

JULIA TAO LAI PO-WAH

GLOBAL BIOETHICS, GLOBAL DIALOGUE:
INTRODUCTION

This volume explores one of the central debates in the field of bioethics in the new century. It analyses the important issue of the possibility of global bioethics from multiple levels and perspectives, taking into account the context of breathtaking technological and social changes, and the challenge of moral pluralism, within which complex bioethical issues demand solutions. The challenge requires us to explore some fundamental questions in moral philosophy both at the normative and the meta-ethical level. It also leads us to debate some concrete issues in health care and bioethics which require urgent ethical decision-making and “pragmatic” solutions from a cross-cultural perspective.

Under the influence of the Enlightenment, modernity is characterized by the search for a common universal law, both in nature and in the common world, in ethics as much as in bioethics. But increasingly, there are doubts that the universal ethical code will ever be found. Instead of a shared common morality in the field of bioethics, it is claimed that there are numerous moral visions, each with its own value content. The increasing reception of various systems of Eastern ethics in recent decades have cast further doubts on the search for a comprehensive unitary ethical system which can be shared by every human being and community. They reflect intense differences in theoretical perspectives and moral commitments which often involve un-bridgeable disagreements, although this need not imply that any morality is but a local (and temporary) custom and that sources of morality are purely accidental and contingent.

At the same time, there are those who argue for a thin notion of global ethics instead of a thick notion characterized by the search for a single moral vocabulary and a single set of moral beliefs which claim universal objectivity and validity. They defend a weak notion of global ethics defined as the search for moral principles that can be shared cross-culturally. On this understanding, global bioethics would mean nothing more than acknowledging that “modern medicine all over the world has generated the same kinds of moral issues that need to be addressed through reason and argument” (Becker, p. 108, in this volume). The belief

is that much common ground can be secured in the midst of moral diversity through an open and rational discourse aimed at clarifying “the factual issues by removing misunderstandings and precisely defining the moral issue(s) at stake” (Becker, p. 108, in this volume).

Contributions within this volume are organized into five parts to explore five major themes central to the important debate on the possibility and impossibility of a global bioethics. The first part explores the moral foundations of bioethics, and contemporary reflections on the nature and role of moral theory. In particular, it examines the rival claims between the universalist and particularist views of morality. The second part analyses the character of bioethics in post-traditional, post-modern societies. It explores the impact of moral loss and moral diversity, and the increasing difficulty of appealing to care and community to guide important life passages and health care decisions. The third part evaluates current debates on the possibility and impossibility of a global ethics, and its implications for consensual solutions of specific bioethical problems across cultures. The fourth part addresses moral conflicts and ethical dilemmas in everyday health care practice, and analyses the way they reflect competing moral visions regarding the permissible treatment of humans by humans, the limits of biotechnological interventions, and the nature and goals of medicine. The volume concludes by examining several alternative philosophical approaches and moral perspectives in the hope of opening up new modes of self-understanding, and expanding space for new strategies for bioethical exploration, unconstrained by demands of universal moral consensus, and unbiased by claims of moral relativism.

I. THE FOUNDATIONS OF BIOETHICS IN A POST-TRADITIONAL, POST-MODERN WORLD

The volume begins with Engelhardt’s penetrating analysis of the different plausible understandings of the foundations of bioethics and their implications for aspirations to a global bioethics that transcends particular societies and communities. He examines three competing visions of bioethics and analyses how each of these three perspectives makes plausible a different understanding of bioethics based upon their different conceptions of the nature and source of moral autonomy. His analysis shows that within the cosmopolitan liberal framework, all morality must

be chosen authentically and autonomously by moral agents who contract with each other. Autonomous individual liberty therefore constitutes the ground of moral authority. For libertarian liberals, the only source of common authority among moral strangers is the consent of individuals. In traditional understandings of human flourishing, authority is grounded in religiously rooted moral visions or in cultural commitments to enduring orderings of values. The conflicts between these competing moral visions *de facto* count against the possibility of claiming the existence of a moral consensus to support a global bioethics. Universalization of morality can in effect mean silencing moral impulse and constricting moral life. How ought one to respond? Engelhardt offers two suggestions. On the one hand, it is important to resist claims on the behalf of a global bioethics such as that represented by the cosmopolitan liberal moral vision. On the other hand, it is important to take moral diversity seriously by nurturing the conditions under which it can flourish. This implies affirming the importance of exploring regional and cultural bioethics, as well as the richness and goodness of those traditional moral visions that allow the ample flourishing of the human good (Engelhardt, 2000).

II. CARE AND COMMUNITY: LOST PERSPECTIVES?

The two chapters by Tao and Joseph in Part I extend Engelhardt's analysis of the impact of moral loss and moral diversity on making care and community less accessible in post-modern, post-traditional societies. In her chapter, Tao welcomes the liberating opportunity offered by post-modernity to search for a different mode of self-understanding and an alternative bioethical perspective neither dominated by the mainstream Western individualistic paradigm of human relations, nor committed to an understanding of morality as impartiality as defined in conventional impartialist ethical theories. Such an emphasis on individualism and impartiality has made it increasingly difficult to see why we should care about others. It has also encouraged a mode of moral reasoning in bioethics which emphasizes general norms and which tends to overlook the contextual nature of decisions in patient care and the importance of a healthcare professional's character. Her analysis shows how in the face of the dominance of impersonal ethics and the alienating and depersonalizing forces of modern society, a reductionist response has set justice and care as irreconcilable perspectives. She argues for a new

bioethics that is more sensitive and more responsive to the ideal of “just caring.” For this, we need a picture of a just community that is far more than a picture, where rules and principles are followed with impartiality. She examines three alternative ethical frameworks: feminist care ethics, agent-based virtue ethics, and Chinese Confucian ethics, for a different understanding of the relationship between justice and care. Her analysis supports a new bioethical approach to allow context, particularity and relationship to have a central place in our understanding of complex bioethical issues, and a re-energized moral discourse which seeks to balance justice and caring for the sake of human flourishing in the post-modern world.

Joseph’s chapter offers further analysis of the post-traditional character of the lives and deaths of many people across the world. His essay is focused on the theme of moral loss and the challenge it poses to bioethics and medicine in the new century where one can no longer experience a sense of care and community to guide important life passages. Drawing on his own experience as a priest visiting patients in the hospital, he shows how individuals living in large-scale societies in a fully secular, pluralist moral context, no longer possess a point of moral orientation that can provide definite moral guidance for decision making on life and death issues in health care. The moral confusion and disorientation which result from the absence of support and context once provided by family and community, often lead to the abandonment of the moral discourse, and a shift from the substantive to the procedural, when addressing substantive decisions at the end of life. The absence of a definitive point of moral orientation can imply a contraction of the sphere of human moral experience by making moral choices a matter of individual creations. The consequence is that in a post-traditional world, we can admit at most a vestigial “minimalistic” morality, limited solely by the demand for tolerance. To avoid further moral and spiritual fragmentation, and if we are not to get stuck with a procedural morality which deeply impoverishes moral life, Joseph urges us to examine ways in which to invigorate the roles of family and particular moral communities so that they can continue to serve as important moral networks within which individuals find their moral bearings.

III. THE POSSIBILITY AND IMPOSSIBILITY OF A GLOBAL BIOETHICS

Part II examines a number of theoretical issues raised by concrete examples of biotechnological applications which bear importantly on contemporary debate between the possibility and impossibility of a global ethics. Through exploring these moral dilemmas and cultural conflicts, the essays re-evaluate the controversy between the view that there is a common morality accepted by all in the field of bioethics (see, e.g., Beauchamp and Childress, 1979, 1994), and the opposing view that there are different moral visions and moral rationalities which means that a comprehensive unitary ethics is an impossibility.

It begins with Qiu's chapter, which explores the challenge posed for genetic intervention and reproductive human cloning by Chinese Confucian moral tradition. He draws attention to Confucian values of filial piety and ancestor worship and how their moral requirements can create ethical dilemmas and cultural conflicts in the context of modern biomedical technology. He questions the claim that there are some foundational moral values that transcend particular cultures, and that the foundations of global ethics are independent of the norms of any particular culture. He reminds us that a global bioethics can be a dream of reconciled humanity or a nightmare of cultural domination of world bioethics by one set of moral assumptions and style of reasoning. He argues in support of a weak notion of global ethics, which presupposes humility about our ethical wisdom, based upon an awareness of the limits of rational argument and of the prejudice which distorts our claims to ethical impartiality.

In a similar vein, Hu's chapter begins with a critique of individualism, the main doctrine which underlies Western ethical, political and social thought, and which is also the dominant value system central to the enterprise of bioethics as it has developed in the west. He is concerned that in the light of this doctrine, the individual is emphasized as the focus, with both ontological and methodological priority. This has in turn led to an analogy between physical atoms and moral individuals under a kind of reductionism whereby individuals are perceived to be playing the same role in society as atoms in the physical world. In contrast to this unhealthy atomism and reductionism, Xu argues that a person is a product of a set of relations, and cannot be reduced to his genes. He proposes a relational paradigm as the basis of a new bioethical approach. Under the

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Tao Lai Po-wah, J. (Ed.)

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