Philosophical Bioethics—Its State and Future

Guest Editorial

Wither Philosophical Bioethics?

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This special section of the *Cambridge Quarterly of Healthcare Ethics* explores the current state and future prospects of philosophical work in bioethics. What are its methods? What are its approaches? What are its aims? What should they be? It also completes our trilogy of edited works on philosophical bioethics. The first two parts, *Best Practice in Conceptual Philosophical Bioethics* and *The Role of Philosophy and Philosophers in Bioethics*, were published as virtual issues of the journal *Bioethics* in 2014.¹

This collection starts with two general and critical commentaries. In "What Do You Think of Philosophical Bioethics?," Matti Häyry gives an overview of the many forms that bioethics can take—practical and theoretical, positional and universalistic, religious and secular, historical and conceptual, and empirical and theoretical, to name a few. He then goes on to argue that philosophical bioethics is a particular branch of theoretical bioethics, designed to explicate, interpret, and evaluate views, arguments, concepts, and attitudes in ethical discussions. According to him, genuinely philosophical work in bioethics eventually comes down to unearthing and exposing the assumptions and presuppositions that underlie our ideas and assertions about moral, social, and political realities. Philosophers, as philosophers, need not and probably should not proceed from their conceptual analyses to normative recommendations, because that is the task of practical bioethics, which is a different beast altogether.

In "Get to the Point! Philosophical Bioethics and the Struggle to Remain Relevant," Tuija Takala questions the emphasis that contemporary philosophical bioethics places on practicality. Due to popular demand, funding organizations' wishes, and an urge to do something important, most academics in the field aim to influence legislation and regulations. Takala argues, however, that the relevance achieved by this approach is illusory. Moral guidance is given, but this moral guidance is only sound within its own ethical framework. She then turns her attention to common morality as the basis of universal prescriptions. The value of the assumption of common morality is, in her view, reduced by diversity in moral views and the difficulty of finding out what people actually think about ethical issues. Finally, Takala tackles the demand for interdisciplinarity and suggests that the best use of interdisciplinary studies in bioethics is in ironing out legal bumps and public reactions to decisions that are already "known" to be right to the commissioners of the research.

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After our slightly skeptical contributions, we give the floor to our writers, all of whom firmly believe in the improvability of bioethics as a theoretical-cum-practical endeavor. For them, it is just a question of finding the right approach, and the alternative foci presented by them range from critical, feminist, and postmodern viewpoints to global considerations, policymaking concerns, and the notion of social responsibility.

In "Toward Critical Bioethics," Vilhjálmur Árnason asks what makes bioethics a critical discipline. He begins by considering the kind of conceptual analysis proposed by Häyry but finds it wanting, because it can involve excessive criticism, false views of the assumptions required by theories, and a limited perspective on issues in bioethics. He then regards methods based on communicative rationality and social theory. Unlike the current analytical approach, which can treat authors unfairly and topics inadequately, this would focus on power and its uneven distribution in bioethical situations. Its shortcoming, however, is lack of normativity, which is something that Árnason sees as essential to philosophical bioethics. He ends up defending a model that draws from the hermeneutic tradition. Bioethicists should be aware of their own assumptions, should understand ethical questions in their social and cultural contexts, and should engage in continuous dialogue, in which reasoned arguments provide the practice with its normative foundation.

Herjeet Marway and Heather Widdows, in "Philosophical Feminist Bioethics: Past, Present, and Future," examine what the goals set to feminist bioethics in the 1990s were, how academics proposed to achieve them, and to what degree they succeeded in doing so. The authors identify three main concerns raised two decades ago—namely abstraction, lack of particularity, and power—and outline three responses offered to these concerns: relationality, particularity, and justice. Abstraction means seeing bioethical issues as general and impersonal and as covered by universal rules and principles. Understanding the relationality between people has been seen as a more proper approach to moral questions. Lack of particularity is similar to excessive abstraction, and studies in nursing ethics have shown how this can be alleviated by emphasizing concrete cases and their features. And hidden issues of power can be brought to light by considerations of structural injustice. These matters, Marway and Widdows argue, are still focal to feminist bioethics.

In his "Toward a Postmodern Bioethics," David Gibson begins by noting that many bioethicists think that their most important task is to give guidance in practical situations. This, however, is not the way of postmodern philosophy, which is aimed at pointing out power imbalances in views and practices, and reminding theorists and practitioners alike that the rules and standards they follow as neutral prudential and moral instructions always favor one point of view and one group of people over others. A postmodern approach to bioethics would, in light of this, concentrate on the distribution of power in word and deed; on the violence ensuing, perhaps inadvertently, from the power discrepancies; and on an understanding of relational responsibility that could provide solutions to some of the problems observed. According to Gibson, good directions for the development of postmodern bioethics could be found, for instance, in studies on relational (as opposed to thoroughly individualized) autonomy and naturalized ethics.

Sirkku Hellsten, in "The Role of Philosophy in Global Bioethics: Introducing Four Trends," traces her way back to analytical philosophy and rejects attempts to assume normative positions at will and to draw ethical guidance from them. It has been suggested that problems in global ethics and policy could be solved by

recognizing a variety of moral and ideological views, and by approaching matters relativistically and using a wide array of disciplines. Hellsten argues against this that philosophers should, in the face of complex issues, return to their original stance of universally applicable, self-critical analysis and argumentation. She identifies the alternatives to this, as suggested by Henry Odera Oruka, as ethnophilosophy, which tends to present an overcritical view of foreign ideas; philosophical sagacity, which is inherently populist and ignores the need for technical expertise in modern society; and ideological philosophy, which may point out wrongs but is dogmatic and lacks neutrality and critical distance.

In his "The Grand Leap of the Whale up the Niagara Falls: Converting Philosophical Conclusions into Policy Prescriptions," Søren Holm questions the habit of philosophical bioethicists of moving directly from conceptual conclusions to practical recommendations in regulation, law, and social policy. He uses the example of infanticide, more particularly, the idea of terminating the lives of healthy newborns at the parents' request. A standard liberal argument for permitting late abortions can be employed to support this practice. If only psychological persons have full human rights, including the right to life, then infants, who are not yet psychological persons in the stipulated sense, do not have the rights or moral status that would prevent us from taking their lives. Holm argues that this conclusion, although valid in its own theoretical context, cannot be converted into a policy prescription without considerable further analysis, including studies into different value systems, jurisprudential principles, rules of policymaking, and realities of implementation.

Johanna Ahola-Launonen, in "The Evolving Idea of Social Responsibility in Bioethics: A Welcome Trend," examines the extent to which individuals can be held answerable when it comes to the link between their choices and their health problems. Prominent philosophical views—luck egalitarianism is the prime example—assert simply that although individuals are not responsible for what they have not themselves freely, informedly, and autonomously chosen, they do have a responsibility for the outcomes of the actions and inactions that they have knowingly and willingly undertaken. Ahola-Launonen believes that this premise limits unnecessarily and dangerously the scope of ethical and political considerations related to health and well-being. Health has several social determinants, the impact of which is far greater than the effects of an individual's personal decisions. Poor people are in worse health than rich people, but very few of them have chosen to be poor. The starting point of studies into health and ethics should be in social factors.

These eight articles, we hope, provide the reader with a snapshot, or a collection of snapshots, of the challenges philosophical bioethics currently faces, and of the responses that have been suggested for them. The main thing for philosophers in this field to realize, we believe, is that our exact role, theoretical or practical, is not clear or uncontested, and that maintaining a critical attitude toward our own work and the work of our colleagues is essential for our continued contribution to ethics generally and bioethics more specifically.

Note

1. These publications can be accessed at http://onlinelibrary.wiley.com/journal/10.1111/%28I SSN%291467-8519/homepage/best_practice_in_conceptual_philosophical_bioethics.htm (last accessed 15 Sept 2014) and http://onlinelibrary.wiley.com/journal/10.1111/%28ISSN%291467-8519/homepage/the_role_of_philosophy_and_philosophers_in_bioethics.htm (last accessed 15 Sept 2014).