


RESEARCH ARTICLE

Bioethics: No Method—No Discipline?

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Abstract

This article raises the question of whether bioethics qualifies as a discipline. According to a standard definition of discipline as “a field of study following specific and well-established methodological rules” bioethics is not a specific discipline as there are no explicit “well-established methodological rules.” The article investigates whether the methodological rules can be implicit, and whether bioethics can follow specific methodological rules within subdisciplines or for specific tasks. As this does not appear to be the case, the article examines whether bioethics’ adherence to specific quality criteria (instead of methodological rules) or pursuing of a common goal can make it qualify as a discipline. Unfortunately, the result is negative. Then, the article scrutinizes whether referring to bioethics institutions and professional qualifications can ascertain bioethics as a discipline. However, this makes the definition of bioethics circular. The article ends by admitting that bioethics can qualify as a discipline according to broader definitions of discipline, for example, as an “area of knowledge, research and education.” However, this would reduce bioethics’ potential for demarcation and identity-building. Thus, to consolidate the discipline of bioethics and increase its impact, we should explicate and elaborate on its methodology.

Keywords: demarcation; discipline; ethics; method; methodology; profession; professionalism

Introduction

Bioethics has been a field that has expanded substantially since the 1970s,¹ not least due to the vast technological development in medicine posing a wide range of moral challenges. While Dan Callahan envisioned bioethics as a discipline with “methodological rigor,”² the lack of methodological consensus or rigor has haunted the field. As pointed out by Al Johnson, bioethics is not as much an academic discipline as “a guidance of practice and politics ... a form of discourse, promoting public debate.”³

Since then, there have been many diverging definitions and varying aspirations for bioethics, and there is little if any consensus on its demarcation as a discipline.^{4–6} As stated by Thomas V. Cunningham, “The boundaries of the field are multiple and blurred, its central problems contested, and its theories and methods are frequently underdeveloped.”⁷

One reason for this may be that bioethics has no definite method. As stated by McMillan: “Bioethics has made a mistake about what its methods are, and this has led not only to too much theorizing but also to fragmentation ... [and] unhelpful disputes between those who think bioethics needs to be more philosophical, more sociological, more clinical, or more empirical.”⁸ This raises the concern that the lack of methodological clarity hampers bioethics’ consolidation as a discipline, which has implications for several crucial issues:

- professional status: for internal regulation and external demarcation⁹
- quality criteria: disciplines tend to have clearer quality criteria

- academic and educational importance¹⁰
- research funding: more targeted and better funding for established disciplines.

Accordingly, the objective of this article is to clarify whether bioethics qualifies as a specific professional discipline. To do so, I will investigate whether the reason that bioethics is not (yet) a clearly defined and demarcated discipline is that it does not have a fairly well-defined methodology.

There is a vast scholarly debate on what counts as discipline¹¹ and there are many definitions of “discipline.” Here, I will refer to a standard dictionary definition (from Merriam-Webster’s Dictionary), according to which a *discipline* is “a field of study” and “a rule or system of rules governing conduct or activity” (<https://www.merriam-webster.com/dictionary/discipline>). The term stems from “discipulus” (Latin for pupil, providing the source of the word disciple). Hence, the question of whether bioethics is a discipline is asking whether it is a field of study following rules or a system of rules.

Clearly, it can be argued that bioethicists follow their own (idiosyncratic) rules when doing bioethics and thereby make it a discipline. However, this hardly makes bioethics a unified discipline strengthening the assets listed above. On the other hand, it may be argued that bioethics is not a discipline as it does not follow a defined system of rules (in general). However, I will investigate a more specific conception of rules, that is, whether bioethics follows explicit methodological rules. Moreover, to rule out that bioethics is a discipline because bioethicists follow their own personal rules, I will require that the methodological rules are commonly acknowledged and accepted upon (if not agreed upon). Moreover, it may be argued that bioethics is an inter- or transdisciplinary endeavor or an umbrella for several disciplines, and thus has a range of methodologies. However, instead of jumping to such conclusions, this article will investigate whether the ambitions of Callahan and others are relevant, 50 years after their inception: bioethics being a discipline with methodological rigor.

With these clarifications, the aim of this article is to *clarify the professional status of bioethics* by addressing the research question of *whether bioethics counts as a discipline in terms of being a field of study following specific and well-established methodological rules*.

A point of departure is the fact that very few articles in normative bioethics contain methods chapters or explicitly declare their methods. The article will investigate whether this is because the methodological rules are implicit, and whether bioethics can follow specific methodological rules within subdisciplines of medicine or for specific tasks. As this does not appear to be the case, the article investigates whether bioethics’ adherence to specific quality criteria (instead of methodological rules) or pursuing of a common goal can make it qualify as a discipline. Thereafter, it scrutinizes whether referring to bioethics institutions and professional qualifications of bioethicists can ascertain that bioethics is a discipline. Unfortunately, this fails, and I end the article by investigating some consequences and opportunities for bioethics following this negative conclusion.

Does bioethics have methods?

As very few articles in normative bioethics explicitly declare their methods, one could hastily conclude that bioethics does not qualify as a discipline according to the given standard definition. However, this is obviously a too quick conclusion for at least two reasons: 1) bioethics methodology could be implicit, and 2) there is a diversity of methods in bioethics. Let us, therefore, investigate these alternatives.

Implicit methodology

One potential explanation for the rare explicit methods reporting in bioethics is that methods are implicit in most bioethics work. One can argue that all professionals in the discipline of bioethics recognize the methods when they see bioethics work, and that there, therefore, is no need for explicit statements. Unfortunately, some premises for this argument are not true.

First, given the diversity of methods in bioethics (see below), it is not the case that all bioethicists are well acquainted with all relevant methods. Most ethics courses only teach a selection of the approaches applied in articles in bioethics journals. Moreover, bioethics work is directed towards a much broader audience than just trained bioethicists, and they deserve to be informed about the applied methodology.

Second, even if methods are implicitly recognized, one would expect there to be methodological issues to debate, for example, in the discussion sections of the articles. However, while bioethics articles frequently discuss relevant counterarguments (and counterexamples), they rarely include methodological discussions. Moreover, one would expect that opposing bioethicists would explicitly attack the methods, which they rarely do.

Hence, the argument that methods are implicitly known in bioethics hardly holds. What about the methodological diversity then? Bioethics may have a wide range of methods (as other disciplines have).

Methodological diversity

Clearly, bioethics work applies a wide range of theories, perspectives, approaches that provide methodological rules and can count as methods in bioethics.^{12–31} There appear to be “various methodological approaches to treating problems and questions in bioethics.”³² Table 1 provides an overview of major types of approaches in bioethics.

Additionally, there are many applications of bioethics in specific fields, such as “public health bioethics,” “global bioethics,”³⁵ bioethics in research and innovation,³⁶ “environmental bioethics” or in regions, such as “Brazilian bioethics.”³⁷

Moreover, there does not seem to be a specific “metabioethics.” While there is much reflection on concepts, theories, and approaches in bioethics,³⁸ the metaethical issues are analyzed and discussed along the same line as metaethics in general.

Hence, it is clear that bioethics has a variety of underlying theories, perspectives, and approaches, as do other disciplines. However, there is no uniting methodology³⁹ and no common rules or standards to evaluate whether a contribution falls under the concept of bioethics or not. One reason for this may, of course, be that bioethics, like medicine (and the life sciences), is not one discipline, but consists of a range of disciplines.

Diversity of disciplines

Medicine and the life sciences, which bioethics often is about, themselves consist of a great plethora of disciplines, and therefore apply a variety of methods. Hence, bioethics naturally will have a methodological diversity. As medicine applies specific methodologies in pathology and psychiatry, bioethics could apply different methods depending on the subject matter of its topic, it could be argued.

However, this does not seem to be the case either. There is not one set of methodological rules applied to discuss euthanasia, and another applied to address the ethical issues of reproductive technologies. The same goes for bioethics being an umbrella for a range of disciplines, such as philosophy, sociology, history, law, anthropology, literature, linguistics, or (moral) psychology, applying specific methodologies

Table 1. Brief overview of the main kinds of theories, perspectives, and approaches in bioethics

General ethical (high-level) theories or approaches	Specific (mid-level) approaches in (applied) bioethics	Empirical bioethics	Clinical bioethics
Deontology	Principlism	Quantitative	Moral Case-Deliberation
Consequentialism	Feminist bioethics	Qualitative	Systematic Models for Ethical Reflection
Virtue ethics	Ethics of care	Mixed methods	Proprietary (contextual) approaches
Casuistry	Narrative bioethics	See Wangmo et al. ³³	See Gordijn and ten Have ³⁴
Religious/theological bioethics	Communitarianism		

Note: The lists are by no means complete.

according to these disciplines. However, there is not a single group of methods for those parts of bioethics based on such disciplines either. Hence, if bioethics is a multidisciplinary endeavor, it does not map onto a multidisciplinary of methods. Similar arguments can be made for claims of interdisciplinarity and transdisciplinarity.

Diversity of tasks

It may also be argued that bioethics has many diverse tasks,⁴⁰ for example, to describe or explore ethical issues, make normative judgments (based on broad assessment), to argue for specific solutions,⁴¹ or to reflect on basic moral concepts. Accordingly, it could be argued that there is no clear or uniting methodology for all these tasks, but rather well-established methodologies within the various tasks of bioethics.

However, this is not evident from the literature studied in Table 1 or the general bioethics literature. Even within very specific tasks, such as exploring ethical issues or making normative judgments, there are no specific and well-established methodological rules.

This means that even within specific tasks or subdisciplines of medicine, bioethics is not “a field of study following specific and well-established methodological rules.” Hence, by this definition, bioethics is not a discipline. However, it may be that “methodological rules” should be interpreted in a broader way, for example, in terms of quality criteria. It may be that bioethics has well-established criteria for assessing its quality and that these make it a discipline.

Quality criteria

Accordingly, it can be argued that what makes bioethics a discipline is not well-established methodological rules, but criteria for the systematic evaluation of the quality of ethical deliberations.⁴² The question “What is good bioethics?” has been extensively discussed.^{43–73}

However, there is little agreement on what counts as good bioethics, and any such criteria are seldom referred to in journal articles and rarely discussed at bioethics conferences. Thus, it is not clear that quality criteria should make bioethics a discipline either.

Common goals

Nonetheless, as mentioned in the introduction, several scholars have aspired to make bioethics a methodologically rigorous discipline. Moreover, Van Rensselaer Potter’s seminal work, *Bioethics: Bridge to the Future*⁷⁴ set forth “A Bioethical Creed for Individuals,” which is a pledge to try to make the world a better place. However, Potter’s creed is significantly different from the usual way of conceptualizing academic disciplines and does not make an obvious way of defining bioethics as a discipline.

Furthermore, the goals of bioethics are diverse, as are the goals of medicine.^{75–80} Hence, in general, the goals of bioethics are not obvious *definitions* for bioethics as a discipline either.

In summary, bioethics does not seem to qualify as a discipline in terms of being a field of study following specific and well-established methodological rules. Even if the methodological rules are implicit (and not explicit), if we take into account that bioethics may have diverse tasks and address different issues within the various disciplines of medicine, or if it adheres to specific quality criteria (instead of methodological rules) or pursues a common goal, it does not qualify as a discipline.

Discussion

To conclude that bioethics is not a discipline may be counterintuitive and deserves a thorough discussion. The definition of discipline applied here is certainly a weak spot. Discipline could be defined more broadly as “a particular area of knowledge, research and education,”⁸¹ and thus cover bioethics.

Moreover, it may be argued that bioethics is a discipline in terms of having and following a “system of rules” (as in the general definition from Merriam-Webster). However, there are two major problems with this. First, we may find it difficult to explicate these rules and encounter the same problems as discussed above. Second, a vague and diverse “system of rules” does a poor job in defining and demarcating bioethics and in “disciplining” its performers.

Certainly, many other definitions of discipline could have been applied. The definition used here is motivated by specific tasks: to consolidate bioethics as an organized professional field with a transparent and justifiable methodology.

As demonstrated by Hammarfelt, discipline is an elusive concept without any clear definition.⁸² It can be fruitful to differentiate discipline from related terms, such as field, domain, or topic, or by its institutional and organizational features.⁸³ As such, there are many departments, institutes, centers, and committees for bioethics, according to which bioethics would qualify as a discipline. Unfortunately, this makes the argument circular: bioethics is what is done at institutions that are engaged in bioethics.

Yet another alternative is to claim that bioethics is internal to the medical profession.

A discipline internal to medical professionalism

It is argued, as does Rosamond Rhodes, that medical ethics (as a field within bioethics) is its own domain with its own rules based on the medical profession: “The ethics of medicine is internal to the profession: it is constructed by the profession and for the profession, and needs to be continually critiqued, revised and reaffirmed by the profession.”^{84,85} Hence, at least parts of bioethics could be viewed as a specific subdiscipline of medicine.

However, as pointed out by Søren Holm,⁸⁶ if the ethical standards are determined by the medical profession, it will return this type of bioethics to plain old paternalism. “Letting the medical profession take back control of the ethics of the doctor-patient relationship will lead to a lop-sided ethics, because it will inevitably move the focus to one side of that relationship.”⁸⁷

Thus, although bioethics could be defined as a subdiscipline of medicine, it would rule out most of what counts as bioethics today. More importantly, even the medical profession does not have “its own rules” for bioethics. Hence, this alternative does not appear appealing.

Professionalized bioethics

Correspondingly, it may be argued that bioethics is a profession by itself, for example, in terms of formal qualifications. Again, we would have the problem of defining this profession without rendering the definition circular (bioethics is what is performed by bioethicists, which is defined by doing bioethics). Moreover, professionalizing ethics could also have side effects: “Ethics could thus be progressively captured by institutions for its performative qualities, providing an alibi justification for whatever direction the institutional practice is heading for.”⁸⁸

Is bioethics obsolete?

It may, of course, be that the strive for establishing bioethics as a discipline is in vain and obsolete in the first place. As Sarah Franklin points out in a reflection on the development of the field in *Nature*, bioethics “no longer relies on philosophically derived mandates codified into textbook formulas. Instead, it functions as a dashboard of pragmatic instruments, and is less expert-driven, more interdisciplinary, less multipurpose, and more bespoke. In the wake of the ‘turn to dialogue’ in science, bioethics often looks more like public engagement — and vice versa” and “has come to be associated with building trust by creating transparent processes, inclusive participation and openness to uncertainty, as opposed to distinguishing between ‘is’ and ‘ought’.”⁸⁹ Be that as it may, it could of course also be that bioethics has

experienced too many “strangers at the bedside,”⁹⁰ that is, been “diluted” or “contaminated” by a wide range of other disciplines, such as sociology and anthropology.

Making a methodological choice

If it is correct that bioethics does not qualify as a discipline (according to the given definition), one could “make it a discipline” by subscribing to or reaching consensus on a methodology (or a limited set of methodological rules). Principlism,⁹¹ the 10-rule approach,⁹² and other approaches could make relevant candidates from the midrange camp, and utilitarianism could be a candidate from the theoretical camp.

Accordingly, as principlism has become dominant and pervasive, one could argue that this has and can bolster bioethics as a discipline, as it has provided a practical approach to address normative issues in medicine, healthcare, and the life sciences following fairly well-established and recognized methodological rules. However, despite principlism being widespread, it is by no means dominant, for example, in the major bioethics journals. Moreover, it is not very likely that principlism, or any other approach, would be able to dominate (and define) bioethics in the near future.

Hence, while principlism may have demonstrated that bioethics can have a fairly stringent methodology against which it may be assessed, principlism has not yet made bioethics a definite discipline. This does, of course, not undermine the possibility of it doing so in the future.

Following other (non-methodological) rules

Yet another alternative for making bioethics a discipline would be to show that bioethics work follows other non-methodological norms and rules. Such rules could be to have ties to other fields (such as ethics), have a canon, and have a delimited set of problems.⁹³ However, it is unclear what these norms and rules are or should be.

In any case, it seems to follow from the findings of this study that bioethics could be consolidated and bolstered as a discipline by clarifying, developing, or precisising its methodological rules and norms. Hence, a “methodological turn” in bioethics could do the trick.

The methodological turn in bioethics

Bioethics has already experienced several turns, such as “the empirical turn”^{94–96} and “the social turn,”^{97,98} and there is expected to be a “digital turn.”⁹⁹ Accordingly, one can envision a “methodological turn” specifying the methodological rules and thereby strengthening the professional identity and demarcation of bioethics. While elaborating how this turn can come about and evolve certainly is beyond the scope of this study, it is a pertinent topic for further research.

Is this article bioethics?

What about this article then? Does it qualify as bioethics according to the definition given at the outset? I have not stated or followed “specific and well-established methodological rules.” However, the article raises a specific question of relevance for bioethics, and it is published in a bioethics journal. However, being published in a bioethics journal would not be a relevant criterion, as it would make the issue circular (being bioethics because it is published in a bioethics journal and published in a bioethics journal because it is bioethics).

This study has followed a quite common pattern: After defining its key concepts, the article addresses the question following specific steps, including a conceptual part (addressing various alternative interpretations of methodological rules or norms), and a discussion of relevant objections and alternatives. However, this is a generic format for many disciplines that hardly defines bioethics as a discipline.

Admittedly, many articles in bioethics journals follow a pattern (first defining the problem and then analyzing, addressing, and/or discussing it via various perspectives or arguments). The reason I have not counted this as “methodological rules” is that it would not be able to demarcate it from other relevant disciplines.

Moreover, I have not by any means ruled out that bioethics is a scholarly field, a topic, or a profession. I have only investigated whether it qualifies as a discipline in terms of adhering to defining (demarcating and identifying) methodological rules.

Conclusion

In this article, I have applied a standard and specified definition of discipline and found that bioethics is not a specific discipline as it is not “a field of study following specific and well-established methodological rules” as very few of the articles in normative bioethics explicitly state their methods. To scrutinize this preliminary conclusion, I investigated whether bioethics’ methodological rules could be implicit, and whether bioethics could follow specific methodological rules within subdisciplines or for specific tasks. As this did not appear to be the case, I investigated whether bioethics’ adherence to specific quality criteria or pursuing of a common goal could make it qualify as a discipline. However, the result was negative. Correspondingly, referring to bioethics institutions and professional qualifications to warrant its disciplinarity failed, as this made the definition circular.

This forces me to conclude that bioethics is not a discipline according to the given a standard and specified definition of discipline. Bioethics may, of course, qualify as a discipline according to broader definitions of discipline (e.g., as an “area of knowledge, research and education”). However, this would reduce its demarcation, identity-building, and disciplining function. Thus, one way to consolidate and bolster the discipline of bioethics and increase its impact is to explicate and elaborate its methodology.

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