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## The Fragility of Bioethics

\_Viewpoint

«Bioethics» as a term was still widely unknown some 15 or 20 years ago. Today we can find bioethics issues appearing daily in the press: the birth of octuplets, a parliamentary debate on active euthanasia, the establishment of a new national committee, to mention just a few random examples. The development of bioethics could be called a success story. There is an increasing number of journals worldwide, many of which continue to rise in visibility and impact. If we displayed the growth of the different ethics commissions, councils and committees on a global scale the curve would probably be quite impressive. Likewise, countless teaching programs and tools have been developed for different curricula, for medical and nursing schools as well as for other settings. Consultation services, both private and public, have

been established, and a respectable number of national and international professional societies provide space for networking and exchange.

It is fair to say that bioethics has turned into a flourishing field. Why? For one, it is intellectually fascinating. It is simply fun to think how we should think morally of new forms of life that we designed through the means of synthetic biology, or why we should or should not pop a pill that would turn us into moral whiz kids. And secondly, bioethics has the potential to provide advice and guidance on questions that are of practical relevance and frequently of public concern. Should we aim at a stricter implementation of anti-doping measures or rather at regulation and supervision? What arguments can be put forward for any of the two options? Whereas bioethics as a field

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of intellectual inquiry leaves room for speculations that can be quite detached from our everyday lives, bioethics as policy advice does need to be firmly grounded in the «real world». In spite of its success, bioethics remains a fragile enterprise. Among the various challenges it faces is its *interdisciplinary identity*. At first sight «interdisciplinarity» seems an advantage, as an «en vogue» thing to be representing. However, it does raise some thorny questions, such as «Who is a (good) bioethicist?», «Who possesses the relevant expertise?», and «Whose child is it anyway?» These questions would probably be answered quite differently from disciplinary perspectives such as theology, philosophy, law, social sciences, medicine and nursing. Bioethics risks wearing itself out in the perpetual struggle for recognition in the different fields with their respective demands. Although the idea of a non-judgmental, open exchange between disciplines can be seen as naïve it may well be the only reasonable way to tackle bioethical issues that require the knowledge and skills of more than one discipline.

Bioethics, if it is to engage in the «real world», is a combination of raising and addressing empirical and normative questions. Without knowledge of concrete contexts it will be hard to identify the relevant normative questions. And, likewise, without skills in ethical analysis it will be difficult to reflect on moral judgments and to make a well argued case for normative conclusions. However, some of those who consider themselves experts for general moral questions get quickly bored when exposed to the intricacies of concrete contexts, and some of those who have specialized in exploring concrete contexts find it difficult to transform their feeling of uneasiness with certain observations into a clear normative position. At the same time, there is a tendency to disregard the – empirical resp. normative – competencies of the other as secondary to answering the bioethical question at hand. A genuine, meaningful interdisciplinarity needs favorable circumstances and hard work. The discipline of bioethics can help bring the different competencies together and facilitate interdisciplinary cooperation. At the same time, bioethics has grown up and has an – interdisciplinary – identity of its own, combining, in one form or another, some of the competencies of its parents.

Another challenge relates to the delicate *balance between mainstreaming bioethics and furthering its professionalization*. Whereas it would not be appropriate to term any related activity, no matter how unqualified, as «bioethics», the opposite – a closed club of experts – would not be desirable either. A reasonable approach to the issue will take into account that moral expertise is multifaceted: it does not just consist of philosophical knowledge and analytical or methodological skills but includes moral sensitivity (e.g. through repeated exposure) and good common sense. Whereas bioethics discourses will thus profit from a variety of input those who have special training or skills can still legitimately be called experts in bioethics.

A third challenge relates to the *institutionalization* that bioethics has experienced over the last years. Bioethics as an academic enterprise is vulnerable to losing control of its agenda: hunting for grants, aiming at high impact publications and attractive collaborations it is easy to forget what issues one considered important in the beginning. There is a temptation for bioethi-

cists to please powerful others – scientists, physicians, the pharmaceutical industry, major funding agencies etc. – by taking up questions they would like to see worked on. Another, that has witnessed a considerable institutionalization, although with varying success, are consultation services, frequently in a hospital setting. Problems can arise when the ethicist is directly employed by the very institution – the hospital management, a department in the hospital etc – in which he is to unfold some critical potential. Another frequently encountered issue is the instrumentalization of an ethics consult for interpersonal, interprofessional, hierarchical, and other conflicts.

Yet another challenge is the *interface bioethics shares with politics*. Bioethics can be an immensely useful tool to improve the image of a politician, to justify controversial practices or to divert attention from other issues. For bioethicists, on the other hand, there may be a certain temptation to venture into the political arena: media attention, feeling important, being taken «seriously», having impact on public affairs are some of the perceived rewards. There is thus a danger of mutual abuse. In addition, when the spheres of ethical argumentation and political decision-making are not distinguished in a transparent way, biopolitics may come in the disguise of a bioethical discourse, with arguments serving as fig leaves for lobby work. The consequences are dire: switching into «strategic mode» in the form of a pseudo ethics discourse (instead of a straightforward political debate) is likely to ruin intellectual openness and curiosity and to lead to mutual distrust and polarization.

Finally, another major challenge has to do with *globalization*. It is not clear that we have or can reach a consensus on central issues, such as autonomy or non-discrimination that is robust enough to withstand attacks and at the same time specific enough to be meaningful. Debates on organ selling, the moral status of unborn life or women's rights may serve as examples for the difficulties encountered in that sense. Debates risk being framed in terms of imperialism and difference (as witnessed by notions such as «Western bioethics» and «Asian values») or resulting in a rhetorical consensus void of content.

Bioethics is a precious contribution to thinking our way through on how to deal with the possibilities opened up by medicine and the life sciences. At the same time, given the considerable challenges it faces, it is a fragile undertaking. As bioethicists we will have to take good care of our field – by mutually appreciating our different contributions rather than discrediting those with different expertise, priorities or viewpoints; by proactively shaping the agenda rather than leaving it to our sponsors; by aiming to maximize our independence, and by staying focused on the issue rather than becoming distracted by external gratifications.

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