

1

Bioethics: A Critical Introduction

We Are All Bioethics Experts Now

By way of opening this chapter, I would like the reader to consider a few (rather big) questions:

- Is abortion murder?
- Should one be able to buy a kidney if one's life is under threat and one can find a willing seller?
- Do we need to be concerned about the possibility of cloning humans?
- Is experimentation with animals morally permissible?
- Should doctors always tell the truth?
- On what grounds, if any, would one object to organ transplantation from pigs to humans?
- Is gene therapy an attempt to produce a new “master race”?
- Is any life worth living?
- What is the value of human life?

One does not need to be a trained philosopher to attempt to answer these questions. Indeed, most people would probably be able and willing to provide an answer to at least some of the above—even if these answers were to amount to mere opinion or something like “I’m not really sure” or, perhaps, “It’s rather complicated.” When it comes to matters concerning our life and health, there seems to exist an unwritten consensus that they must not be left just to experts—philosophers, theologians, or doctors—and that all freethinking citizens in liberal

democracies need to have a say when decisions are being made about their lives and bodies. Of course, not all such answers will be philosophically astute; some will consist in a mere repetition of the most orthodox views developed by religious or secular experts. However, it is the very possibility of participating in the discourse on human life—a discourse whose signal points are being increasingly tested by technological developments and experiments—that is important here and that is being claimed as a right. What one will specifically say in response to these questions depends on one's intellectual and moral position: on what concept of human life one subscribes to, whether it is underpinned by religious or secular viewpoints, whether life here is seen as a superior value. One's responses will also depend on one's political convictions and one's understanding of issues of property, freedom, and social justice. This is not to say that these responses will be fixed forever. The very process of decision making is potentially dynamic, in the sense that one's values and convictions may undergo a transformation when exposed to new moral problems and questions. As new technologies and new media are constantly challenging our established ideas of what it means to be human and live a human life, they also seem to be commanding a transformation of the recognized moral frameworks—although this is not to say that the need for such a radical reassessment of values is taken as a given by everyone.

And yet debates on human life, health, and the body are never just a matter of individual responses and decisions made by singular moral entities. Instead, they belong to a wider network of politico-ethical discourses that shape the social and hold it together. The broadcast media, with their moral panics about “Dr. Dolly” attempting to clone humans or about asylum seekers infecting the home population with serious diseases such as TB and AIDS, as well as their more considered reports into the mismanagement of mental health care in the United Kingdom, play an important role in constructing narratives on human life, health, and the body.¹ No matter what position is actually taken, it is the very possibility of participating in the discourse on human life that is important here and that both media producers and media audiences are claiming as a right. Thus, even if, as stated earlier, most people can be said to “have an opinion on life,” I am principally interested in how certain

positions and opinions on life become legitimized as authoritative and hegemonic. In other words, I want to explore the emergence of the academic and professional discourse known as “bioethics” that has framed and legislated the debates on life and its technological mediations and transformations. Arising in conjunction with, and in response to, developments in the areas of biotechnology and medicine, bioethics raises philosophical questions about the constitution of the boundaries of the human and human life, as well as considering policy implications of such developments for government bodies, health care institutions, and other social organs. It is thus always already a clinically driven “expert discourse,” which can then be applied to “real-life cases.” However, bioethics is also an academic discipline, underwritten by the disciplinary procedures of moral philosophy (although theology and sociology also contribute to its intellectual trajectory). Originally positioned at the crossroads of the clinic and the philosophy department, bioethics has in recent years attracted the attention and investment of “Big Pharma,” that is, the biotechnological industry.² In spite of the differences between the European and American bioethical traditions, we can risk saying that globalization and the financial investments into medical and ethical research programs by international biotech companies have strengthened the Americanization of bioethics across the globe over the last decade or so.³ Globalization and neoliberalism have also pushed the utilitarian agenda of this newly emergent “international bioethics” much more to the fore.

Philosophically, mainstream bioethics most often employs deontological perspectives and attempts to prescribe universalizable judgment for all possible circumstances, as explained by Helga Kuhse and Peter Singer in the Introduction to their anthology, *Bioethics*.⁴ It is thus a form of applied ethics, whereby general rules are applied to different cases. Bioethics frequently adopts the philosophical framework of utilitarianism, involving the methodical calculation of goods under given sociopolitical circumstances in order to satisfy the greatest number of desires and preferences. Ethics here is not a matter of taste or opinion; instead, it is amenable to argument—and indeed, from this perspective it is the responsibility of thinking human beings to engage in argument. For this argument to be productive, consistency and factual accuracy

need to be ensured. Other philosophical positions that Kuhse and Singer list as playing a significant role in bioethics today involve a Kant-inflected belief in the inviolable moral principles formulated in the categorical imperative; the Aristotelian ethics of good based on certain adopted views of “human nature”; Christian ethics of natural good and evil regulated by the idea of God; and, last but not least, ethical positions that are not based on any principles or rules but rather on an idea of what it means to be a “good person” (and more narrowly, a “good doctor,” “good researcher,” or “good academic”). What binds all these different positions on bioethics together is the following:

- the sense of normativity they all embrace, which is filled with positive content, that is, the idea of good they refer to and defend;
- the rational human subject that can make a decision and that is seen as the source of this decision;
- the need for the universalization and applicability of the moral judgment.

It is on these three counts—predefined normativity, human subjectivity, and universal applicability—that I want to raise questions in this book for what I broadly refer to as “traditional bioethics.” The aim of this chapter is therefore to present an overview of dominant positions in bioethics as developed from within both moral philosophy and health-related professions, while also considering the financial and affective investments that underpin those positions. This overview will prepare the ground for our consideration of the possibility of thinking differently about the life and health of individual citizens as well as whole populations in what I have tentatively called “the age of new media.” I will outline—here and in other chapters—a number of such alternatives which have recently been proposed by thinkers who have remained attentive to technological processes at all levels of life, such as Rosi Braidotti, Rosalyn Diprose, Carl Elliott, Donna Haraway, Margrit Shildrick, or Eugene Thacker (to name but a few). I will also offer my own contribution to these debates.

The majority of these alternatives in thinking about bioethics inscribe themselves in a broader set of debates between foundational and non-

foundational, systemic and non-systemic, or—to resort to something of a cliché—analytical and continental traditions within philosophy. Inspired by the hybrid that in Anglo-American academe has gained the name of “continental philosophy” (I am referring here to the predominantly French and German-influenced approach that posits reality as always already in need of interpretation and historical contextualization, rather than a timeless logical structure in need of clarification),⁵ they are also informed by interdisciplinary work on ethics within media and cultural studies, English and comparative literature, and sociology.⁶ My own line of thinking, as well as that of many of the other theorists I will be drawing on here, arises as a response to deontological moral theories which are based on a specific content (i.e., good that transcends Being in Plato, the almighty and all-loving God in Christianity). What is put forward instead is a non-systemic ethics that dispenses with a need for a content-based obligation, while at the same time retaining the sense of duty (i.e., the concept of the obligation to the other in Levinas and the notion of active production and the expansion of life to its full potential in Deleuze).⁷ The specificity of my own argument lies in bringing the Levinas-inspired understanding of ethics as responsibility for the infinite alterity (i.e., difference) of the other, as openness and hospitality, to debates on bioethics. However, this understanding of “open-ended” ethical responsibility is also underpinned for me by a cultural studies injunction to study, attentively and singularly, multiple instances where responsibility imposes itself against specific forces and powers acting in the world and where it requires a careful negotiation with contradictory claims for such an openness.

Before I move on to outline any such alternatives, though, I would first like to spend some time examining further some of the main principles of traditional bioethical theories, focusing on their philosophical premises and political underpinnings.

“Traditional” Bioethics and Its Discontents

Kuhse and Singer explain that the term “bioethics” “was coined by Van Rensselaer Potter, who used it to describe his proposal that we need an ethic that can incorporate our obligations, not just to other humans, but

to the biosphere as a whole.”⁸ Although ecological concerns are not foreign to many bioethicists, nowadays the term is used “in the narrower sense of the study of ethical issues arising from the biological and medical sciences.”⁹ A branch of applied ethics, bioethics is most commonly seen as requiring the formal logic, consistency, and factual accuracy that set a limit to the subjectivity of ethical judgments. In most cases, however, the requirements of formal reasoning have to be reconciled, in one way or another, with “practical constraints.” Kuhse and Singer postulate “universal prescriptivism”—prescribing universalizable judgment for all possible circumstances, including hypothetical ones—as a promising alternative to both ethical subjectivism and “cultural relativism.” They explain, “The effect of saying that an ethical judgment must be universalizable for hypothetical as well as actual circumstances is that whenever I make an ethical judgment, I can be challenged to put myself in the position of the parties affected, and see if I would still be able to accept that judgement.”¹⁰ Judgment is thus being made by a rational, self-enclosed and disembodied self which remains transparent to itself and which can extricate itself from its custom and culture, that is, its *ethos*—a point to which I will return later on in this chapter.

This ethical position has been developed by the Oxford philosopher R. M. Hare and is known as “consequentialism,” a form of utilitarianism which is based on the view that the rightness of an action depends on its consequences. We can hear in this position echoes of Kant’s moral philosophy. For Kant, morality has to come from our reason, rather than from any external concept of good, and it does not involve any principles that would not be subject to universalization. His categorical, universal imperative finds its application in the so-called “Formula of the End in Itself,” which demands that we treat “humanity in your own person or in the person of any other never simply as a means but always at the same time as an end.”¹¹ Postulating respect for other persons, Kant’s ethics stems from the (rational) self which is *naturally* conducive to moral judgment. While a number of contemporary consequentialists, including Hare, are more interested in “practical” resolutions to moral dilemmas, for Kant there are inviolable rules which cannot be changed even if the moral majority would like them to be adjusted in one way or another.

Universal prescriptivism as promoted by Hare, Singer, et al. is not based on any notion of a pregiven universal good, but rather on what we might term the methodical calculation of goods under given socio-political circumstances. In this way, Jeremy Bentham's and John Stuart Mills's utilitarianism, whose ethical principles were aimed at ensuring the "greatest surplus of happiness," is modified: the idea of maximizing the net sum of all happiness is abandoned for the sake of a more modest attempt to satisfy the greatest number of desires and preferences. (Neo)utilitarian positions of this kind inform a great number of debates among contemporary bioethicists. Kuhse and Singer's own ethical proposal, rooted in utilitarian philosophy, goes beyond any predefined rules, no matter if drawn from reason, human nature, or God. It also puts in question the teleological explanation for ethical laws. If humans are seen as purposeless beings who are the result of natural selection operating on random mutation over millions of years, "there is no reason to believe that living according to nature will produce a harmonious society, let alone the best possible state of affairs for human beings."¹² Instead of a priori rules, Kuhse and Singer propose practical solutions. However, when they explain admiringly that utilitarianism "puts forward a simple principle that it claims can provide the right answer to all ethical dilemmas" and that can be applied universally, they position ethical quandaries as disembodied and decontextualized technical problems that concern singular subjects in isolated circumstances.¹³ Bioethics becomes here a "technological fix" to a technical problem.

A similar view is espoused by Stephen Holland in his *Introduction to Bioethics: A Philosophical Introduction*, a book that presents an account of positions in bioethics which are rooted in analytical moral philosophy. Holland states there that "a grasp of normative moral theory is required to address practical ethical problems."¹⁴ This statement clearly foregrounds the view of ethics as expertise rooted in predecided moral norms that can be applied to specific cases. And yet it can be argued that this kind of approach to bioethics and, more broadly, "life itself" risks turning ethics into an automated program that is somewhat schematically applied to specific cases, without taking too much account of the fact that the cases themselves are still very much "in the making." Indeed,

in encounters with new technologies and new media, the ideas and material forms of the human, the body, and life itself are undergoing a radical transformation, with new forms of kinship between humans, animals, and machines being constituted and with the human itself being repositioned as “a digital archive, retrievable through computer networks and readable at workstations.”¹⁵ This is by no means to suggest that the human has been reduced to information in the age of new media and that we can therefore do away with embodiment; it is only to point to the emergence of new discourses of the human which undermine its centering around some fixed biological characteristics or moral values. “Applied bioethics,” understood as the application of the previously agreed moral principles, informed by rational argument and based on biological knowledge, can thus perhaps be seen as threatening to close off an ethical enquiry into the emergence of, and encounters between, organisms and life forms that defy traditional classification all too quickly.

Another problem concerning bioethics which is rooted in the formal reasoning of moral philosophy is that it often relies on hypothetical case studies which function as intellectual exercises but bear little relation to the actual, material circumstances resulting from the developments in biotechnology and new media (no matter whether a case is being made in support of, or against, issues such as abortion, xenotransplantation, or gene therapy). A frequently evoked example is the one put forward by Judith Jarvis Thomson, whose proposition that abortion is morally defensible is derived from the invocation of the figure of “a famous unconscious violinist” who has a kidney disease and has been connected to another human being for nine months in order for his disease to clear.¹⁶ The case is supposed to exemplify the excessiveness or even ridiculousness of a demand posed by a supposedly worthwhile human being—a violinist but also, by extension, a fetus—who, by nature of his or her special talent, and the future potential to which it can be put, has the right to take away the freedom of another human, without considering the latter’s consent or well-being. We are faced here with a philosophical argument constructed through analogy, whereby the specificities of different situations and cases are eliminated. Again, calculation becomes a dominant tool in this kind of moral reasoning, with different

a priori principles being weighted against each other in an attempt to decide whether they are broad or narrow enough.¹⁷

Human, All Too Human

All the issues listed above notwithstanding, it is the inherent humanism of much of traditional bioethics, be it in its religious or secular form, that I find most problematic in contemporary bioethical thought. Let me illustrate what I mean by this by continuing with the abortion example. In his contribution to a debate on abortion, John Finnis, an expert in jurisprudence and constitutional law at Oxford University and author of many books on natural law, fundamental of ethics, and moral absolutes, writes:

Leaving aside real or supposed divine, angelic and extraterrestrial beings, the one thing common to all who, in common thought and speech, are regarded as *persons* is that they are *living human individuals*. This being so, anyone who claims that some set of living, whole, bodily human individuals are not persons, and ought not to be regarded and treated as persons, must demonstrate that the ordinary notion of a person is misguided and should be replaced by a different notion. Otherwise the claim will be mere arbitrary discrimination. But no such demonstration has ever been provided, and none is in prospect.¹⁸

Finnis's condemnation of abortion is based on the principle of "active potential" embraced by many bioethicists—a belief that the embryo "is a human being and human person with potential, not only a merely potential human person or potential human being."¹⁹ The embryo is thus perceived as a "human individual from the beginning of fertilization."²⁰ The ontological status, universal meaning, and transcultural value of "the human" (or, indeed, a "living human individual") is presupposed in this theory as a given. Significantly, the very same argument based on what we can describe as a "stretched scale of personhood"—from a potential human being through to a human being with yet-unfulfilled potential, and then to a human being whose potential is being realized to its maximum capacity—is used by Finnis's opponents. For example, the philosopher Michael Tooley outlines his defense of abortion by postulating "a basic moral principle specifying a condition an organism must satisfy if it is to have a serious right to life" and then arguing that "this condition is not satisfied by human fetuses and infants" and thus that

“they do not have a right to life.”²¹ The sliding scale of humanity and personhood is being applied in both types of moral argument. It is the positioning of the object of bioethical enquiry on this scale that determines the moral response to it.

Interestingly, a certain opening seems to have been created in Tooley’s argument when he calls for a need to distinguish between a human being and a person, with only the latter being moral or having moral rights, including the right to life. “Person” thus becomes for Tooley “just” a moral concept, a tactical maneuver synonymous with asserting that X has a moral right to life,²² raising the possibility of developing a nonhumanist, rights-based bioethics—if only we could agree in advance what it actually means to be alive. However, this is an impossibly big “if.” The distinction between brain death and cardiac death introduced over the last few decades in medicine and the reconceptualization of life as emergence and evolution by researchers in computing and artificial life have cast doubts over the certitude of our all-too-human understanding of the concepts of “life” and “being alive” (even if the alife discourse ultimately reinforces the humanist assumptions it sets out to challenge).²³ Significantly, the author of *The Birth of Bioethics*, Albert R. Jonsen, informs us that the key question bioethics grapples with concerns precisely the ontological status of the human, and human life and death, with, for example, Robert Morrison defining death not as an event but rather as a process commencing at the beginning of life and progressing through its entirety, and Leon Kass postulating that death is an event which should be defined by specific physiological criteria.²⁴ The possibility of the critique of humanism, and of the inherent “truth” of the human and its preestablished, albeit competing, definitions of what it means to live a meaningful life, thus presents itself as inherent to bioethical enquiry. Coming back to Tooley’s proposition, even though the identity of the person presumed by him is strategic, its humanism is nevertheless asserted by a somewhat hesitant aside: “it seems to be a conceptual truth that things that lack consciousness, such as ordinary machines, cannot have rights.”²⁵ We can see from the discussion above that Finnis and Tooley prioritize pragmatic solutions over speculative debates. They do indeed consider a possibility, somewhat jokingly or hesitantly, of the existence of other life forms, “real or supposed divine, angelic and extraterrestrial

beings,” only to position these beings as exclusions, concepts that should not detract a moral philosopher from the serious task of interrogating an already established person’s rights or intrinsic value. And thus the inevitable question, “What about out-of-the-ordinary machines?,” that many a theorist of technology and new media would like to pose to Tooley, remains unanswered.

Significantly, even Peter Singer himself—a veritable enfant terrible of contemporary bioethics due to his unabated support for euthanasia and the killing of anencephalic babies (i.e., babies who have no cerebrum or cerebellum but only a brain stem)—resorts to this very same “stretched scale of personhood” when outlining his ethical propositions. In *Rethinking Life and Death: The Collapse of Our Traditional Ethics*, Singer introduces, in a similar vein to Tooley’s argument, a distinction between a “human being” and a “person,” with only the latter, characterized by rationality and self-awareness, being worthy of ethical respect. Singer includes nonhuman animals such as great apes in the category of “persons” and believes that “whales, dolphins, elephants, monkeys, dogs, pigs and other animals may eventually also be shown to be aware of their own existence over time and capable of reasoning.”²⁶ While his “new ethical outlook” raises radical questions about the principle of the sanctity of human life, his concept of the “person” only extends the notion of the human as a rational being worthy of ethical respect. For Singer, the “new humans” are still skin-bound, carbon-based singular entities, and thus his bioethical propositions are merely an expanded version of traditional moral theories. Although Singer does encourage his readers to interrogate the boundaries of life and death, he does not really investigate the philosophico-political model (i.e., the political philosophy of self-interest and possessive individualism) which underlies his notion of the human. Indeed, not much recognition is given in his work, for example, to the fact that life sciences such as biology and primatology, rather than being just a mirror reflection of capitalist social relations or gender structures, actively reproduce them.²⁷ In Singer’s moral universe there is no room for a thorough investigation of the intermeshing of wider political processes and cultural influences with moral dilemmas.²⁸ What he therefore ends up proposing is an ethics of (and for) the individual, who has to make rational moral choices as if he or she could

always be carved out from the network of relations and flows of capital. Nor does it occur to Singer to include an investigation into the antagonisms that organize the social: any analysis of wider sociopolitical processes seemingly needs to be separated from moral judgments. In his theory of bioethics we are presented with a rational working out of rules, a process of calculation where values can be compared for the sake of elaborating a common good.

While obviously radicalizing humanist ethics by shifting the boundaries of who counts as a “person” (an ape or possibly a dolphin may, while an anencephalic baby does not), Singer still preserves the structural principle of this ethics, with an individual person serving as its cornerstone. In Finnis, Tooley, and Singer, then, all of whom I have included in this chapter as representatives of radically different moral theories, both the moral agent and the object of bioethical enquiry are defined as singular self-enclosed entities, extricated from the networks of social relations and political circumstances as well as the material and discursive conditions of their own emergence. In religious and also secular versions of many bioethical theories, bioethics conjures up the idea of a freethinking neoliberal subject, both as someone who is in charge of making a decision and someone upon whom a decision regarding life and death is to be made. Finnis’s fetus is a potential person, which is why humans as rational moral subjects have a responsibility to make this decision on their behalf, in order to enable the realization of their personhood, while Singer’s apes and dolphins are perceived to be “like humans” and therefore deserving person-like moral treatment.

Even the British moral philosopher John Harris, an unabashed supporter of “human enhancement” and a stringent critic of social hysteria over any type of alteration to humans’ mechanical or chemical make-up, turns a blind eye to the sociocultural circumstances of his technologically enhanced moral subject and thus ends up reaffirming its humanism. In *Enhancing Evolution: The Ethical Case for Making Better People*, Harris posits the need for enhancement as a universal “moral imperative” and seems to have a very clear sense what this “enhancement” actually means. His “better people” will be more intelligent, more beautiful, but also “longer-lived, stronger, happier, smarter, fairer (in the aesthetic and in the ethical sense of that term)” —in other words, “more of everything

we want to be.”²⁹ While I am in agreement with Harris that there is no need for a moral panic over enhancement since “many of us are already enhanced,” there is absolutely no realization in his argument that the allegedly objective human qualities he presents as desirable are actually cultural values, underpinned by numerous assumptions and judgments. What is more, the issue of equal opportunity, which is the guiding force behind his project, cannot be resolved merely on a philosophical level the way he proposes, without addressing the broader questions of politics and its alleged progressivism, which Harris seems to take for granted (in the sense that the “good” of enhancement enjoyed by the “early adopters” will then spread into whole populations), or the logic of capitalism in which, arguably, a certain sense of inequality is imbedded. To think that technological enhancement as such will magically solve the issue of inequality is not particularly innovative—various technolibertarians have thought that about the automobile or the Internet—but it is politically reductive and hence rather naive. This is precisely why cultural studies, which has a long history of thinking through the interconnections between culture, politics, and “the individual,” could teach many a moral philosopher a lesson about the structurations of power and the impossibility of a neat separation of entities for the sake of an elegant moral argument.

Supported by the logic of “stretched personhood” which nevertheless posits the person’s boundaries as fixed, the bioethics that develops firm moral positions in advance and then applies them to specific cases may therefore be difficult to retain if the self-enclosure of “the person” which is its prerequisite is revealed to be both a philosophical and a biological fiction. A number of examples which stretch or enhance individual personhood in totally unpredictable ways, perhaps even beyond the point at which calling them “human” is still applicable, could be evoked here. If we take into account the radical opening of the boundaries of the human body and life—through prosthetic enhancements such as corneal implants or gene therapy, programs such as the Human Genome Project, and the redefinition of death through the notion of being “brain dead”—the presumed humanism of what I call here, for reasons of brevity, “traditional bioethics” is found wanting. However, I want to suggest that a more fundamental reconceptualization of “enhancement” is needed.