

Eubios Journal of Asian and International Bioethics

EJAIB Vol 15 (6) November 2005 ISSN 1173-2571

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Official Journal of the Asian Bioethics Association (ABA)

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Send papers to the editor in electronic form if possible.

Please use reference style used in News section, do not use automatic footnotes or endnotes. Papers are peer reviewed.

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Deadline for the January 2006 issue is 8 January, 2006.

Editorial: ABC6 in Turkey

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The Sixth Asian Bioethics Conference was held in Sanfurliya, Turkey from 14-18 November, 2005, at Harran University. It was a joint Congress between the Asian Bioethics Association and the Turkish Bioethics Association, with simultaneous interpretation between Turkish and English. In the five days of plenary sessions there were many papers presented by a range of authors. Some of the proceedings will be placed on the Eubios Ethics Institute website in the coming months, in the links section to the Asian Bioethics Conferences. Please move your Internet links to the new site: **www2.unescobkk.org/eubios**. Members of the Asian Bioethics Association should renew their subscriptions for 2006, and without payment please accept the Internet versions of the journal only. The voluntary fee contribution of ABA remains determined by the individual means of members, which has a great diversity.

The conference included some hot debates on questions such as the universality of bioethics, with regard to the UNESCO Declaration on Bioethics and Human Rights, the text of which is also included in this issue of the journal. Please note that the title is not including universal norms, which was in the earlier drafts in 2004 and which was dropped after the feedback during global consultation on the draft. The appropriate cultural implementation of the Declaration will be a focus of a number of meetings in the coming year. I also attended the Fourth World Conference of Bioethics in Gijon, Spain, 21-25 November, which endorsed the UNESCO Declaration.

In this issue is a range of papers reminding us of the diversity of views on bioethics, and topics, and the free expression of views that is the essence of bioethics. Please also see the conference list for news of some forthcoming events which promise forums for reflection and action during 2006.

With greetings as we approach the end of 2005, for the new year, 2006. The January issue will see the return of a News section, which will have a lot of events to mention that have occurred in global bioethics and publications during 2005.

If you wish to continue receiving a hard copy of *EJAIB* please copy the last page and send back to me, or else email the important details.



United Nations Educational, Scientific and Cultural Organization
Organisation des Nations Unies pour l'éducation, la science et la culture

Universal Declaration on Bioethics and Human Rights^{*}

The General Conference,

Conscious of the unique capacity of human beings to reflect upon their own existence and on their environment, to perceive injustice, to avoid danger, to assume responsibility, to seek cooperation and to exhibit the moral sense that gives expression to ethical principles,

Reflecting on the rapid developments in science and technology, which increasingly affect our understanding of life and life itself, resulting in a strong demand for a global response to the ethical implications of such developments,

Recognizing that ethical issues raised by the rapid advances in science and their technological applications should be examined with due respect to the dignity of the human person and universal respect for, and observance of, human rights and fundamental freedoms,

Resolving that it is necessary and timely for the international community to state universal principles that will provide a foundation for humanity's response to the ever-increasing dilemmas and controversies that science and technology present for humankind and for the environment,

Recalling the Universal Declaration of Human Rights of 10 December 1948, the Universal Declaration on the Human Genome and Human Rights adopted by the General Conference of UNESCO on 11 November 1997 and the International Declaration on Human Genetic Data adopted by the General Conference of UNESCO on 16 October 2003,

Noting the United Nations International Covenant on Economic, Social and Cultural Rights and the International Covenant on Civil and Political Rights of 16 December 1966, the United Nations International Convention on the Elimination of All Forms of Racial Discrimination of 21 December 1965, the United Nations Convention on the Elimination of All Forms of Discrimination against Women of 18 December 1979, the United Nations Convention on the Rights of the Child of 20 November 1989, the United Nations Convention on Biological Diversity of 5 June 1992, the Standard Rules on the Equalization of Opportunities for Persons with Disabilities adopted by the General Assembly of the United Nations in 1993, the UNESCO Recommendation on the Status of Scientific Researchers of 20 November 1974, the UNESCO Declaration on Race and Racial Prejudice of 27 November 1978, the UNESCO Declaration on the Responsibilities of the Present Generations Towards Future Generations of 12 November 1997, the UNESCO Universal Declaration on Cultural Diversity of 2 November 2001, the ILO Convention 169 concerning Indigenous and Tribal Peoples in Independent Countries of 27 June 1989, the International Treaty on Plant Genetic Resources for Food and Agriculture which was adopted by the FAO Conference

^{*} Adopted by acclamation on 19 October 2005 by the 33rd session of the General Conference of UNESCO.

on 3 November 2001 and entered into force on 29 June 2004, the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) annexed to the Marrakech Agreement establishing the World Trade Organization, which entered into force on 1 January 1995, the Doha Declaration on the TRIPS Agreement and Public Health of 14 November 2001 and other relevant international instruments adopted by the United Nations and the specialized agencies of the United Nations system, in particular the Food and Agriculture Organization of the United Nations (FAO) and the World Health Organization (WHO),

Also noting international and regional instruments in the field of bioethics, including the Convention for the Protection of Human Rights and Dignity of the Human Being with regard to the Application of Biology and Medicine: Convention on Human Rights and Biomedicine of the Council of Europe, which was adopted in 1997 and entered into force in 1999, together with its Additional Protocols, as well as national legislation and regulations in the field of bioethics and the international and regional codes of conduct and guidelines and other texts in the field of bioethics, such as the Declaration of Helsinki of the World Medical Association on Ethical Principles for Medical Research Involving Human Subjects, adopted in 1964 and amended in 1975, 1983, 1989, 1996 and 2000 and the International Ethical Guidelines for Biomedical Research Involving Human Subjects of the Council for International Organizations of Medical Sciences, adopted in 1982 and amended in 1993 and 2002,

Recognizing that this Declaration is to be understood in a manner consistent with domestic and international law in conformity with human rights law,

Recalling the Constitution of UNESCO adopted on 16 November 1945,

Considering UNESCO's role in identifying universal principles based on shared ethical values to guide scientific and technological development and social transformation in order to identify emerging challenges in science and technology taking into account the responsibility of the present generations towards future generations, and that questions of bioethics, which necessarily have an international dimension, should be treated as a whole, drawing on the principles already stated in the Universal Declaration on the Human Genome and Human Rights and the International Declaration on Human Genetic Data and taking account not only of the current scientific context but also of future developments,

Aware that human beings are an integral part of the biosphere, with an important role in protecting one another and other forms of life, in particular animals,

Recognizing that, based on the freedom of science and research, scientific and technological developments have been, and can be, of great benefit to humankind in increasing, *inter alia*, life expectancy and improving the quality of life, and *emphasizing* that such developments should always seek to promote the welfare of individuals, families, groups or communities and humankind as a whole in the recognition of the dignity of the human person and universal respect for, and observance of, human rights and fundamental freedoms,

Recognizing that health does not depend solely on scientific and technological research developments but also on psychosocial and cultural factors,

Also recognizing that decisions regarding ethical issues in medicine, life sciences and associated technologies may have an impact on individuals, families, groups or communities and humankind as a whole,

Bearing in mind that cultural diversity, as a source of exchange, innovation and creativity, is necessary to humankind and, in this sense, is the common heritage of humanity, but *emphasizing* that it may not be invoked at the expense of human rights and fundamental freedoms,

Also bearing in mind that a person's identity includes biological, psychological, social, cultural and spiritual dimensions,

Recognizing that unethical scientific and technological conduct has had a particular impact on indigenous and local communities,

Convinced that moral sensitivity and ethical reflection should be an integral part of the process of scientific and technological developments and that bioethics should play a predominant role in the choices that need to be made concerning issues arising from such developments,

Considering the desirability of developing new approaches to social responsibility to ensure that progress in science and technology contributes to justice, equity and to the interest of humanity,

Recognizing that an important way to evaluate social realities and achieve equity is to pay attention to the position of women,

Stressing the need to reinforce international cooperation in the field of bioethics, taking into account, in particular, the special needs of developing countries, indigenous communities and vulnerable populations,

Considering that all human beings, without distinction, should benefit from the same high ethical standards in medicine and life science research,

Proclaims the principles that follow and *adopts* the present Declaration.

General provisions

Article 1 – Scope

1. This Declaration addresses ethical issues related to medicine, life sciences and associated technologies as applied to human beings, taking into account their social, legal and environmental dimensions.
2. This Declaration is addressed to States. As appropriate and relevant, it also provides guidance to decisions or practices of individuals, groups, communities, institutions and corporations, public and private.

Article 2 – Aims

The aims of this Declaration are:

- (a) to provide a universal framework of principles and procedures to guide States in the formulation of their legislation, policies or other instruments in the field of bioethics;
- (b) to guide the actions of individuals, groups, communities, institutions and corporations, public and private;

- (c) to promote respect for human dignity and protect human rights, by ensuring respect for the life of human beings, and fundamental freedoms, consistent with international human rights law;
- (d) to recognize the importance of freedom of scientific research and the benefits derived from scientific and technological developments, while stressing the need for such research and developments to occur within the framework of ethical principles set out in this Declaration and to respect human dignity, human rights and fundamental freedoms;
- (e) to foster multidisciplinary and pluralistic dialogue about bioethical issues between all stakeholders and within society as a whole;
- (f) to promote equitable access to medical, scientific and technological developments as well as the greatest possible flow and the rapid sharing of knowledge concerning those developments and the sharing of benefits, with particular attention to the needs of developing countries;
- (g) to safeguard and promote the interests of the present and future generations;
- (h) to underline the importance of biodiversity and its conservation as a common concern of humankind.

Principles

Within the scope of this Declaration, in decisions or practices taken or carried out by those to whom it is addressed, the following principles are to be respected.

Article 3 – Human dignity and human rights

1. Human dignity, human rights and fundamental freedoms are to be fully respected.
2. The interests and welfare of the individual should have priority over the sole interest of science or society.

Article 4 – Benefit and harm

In applying and advancing scientific knowledge, medical practice and associated technologies, direct and indirect benefits to patients, research participants and other affected individuals should be maximized and any possible harm to such individuals should be minimized.

Article 5 – Autonomy and individual responsibility

The autonomy of persons to make decisions, while taking responsibility for those decisions and respecting the autonomy of others, is to be respected. For persons who are not capable of exercising autonomy, special measures are to be taken to protect their rights and interests.

Article 6 – Consent

1. Any preventive, diagnostic and therapeutic medical intervention is only to be carried out with the prior, free and informed consent of the person concerned, based on adequate information. The consent should, where appropriate, be express and may be withdrawn by the person concerned at any time and for any reason without disadvantage or prejudice.

2. Scientific research should only be carried out with the prior, free, express and informed consent of the person concerned. The information should be adequate, provided in a comprehensible form and should include modalities for withdrawal of consent. Consent may be withdrawn by the person concerned at any time and for any reason without any disadvantage or prejudice. Exceptions to this principle should be made only in accordance with ethical and legal standards adopted by States, consistent with the principles and provisions set out in this Declaration, in particular in Article 27, and international human rights law.

3. In appropriate cases of research carried out on a group of persons or a community, additional agreement of the legal representatives of the group or community concerned may be sought. In no case should a collective community agreement or the consent of a community leader or other authority substitute for an individual's informed consent.

Article 7 – Persons without the capacity to consent

In accordance with domestic law, special protection is to be given to persons who do not have the capacity to consent:

- (a) authorization for research and medical practice should be obtained in accordance with the best interest of the person concerned and in accordance with domestic law. However, the person concerned should be involved to the greatest extent possible in the decision-making process of consent, as well as that of withdrawing consent;
- (b) research should only be carried out for his or her direct health benefit, subject to the authorization and the protective conditions prescribed by law, and if there is no research alternative of comparable effectiveness with research participants able to consent. Research which does not have potential direct health benefit should only be undertaken by way of exception, with the utmost restraint, exposing the person only to a minimal risk and minimal burden and if the research is expected to contribute to the health benefit of other persons in the same category, subject to the conditions prescribed by law and compatible with the protection of the individual's human rights. Refusal of such persons to take part in research should be respected.

Article 8 – Respect for human vulnerability and personal integrity

In applying and advancing scientific knowledge, medical practice and associated technologies, human vulnerability should be taken into account. Individuals and groups of special vulnerability should be protected and the personal integrity of such individuals respected.

Article 9 – Privacy and confidentiality

The privacy of the persons concerned and the confidentiality of their personal information should be respected. To the greatest extent possible, such information should not be used or disclosed for purposes other than those for which it was collected or consented to, consistent with international law, in particular international human rights law.

Article 10 – Equality, justice and equity

The fundamental equality of all human beings in dignity and rights is to be respected so that they are treated justly and equitably.

Article 11 – Non-discrimination and non-stigmatization

No individual or group should be discriminated against or stigmatized on any grounds, in violation of human dignity, human rights and fundamental freedoms.

Article 12 – Respect for cultural diversity and pluralism

The importance of cultural diversity and pluralism should be given due regard. However, such considerations are not to be invoked to infringe upon human dignity, human rights and fundamental freedoms, nor upon the principles set out in this Declaration, nor to limit their scope.

Article 13 – Solidarity and cooperation

Solidarity among human beings and international cooperation towards that end are to be encouraged.

Article 14 – Social responsibility and health

1. The promotion of health and social development for their people is a central purpose of governments that all sectors of society share.

2. Taking into account that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition, progress in science and technology should advance:

- (a) access to quality health care and essential medicines, especially for the health of women and children, because health is essential to life itself and must be considered to be a social and human good;
- (b) access to adequate nutrition and water;
- (c) improvement of living conditions and the environment;
- (d) elimination of the marginalization and the exclusion of persons on the basis of any grounds;
- (e) reduction of poverty and illiteracy.

Article 15 – Sharing of benefits

1. Benefits resulting from any scientific research and its applications should be shared with society as a whole and within the international community, in particular with developing countries. In giving effect to this principle, benefits may take any of the following forms:

- (a) special and sustainable assistance to, and acknowledgement of, the persons and groups that have taken part in the research;
- (b) access to quality health care;
- (c) provision of new diagnostic and therapeutic modalities or products stemming from research;
- (d) support for health services;
- (e) access to scientific and technological knowledge;
- (f) capacity-building facilities for research purposes;
- (g) other forms of benefit consistent with the principles set out in this Declaration.

2. Benefits should not constitute improper inducements to participate in research.

Article 16 – Protecting future generations

The impact of life sciences on future generations, including on their genetic constitution, should be given due regard.

Article 17 – Protection of the environment, the biosphere and biodiversity

Due regard is to be given to the interconnection between human beings and other forms of life, to the importance of appropriate access and utilization of biological and genetic resources, to respect for traditional knowledge and to the role of human beings in the protection of the environment, the biosphere and biodiversity.

Application of the principles

Article 18 – Decision-making and addressing bioethical issues

1. Professionalism, honesty, integrity and transparency in decision-making should be promoted, in particular declarations of all conflicts of interest and appropriate sharing of knowledge. Every endeavour should be made to use the best available scientific knowledge and methodology in addressing and periodically reviewing bioethical issues.
2. Persons and professionals concerned and society as a whole should be engaged in dialogue on a regular basis.
3. Opportunities for informed pluralistic public debate, seeking the expression of all relevant opinions, should be promoted.

Article 19 – Ethics committees

Independent, multidisciplinary and pluralist ethics committees should be established, promoted and supported at the appropriate level in order to:

- (a) assess the relevant ethical, legal, scientific and social issues related to research projects involving human beings;
- (b) provide advice on ethical problems in clinical settings;
- (c) assess scientific and technological developments, formulate recommendations and contribute to the preparation of guidelines on issues within the scope of this Declaration;
- (d) foster debate, education and public awareness of, and engagement in, bioethics.

Article 20 – Risk assessment and management

Appropriate assessment and adequate management of risk related to medicine, life sciences and associated technologies should be promoted.

Article 21 – Transnational practices

1. States, public and private institutions, and professionals associated with transnational activities should endeavour to ensure that any activity within the scope of this Declaration, undertaken, funded or otherwise pursued in whole or in part in different States, is consistent with the principles set out in this Declaration.

2. When research is undertaken or otherwise pursued in one or more States (the host State(s)) and funded by a source in another State, such research should be the object of an appropriate level of ethical review in the host State(s) and the State in which the funder is located. This review should be based on ethical and legal standards that are consistent with the principles set out in this Declaration.
3. Transnational health research should be responsive to the needs of host countries, and the importance of research contributing to the alleviation of urgent global health problems should be recognized.
4. When negotiating a research agreement, terms for collaboration and agreement on the benefits of research should be established with equal participation by those party to the negotiation.
5. States should take appropriate measures, both at the national and international levels, to combat bioterrorism and illicit traffic in organs, tissues, samples, genetic resources and genetic-related materials.

Promotion of the Declaration

Article 22 – Role of States

1. States should take all appropriate measures, whether of a legislative, administrative or other character, to give effect to the principles set out in this Declaration in accordance with international human rights law. Such measures should be supported by action in the spheres of education, training and public information.
2. States should encourage the establishment of independent, multidisciplinary and pluralist ethics committees, as set out in Article 19.

Article 23 – Bioethics education, training and information

1. In order to promote the principles set out in this Declaration and to achieve a better understanding of the ethical implications of scientific and technological developments, in particular for young people, States should endeavour to foster bioethics education and training at all levels as well as to encourage information and knowledge dissemination programmes about bioethics.
2. States should encourage the participation of international and regional intergovernmental organizations and international, regional and national non-governmental organizations in this endeavour.

Article 24 – International cooperation

1. States should foster international dissemination of scientific information and encourage the free flow and sharing of scientific and technological knowledge.
2. Within the framework of international cooperation, States should promote cultural and scientific cooperation and enter into bilateral and multilateral agreements enabling developing countries to build up their capacity to participate in generating and sharing scientific knowledge, the related know-how and the benefits thereof.
3. States should respect and promote solidarity between and among States, as well as individuals, families, groups and communities, with special regard for those rendered vulnerable by disease or disability or other personal, societal or environmental conditions and those with the most limited resources.

Article 25 – Follow-up action by UNESCO

1. UNESCO shall promote and disseminate the principles set out in this Declaration. In doing so, UNESCO should seek the help and assistance of the Intergovernmental Bioethics Committee (IGBC) and the International Bioethics Committee (IBC).
2. UNESCO shall reaffirm its commitment to dealing with bioethics and to promoting collaboration between IGBC and IBC.

Final provisions

Article 26 – Interrelation and complementarity of the principles

This Declaration is to be understood as a whole and the principles are to be understood as complementary and interrelated. Each principle is to be considered in the context of the other principles, as appropriate and relevant in the circumstances.

Article 27 – Limitations on the application of the principles

If the application of the principles of this Declaration is to be limited, it should be by law, including laws in the interests of public safety, for the investigation, detection and prosecution of criminal offences, for the protection of public health or for the protection of the rights and freedoms of others. Any such law needs to be consistent with international human rights law.

Article 28 – Denial of acts contrary to human rights, fundamental freedoms and human dignity

Nothing in this Declaration may be interpreted as implying for any State, group or person any claim to engage in any activity or to perform any act contrary to human rights, fundamental freedoms and human dignity.

Ethics of Concerns and Life Cessation Decisions: When Emotions are All What Remains

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Summary

Background. It is generally claimed that, in some exceptional circumstances, the taking of human life may be justified on moral grounds. Rare but possible or largely theoretical life situations are often presented to describe either a dilemma within which all outcomes involve loss of human life, or a dilemma which offers at least two alternatives, whereby to act in a way to not maintain human life could be morally preferable. In practical situations, in some rare occasions when such inevitable decisions (to terminate or not human life) have to be taken - when no alternative exists, the decision could not be left to be accidental but would have to be based on same reasons. We argue that the taking of human life could not be morally justified, and we propose here a solution based on emotional motives. The aim of the essay is, therefore, to examine moral reasons for or against maintenance of human life in medically uncontroversial circumstances in the patients whose mental life is estimated to be absent.

Ethics of concerns. The problem of the justification of the taking of human life is not only a moral but, above all, an ontological (existential) question which, consequently, could not be morally justified and requires other conceptual frame of reference. In medical practice, the currently accepted criteria for the termination of life support are morally acceptable reasons including patients' desire, together with medical reasons, like absence of mental life, for example the case of Terri Schiavo, March 2005), as well as the certainty that sensible life could not be prolonged. A decision which should be taken has to accommodate to all concerns that are involved. However, our *concerns* are closely linked to our emotions and may relate not only to persons but also to physical objects. If our intentional life were understood to be based on our *concerns* and if our acting would be understood to be predominantly, also, biased by our *concerns*, the emotional attitude of the actor would have to be largely influencing almost all hers/his decisions. These would include decisions that not necessarily have to have a direct link with emotions, like various rational decisions, and would certainly include moral decisions.

Applying the morality of concerns. The reasons for the continuations or cessation of the life support may be based on direct or indirect patient's interests and/or Interests of others. If there are no patient's interests, when rational choice is missing, and when moral arguments fail, decisions could be based on reasons based on the *emotional concerns*, which are

only morally justifiable reasons that remain, while reasons stemming from material motives could not be accepted.

Conclusion. The emotional approach may be of particular value in the above described circumstances, and in critically ill patients where a dilemma exists as to whether to maintain life support or not, when all other approaches would fail, and should be estimated as necessary and sufficient for decision making. Those persons that invested the most of emotions (the closest relatives of the patient) would be the persons whose opinion should significantly influence a decision about life cessation in patients that otherwise would not qualify for life support. Then, intensive communication with the persons emotionally concerned would be an appropriate method that may lead to the decision which could satisfy moral and ontological criteria.

Keywords: death, decisions, killing, ethics of concerns, sympathy, empathy

1. Introduction

The dispute over whether killing could be justified has a very long history. Indeed, killing humans has probably been a practice ever since humans came on the earth. Interestingly, the more we became "civilized", the more killing seems to have taken place. A need for the justification of killing, obviously, increased with the development of civilization, yet the matter became, at the same time, more obscure. A particular problem has been encountered when trying to justify the taking of human life in self-defence, euthanasia, capital punishment, and in war. The obstacle is not solely the inability to rightly judge the conditions one faces when deciding, like in the euthanasia, whether the conditions for such actions are at hand [1] or, in war, for example, whether the utilitarian version of an argument suffices or not [2]. The more basic problem has been, we will claim, that people have tried to solve the problem within the framework of religion and morality which could not, in principle, provide a basis for rational behaviour in these extreme situations. Thereby, taking human life has been, at the same time, forbidden and permitted.

As mentioned, one of causes of the problem has been the fact that the conditions that would allow for the taking of human life in self-defence, euthanasia or "just war" could not be exhaustively defined. Therefore, the disputes over the theoretical possibility of justifying or not justifying such acts, have been permanent and without hope of being solved in principle. Moreover, capital punishment contained an additional problem: the inability to show why, in principle, one should kill a human being who had committed a crime. The theory of retributive justice had many adherents who developed strong arguments in its favour [3, 4], in spite of the fact that its basic principles could not be proven acceptable, since it was not possible to show, in principle, what exactly it was that somebody deserved. Moreover, how can the taking of life be considered a kind of punishment when it results in the removal of the punished. Also, justification for the taking of life does not lie in preventive punishment. Therefore, the basic principles would fail. Either predictions are never certain or, after being executed, the criminal would not experience anything at all and the retribution would fail. This is also not deterrence, since a number of investigations have shown that the effect of deterrence is, to put it simply, absent [5]. Finally, such action does not provide sufficient satisfaction to the victim, his/her family, or to those who loved the victim.

Similarly, no form of consequentialism could, in principle, provide the right answer as to what should be done, since there is no certainty as to how various agents, which cannot be controlled, would behave and the outcome stays uncertain. Thereby, teleological attempts have been condemned to

failure. On the other hand, the deontological approach can hardly be of any help since, although it may be useful to find out what is right and wrong to do in principle. The theory cannot prescribe an action that would contradict its basic principles - this being exactly what would be needed to justify killing.

Whether emotive meta-ethics [6, 7] has failed will be out of scope of this paper. However, we will claim that although it probably failed [8] it may be of value in the field that we will maintain to be "outside" ethics. We argue that the taking of human life could not be morally justified, and we propose here a solution based on emotional motives. Aim of the essay is, therefore, to examine moral reasons for or against maintenance of human life in medically uncontroversial circumstances in the patients whose mental life is estimated to be absent.

2. Moral Theory of Concerns

The problem of the justification of the taking of human life is not only a **moral** but, above all, an **ontological (existential)** question which, consequently, could not be **morally** justified and requires other conceptual frame of reference. Let us examine this more closely.

The problem of the moral justification of the taking of human life, we claim, does not belong entirely to the moral frame. Therefore, the problem of killing humans can not be solved in a moral frame. Morality is a result of human intellectual enterprise. It presupposes a human individual who reflects upon her/his obligations towards the outside world: what should be done, what ought to be done, and what should not be done. Man is a subject of morality and its destruction removes morality entirely. The deontological approach to morality is, obviously, a result of human intellectual development and education. All other approaches to moral problems are not much different. Teleology would be impossible without the human mind, for example. Killing human beings is, then, inevitably bound to renouncing morality by removing its very subject. To oppose this would be to claim that we can live without morality, which would be similar to claiming that we can live without other humanly specific mental activities, which is absurd. This would remove our human essence. To claim that we can continue to live and not be human any longer, would be equally absurd.

To make our ideas clear, we need some repetition. First, we would like to emphasize some key terms that will be used – sympathy and empathy [9, 10, 11] and, then, move into describing our relationships to the objects or persons in the external world which determine in what kind of active positions we are and in relation towards the external world and its content. As Eisenberg and colleagues have defined [11]:

"Empathy (is) an affective response that stems from the *apprehension or comprehension of another's emotional state or condition and is similar to what the other person is feeling or would be expected to feel.* (...) Sympathy is an emotional response stemming from the apprehension or comprehension of another's emotional state or condition, *which is not the same as what the other person is feeling (or is expected to feel) but consists of feelings of sorrow or concern for the other.*"

In Eisenberg's view:

"(...) pure empathy *is not other-oriented.* However, with further cognitive processing (assuming that the individual is old enough to differentiate between one's own and others' internal states), an empathic response usually turns into either sympathy, personal distress, or some combination (perhaps alternating) thereof".

This difference is important, although not so much for our present argument where we will remain inside of the broader frame of concerns in general.

3. Direct and Indirect Concerns

Our world, as we perceive it, is inhabited by other minds, animals, plants and things, i.e. material objects, as well as mental objects. All of these may deserve our direct (primarily other people, i.e. other minds) or indirect (the rest of our perceived world) moral (or other) concern, this depending on the degree by which they may relate to the other minds, other human beings (persons) [12]. However, the primary and direct subject of morality and our moral concern are human beings.

One builds multiple relations with one's surroundings. One likes or dislikes the objects, facts or persons; what they do or not do, approve or disapprove of. All kinds of intellectual and psychological relationships are established. Whether these be cognitive, behavioural, automatic responses or attachments to the objects or persons, all generate a vast variety of concerns. Man is active towards the surroundings in various ways, establishing, thereby, concerns about fulfilment of these activities. These concerns vary in intensity and kind. Many of our relations can be described in terms of the pleasure they foster. This may be simple, physical pleasure (i.e., taking a warm bath) or artistic pleasure (enjoying a piece of art), to name a couple. There may be a combination of "pleasures", such as watching or doing sports. Participating in sport, fosters a corporal satisfaction, as well as, a mental satisfaction, which is not only related to the feeling of movement of one's own body, but, also, to the visual satisfaction while performing or seeing a performance of movements.

Regarding the many concern types, the possibilities are endless. Only one group of concerns are moral concerns. The others are our aesthetic concerns, intellectual or social concerns (dependent on activities which are subject to a person's preferences and values; what one discourages/encourages and what one [dis]approves of). In addition, one cares about one's own life, the lives of others, the existence of objects, other living beings, and our "world". Two of these groups of concerns are relevant to what we are talking about – one being moral and the other being existential concerns. Existential concerns are more basic. The former are about the content of our world, the latter about our world in its totality. This is a crucial distinction.

In general, our concerns will be positive or negative. Positive would mean that we approve of doing something, like doing something, or, even, believe that we have to/ought to do something. The opposite would be true of the negative concerns. We experience pleasure or pain in a number of them; though, not in all. Deontological principles or teleological reflections play an important role in determining our motivations. Our sense of justice could, for example, play a role in these concerns without necessarily involving a sense of empathy or sympathy [13]. These would also constitute a particular group of moral concerns. Given the substantial number of our concerns, their fulfilment or lack of fulfilment does not necessarily produce pleasure or pain. We may be quite indifferent to them. Direct concerns are different. Direct concerns would be those objects/subjects we care about; not because of some other reason, object, or subject; but for the object/subject itself.

Indirect concerns are equally important. We are concerned about the concerns of other people or living beings (even those of animals) and sympathize with them. Our concerns about the concerns of other people (other minds) are particularly strong, thus caring whether other people are satisfied or not. But we sympathize only if we can recognize their concerns. As Hume puts it: "sympathy with persons

remote from us, (is) much fainter than that with persons near and contiguous" [14]. We are capable of recognizing "concerns" which animals may have. We, for example, recognize that animals may experience pain or pleasure and, often, admit to caring very much about them. Our concerns about other minds' concerns or about the concerns or feelings of other living creatures could be, in the appropriate circumstances, also our moral concerns. We may therefore indirectly care about some physical objects which concern others. For example, we may not be concerned at all about some book, but if somebody else does, the destruction of the book could introduce indirect feelings of sympathy for the object and, even, incite our moral concerns.

We, also, strongly sympathize with people who are anxious about their existence. On the other hand, we are prepared to not care about animal lives if we are aware that animals do not have such concerns. In general, we are able to not sympathize with living beings (including humans), thereby excluding moral concerns. Our moral concerns need objects of concern and we need the capability to sympathize with these objects. Imagine, for example, that the whole world would be destroyed with the exception of one person; destroying all subjects of his concern. He would remain without the entire collection of the subjects of his moral concerns and, we presume, without his moral life.

As we have seen above, sympathy is important for, both, direct and indirect concerns, although largely independent of the nature of the objects. Whether the object of our concerns is a person or not is not particularly decisive. When the justification of animal killing is in question, it seems to be of little relevance whether the animal is a mammal or not. What is certainly relevant, is whether the animal feels pain or whether it has a kind of mental life, yet such considerations are largely neglected. Our human relationship with a particular animal seems to be of more importance in fostering eventual sympathy and inciting such in other people. Enormous numbers of highly developed animal species are killed just for food and, this, without much hesitation, as long as no human being is suffering because of that act.

Let us examine just a few more examples. To make direct and indirect concerns more clear, we would like to further discuss the interests of people. One type of our moral concerns appears when we know that other people are concerned about the preservation of forests, for example, yet we are not. The destruction of the rainforests in the Amazon, could then become our moral concern, not because of the rainforests themselves, but because of the people concerned about the destruction of forests. This would be an indirect concern. Similarly, we could, also, develop concerns for people who fear being killed or mistreated, starving, or suffering in various ways – only if we have developed concerns for them previously. Interesting example brings Aronson [15]. He was calmly watching the news from Vietnam War with his little child. At certain point the little child asked him what was "napalm", and he explained it briefly. At that instance the child started to cry. He admitted that he was surprised by the absence of sympathy we can develop for other people sufferings in the world of meaningless world that we live in. Or, we would say, how much self involvement we need to fully appreciate others as human beings.

If this would be all that matters, then the killing of human beings who are in deep narcosis, having no friends or relatives who, except may be those who are outside of that imagined situation, cared whether they stayed alive or not, would not be problematic. Our reality sometimes displays such behaviour. In war, for example, when all our compassionate feelings are extinguished by war propaganda and political, moral corruption; we tend to approve of killing. This is how we finally

arrive at accepting the proposed justifications for the killing of human beings. If concerns are absent, as in these situations, human beings are capable of ignoring all moral principles. It seems that the presence of concerns is decisive for remembering the moral principles.

4. Existential Concerns

As mentioned above, killing humans may be denied on moral grounds, yet it is also possible, even within the moral sphere, to develop arguments which try to justify killing; as in war, capital punishment etc. We claimed above that these attempts always fail because the problem is not only moral, but also existential; concluding that killing could not be justified by a moral argument. Moreover, being an existential issue – outside of morals - its moral justification would be quite irrelevant. We claim here, however, that while living with unsolved moral concerns, we are still faced, in such dilemmas, with existential concerns as well. The solutions to the existential concerns, provided the solutions exist at all, have to be looked for outside morality. Before attempting to search for a solution, let us examine how existential concerns apply to physical objects.

The example with the book that we gave above is only one. Similarly, our concerns as to whether or not our TV set is going to break down and we would have to buy another one is a type of existential concern. We may be concerned about all the objects that surround us, even though these objects may provide no particular pleasure. Their disappearance may trouble us if we consider them to be making up our world; they are part of our life. As long as their disappearance belongs to the works of nature, like the disappearance of the mountain after a volcanic eruption, we suffer little or not at all from existential concerns. But, if this would be the result of human intervention, it may trouble us. An "act of nature" does not usually trouble us as an immoral act; although it can, if the destroyed object is of personal concern of somebody else. One could conclude that an "act of nature", at its very base, awakens our existential concerns. However, it stops there. It does not provoke an existential crisis. Material objects are not minds, nor are they a dwelling place for any mental or intellectual enterprise. This is only man himself.

To describe the existential dilemma, the expression "immoral" seems, then, to be quite inappropriate. Consequently, not only fallacious arguments, but, also perfect moral arguments simply could not pertain when talking about the killing of humans. This is a sphere where moral disputations do not belong. "Amoral" may be a better word to describe such behaviour, since an act of destruction towards the very subject of morality (human being), as I stated above, is outside morality. For the same reason, a discourse about war, which promotes the very act of killing human beings, is outside of moral discourse; although it may be descriptive, metaphoric, or emotional. Perhaps, we can develop some existential or ontological discourse on the topic, but ethical discourse would lead to the absurdities that we have already mentioned.

5. Existential "Solution"

Whether or not an existential argument in this matter has a solution is controversial. There are, indeed, circumstances when the killing of humans is technically difficult, if not impossible, to avoid. Such are the cases of concrete self-defence or in wars undertaken to protect a population under direct attack. Imminent attack is not included, not only because the future can not be predicted with certainty, but, also, because it is not possible to precisely define such a condition. Indeed, it is not possible to precisely define in advance a direct attack or real self-defence situation either. They are known

only after the act, when, of course, it is too late for any other action.

As we have demonstrated above, moral argument would not offer a justification for killing. If the situation were such that a decision to act in some way has to be taken, obviously, we would have to decide on some other, non-moral grounds. In such a dead-end situation we may retreat and choose not to decide, i.e. not to act. Of particular relevance in medical ethics would be a decision of the physician not to induce, actively or passively, life termination in some medically uncontroversial circumstances. This is a right that the physician in question certainly has, that is little discussed in the medical ethics. As mentioned above, there are situations where, both, acting and not acting would lead to outcomes that may be equally undesirable, and where not acting may represent, by the means of some other agent which, acting in our absence, would, in fact, be an "active" option.

What other grounds could be used if we can not be morally justified in our actions in all available outcomes? We are always aware of our intentional background and, in the absence of a rational and just choice, we would only be in a situation, preserving rationality, within which we could only opt for some reasons that spring now, not from our moral principles and presuppositions, but from our individual motives: we would have no choice but to turn to ourselves.

In his Nobel Prize inaugural Lecture, Bertrand Russell [16] wrote: "All human activity is prompted by desire. There is a wholly fallacious theory advanced by some earnest moralists to the effect that it is possible to resist desire in the interests of duty and moral principle. I say this is fallacious, not because no man ever acts from a sense of duty, but because duty has no hold on him unless he desires to be dutiful. If you wish to know what men will do, you must know not only, or principally, their material circumstances, but rather the whole system of their desires with their relative strengths.

Occasionally, we believe (perhaps contrary to what Russell thought) that some of the desires in some people may spring from their intellectual occupations and their knowledge. However, the number of such desires is small and such people are rare. To achieve this, we would have to subordinate all our other concerns to our intellectual concerns and subordinate all our feelings to a single one, that being our concerns for the values of knowledge. And this we are incapable of doing.

In the extreme situations mentioned, humankind is left without much of learned moral principles, and alone with bare desires and their motives. These motives will be of various kinds and we listed number of them when speaking about concerns. We will take just two extremes: material and emotional. If we would presuppose a moral attitude, i.e. continuing to act morally by consciously choosing our motives for action, it would seem quite acceptable that emotional grounds for acting would replace moral motivation in a situation where acting morally would not be possible. This would be a situation where our emotional concerns would be our only available resources. A frequently cited example is the situation where one has a choice: either to take one human life or to let a number of people die, including the mentioned one. These situations probably never occur. Let us assume, for this occasion, that they do occur and that the outcomes are certain. The decision would still be, according to what we have said, an emotional one. The claims that it may be an entirely technical solution (killing one instead of letting many die), is based on the certainty of the possible outcomes, which, in reality, are never at hand. The Moscow theatre disaster in October 2002 is one example where a group of terrorists intended to kill a great number of spectators. Moscow authorities decided to sacrifice a smaller number of spectators in order to save the majority. However, it has never been

publicly investigated just how certain the claimed certainty was. Such decisions, although they may be universally approved in principle, may not be universally acceptable in every particular instance because they are specific to the particular decision maker who decides to act immorally and take the emotional burden.

7. Difficult issues

Whether some motives for an action are nobler than the other or how does altruism, euthanasia or the Doctrine of Double Effect - DDE [17] fit in the emotional frame? It will be not referred here to the Aquinas version of the DDE ("killing one's assailant is justified, provided one does not intend to kill him"). Today much cited utilitarian version of DDE will be used where it is maintained that if to achieve good effects some not so important bad effects have to be produced, the action may be approved, or its inverted form: if the bad effects are just unacceptable, the action has to be cancelled.

On the pure ethical ground, the material motives would not be acceptable as a first line of choice. A hierarchy of motives is certainly a social construct which is not equally distributed. There are societies where the above hierarchy would not be easily accepted. As some recent wars demonstrate, our western society is often more inclined to value material interests higher than emotional ones. It may be argued, that the material advantages gained would, in the end, serve high moral purposes, such as the achievement of social justice, better healthcare, education, or similar benefits. These are all highly hypothetical possibilities, which therefore need no further discussion. Similar reasoning would apply to the medical ethics, including the application of the accepted rules used when taking decisions as to whether to maintain or not to maintain human life of the patients in otherwise medical or ethically-non-controversial circumstances. These would include currently accepted criteria for the termination of life support which constitute morally acceptable reasons, including patients' desire, together with existential reasons; including medical reasons (absence of mental life, for example), certainty that life could not be prolonged, etc.. The emotional approach may, in these circumstances where all other approaches would approve an uncontroversial decision, be of particular value and should be estimated as necessary and sufficient for decision making. We are bound to believe that our approach, although it does not spare meta-ethical emotivism from shortcomings, opens a field where emotivism may find its full value.

Being unjustifiable on rational ground, the altruistic behaviour would fit perfectly well an emotivist logic. On the contrary, it is often tried to approve euthanasia by moral and rational arguments, which, following what we have claimed above, can not be done, while by emotional arguments could. Some legislatures (German for example) have adopted some rules as, it is claimed, quite practical. One is "in dubio pro vita" (when in doubt, decide for life maintenance) about which has been argued elsewhere to be an open end rule always forbidding euthanasia and to be as such without much practical use [18]. Similarly in certain legislatures, rephrasing the rule "salus aegroti suprema lex" into "voluntas aegroti suprema lex" ("well-being of the patient is the highest law" into "the will of the patient is the highest law") lead to the obvious consequences: obligation of the physician to help a patient has been conditionally cancelled and the obligation perverted into explicit duty to fulfil patient's wish. Indeed, the latter rule may be not only in contradiction with the former, imposing a duty not to help in healing the patient if he/she does not want it, but sometimes, it requires that physician acts in a certain way (by withholding or terminating active life support) so as to permit patient's death – if this is patient's desire. If the right of

disposing of himself/herself is accepted for everybody, patient and physician have equal rights and "voluntas" of one does not override that of the other. The requests for active or passive euthanasia may simply be, and quite often are, in opposition to physician's moral principles and such ethical stance may be emotionally charged very strongly indeed. Killing human being, in an active or passive way, may result in pain, suffering and long lasting emotional trauma for the actor, and this gives him/her full right to avoid executing such "duties". In theory, an application of the inverse form of DDE (see above) would be warranted in these cases, whereby the effects of moral and emotional injury to the attending physician would prevail. This would then justify refusal of some physician to fulfil the desire of the patient to terminate life in both ways, either active or passive. A physician should have a right NOT to kill the other human being (in an active or passive way), similarly to the right that all other men and women certainly have. The reality is different though. Such right is sometimes recognised for some religious groups, but it is denied to the individuals if based only on pure ethical grounds, what is logically inconsistent. Even greater absurdity is in the acceptance, at the same time, of its opposite – acceptance of the right to kill, in war, for example. These contradictions would be avoided if that difficult issue would be understood to be reaching over and above morality and considered in an existential frame, which we proposed in this paper.

In medical practice, the currently accepted criteria for the termination of life support are morally acceptable reasons including patients' desire, together with medical reasons, like absence of mental life, for example the case of Terri Schiavo, March 2005), as well as the certainty that sensible life could not be prolonged. A decision which should be taken, has to take into account all concerns that are involved. However, our *concerns* are closely linked to our emotions and may relate not only to persons but also to physical objects. If our intentional life were understood to be based on our *concerns* and if our acting would be understood to be predominantly, also, **biased** by our *concerns*, the emotional attitude of the actor would have to be largely influencing almost all hers/his decisions. These would include decisions that not necessarily have to have a direct link with emotions, like various rational decisions, and would certainly include moral decisions.

Applying the morality of concerns. The reasons for the continuations or cessation of the life support may be based on: Direct or indirect patient's interests and/or Interests of others. If there are *no patient's interests*, i.e.:

1. Lethal outcome is inevitable but patient can not be declare dead.
2. Irreversible loss of mental life
3. No medical indications for continuation of life support
4. Continuation or cessation of life support neutral towards patient's interests
5. Unknown what "a moral personality" (Rawls, 1972) would want
6. No judicial grounds for continuation or termination of life support (patient's desire unknown).
7. No additional "patient's interests" that would help decide

In these cases, when rational choice is missing, and when moral arguments fail, decisions could be based on reasons based on the *emotional concerns*, which are only morally justifiable reasons that remain, while reasons stemming from material motives could not be accepted.

8. Conclusion

We have argued here that when deciding to terminate human life, what appears to be "morality" has primarily to do with our concerns and that these concerns may be of two kinds: moral and existential. Whether or not we are going to

approve or disapprove of some action in such circumstances will depend largely on the concerns we would have for the particular object. Concerns may be further divided into direct and indirect concerns and are both based on the sympathy or empathy we have developed towards the objects of concerns. While the solution of moral problems may be sought in moral arguments, the existential problems would require existential arguments. The problem of killing humans is a moral problem that can not be morally justified. It extends beyond morality and is, in the end, an existential problem which cannot be solved by moral argumentation. Existential argumentation concerning the killing of humans may be pursued after moral argumentation has been exhausted. These would include currently accepted criteria for the termination of life support which constitute morally acceptable reasons, including patients' desire, together with existential reasons; including medical reasons (absence of mental life, for example the case of Terri Schiavo), certainty that life could not be prolonged, etc...

Valid existential argument may include an emotional basis which can not be universally acceptable, since it is specific to the particular decision maker, but the approach may be approved in principle. These principles would also apply for the critically ill patients where a dilemma exists as to whether to maintain life by means of active life support or not. The emotional approach may, in these circumstances where all other approaches would approve an uncontroversial decision, be of particular value and should be estimated as necessary and sufficient for decision making. Those that invested the most of emotions (the closest relatives) would be the persons that should be favoured to exercise that delicate authority of forbidding life cessation decision in the patients that otherwise would not qualify for life support.

Indeed, the emotional approach may be of particular value in the above described circumstances, and in critically ill patients where a dilemma exists as to whether to maintain life support or not, when all other approaches would fail, and should be estimated as necessary and sufficient for decision making. Those persons that invested the most of emotions (the closest relatives of the patient) would be the persons whose opinion should significantly influence a decision about life cessation in patients that otherwise would not qualify for life support.

Then, **intensive communication** with the persons emotionally concerned would be an appropriate method that may lead to the decision which could satisfy moral and ontological criteria.

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Bhagavad Gita on Divine Values: A Pathway for Ethical Evolution

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Introduction

In society in general, it is not reasonable for a person to expect that he, with his limited intellect and knowledge, may know all the divine virtues for ethical practices. There may be imperfections in and around him, triggering a sense of restlessness for ethical evolution and perfection. As a Hindu I believe that Lord Krishna in Bhagavad Gita (BG 16:1-3) has provided the secret of divine values. This will help to train ourselves to perceive the beauty of life and cast off the imperfections. By the gradual development of these divine traits within will bring love and tenderness of heart towards all living beings. Thereby, love will be expressed and the veil of ignorance will be removed and selfishness will vanish. The seeker will move towards inward and outward harmony with a clear frame of mind. There will be harmony in thought, speech and action. With the attainment of these divine qualities, whatever a man will do it will be conducive to the welfare of all living beings. This paper introduces some of the key ethical values in Hindu philosophy.

The Lord Krishna in Bhagavad Gita said:

"Fearlessness, purity of heart, steadfastness in yoga to knowledge, charity, self restraint, performance of religious rites, study of the scriptures, self-discipline uprightness" (BG 16-1)

"Non-violence, truthfulness, freedom from anger, renunciation, tranquility absence of covetousness, compassion to all living beings, freedom from sensuality, gentleness, modesty, steadiness" (BG 16-2)

"Radiance, forgiveness, fortitude, purity, non-hatred, freedom from vanity – these qualities are the wealth of a divinely inclined person, O Descendant of Bharata." (BG 16-3)

(1) Fearlessness

- It is mentioned first because it is a quality of a spiritual /ethical person whose personality and psyche is like a rock.

- He has full faith on God, in His protection, justice, wisdom, mercy love and omnipresence.
- He is mentally equipped against any conflicting situations, doubts delusion or attacks or enticements.
- He is in a state of self-reliance and independence.
- He is firm against physical, mental or spiritual disturbances.
- All these characters prevent him from psychological and physiological disturbances.
- Neutral action can be expressed only when one is fearless.
- He is neutral and sees equal in any given situation which is an essential quality for ethics.
- Fear is caused when one is clouded by ignorance.
- Faith on God removes ignorance and illuminates knowledge.
- Attainment of true ethical perfection is directly proportional to the spiritual evolution attained by an individual.

(2) Purity of Heart

- There is transparency to truth.
- This modality helps the intelligence to arrive at truthful judgments.
- The consciousness of a person is free from distortions of attachment and repulsion to sense objects.
- The heart / mind is not influenced by the pairs of opposite or likes and dislikes.
- There is an attitude of righteousness.
- Persons with this attitude bathe in the light of truth and virtue in which there is honesty of intentions and purity of motives.

(3) Steadfastness in Yoga to Knowledge

- The mind is constantly in unison with the Lord.
- Devotion/ yoga knowledge is a positive way to control the mind to repel any feeling for sensuous and attractive objects.
- By this he able to renounce the attractions of attachments and low temptation for sensuous objects which may bring temporary joy and pleasure.
- There is a steady loyalty to wisdom values.

(4) Charity / Almsgiving (gifts)

- It is a meritorious act and in it there a spirit of sacrifice.
- It eliminates the feeling of ownership
- All his achievements and possessions have been bestowed by the God.
- It can be performed only if one identifies one self with soul of other person.
- All giving is egoless.
- It is performed to share with others his possessions, knowledge and spiritual treasure.
- By this, there is a feeling of universal love and compassion, moreover, and one gives his life or a part of life to the service of mankind but it should be given only to those who are worthy and needy.
- Spiritual knowledge and wisdom are only to be shared who are receptive fit.

(5) Self Restraint

- It is the power to control the senses when they are excited by pleasant sensations of smell, sight, touch etc and sensuous objects.
- Curbing them is one of the early step in the path of discipline.

(6) Sacrifice / Religious Rites

- It is an act that brings welfare to the society.
- It may be through rituals or in the form of mental rites of burning wrong desires in the flames of wisdom.

(7) Study of Scriptures

- It is the prerogative of humans. The seers have left them as an invaluable legacy.

- It is essential for a person of ethics to study those sacred books and analyse them to attain the truth.
- It provides us the key to realize the ultimate truth.
- Theoretical knowledge coupled with practical application in our daily life will remove ignorance.
- Theory and practice will ultimately help to inspire and stimulate ethical concepts in life without any conflict.
- Truth becomes the integral part of a divine man.

(8) Self discipline (Tapas/Austerity)

- The practice of self-discipline helps a person to recast his mind body and speech.
- It helps to improve the mode of life.

(9) Uprightness

- It is the act of harmonizing thought, word and deed on noble purposes frankly and openly.
- In it there is no hiding of truth, no selfish motives and no making of false promises.
- There is no place for crookedness in the personality.

(10) Non-violence (Non injury)

- Infliction of pain or injury on any being through body, mind and speech is violence.
- Non- injury of any such type is non-violence.
- The eternal rule to practice non-violence is "Do unto others as you would have them do unto you".

(11) Truthfulness

- It consist of taking all care to speak agreeable and wholesome words in an honest manner and to represent faithfully to others what has been observed, heard or experienced through body, sense and mind.
- There is truth in thought, speech and action.
- There is no place for duality in nature of a man.

(12) Freedom from Anger

- It can be defined as even in temper and state peace of mind.
- It is the capacity to control the stimulus of negative excitement when it is generated due to obstruction of desires or expectations.
- The excitement coupled with aversion leads to anger.
- Anger in a man originates when a man feels that he is subjected to insult, injury or calumny or when someone acts against his will, abuses him or commits wrong in his knowledge etc.
- The internal disturbance caused due to these factors is expressed in the form of anger through mind, body or speech.
- A purified heart filled with love and equanimity can only when it is of free from anger.

(13) Renunciation

- Real renunciation is a state that in which one is engaged in worldly actions without desire for fruit.
- He renounces sinful and unjust actions and refrains from worldly enjoyments.
- All actions are performed without attachment to them.
- Renunciation leads to peace of mind and advancement towards spirituality.

(14) Tranquility

- It is a state of serenity.
- He is not disturbed by disturbance of outer environment that may lead to joy or sorrow.
- The outer stormy environment does not disturb his equipose state and intellectual poise.

(15) Absence of covetousness

- There is total absence of exposing faults of others.
- A man with low mentality shows disrespect for others and misrepresents the facts on false grounds.
- A man with divine traits refrains from performing any act that expresses disrespect to others.

(16) Compassion to living beings

- A man with tender heart can only have this quality.
- Love alone can discover infinite amount of tenderness in us.
- This generates within us the urge to relieve suffering to any one who is suffering from any cause or is in distress and requires compassion.

(17) Freedom from sensuality

- It is defined as non-indulgence in sense enjoyments.
- There is no just greed and desire for sensual pleasures.
- This possible when a man is immersed in inner spiritual joy.

(18) Gentleness

- In this state there is no sternness.
- There is no feeling of enmity and ill will towards anyone
- This is possible when a man is in a state of love and compassion.

(19) Gentleness and Modesty

- It is a quality of being calm and kind toward others.
- It is possible when one is composed in his behaviour.
- The conduct of such a disciplined man will be gentle and modest.

(20) Steadiness

- In it there is no restlessness of mind and behaviour.
- Restlessness occurs when the mind is indulged in negative thoughts, sensual pleasures and emotional stress.
- The mind does not wander aimlessly.
- The mental attitude reflecting the body and thought behaviour is in equipoise state.

(21) Radiance (of personality)

- It is a spiritual glow in a person.
- From the innermost depth fragrance of peace, love erupts at all times.
- Personality of a man is serene, with a divine glow around him.
- All acts performed by him are on righteous track.

(22) Forgiveness

- A person with radiant personality has love compassion in him
- The attitude to inflict punishment is absent.
- The spirit of forgiveness is attained by spiritual practice.

(23) Fortitude

- It enables a man to develop the quality of patience.
- He is prepared to meet favourable and unfavourable situations.
- He works with untiring zeal to achieve his goal with consistency of purpose, clear perception of his mission with a spirit of sacrifice.
- Exhaustion, fatigue and despair has no place in his divine mission.

(24) Purity

- A spiritually enlightened man has purity of mind and body.
- Cleanliness of body is next to godliness.
- There is purity of thoughts and deeds in all his motives and dealings.
- The environment is filled with the fragrance of purity and radiance around such persons.

(25) Non-hatred

- There is no place for malice and hatred but expression of love and compassion is present in person who practices non-hatred.
- There is a feeling of 'oneness' for all.

(26) Free from vanity

- It signifies the absence of pride.
- There is no feeling of 'I'
- A man considers himself to be a non-doer but an instrument of the Lord.

Inferences

All of these twenty-six qualities are of divine nature. They should be cultivated and practiced according different situations depending upon occupational position and social order. These enumerated qualities act as a guide for us to be perfect and lead a right way of living. It enables us to recognise our way of life and change our vision of the world around us. The qualities are divine in nature and its development in human behaviour can be achieved gradually by practice. The real test of its application may come from time to time and at that moment the knowledge of these traits may a source of guidance. The key for ethical evolution is provided for all humankind and for all times.

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Green Whispers

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Many years ago when the dispute over the Silent Valley in Kerala was rampant and the great debate over the whole philosophy of Nature Conservation was in its incipient stages, a senior friend of mine who later was to become a naturalist of considerable renown, turned abruptly to me and opined: "you are more of an aesthete than a naturalist!" His dismissive tone was on account of the significance that I advocated for the *idea of beauty and value* in nature. Nature conservation, I had then argued, began with the *love and devotion to nature and the natural*. However, the late seventies in Kerala, were quite unsuitable times for the aesthete and idealist! And by then, the *Sastra Sahitya Parishad*-- the advocates for peoples' science movement-- who radicalized the idea of science and technology, and who were development-oriented and forward-looking, had taken over the entire struggle and popularized the idea of conservation and preservation. Ecology had become a household term and the idea of conservation of biodiversity

was indisputably foregrounded as an integrated part of the agenda of development studies. Equating development with the progressive adaptation of science and technology was always held to be logical and unquestionable.

Of course, the arguments for and against *conservation* have not yet subsided. Even now there are many who believe that the entire idea of nature conservation is only suited for the developed countries, while the poor and needy in our part of the world can not afford such a measure! Economically such proceedings are not quite feasible at all. Ecology we need to remember was a comparatively recent science and it has been necessitated by the inadvertent march of human civilization! Because we overexploit our natural resources and remorselessly indulge in species annihilation, lethally poison our rivers and seas over and above damming and polluting them, smoke out holes in our atmosphere, and engage in a hundred different ways of self-destruction, we need to sit up and take stock before things go out of our hands. If only we had listened to our poets and artists! If only we had heeded our now over-interpreted spiritual texts and good old religious seers! It is not as if everything about the past and those days of yore is to seen as conservation-oriented. But then there had been one too many voices of dissent and disapproval raised against the mad march of development in the past. And the point is that they had perhaps resorted to the heart rather than the head. And that is where it all leads us to.

The argument that my scientist-friend disapproved of was that nature conservation was largely a matter of the heart than the head. I had cited the *green poets* and pointed out that *the ultimate historical foundations of nature preservation are aesthetic* (which I much later came to realize was the basis of the *environmental ethics* as formulated by the deep ecologists). We start by loving nature and the natural, and begin to care for what we love and cherish. The deep blue sky, the wide expanse of the green earth, the songs and flutter of the birds and butterflies, the gamboling animals—all these begin to crystallize in our hearts a deep fondness of indistinguishable delight, *a sense of nature*. This crystallization is not without its cultural and historical contexts. Nevertheless it is what binds us the great wide world. The hard data of the like that *today a significant portion of the 15000 plant species and 75000 animal species found in India are threatened by the pressure of human activity on land and forests, and so many hectares of forest land are ransacked per the hour in the rain forests of the world*, are only supplementary and they add to our agony. The fragility and the resilience of earth is first borne into our hearts through the wonder and amazement that our hearts accord. Perhaps this is the experience of the intangible behind the tangible that the spiritual masters have spoken of. This would bring us to the brink of metaphysics and religion. Perhaps, this is the right place to begin.

Religious thought, the world over, dovetails with that of the nature lover, because religion in its beginnings and ends has a bearing on nature. Almost all religions, sociologists would agree, have their roots in the worship of nature. The adoration of trees, birds and animals, the worship of sacred groves, and the attribution of sacredness to all life forms are true to the spirit of ancient religions. It may be that the reasons for their being so sacred might be slightly different from the ecological angle that we are seeking for, but however, in spirit, they come quite close to that. Of course, we are saddled with the virtues and hindrances of hindsight and therefore can see in history the reverence attributed to all life forms in the sacred texts of almost all religions. The finer aspects of differences may be a matter of significance only for the scholar: while most "pagan" religions identified the immutable with the divine, the Hebraic, especially the Christian religion, maintained the natural superiority of the human being over all other life forms,

and insisted on *his* (His?) superior ability to break the immutability of natural laws. As many perspective scholars have noted it might be this underlying patriarchal power that laid the foundations for classical science and its strains are still visible despite the claims to universality and understanding of contemporary science. However, pre-scientific societies cherished a celebratory attitude to nature.

In the march of Western history of ideas, the Enlightenment is often looked upon as the age of reason. Whatever else this might have entailed, the most significant aspect is that this age gave rise to a belief in scientism—a dangerous attitude indeed—a deep faith in the order of scientific thinking. Human emotion, feeling, and the entire “irrational” sphere of mankind were delegated a secondary insignificant position in the understanding of life. The intellect superceded the heart and analytical thought sought precedence over the intuitive. Values came to be reinterpreted, religion was relegated to superstition, and science got itself the supreme role as the interpreter of truth. In our own times even to speak of one’s beliefs is to rake up the ghost of pre-renaissance nescience! How could one speak of being moved by nature and the natural forms? Poetry and imagination are things of the past. These are days of rationality and intelligence. Religion breeds only superstition and nonsense; it works as opium! This is not to demean rationality and intelligence *per se* but only to challenge their claims to being the only valid means of approaching the truth. While this being so, truth, in the logic of the postmodern, is multi-dimensional and multifaceted. Let us reorient ourselves to this fact that is not a fact! If fiction differentiates itself by not being fact let us create the faction of the present! In the search for alter/native truths we need to heed and understand the other logic that may not resemble the logic we are used to. If the post-enlightenment logic declaims the validity of religion and metaphysics, then we need to reorient ourselves with regard to these two as well.

To believe Theodore Adorno, *it is barbaric to write poetry after Auschwitz*. And to believe Michael Foucault and Edward Said, it is impossible to think of any social situation without relating it to the politics of power and oppression. And of course after the great movements in Feminist thinking it is virtually impossible to understand any situation without relating it to the ideas of gender and politics. Likewise *race, class, ideology*—these concepts have all altered our ways of understanding the present. In such a situation how could we relegate the idea of nature? What we understand by nature most certainly has a bearing on what we make of ourselves. And our understanding needs necessarily be *holistic* and not *discriminative*. The efforts of environmental historians and environmental geographers have enabled us to understand the profound implications of the natural environment and our ways of responding to it.

Thus in our understanding of the world we live in we need to reorient ourselves with regard to the values and our ways of response. It is my strong contention that aesthetics belongs to the order of values of which ecological value too forms a significant part. In fact the value which we attribute to the environment cannot be seen distinct from our general aesthetico-ethical frame of reference. The value which we attribute to the environment is holistic and complete and not peripheral or derivative. Aesthetic value cannot be and should not be dismissed as subjective (in a Cartesian sense) when considering the value of environment and issues pertaining to conservation and preservation. The ecological activism that globally politicized these issues has come to be known as the Green Movement. There is a green politics and even a green speak! And over the last fifteen years a whole aesthetics of the green has also emerged under the name of ecological criticism

or eco criticism. In the great welter of socio-political theorizing that had held sway over the last half of the twentieth century the concerns of the human individual and nature were virtually submerged. After the *death of the author* the individual artist/poet ceased to have any space to speak afterwards, and after the closure of the text history ceased to exist at all. If one were to take the pains of going over the warp and woof of socio-political theorizing carefully, one can perceive the struggles of the author and the text in the light of meaning production. When we reinstate class, race and gender along with the voice of nature we regain the fuller meaning of human’s being. When Thoreau wrote, “I went to the woods because I wished to live deliberately...” and when Aldo Leopold spoke of the *land ethic*, they were giving voice to an aesthetics of commitment and engagement.

Deep Ecology

What came to be called Deep Ecology stemmed primarily from the work of the Norwegian philosopher Arne Naess. According to Naess, “the aim of supporters of the deep ecology movement is not a slight reform of our present society, but a substantial reorientation of our whole civilization.” Hence it is an ecosophy. It concentrates on the human relationship with the natural world and supplies a substantial reorientation to a world run astray. Let me provide the major points of this ecosophy as it is developed by the practitioners of deep ecology:

1. A rejection of anthropocentrism. All life on earth has an intrinsic value irrespective of the human angle.
2. Richness and biodiversity are valuable in themselves and humans have no right to reduce this diversity.
3. An identification with all life
4. Caring for the other life forms is part of individual self realization.
5. A critique of instrumental rationality (emphasis should be not on quantity and efficiency but quality)
6. Personal development of a total world view. Individual thinking and action are of utmost significance and later the collective and the social.

As can be seen the concept of deep ecology is akin to the spiritual. What is aimed at is life enhancing qualitative values very much similar to spiritual enlightenment or artistic fulfillment. After all, life becomes meaningful only when we start to live fully and selflessly.

In our present day to day life of hard reality at every point we are habituated to turn to the physical sciences for concurrence and approval for only they can account convincingly for our corporeal existence. Similarly, in spite of their theoretical differences the so-called social sciences get their sanction only because they meekly follow the methodology of the non human mathematical sciences. And yet many perceptive minds have pointed out time and again that our thinking and perception have been determined by the technological environment rather than the natural. There is apparently little of nature that is left in us. Technology has taken over. This has become an automatic universe for us. Our constructions of our environment and our lives have become so removed from the organic unity of the poetic and the spiritual and so how could we sense and see the elemental harmony that is so apparent to the poet when he writes:

*My beloved is the mountains
The solitary wooded valleys,
Strange islands...silent music*
(St John of the Cross)

or

iyam prithvi sarvesam bhutanam madhu, asyai prithvyai sarvani bhutani madhu

this earth is like honey for all creatures and all the creatures are like honey for this earth, *Bṛhadāraṇyaka V brahmana 1*.

Environmental Aesthetics

It is however in imaginative writing and narratives the world over that a deep felt affinity to nature can be discovered. Some are overtly evident while some remain submerged under the rubble of dominant cultural narratives ill disposed to nature. In what has come to be called Green Aesthetics or Eco aesthetics, efforts are being made by scholars in various disciplines to study the interrelationship of nature, human life and creativity. Of course, Eco Aesthetics is not too far from the *ecosophy* of deep ecology.

In the woods, said Ralph Waldo Emerson, we return to *reason and faith*. Despite the fact that this statement is loaded with nineteenth century American transcendentalist overtones, one could still see in it the essence of an environmental aesthetic. Ching-yuang, an early follower of Zen reflects on his understanding of nature as follows:

Before I had studied Zen for thirty years, I saw mountains as mountains, and waters as waters. When I arrived at a more intimate knowledge, I came to the point where I saw that mountains are not mountains, and waters are not waters. But now that I have got its very substance I am at rest. For it's just that I see mountains once again as mountains, and waters once again as waters. (quoted in Lawrence Coupe, *The Green Studies Reader*, London and New York: Routledge, 2000, p. 1)

It is an experience of *perceptual transformation* that the Zen master undergoes. The difference is between the guileless innocence of the Child and the achieved innocence of a yogi. The very first level of perception—seeing mountains as mountains—preceded all logic, ratiocination and language, while the second bracketed the world of nature as the *other* that is just a creation of the human unconscious (recall the Lacanian aphorism “the unconscious is structured like language”) where in the signifiers and the signifieds overlap to create a parallel reality or *the reality* as we understand it. The third stage is beyond all experience and transcends logic, reason, and language, having “got its very substance.” This is where eco aesthetics or green studies steps in, in the wake of theories and counter theories in the academia of twentieth century. It is post-deconstruction. As one green critic has claimed: these are days when the critic has turned from red to green! Green studies attempts to reinstate the real world of men and women and nature and human history. Kate Soper, hits the nail on its head directly when she pronounces dramatically: “In short, it is not language which has a hole in its ozone layer; and the real thing continues to be polluted and degraded even as we refine our deconstructive insights at the level of the signifier.” (*The Green Studies Reader*, p. 3). Green studies thus aims not merely to speak *about* nature but also to speak *for* nature. This is just where literature and the environment meet and the text spills over on to the globe, when we learn to see mountains as mountains and waters as waters once again. So much depends upon our sensibilities, the self-realisation of the human being and the humanization of nature. Aldo Leopold one of the pioneers of this kind of thinking has spoken about the land ethic that called for a biocentric vision. The point we have to remember is that the genuine environmentalist cherishes the values of love and affection that makes him/her a human being. The path of the Mahavira and the Buddha is not too far to seek. Or to put it in the words of the German poet Holderlin: “...poetically man dwells...”

Utilization of the race concept in the medical sciences

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Abstract

The utilization of the race concept in medical practice is frequent and its definition, based on external morphological characteristics of subjects has been learned and taught by generations of health professionals. Besides being of easy applicability, other factors are responsible for the utilization of this classification, like the belief in a strong biological basis, possible helping in the diagnosis and treatment of diseases, information storage and help in public health. Nevertheless, from the biological and clinical point of view, there are several problems about using this term, which can take to serious technique and ethical mistakes.

For decades the science discussed the supposed existence of superior and inferior human races. Years ago the debate was around of possible biological fundamentals to the distinction of human beings in different races. Nowadays, it is discussed if this classification, social and not biological, can be useful to the medical sciences.

The use of race concept in clinical practice is frequent and its definition based on external morphological characteristics of subjects, like color of the skin and eyes or hair style is extremely simple and fast. This system of classification in human groups is being learned and taught by generations of health professionals.

Besides being of easy applicability, other factors are responsible for the utilization of this classification, like the belief in a strong biological basis, possible helping in the diagnosis and treatment of diseases, information storage and help in public health.

From the biological point of view, there are several problems for the utilization of this concept. Several studies show that the genetic diversity of humans is low compared with many other species,¹⁻² and that it is bigger inside the “racial” or geographical groups than among them.³⁻⁷ The definition of race corresponds to an imprecise and arbitrary system of visual classification, extremely broad and submitted to several interpretations in agreement to the standards to be utilized, place and time which the classification was made.⁸⁻¹² Depending on the criteria for classification of human groups, we can differentiate any populations. Among anthropologists the number of described races in different reports ranged from 3 to 200.¹³

The existence of a difference in the frequency of some genetically variance is well established, as well as the susceptibility of some ethnical groups associated to diseases as sickle cell anemia, cystic fibrosis and Tay-Sachs. Nevertheless, from the clinical point of view, we should know not only if there are differences among certain groups, but also if they can be correctly established by the current classification of races.

Recent studies of genetic diversity indicate that genes underlying the phenotypic differences are atypical, and that they vary between races much more than other genes in general.¹⁴ Present definitions of race based on superficial characteristics are strongly influenced by natural selection,¹⁵ and especially in heterogeneous nations, do not present safe

correlation with the genetic constitution,¹⁶⁻¹⁸ which can take to a mistaken correlation associated with diagnosis and treatment.

Sickle cell anemia, pathology classically related to "black people", is a good example. The peculiar distribution and the high frequency in some regions are associated with the capacity of the heterozygotes to resist against infection to *Plasmodium falciparum*, etiological agent of malaria. Even being more frequent in Afro-derived subjects, sickle cell anemia does not occur only in these groups. While in the Equatorial Africa the heterozygotes are present approximately 30% in some populations,¹⁹ it is less frequent in the North and South Africa. It possesses great distribution in the Mediterranean and Near East. Heterozygotes represent 2,5% of the subjects in Arabic Peninsula,²⁰ reaching 25% in some populations of Saudi Arabia,²¹ 27% in some Indian populations²² and 30 % in Greece.²³

Different studies in Brazil investigated a total of 218 Brazilian patients with sickle cell anemia, observing that those people classified as "blacks" represented 45% of the individuals, "mulattos" 34% and the ones considered "white" 21%.²⁴⁻²⁵ These data show that a significative number of individuals with sickle cell anemia do not belong to "black race".

In one big Brazilian trial of hemoglobinopathies, performed by Alvares-Filho and co-workers²⁶, there were analyzed 67,667 subjects from 16 different states. The subjects were classified as "caucasian" or "negroid" (blacks, light or dark mulattos) according to external characteristics. The total of heterozygotes was 1,492 (2,2%). The "negroids" (5,1%) presented superior frequency when compared to "caucasoids" (1,2%). However, a great variation was observed among individuals classified as "caucasoids". In five states the frequency was superior to the total, reaching 3,6%. In another research, it was not verified significative difference of "whites", "blacks" and "mulattos", probably because of the simplistic classification of "whites" or by the intense Brazilian miscegenation.²⁷

Besides, the use of race concept can take to the belief in clinical practice that some diseases are exclusive of some races. In the United Kingdom, especially regarded to sickle cell anemia, health professionals believe that this disease affects only Afro-Caribbean subjects.²⁸ The genetic diseases are not confined to specific racial groups, and race is more useful to explain socially and not biologically the prevalence of certain diseases²⁹. The correlation between the designation of races in a monogenic disease classically associated to "black people", like sickle cell anemia, in a heterogeneous nation like Brazil, can lead to a delay or even mistakes of diagnosis and treatment. More problems can occur with this classification in polygenic and multifactorial diseases.

Regarded to the utilization of the term race to assist treatment of patients, it is observed that despite the fact that there is no consensus about the differences of drug reactions by distinct ethnical groups,³⁰⁻³² studies suggest that Afro-descendants possess different answers to hypertensive medicines when compared to non afro-descendent subjects.³³⁻³⁵ Nevertheless, as it was described before, if the concept of race does not have a biological sense, physicians cannot know if the patient possesses certain gene combinations that will assert the efficacy of a drug, and correlate in a wrong way the complex physiological traces to arbitrary aspects of the external appearance.³⁶ Besides, it is needed to remember that drug prescription is a interactive process, and the dose given or the choice of medication is done in accordance to the toxic effects and therapeutic answers.³⁷

Another purpose to the adoption of race concept is the storage of information and the performance of comparison

among groups. In this case, the researchers need to be clear about the choice of conditions as well as being careful about doing generalizations about the human genetic diversity.³⁸ The term must be the most descriptive and reflect well stated groups. Some characteristics like genetic differences, country of origin, years of residence in the country, origin of parents, religion and socioeconomic information must be a part of description.³⁹

Nevertheless, frequently the criterion of race classification is not adequate, and this term does not describe successfully the diversity among populations. The American cense of 1990 stipulated 10 subcategories to Asians and residents of Pacific Islands, but none for whites, which answered for 80% of population.⁴⁰ In this same country, even though it is a routine to define patients as "black", "white" or "hispanic", these vague terms do not possess medical relevance.⁴¹ The term "Hispanic" involves a series of different populations which possess in common only prejudice and discrimination against them.⁴² These vague terms can underestimate several populations and to classify groups with different origin, culture and ancestrality in the same denomination.

The ethnical minority groups are frequently forgotten or put inadequately together with categories already pre-established. In regions of the United States where the population is predominantly from European-American and Afro-american origin, the description of race in the presentation of clinical histories is frequently done only as "white" or "black".⁴³ Even in official institutions there is no classification pattern of human populations. The censuses frequently do not use the same parameters to generate results, which changes the categories along time, depending on historical circumstances,⁴⁴ turning questionable the comparison of diseases connected to race using international disease index.⁴⁵

One of the great arguments for the utilization of the races concept is the capacity that these categories can reveal disparities in the access and utilization of the health services. Several studies show disparities existent among races regarded to the perception of health professionals,⁴⁶⁻⁴⁸ access to medical information,⁴⁹ access to health system,⁵⁰ to diagnosis⁵¹⁻⁵³ and treatment.⁵⁴⁻⁵⁶ Due to this, several authors suggest that the race could assist politicses in the health area that reverted these disparities. However, here also there are some problems for the utilization of this term, because race offers an extremely gross measure of social class. There is not only one "race" of a stated social class and not all the subjects belong to only one of them.⁵⁷ There is still the difficulty of connecting the race of individuals and disparity in public health. The relationship among race, social class and disease is complex and the data related to these problems are difficult to access, especially in researches performed for other purposes.⁵⁸ Besides that, low socioeconomic status generally is not considered among risk factors modifiable in the intervention of health and frequently is left aside in the planning of preventive strategies.⁵⁹

Final Considerations

There is a real potential for discrimination in health care based on the inappropriate use of race as a genetic marker.⁶⁰ Scientific arguments regarded to races permitted in the past basis to several conclusions and mistaken proceedings in medical sciences.⁶¹ The frequent practice of documenting the differences in health among races and not its basis can avoid advances in scientific knowledge, limit efforts for the primary prevention and contribute to ideas of biological determinism.⁶² Besides, the utilization of a concept without biological basis and with severe ethical repercussion can raise prejudice and unfairness.

The study of the classification of human beings in different races in American and Brazilian censuses teaches us that racial categories are not merely data of demographic reality, but intellectual products, social markers and helpers in the way of thinking.⁶³ Because of that, health professionals must learn to see people not through race lens, but through their individuality.⁶⁴ Diagnosis and treatment of patients must be individualized and not followed by possible group patterns.

In public health, the determination of patient race, even with the knowledge that it is a social concept, can reveal iniquities of access and utilization of health services by some population group. Nevertheless, it is needed to remember that the designation of race in the clinical context does not define what we learned from biology and genetics, and dangerously opens a door to the iniquities of medical care. Thus, the genetic instruction must emphasize the race fallacy as a scientific concept and the dangers inherent in the medical practice based on races.⁶⁵ In clinical practice, the designation of race of an individual is not merely a classification system, but for several times, a manner of discriminating human beings which can take to serious technical and ethical mistakes.

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Report of the 2005 Asian Bioethics Association (ABA) Board Meetings and General Meeting

Board Meetings

Three Board meetings were held in 2005, attempting to maximize the opportunities presented to the Board members who are able to be present at conferences to discuss ongoing activities of the ABA.

A) Board Meeting, 15 September, 2005 in Bangkok, Thailand

Presided over by Sang-yong Song (President of ABA)

Present: Jayapaul Azariah, Leonardo de Castro, Darryl Macer, Renzong Qiu, Sang-yong Song, Xiaomei Zhai

Views given but not present on that day: Noritoshi Tanida

Absent: Sahin Aksoy, Yeruham Leavitt, Un Jong Pak, Hyakudai Sakamoto

Meeting held during the lunch break at the First UNESCO Bangkok Bioethics Roundtable

1) A proposal from Dr. Soraj Hongladarom of Thailand to host the next Asian Bioethics Conference in Bangkok Thailand at Chulalongkorn University was received, and discussed. The initial proposed dates were 9-13 December, 2006. It was considered to close to the forthcoming IAB World Congress of Bioethics in Beijing, and in discussion with Soraj Hongladarom he said that 2007 would also be possible. There were funding concerns, and also a promise to make the registration fees cheaper than for ABC6 that will occur in Turkey in 2005. Negotiations would continue and the matter would be discussed in November 2005 during the Board meeting at ABC6.

2) The Board requested that the organizing committee of the 2006 International Association of Bioethics (IAB) World Congress (Chair Renzong Qiu) be asked to consider that the World Congress would also be the Seventh Asian Bioethics Conference. It is similar to the situation that happened in 1998 in Tokyo, and would be of benefit to ABA members. It would also follow up the communiqué between Professors Benatar and Qiu on ABA and IAB relations. The matter would be supported by the ABA Board members who were also IAB Board members during the forthcoming IAB Board meeting 9-12 November in Mexico, following the decision of the Beijing organizing committee.

3) The documents for the forthcoming Sixth Asian Bioethics Conference (ABC6) supplied by the president, Dr. Sahin Aksoy were considered and some suggestions were conveyed. One of the concerns was how publicity for future congresses could be more widely circulated, and there were concerns about the absence of Chinese speakers. The ABA Board repeated its offer to help the organizers, and hope for better communication, and ways to seek funding for future congresses would be important.

B) Board Meeting, 15 November, 2005 in Sanfurliya, Turkey

Presided over by Sang-yong Song (President of ABA)

Present: Sahin Aksoy, Leonardo de Castro, Darryl Macer, Un Jong Pak, Sang-yong Song, Noritoshi Tanida

Absent: Jayapaul Azariah, Yeruham Leavitt, Xiaomei Zhai, Renzong Qiu, Hyakudai Sakamoto

1) The agenda for the Board meeting was adopted.

2) There was a vote of thanks to ABC6 President, Sahin Aksoy.

3) Darryl Macer gave the Secretary's report on membership and fees, noting the shift of secretariat office to UNESCO Bangkok to be noted in the Supplementary Notes under the Constitution (see below). There were only 16 members of 130 who had paid fees to the secretary in 2005. Further persons had requested free copies of EJAIB, and these were being continually subsidized by Eubios Ethics Institute. He suggested that we remind members and that all fees received from that day be considered for 2006 so that those who did not pay 2005 fees would be forgiven financially.

Leonardo de Castro suggested that we could consider a two year fee structure. The Board agreed that no matter how low the minimum amount for membership is, for members to pay suggests a commitment. Un Jong Pak emphasized it is important for ensuring the commitment of people.

4) Discussion of candidate sites for next Asian Bioethics Conferences were made:

ABC7 (Beijing, China, 3-6 August 2006) overlapping with the Eighth World Congress of Bioethics. Parallel sessions as ABC6. This was considered practical and a good opportunity for both IAB and ABA.

ABC8 (the offer made by Dr. Soraj Hongladarom, Chulalongkorn University, Thailand for revised dates of 19-23 March 2007).

Sang-yong Song mentioned that also a delegate from Indonesia to ABC6 said that they hope to have ABC9 hosted by the national ethics committee of Indonesia, maybe in 2009.

The Board welcomed all these proposals and the prospects for regular conferences will help serve the members.

5) Sahin Aksoy gave a report on preparation for ABC6. After he returned from ABC5, the Turkish Bioethics Association (TBA) endorsed the Joint Bioethics Congress. It was hard to arrange the conference in a poor and small city. There were no major private companies, and the central government does not send too much money. The local government does not easily understand the benefits. The support for two dinners, one from municipality and one from the Turkish Ministry of Culture, and one lunch from Harran University, was gratefully acknowledged. There was also a modest grant from the Turkish S&T Association. That situation meant the registration fees were very important as a source of funds. There were expenses to arrange the event through a travel agency, and they needed professional translators for the high quality simultaneous interpretation between English and Turkish that was essential for good communication. Students also helped as in past ABC meetings.

Many Turkish colleagues noted it is the first time to see a rigorous scientific meeting in the field of bioethics. The meeting ensured the free spirit of academic discourse necessary for ABA conferences. The Board appreciated the efforts, and thought that the lessons were useful for future hosts.

6) The Board adopted the agenda for ABA General Meeting at ABC6, that would occur that afternoon, because of scheduling restraints in the conference.

C Board Meeting, 16 November, 2005 in Sanfurlia, Turkey

Presided over by Sang-yong Song (President of ABA)

Present: Sahin Aksoy, Jayapaul Azariah, Leonardo de Castro, Yeruham Leavitt, Darryl Macer, Un Jong Pak, Sang-yong Song, Noritoshi Tanida

Absent: Xiaomei Zhai, Renzong Qiu, Hyakudai Sakamoto

1) There was a summary of the proceedings of the 15 November, 2005, Board meeting and General Meeting. There was positive reflection on the approval of the forthcoming conferences.

2) Frank Leavitt raised a point that why in the ABA constitution adopted in the ABC4 conference in Seoul, that there was no maximum time limit for the secretary, whereas vice-presidents could only stand twice. Sang-yong Song noted that the secretary duties are something different from the president and vice-presidents. He had many experiences of running academic societies and in some of these the secretary is appointed by president and not elected but nominated. Jayapaul Azariah suggested that it can be a permanent secretary. Darryl Macer explained the background to the history of the ABA and the constitution, and why the presence of a secretary was considered by the Board and membership to be important for long term survival of a fledging society. Noritoshi Tanida suggested that we do not need to propose to members a change of constitution as the secretary stands for election like all Board members every two years anyway. Frank Leavitt accepted that after the points were made clearer, and there was consensus.

3) Darryl Macer mentioned that the current vice-president spots only included some regions, but that ABA needed to encourage active country or regional representatives. In the meeting persons had suggested that they could be representatives for Eastern Europe, Indonesia, Taiwan, and North America.

4) Frank Leavitt proposed that retiring board members can be included in Board discussions. Leonardo de Castro asked what do we hope to achieve by changing arrangements for the Board meeting. The VPs could be seen to have reps, but if we allow previous members of the Board to sit in, it could continue to serve a purpose. Darryl Macer noted that actually in principle all Board meetings were open to all ABA members anyway. Un Jong Pak noted that currently only the previous president has a customary role, and others can come as ordinary members.

There was consensus that rather than removing term limits on Board positions we would like to encourage other people to join. It is self-serving to remove term limits. It is important to encourage initiatives from other persons. The Board needs to seek out other young professionals.

5) The question of the titles of regions for vice presidents was discussed. Frank Leavitt noted that North of India is not included. Sang-yong Song noted that also parts of the former USSR, and Pacific Islands are also not specifically mentioned, but implicitly included in ABA.

6) Darryl Macer mentioned the suggested updates to the supplementary provisions. Un Jong Pak suggested that these should really be called supplementary notes, which all agreed to, with the changed text as below.

7) Darryl Macer raised the issue of funding Board members, mentioning the case for ABC6 that excluded participation of Drs Zhai and Qiu. It was suggested that the principle for support of Board members to congresses be that if the budget allows, we support ABA Board members to come. The Board members normally received a registration waiver, and accommodation with best efforts to help fund if they could not find travel funds, and if they can give lectures. Noritoshi Tanida mentioned that we should

invite the organizers to come to previous Board meeting, before the next Congress, and this was suggested for Beijing in 2006 that the 2007 hosts attend the Board meeting.

8) On possible points for conference guidelines, Leonardo and Frank emphasized that we should accommodate the religious needs and vegetarian aspects of food. These were accepted norms of ABC conferences for some time in fact.

9) There was discussion of timing and nominations for 2006 elections of officers, which would be October- November 2006, after the ABC7 conference in Beijing.

Minutes of the ABC6 ABA General Meeting

Held on 15:00-16:00, 15 November, 2005 in Sanfurlia, Turkey concurrent with the Sixth Asian Bioethics Conference (14-18 November, 2005), in the plenary hall.

Presided over by Sang-yong Song (South Korea) and Darryl Macer (Thailand)

40 persons were in attendance, and non-members were welcomed.

1) Explanation of ABA and appreciation was expressed to the Turkish colleagues and hosts, especially the congress president, Sahin Aksoy, and his helpers.

2) Self-introductions of ABA Board Members who were present.

3) Secretary's report

Darryl Macer said that the shift of ABA secretariat office to UNESCO Bangkok was to be noted in the Supplementary Notes under the Constitution. There were only 16 members of 130 who had paid fees to the secretary in 2005. Further persons had requested free copies of EJAIB, and these were being continually subsidized by Eubios Ethics Institute. Members were reminded of the optional fee structure, and that all fees received from that day be considered for 2006 so that those who did not pay 2005 fees would be forgiven financially.

4) President's report and appeal for membership was made by Sang-yong Song.

5) Site of forthcoming ABC conferences was announced.

ABC7 (Beijing, China, 3-6 August 2006) overlapping with the Eighth World Congress of Bioethics. Parallel sessions as ABC6. This was considered practical and a good opportunity for both IAB and ABA.

ABC8 (Chulalongkorn University, Bangkok, Thailand, 19-23 March 2007).

A delegate to the general meeting from Indonesia to ABC6 said that they hope to have ABC9 hosted by the national ethics committee of Indonesia, maybe in 2009. The meeting welcomed all these proposals and the prospects for regular conferences will help serve the members.

6) A call for commitments to organizing sessions at forthcoming ABC conferences, particularly in Beijing was made.

7) Those persons who volunteered to be country or regional representatives should contact the secretary, Darryl Macer, and they would be posted on the website. The new website for ABA from 2005 was <www2.unescobkk.org/Eubios/ABA.htm>

For reference amendments to the Supplementary Notes are underlined.

Supplementary Note 1

The principles of this Constitution were initially adopted at the Inaugural Meeting of the East Asian Association for Bioethics held in Beijing on the 5th of November, 1995, when the Officers of this Association were also nominated. At the UNESCO Asian Bioethics Conference, 4 November 1997, the Association was broadened to become the Asian Bioethics Association, and several further members were nominated. This initial Board of Directors was replaced by a new Board in November, 2002, at the Fourth Asian Bioethics Conference in Seoul, and when the Constitution was formally adopted (25 November, 2002). The 2004 election was held on 10 November 2004.

Supplementary Note 2

The business office of the Association was placed in the University Research Center, Nihon University, Tokyo, Japan, from 1998 to February, 2002. From February, 2002 to February 2005 the secretariat and office was: Prof. Darryl Macer, Institute of Biological Sciences, University of Tsukuba, Tsukuba Science City 305-8572, JAPAN. From February 2005 the secretary and office moved to Prof. Darryl Macer, RUSHSAP, UNESCO Bangkok, 920 Sukhumvit Rd, Prakanong, Bangkok 10110, Thailand [d.macer@unescoibkk.org]. The website from 2005 is <<http://www2.unescoibkk.org/eubios/ABA.htm>>.

Report of the First UNESCO Bangkok Bioethics Roundtable (BBRT1)

Prepared by Darryl Macer
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Background

In this third regional ethics meeting held by UNESCO in 2005 in Bangkok there were 100 papers presented over five intensive days of plenary informal roundtable (11-15 September, 2005) held in Imperial Tara Hotel. The purpose of this meeting was to engage in an interactive dialogue over the priorities for bioethics and ethics of science and technology in Asia and the Pacific, with global implications. How can we apply bioethics declarations and international agreements to enhance the realities of communities across a divided and diverse world? A number of members of the expanding regional networks of researchers and policymakers were brought together from 33 countries and a wide range of specialties for this roundtable as a further step in the reflection and action on ethics of science and technology for ongoing UNESCO programmes.

In order to encourage group interaction, at this meeting 150 experts attended in their individual capacity, with a time limit of 10 minute talks followed by similar time in informal Q&A in a roundtable format. After introduction to the UNESCO Ethics Programmes, at the conference which included members of COMEST and the International Bioethics Committee (IBC), there were sessions on the History and Practice of Ethics of Science and Technology, Bioethics Education in Schools across Asia and the Pacific, Environmental Ethics, Ethics of High Technology, Ethics and Policy across the Pacific and Asia, Medical Ethics and Education, Bioethics for All and South-South Dialogues, Public Health and Ethics of Research and Governance Models for Genetic and Reproductive Technology. There were also satellite working meetings on the Bioethics textbook project on the 13 and 16 September. On the 14 September there was an all day field visit with sessions in lecture room and in agricultural fields at Kasertsart University - Kamphaeng Saen Campus, on Biotechnology and Bioethics. The meeting provided continued feedback on the regional needs and priorities for bioethics and ethics of science and technology, and in the coming biennium the Asia-Pacific region will be a priority region for UNESCO work in these areas. The abstracts, discourse and proceedings of the meeting will be on-line and published in hard copy also.

Meeting report

In the **Opening Session** there was an introduction to UNESCO Ethics Programmes, with presentations on both the UNESCO IBC (by Darryl Macer) and COMEST (by Sang-yong Song). There was also a welcome from the representative of the Thai Ministry of Science and Technology, Prof. Prapon Wilairat, that follows up the cooperation in hosting the Fourth Session of COMEST in March 2005.

The Roundtable was opened by a Welcome from Sheldon Shaeffer, Director, UNESCO Bangkok. The Roundtable was the first event in Bangkok of the 60th anniversary of UNESCO. Shaeffer talked on the newest mandate of UNESCO the "Decade of Education for Sustainable Development." ESD is a framework encompassing all

of UNESCO's education work: EFA, Secondary Education, Technical Vocational Education and Higher Education, Citizenship Education, Peace Education, Distance Education, etc.

The UNESCO Bangkok office is the largest UNESCO branch office in the Asia-Pacific Region, which for UNESCO includes 46 member countries from Turkey in the West to Japan in the East and New Zealand and 17 Pacific Island nations to the South. It is designated as the coordinating office for implementation of the UNESCO programmes on ethics of science. This includes ethics teaching programs, implementing the Decade of Education for Sustainable Development (ESD) and increasing national and regional implementation of UNESCO declarations on bioethics, as well as the activities of the UNESCO International Bioethics Committee (IBC), the UNESCO Intergovernmental Bioethics Committee (IGBC) and the World Commission on Ethics of Science and Technology (COMEST).

Darryl Macer outlined the general framework of the Sector for Social and Human Sciences to seek to advance knowledge, standards and intellectual cooperation in order to facilitate social transformations where the values of justice, freedom and human dignity can be fully realized. The Sector's task is to study what is, to anticipate what could be, and to determine what should be, in order to reduce the gap between what is and what should be. The Sector's Programme on the Ethics of Science and Technology, being one of UNESCO's five priority areas, is designed to ensure that the world remains secure for everyone by placing the ongoing revolutionary scientific and technological progress within a context of ethical reflection rooted in the cultural, legal, philosophical and religious heritage of the various human communities. This programme covers two primary areas of ethical reflection: bioethics, addressing concerns stemming from advances in life sciences; and ethics of science and technology, addressing other areas of applied ethics in relation to scientific and social developments.

In order to more effectively implement ethics and bioethics activities the networking and partnership building across the region, with global assistance and cooperation, must be improved. This roundtable follows up earlier consultations and meetings on these topics in Bangkok, and signals an increase in activities in ethics in the region. In order to help Member States build capacity in applied ethics, a system of databases is being created: the Global Ethics Observatory (GEO). Four databases will make up GEO: 1) a database of experts in applied ethics, 2) a database of ethics institutions and committees, 3) a database of teaching programmes and 4) a database of relevant legislation. The information should be searchable online and available in the six official languages of UNESCO, with some further regional languages and support being developed to complement this in Bangkok.

This meeting is an important one in a series of meetings developing in the Asia-Pacific region. In 1997 the UNESCO Asian Bioethics Conference was held in Kobe, Japan, together with the Asian Bioethics Association which was founded at that meeting. In November 2003 a Bioethics Consultation meeting was held in UNESCO Bangkok, and this March the First Bangkok Workshop on Ethics Partnerships for Asia and the Pacific, and the Fourth Session of the COMEST were held here. In December, 2005, we expect the UNESCO IBC to meet in Japan. The future involvement of participants in an expanding international network and activities will be discussed. The three UNESCO Declarations on Bioethics were also tabled to show we are aiming to implement.

Prof. Sang-Yong Song, the vice-chair of COMEST from South Korea described the past and future planned work for the World Commission on Ethics of Scientific Knowledge and Technology (COMEST). The first phase of COMEST's work focused on the exploration of ethical issues in water usage, energy, space policy, and information, as well as on the teaching of ethics. Drawing upon dialogues from the first phase, COMEST has now adopted a new approach for the second phase of its work by supporting Member States in standard-setting action, capacity building, and awareness-raising with regard to ethical issues related to science and technology. COMEST has also expanded its focus, working towards establishing international instruments in the ethics of outer space, ethical code of conduct for scientists, and environmental ethics, as well as addressing issues of science ethics, research ethics, ethics of technology, and ethics teaching.

With regards to an ethical code of conduct for scientists, ongoing COMEST discussions have recognized that a very detailed code would not be acceptable to scientists, but a framework for those who do not yet have guidelines would be useful. It has also been recognized that a distinction should be made between engineers and scientists as they may require different kinds of regulations. It was further pointed out that some codes would not simply constrain scientists and engineers, but would act to protect them as well.

In the second session, **History and Practice of Ethics of Science and Technology**, there were papers from several traditions in the region, including Prof. Renzong Qiu on "Confucianism and Its Implications for Bioethics: Tradition and Modernity in China". Confucianism is mainly an ancient ethical doctrine but has sustained influence on medicine and other disciplines in China. Confucianism with its core concept *ren* is a care ethics which labelled medicine as an art of *ren* and became the intellectual foundation of Chinese medical ethics. It assumes that physicians have heavy responsibilities for patients, so they should have special virtues to be made a doctor. He said the most influential concept on bioethics is the Confucian concept of personhood, and its implications for the discourses of rights and responsibilities.

Prof. Shinryo Shinagawa spoke on Bioethics in a Wider and Probably Original Sense, examining the broader concepts of bioethics. Dr. Mohammad Hassan Ghadyani spoke on Islamic Codes in Medical Ethics. Dr. D.S. Nesy spoke on Indian Ethics and Contemporary Bio-ethical Issues, especially on Hindu ethics.

Prof. Jeong-Ro Yoon described the South Korean Ethical, Legal and Social Implications (ELSI) program has been supported since 2001 by the government-funded functional human genomics project. Faced with the rising bioethical controversies such as genetically modified food and human cloning, the ministry of science and technology (MOST) decided to include the ELSI program as a part of the research funding for biotechnology. The convergence in genomics and biotechnology, information technology and nanotechnology has further complicated the ELSI and bioethics issues with widening information gap between experts and lay citizens. Given the circumstances, the ELSI and bioethics programs in Korea are at the juncture of re-strategizing the future direction. She concluded that the mission of bioethics and ELSI programs is to sensitize the community to considering ethical issues.

The first afternoon session included a number of working reports on **Bioethics Education in Schools across Asia and the Pacific**. Dr. Lindsey Conner introduced the theory of bioethics teaching, in her paper "The Importance of Knowledge Development in Bioethics Education". She discussed the importance of exploring prior content and procedural knowledge, so that students can extend and develop this knowledge when studying and learning about issues. A case study of a final year high school biology class in New Zealand illustrated aspects of a unit of work that were designed to enhance student's ability to critically consider bioethical issues related to cancer. This investigation indicates that students' prior knowledge of both content and learning processes influenced the level of achievement in their essays. Pedagogical implications are discussed in relation to the enhancement of knowledge development in bioethics education. It was noted by all present that the fact that New Zealand gives credit to an essay on bioethics (20%) in the senior biology examination since 1993 has been a major factor in promoting the development of bioethics education there.

Mr. Senthil Kumaran presented data from trials in India, in Teaching Moral Values for High School Students: an Indian Context. Ms. Maryann Chen Ng presented results from Bioethics Education Trials of the Eubios Ethics Institute Bioethics Education project at the Ateneo De Manila High School, in the Philippines. Dr. Duangkamol Chartprasert discussed Internet Self-efficacy and Student-centered Learning in a Thai Secondary Schools.

Next there were four papers from The Middle School attached to Beijing Normal University, with an Introduction of the Eubios Ethics Institute Bioethics Project in the High School Affiliated to Beijing Normal University in the Past Two Years, by Liping Wang, Jianzhi Li, Jinhua Fu, Jing Zhuo, Yongmei Gu, Yuan Yu, on behalf of collaborating teachers. The High School Affiliated to Beijing Normal University (BNU) is the first school that offers the bioethics course

in the mainland of China. That course has lasted for two consecutive years. Our school identifies the bioethics course as a compulsory subject for the senior II students. Biology teachers take turns to give lectures. There was also an interesting paper on drug addiction, which is a new topic introduced in Beijing with regional relevance, by Ms. Jianzhi Li. Ms. Yuan Yu introduced the topic Organ Donation and Organ Transplants.

Dr. M. Selvanayagam introduced Environmental Education and Ecoethics-Current Trends in Education in India. In a recent judgment, a bench of Judges in India, Justice Shri. N. Santosh Hegde and Justice Shri. B.P. Singh have asked the NCERT, AICTE and all the State Governments to explain the serious lapse on their part on imparting environmental education. The Court had directed the University Grants Commission to prescribe a course on Environment at the graduation and post graduation level. Thus making the environmental education compulsory subject at every level of higher education is a welcome move to inculcate the value of environment so that the environment we live in will be livable also in the future.

Drs. M. A. Jothi Rajan and Arockiam Thaddeus introduced further results of the Eubios Ethics Institute projects in papers on Value Education: A Treasure of a Nation, and "Can Formal Education Promote Beneficence?" Dr. D.S. Sheriff introduced Perspectives on the Role of Sex Education in the changing cultural scenario and psyche of Indian Personae in the 21st Century. There are also functions of bioethics education to increase respect for life and persons.

Consulting the Public in the Setting of Bioethics: Regulatory Framework and Policy in Malaysia was a paper introduced by Dr. Muhammad Nizam Awang Ali. He argued that while Malaysia is still working on the comprehensive regulatory framework, the existing bioethics policy must diligently consider a tacit guideline on how the public opinion will effectively address the issues according to the proper procedures and findings. The example of the standing committee set up for assisted reproductive techniques (ART) drawn up by the Malaysian Medical Association and Obstetrical and Gynaecological Society of Malaysia in 1999 was described. Public discourse and collaborative networks amongst the medical regulatory bodies and the non-governmental organisation were also discussed.

The second day started with a session on **Environmental Ethics**. The paper of Dr. Suliana Siwatibau was on Ethical Dimensions for Sustaining Pacific Island Environments. The ethical dimensions of economic and social development were described in the current status of Pacific island countries where there is growing disparity in opportunities and wealth distribution accompanied by increasing poverty. Ethical dimension of governance and the role of religions were discussed. Dr. Elise Huffer described some of the more theoretical background in her paper "Land and people as the measure: A Pacific ethic of place and prudence". The land (including the ocean) feeds the people, literally and figuratively: it is the source, the foundation, it produces and creates, and it is never an inanimate commodity. Pacific societies have a strong consciousness that going against the path or the way of the land (*salavakavanua* in Fijian) is detrimental.

Ms. Mary Ann Chen Ng presented results of field work in a UNESCO Natural World Heritage Site in the Philippines, "Anthropocentrism isn't a dirty word: reflections on nature and life at the margins". Prof. Abhik Gupta described Indian views in "From Biosphere to Technosphere to Biotechnosphere: the Indian Scenario in an Eco-Ethical Perspective". He mentioned that in India, urban centers were established in the Indus Valley as early as in c 2500 B.C., and starting from c 1000 B.C., large forested tracts were cleared, especially in the Ganga valley, by the Vedic people. Nevertheless, these effects were mostly localized, and by and large the Indian society continued to live in harmony with nature, thereby being governed by the principles of the biosphere concept. While trade flourished and cities grew during the successive empires that followed, including those during the Pathan and the Mughal periods, the Indian villagers essentially led a life of 'ecosystem people', living off the resources drawn from a very limited catchment area.

Dr. Nacanieli Tuivavalagi presented related ideas from Samoa, in "Learning from our forefathers: A foundation for bioethics in the Pacific islands – with emphasis on issues relating to agriculture and the environment" Dr. Fakrul Islam described "Ethical Aspects of

Using International Rivers: Some Policy Proposals for Optimal Sharing of Teesta River Water” which has regional relevance in the shared river water resources in Asia.

Dr. Jan Wawrzyniak described Theoretical Foundations of Neonaturalistic Environmental Bioethics, introducing some new terms to philosophical debate in the network of persons present. Prof. Aruna Sivakami asked “Can education in environmental ethics alone solve problems of loss of biodiversity in Developing Countries?” Mr. Morgan Pollard emphasized the global scale of environmental ethics in “Spreading the Wings of Bioethics: Issues of Scale and Priority”. Dr. Wardatul Akmam gave more examples in her paper “Inculcation of Environment-friendly Ethics as a Prerequisite for Sustainable Development in Bangladesh”. The main theme of her paper is that internalization of ethics relevant to protecting the environment and putting them into action by all human beings is indispensable to achieve ‘sustainable development’. The agents, through which environment-friendly ethics can be inculcated within individuals, include the family, the peer group, religion, education, the mass media, can be used to embed pro-environment ethics within the minds of individuals, and ultimately achieve sustainable development. This session reflected on what environmental ethics is; the meaning of sustainable development; major environmental concerns in many regional countries in efforts towards development, and the ways in which environmental ethics has been practiced over time and how it is developing in the modern context of globalization.

The afternoon started with a session on **Ethics of High Technology**, with a paper by Prof. John Weckert on “Should the precautionary principle be applied to nanotechnology?”. The precautionary principle has wide support and is thought by many to be a useful strategy for action, especially in the environmental and health areas. A recent report extending the scope of the principle to include nanotechnology, artificial intelligence and robotics was discussed.

Dr. Irina Pollard then applied this to another area, in “Advances in Neuroscience and the Precautionary Principle: What Can Bioscience-Bioethics Teach Us?”. Recent advances in brain fingerprinting, stem cell research and intracerebral grafting were described. Ms. J. Mary Vimalakumari Kalaiarasi then examined whether some animals had “Sensory Abilities Beyond Human”, looking at the Tsunami behaviour of animals.

Ms. Mary Josephine Rani discussed benefits and ethical limits of transgenic animals. Dr. Pornvipa W. Chanakool described Science, Technology and the Supernatural in Contemporary Thai Novels.

Prof. John Buckeridge in his paper “Applying Ethics in a Professional context: what can we hope to solve?”, described some of his work with UNESCO in environmental ethics following meetings to describe universal bioethical norms.

Dr. Ivo Kwon described the ethical issues and the current state of embryonic stem cell research in Korea. Dr. Jasdev Rai described the Indian problem of Gender Foeticide.

The next session was on **Ethics and Policy across the Pacific and Asia**, and started with Dr. Peggy Fairbairn-Dunlop from UNESCO Apia who asked “Is there a ‘greater good?’ Ethics policies in the Pacific”.

Prof. Samantha M.C. Pang described a comparative study “How do Chinese and Japanese patients characterize the good nurse? A cross-cultural study of virtue ethics”. Based on the rich descriptions given by the Chinese and Japanese cancer patients, they found that ‘Virtuous comportments’ and ‘virtues residing in a cultivated heart’ are essential constituents emerging from the Japanese and Chinese patients’ accounts of the good nurse respectively. Both Chinese and Japanese patients experienced positive transformation from the vulnerable state of being in their encounters with the good nurse. The variability regarding the kinds of virtues that constitutes the good nurse in China and Japan are examined. Commonalities rooted in the Confucian virtues of “cheng”, “ren” and “li” are observed, but with different emphasis in the two countries.

Prof. Paungphen Choonhapran then described Bioethical issues in intensive care nursing in Thailand. Dr. Alireza Bagheri introduced work he is doing on resolving some controversies over medical futility.

Dr. Siriphen Piriyaichittakornkit described risk theory in “A Conception Risk in Decision-Making”. Then Dr. Nares Damrongchai introduced an Asian research being done on “DNA Technology in Asia-Pacific: Scenario for 2015”.

Dr. A.D. Valsala introduced animal rights issues in “Awaiting Liberation of Animals from Experimental Clutches?”, followed by Mr. Masato Motoki who gave observations on ESD, animal rights and culture. Then Dr. Mary Vimalakumari Kalaiarasi followed up with another paper on animal rights discussing ethics of Animal Rides

The next day, 13 September, began with the session on **Medical Ethics and Education**, with Prof. Noritoshi Tanida describing “Ethical views of first-year medical and nursing students in a joint bioethics course”. The views of 85 medical and 53 nursing first-year students were studied during a joint bioethics course. A Nepalese view was introduced by Subrata Chattopadhyay with “An Earnest Appeal: We Need Spirituality in Medical Education”. Dr. Aamir Jafarey introduced Bioethics Education in Pakistan: Challenges and Prospects. He described the establishment of the Centre of Biomedical Ethics and Culture at the Sindh Institute of Urology and Transplantation, Karachi.

Prof. Anoja Fernando introduced “Bioethics Education in Sri Lanka: the Current Status”. Based on a meeting she presented data to show that while ethics teaching is established to a certain extent in the medical faculties, the other faculties in the universities have not yet introduced the teaching of bioethics in to their curricula. A National Bioethics Committee was set up in 2003, under the aegis of the National Science Foundation. One of the objectives of this committee is to encourage and facilitate the introduction of bioethics into the science based curricula of all the national universities. Dr. Juraporn Pongwecharak introduced a project on the Development of case study materials for teaching research ethics in Thailand.

Sr. Dr. Daphne Furtado and Dr. Karuna Ramesh Kumar introduced ethics teaching at St. John’s Medical College, Bangalore, India, and the program for Ethics in Paramedical Studies. Dr. Dena Hsin Hsin-Chen gave a paper on “To Accomplish the Life Education Mission through Having Bioethics Courses in Medical School.” Dr. Heiko Ulrich Zude introduced European comparisons in “Biomedical Ethics Education in post-communist Eastern Germany”.

Dr. A. Nalini described research in India in “Ethics Education in Medical Curriculum: Interns’ perspectives”, from a survey conducted in four major medical colleges in Tamil nada. 68% of the interns felt that they had opportunities to learn about Ethics in their MBBS course and were able to discuss the ethical issues with the faculty. Most of them cited Forensic Medicine and Community Medicine as specialties where they learned about ethical issues. 75% wanted Medical Ethics as a separate subject as study of ethics will have an impact in improving professionalism.

Dr. Maude Phipps described teaching projects, including through Eubios Ethics Institute bioethics education project, in “Bioethics Education in Tertiary Settings – The University of Malaya Experience”. In 2003, bioethics was designated a core subject for all other undergraduate courses in the medical faculty.

The next section was on **Bioethics for All and South-South Dialogues**. Prof. Soraj Hongladarom introduced “The Study of Bioethics and Interdisciplinarity”. He argued that bioethics exists over and above the traditional disciplines and cannot exist independently of them.

Dr. Jayapaul Azariah described work on Eubios Ethics Institute bioethics education project in “Responses to Bioethics education Across Cultures – A survey to assess the bioethical need across Social Strata in Tamil Nadu, India”. Class trials were carried out in Chennai and Dharmapuri District in Tamil Nadu. In the former, the students were drawn from Higher Secondary and Matriculation schools, University Students from Anna University of Technology, Retired Fisheries Scientists, members of the Study Centre, Madras Diocese, Church of South India and a few other centers of higher education. The paper provides comparative results of the class trials and suggests a few recommendations before adopting the text for global use.

Dr. Blaise Bikandou introduced his expertise from Africa, in “Impulse of ethical research in life science and health systems as

foundation of development in Sub-Saharan Africa". The health system dysfunctions coupled to the economic disparities and iniquities remain a real challenge for years to come. The identification of obstacles and implementation of health research activities are critical requirements for Africa. He presented how taking in consideration and integration of anthropological, socio-cultural and economical specificities of Africa and promoting ethical research might lead to the effective input on people living in Africa.

Prof. M. K. Tadjudin from Indonesia introduced some Ethical Issues in the Face of Scarce Resources. He argued six ethical principles are relevant for health care leaders. They are: beneficence, non-maleficence, respect for persons, justice, utility, and truth telling. In the field of medical ethics, the fundamental principles that guide decision making are autonomy, beneficence, and justice. Policy-makers, managers and providers who face difficult resource allocation decisions may find distributive justice useful in making difficult decisions. Dr. Tran Han Giang introduced Challenges for gender studies in the era of ever-growing development of biology.

Prof. Kwami Christophe Dikenou introduced "The Teaching of the Ethics of Science and Technology in African Universities". He argued that teaching ethics at African universities is not a luxury but rather a necessary task to promote and reinforce through International Cooperation.

Dr. M Al Mamun introduced "Informed Consent in Health Research: Current State of Knowledge among Physicians in Bangladeshi Perspective". Findings of this pilot study revealed that, though most of the physicians were familiar with 'informed consent', many of them did not possess sufficient knowledge on this key component. Thus, Bangladeshi physicians need to be trained on such ethical issues more.

Dr. Ken Daniels discussed the Governance of Donor Insemination. DR. Miyako Okada-Takagi asked "Is the era of the therapy by tailor-made stem cell coming?"

The next day, 14 September, there was a full day field visit at Kasertsart University - Kamphaeng Saen Campus, for the session on **Biotechnology and Bioethics**, hosted by Dr. Orawan Kumdee. First Dr. Kanokwan Romyanon introduced "Transgenic papaya resistant to viral disease: a study for crop improvement in Thai papaya", then Dr. Parichart Burns talked on "Delayed ripening characters associated with genetically modified papaya (*Carica papaya* L.) with antisense ACC oxidase". Dr. Wichai Kositratana described the government Biosafety study of GM papaya in Thailand, then Dr. Pahol Kosiyachinda presented more of the history in "The Transgenic Thai Papaya Story – A Milestone of Thailand toward a Biotech Crop Country".

There was also further examples of agricultural technology introduced with Dr. Voravit Siripholvat, "Description of Thai indigenous chicken plumage colour and broodiness using classical and molecular genetics", and a demonstration and discussion at the cattle breeding center at Kasertsart University. The participants were divided into two groups for field site visits to observe GM papayas and cattle breeding. Despite the torrential rain that day the field exposure was of interest to the persons to see the real context of Thailand.

The biosafety and regulatory aspects were further discussed by Prof. Don Chalmers in "Is there a Need or Space for Gene Technology Ethics: An Australian Perspective", who described the workings of the Gene Technology Act. Dr. Ellen M Kittson described the Victorian Governance of Biotechnology. Prof. Kazuo N. Watanabe gave a paper on "Ethics in Public Communication on Agricultural Biotechnology".

Dr. Minakshi Bhardwaj gave a paper on "Constituting ethics into biotechnology policies and developing international relations", discussing the roles of international agencies. Dr. Tomiko Yamaguchi introduced "An Analytical Framework for Understanding Agricultural Biotechnology Controversies", with studies of the Indian transgenic cotton (Bt cotton) social controversy. The social constructionist approach to social problems provides an overarching framework in which to analyze the issues, and was described.

The last day started with a session on **Public Health and Ethics of Research**. Darryl Macer described the "Ethics of use of genetic control methods for infectious disease". Naoko Kimura presented

results of surveys on gauging attitudes towards genetically modified mosquitoes in Japan. Dr. Xiaomei Zhai introduced "Research Ethics in China: History, Status quo and Issues". Dr. M Saidur Rahman introduced Bangladeshi experience in "Current State of Research Ethics in Developing Countries: Where Do We Stand?".

Dr. Mihaela Serbulea introduced UNU research on "Utilization of traditional knowledge and support of access to health". A policy report including case studies from Canada, Cote d'Ivoire, India, Japan, Mongolia, Nepal, Peru and Trinidad & Tobago was described, reflecting the experiences in various cultures to incorporate non-standard methods in the main-stream health provision systems. Dr. Irene J. Taafaki introduced results of a project in the Marshall Islands, "Avoiding Biopiracy? Protecting Medicinal Knowledge and Plants". Healers and researchers express strong reservations that both the genetics of medicinal plants and the once closely held knowledge of healers will be exploited and lost to external commercial biotechnological interests. This paper described the success and challenges of a collaborative project which aims to provide public access to the specialized knowledge in the use of 56 plants by 40 women healers in the Marshall Islands while both preserving the private right to the ownership of the formulas, and the security of the common, free and self-regenerative species of medicinal plants of the Marshall Islands.

The final session was on **Governance Models for Genetic and Reproductive Technology**, and Prof. Leonardo D. de Castro introduced "Informed Consent: An Essential Requirement for Essential Health Research". Prof. Yanguang Wang described "Ethical Issues on Human Embryonic Stem Cell Research in China". Prof. Don Chalmers described "The Regulation of Stem Cell Technology: International Approaches to Restriction or Permission".

Prof. Jürgen Simon discussed current issues in Biobanking and Ethnic Monitoring. Dr. Brigitte Jansen made "International Comparisons of Regulation of Biobanks". Prof. Le Dinh Luong gave "Some Thoughts about Implementation of International Bioethics Declarations in Vietnam Practice". Dr. Chan Chee Khoo introduced "Market-driven Biomedical Research: A Major Challenge to Everyday Bioethics". Dr. Amru Hydari Nazif introduced the "National Bioethics Commission of Indonesia in the framework of national scientific research and technological development".

Follow-up

The roundtable also had two satellite meetings on the ongoing bioethics education textbook project, on the 13 and 16 September, attended by 60 participants. There was discussion of the variety of levels to teach bioethics, and the need for continued meetings and networking.

The power point files, transcript of discussion and papers will be made available on the RUSHSAP website. A proceedings volume in hard copy and in electronic copy in DVD format will be produced to share the discourse of the meeting.

There is a need for various forms of meeting, but providing this rich collection of experts in a cross cultural setting, with a wide range of ages and disciplines, was enriching to all who participated. The papers provide useful data for mapping the bioethics in the region, and for follow-up in sub-regional and national level meetings. The results were applicable to all areas of the ethics programme of UNESCO, with scope for further overlap with other sectors and other agencies. These are being explored.

Appendices given included:

Abstract Book (See July issue of *EJAIB*)

List of Participants

Universal Declaration on the Human Genome and Human Rights

Universal Declaration on Bioethics and Human Rights

Report on Bioethics Education Textbook Project Meeting (Sept. 2005)

Darryl Macer

1. Introduction

During the First UNESCO Bangkok Bioethics Roundtable in September 2005 there were two special meetings of those participants who were interested in the ongoing Bioethics Education Textbook Project. The Bioethics Education Textbook Project has been active since April 2003 organized by Eubios Ethics Institute thanks to grants from the Sasagawa Peace Foundation (Japan) to Eubios Ethics Institute. It has produced free teaching materials for bioethics education in different countries, both in print and on-line forms. The purpose of the meetings was to seek comments on the second edition textbook, develop methods for bioethics evaluation, and strengthen ongoing links between this international bioethics network with UNESCO programmes. The results of the consultations provided solid feedback for the improvement of UNESCO ethics teaching research and programs in the region.

2. Agenda

(18:15-21:00 in TaraThip Room, Imperial Tara Hotel, 13 September, 2005)

1. Preliminary self-introductions for those already involved in the Text Book Project
2. Introduction to current status of the project and future plans by Dr. Darryl Macer
3. Overview of the draft revised text, D. Macer, *Bioethics for Informed Citizens Across Cultures* (Second edition draft, copies distributed for checking)
4. Explanation of the need for the compilation of on-line teaching guides
5. New ideas and suggestions, brainstorming session
6. Feedback & Reflection from all
7. Regional network and next meeting; scheduling of country trials & teacher training
8. Other business

3. Minutes

After introductions by all present (60 persons), Darryl Macer introduced that in 1991, when he surveyed teachers in Japan to see whether they taught bioethics, he found that 30-40% taught bioethical topics, even though there was no specific topic in the syllabus or curriculum. In 1993 the International Bioethics Education Survey asked principals of schools in Australia, New Zealand and Japan to ask biology and social science teachers at their schools. The results were that 70% in Australia and New Zealand said they taught ethical issues of science and technology, with about half in Japan. One of the major concerns they had was the lack of teaching resources. This project was started in 2003 to develop improved bioethics teaching material(s). As a result, the textbook *Bioethics for Informed Citizens Across Cultures* was produced. Pilot studies in different countries were conducted as the textbook was being made. Three thousand copies were distributed in 2004. There is a need to develop and gather more feedback. A meeting was held in February 2004 at the Fifth Asian Bioethics Conference.

The seven chapter authors who were present were introduced, and a further eight persons who had used the materials in class from different countries. In addition the translators of the text into Tamil, Korean, and Chinese were present.

A call was made for more pilot institutions to join in the trials with the second edition. One of the major objectives is to get concrete data from country trials, trying to collect and analyze data as a method of evaluation that can then be presented to the ministries of education. It is then hoped that this will help implement bioethics into the curriculum in many countries. Unless we have sound scientific data to show that materials work, it won't be convincing to policy makers. Our target is the assembly of more and more resources, in more languages.

The new textbook is double the size of the first edition. After introduction to the new textbook outline, suggestions were made by participants to add sections or chapters on: sex education; specific acts of legislation; cases of medical abuse; the concept of human

dignity; Kant; basic principles and the foundations of ethics; Islam or Hinduism or Christian bioethics; engineering ethics; energy, environmental issues and natural resources; population screening; Thai Buddhism or culture; Nano-technology; genetic testing, screening and diagnosis; Governance; Bioterrorism; Evolutionary Ethics; whaling and anti-whaling; gender inequality or discrimination.

There was discussion of the content of the textbook, and an explanation was given that because the textbook is used by many institutions, it must be morally acceptable to some institutions which have particular religious views. In some chapters the text does not mention the main opposition in the field, for example the sanctity of life and quality of life are important categories in euthanasia. In the first edition of the textbook there was no mention of abortion or prenatal diagnosis. John Buckeridge provided some specific comments in writing on the draft textbook. The introduction to bioethics at the beginning of the text-book is intended for a younger audience, later on there are questions and references. Older students can make reports and research projects, as can those who are allocated more time for these classes.

The teaching resources and guides were still under preparation. Teachers have more access or are more likely to read and link the resources. There are extensive lists in many chapters to useful books. It was pointed out that although there had been many different classes in India using the first version of the text book, it is doubtful that any of them have access to the publications in the reference lists. The teaching resources need links and on-line guides where students can go to on-line, and in various languages. The idea was given to send out sets of books to offer as resources to teach, for example to send out a set of 30 key books. In general, however, we should promote the use of free on-line references.

The question of evaluation was discussed. If bioethics becomes compulsory, should it have an exam? If yes, then should there be a question book? Will an exercise book be produced? Macer said that to teach ethics with multiple choice questions is not our idea. Evaluation is done in some countries by writing essays.

There was said to be a need to include perspectives from many more cultural traditions. This will help introduce students to different thought systems. Cross-cultural case studies from different cultures were suggested, for example how one dilemma in Fiji is approached differently in Korea and Poland. Certain chapters do represent different cultures regarding issues such as brain death. There was discussion of the best level for this textbook to be used, given that there seems to be a lack of general information about bioethics. In any course there may need to be a general introduction for bioethics. A dictionary like a glossary would be useful, though there is the UNESCO/IUBS/Eubios bioethics dictionary available on the Internet.

Regarding the subject of the classes that bioethics can be included into, it was pointed out that ethics is an interesting topic for discussion. It reflects very well that English is a second language in the class room in countries where foreign language classes are compulsory. Also in many schools the English language department teaches on common grounds. Macer mentioned that in the original proposal the idea was that the materials would be used in English classes. The reason for including bioethics in English classes was that it gives the teachers more freedom, as there would not need to be extra space created in the curriculum.

The Beijing school teachers pointed out that in the first year when bioethics was taught, the question of who should take on the responsibility of teaching arose. Should it be an English teacher or a Biology teacher? All information available on the internet was in English, but not all Biology teachers could read English. There are difficulties in communicating in English with other delegates. However, they are still considering carrying out bilingual education.

Regarding the targeted audience of the book a compromise may need to be made. It was said to be aiming for too much to attempt to write and be applicable at all levels. It is too deep for rural children who don't have a roof over their heads. Because the book has to cover many things, small booklets could be useful.

Lindsey Conner raised some general questions. Who is the audience? What are the activities designed for them? For example, 13 or 14 year olds do not have enough background knowledge to utilize some chapters. It is impossible to address all levels. Ideally she would like to see different levels of activities that address the same topic. We might have environmental ethics that you could use with young children, another with first year university students, for example. It is for individual people to look at the resources and decide whether they are useful or not. Some of the chapters are quite wordy so if she was an English teacher she wouldn't use them.

There was explanation of the meaning of copyright to the Eubios Institute, which intends this to be open source just protecting the contributions from commercial exploitation. The widest possible dissemination of the material is intended. There was also a call for revision of the title, and arguments for a simpler title without the words informed choices.

There was also a detailed Feedback Meeting on the Bioethics TextBook, UNESCO Bangkok, 16 September 2005. All 20 participants gave comments on how to evaluate what forms of bioethics evaluation work. Darryl Macer stated that the principle is to have a free, informed and open discussions on ethics is essential as one of the first points of bioethics. Article 19 of the Universal Declaration on the Human Genome and Human Rights says that the teaching bioethics is 'Have a free and open discussion, and share the views in a rational way.' Some participants mentioned activities like field visits, hospital visits, visiting a palm field, visiting GM papayas. In Bioethics we sometimes get some students to visit some people who are going to die. They also discussed movies and other activities. After comparing evaluation notes and agreeing on the idea of a network of policy makers so we can be more effective, and the subject of the sort of general evaluation and assessment of subjects, the discussion moved to consider the goals of bioethics.

Postscript: The resource book or text-book, Darryl Macer, ed., *A Cross-Cultural Introduction to Bioethics*, Eubios Ethics Institute 2006, is available in hard copy and on the website <<http://www.unescobkk.org/index.php?id=2508>>

News in Bioethics & Biotechnology

<http://www2.unescobkk.org/eubios/NBB.htm>
News will appear in the January 2006 issue of *EJAIB*.

International Bioethics Education Project News

<<http://groups.yahoo.com/group/Bioethicseducation/>>

IAB Genetics & Bioethics Network: On-line

The complete address list is updated on the Internet. Send all changes to Darryl Macer.

ABA Membership

<http://www.unescobkk.org/index.php?id=41>

Persons who want to confirm their membership of the ABA must send their completed membership form and fees to the secretary (copy the form on p.200 of this issue), Darryl Macer, (by Email, fax or airmail).

PLEASE RENEW ABA membership fees if you wish to continue to receive *EJAIB*!

CONTENTS list of new Text/Resource Book

A Cross-Cultural Introduction to Bioethics

editor, Darryl R.J. Macer.
Christchurch, N.Z. : Eubios Ethics Institute 2006.

On-line version and teachers guides, references, Internet links;
Project site <<http://www.unescobkk.org/index.php?id=2508>>

Preface

Feedback Forms

Acknowledgments and Authorship

A. Bioethics and the ethics of science and technology

1. Making choices, diversity and principles of bioethics
2. Ethics in history and love of life
3. Moral agents
4. Ethical limits of animal use
5. Ethics and Nanotechnology

B. Environmental Ethics

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11. Bird flu
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3. Surrogacy
4. Choosing Your Children's Sex and Designer Children
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6. Female Infanticide

7. Human cloning
8. United Nations Declaration on Human Cloning
9. Human Genome Organization Declaration on Stem Cell Research

F. Neurosciences

1. Advances in Neuroscience and Neuroethics
2. Learning to Remember: The Biological Basis of Memory
3. The Neuroscience of Pleasure, Reward and Addiction

G. Social Ethics

1. Revisiting the Body
2. Child Labour
3. Peace and Peace-keeping
4. Human Rights and Responsibilities

Movie Guides and Questions (Samples)

Note that the Teaching Guides, References, Internet links, are in a separate document that can be downloaded from the Internet site <<http://www.unescobkk.org/index.php?id=2508>>

Conferences

A bioethics conference calendar website is: <http://www.who.int/ethics/events/en/>

CBEC-UNESCO Joint Conference and Workshop on Bioethics Education, 21-22 January, 2006. Centre of Biomedical Ethics and Culture, 5th Floor, Dewan Farooq Medical Complex, (SIUT new premises), Sindh Institute of Urology and Transplantation (SIUT), Karachi, Pakistan
Email: bioethics@siut.org

International Bioethics Workshops, c.24-27 November, Chennai, India Contact: c.zeeland@unescobkk.org

Second UNESCO Bangkok Workshop on Ethics Partnerships in Asia and the Pacific, 6-7 February, 2006, Bangkok, Thailand. Contact: n.kimura@unescobkk.org

4th International DNA Sampling Conference: "Genomics and Public Health," 4-7 June 2006, Montreal, Canada. Visit www.humgen.umontreal.ca/events/dnasampling.

Asia-Pacific Conference on Bioethics Education, 26-28 July, 2006, Seoul, Korea. Joint Conference between Korean National Commission of UNESCO and UNESCO Bangkok. Contact: c.zeeland@unescobkk.org

Eighth World Congress of Bioethics and Seventh Asian Bioethics Conference (ABC7), 3-6 August 2006, Beijing, China. ABC7 will be overlapping with the Eighth World Congress of Bioethics. Contact: Renzong Qiu [rzq@chinaphs.org]

Eighth Asian Bioethics Conference (ABC8), 19-23 March 2007, Chulalongkorn University, Thailand. Contact: Dr. Soraj Hongladarom [hsoraj@chula.ac.th]

The goals of EJAIB include:

1. EJAIB is the official journal of the Asian Bioethics Association (ABA) and the IUBS Bioethics Program.
2. To review and update news and trends in bioethics from around the world. Bioethics is broadly defined as life ethics, including both medical and environmental ethics, and environmental, ethical, legal and social issues arising from biotechnology.

3. To pay particular attention to issues raised by genetic and reproductive technology, and other news for the International Association of Bioethics Genetics Network. To publish letters on such topics, promoting international debate.

4. To publish research papers, and relevant news, and letters, on topics within Asian Bioethics, promoting research in bioethics in the Asian region, and contributing to the interchange of ideas within and between Asia and global international bioethics. Asia is defined for the general purposes of this journal as the geographical area, including the Far East, China, South East Asia, Oceania, the Indian subcontinent, the Islamic world and Israel.

5. To promote scientific responsibility, in coordination with MURS Japan (Universal Movement for Scientific Responsibility); and the International Union of Biological Sciences (IUBS) Bioethics Program.

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South-South dialogue is encouraged, and papers outside of Asia and the Pacific are welcome.

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