Title

A Theory of Bioethics by David DeGrazia and Joseph Millum (review)

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Authors

Hoy, Colin

Chiong, Winston

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David DeGrazia and Joseph Millum's *A Theory of Bioethics* arrives at a curious time for an ambitious effort at systematic theory construction, seemingly out of step with bioethical fashion. Last year a prominent group of philosophical bioethicists authored an article concerned, seemingly with a touch of defensiveness, to "make the case that philosophy and philosophers still have a very important and meaningful role to play in contemporary bioethics." (Blumenthal-Barby *et al*., 2021) Meanwhile, last year's annual meeting of the American Society for Bioethics and Humanities included several expressions of impatience with the historical privileging of philosophy over more empirical, situated and community-oriented approaches to moral problems in health.

DeGrazia and Millum's work itself reflects the current state of bioethics and how it has changed since the heyday of grand bioethical theory construction in the late 20th Century. To apply Parfit's (1984) invocation of Strawson's (1959) philosophical taxonomy, the general frameworks promulgated by Veatch, Engelhardt, Gert and of course Beauchamp and Childress (among others) were by necessity *revisionary*. These bioethical theories were whole-cloth alternatives to a conventional and paternalistic medical ethos that was already widely acknowledged as unsatisfactory. In 2022 however, bioethics is a mature and institutionalized field, with well-established practices and a corpus of accepted tenets (alongside matters of ongoing but often demarcated controversy). A plausible and fruitful contemporary theory of bioethics must be in Parfit's sense largely *descriptive*, providing an intellectual framework that gives coherence and sense to existing practice while clarifying matters of confusion.

In contemporary bioethics, a central component of this practice is the application of the four principles of non-maleficence, beneficence, justice and autonomy—not just as originally proposed by Beauchamp and Childress, but also as these have been refined over decades of exchange, critique and revision. DeGrazia and Millum's theory begins with two core values: well-being and respect for rights holders. The bulk of the book then applies the method of reflective equilibrium to specify these two values in terms of the canonical four principles, here treated as "mid-level" constructs with readier application to specific cases than the two core values. Experienced bioethicists may have an uncanny sense of setting off from a new trailhead and yet eventually finding themselves still walking a familiar path. However, this way of introducing and explicating the four principles will likely be more accessible to a wide audience, including high-level undergraduates and graduate students not already versed in the revisions, refinements and compromises embedded in Beauchamp and Childress's discussions.

Two other features recommend this book as a resource for trainees and interested non-experts seeking to deepen their understanding of bioethics. A first is the clarity of its style and organizational approach, which provides a friendly orientation to a wide audience. The chapters are structured so that major contending perspectives are outlined before the authors develop arguments for their own positions in this context. Each chapter then proceeds to consider several applications to show how the theory can illuminate potential candidate approaches or policies, as well as demonstrating how to use the tools of ethical analysis to evaluate these proposals in both ideal and realistic cases. This didactic approach to the relationship between conceptual argument and practice will be accessible to many who are initially unfamiliar with or intimidated by theory. An important second feature is the commendable decision to make the book electronically available as Open Access. This farsighted decision also has the potential to broaden the bioethical conversation, in particular to include underresourced settings that have often been overlooked as parties to bioethical discourse.

While the authors' approach is in Parfit's sense descriptive, it is not necessarily conservative. In many places the authors highlight how their theory includes elements or renders conclusions that are not broadly accepted, and (following the method of reflective equilibrium) advocate for these positions both in terms of broad principles and particular judgments about cases. This begins with the dual value framework, which includes innovative claims that attempt to bridge perspectives that are often treated as irreconcilable. Their account of the value of well-being is broadly consequentialist, while their account of respect for rights is generally counter-consequentialist. They interpret their view as having broad scope, with equal consequentialist consideration for all sentient beings, but with the specific protections of rights restricted to beings with "narrative self-awareness." This results in an account of moral status they term "qualified equal consideration," which may be approximately glossed as "rights for persons, utilitarianism for sentient nonpersons." This circumscribed interpretation of equal consideration will not satisfy the demands of more monistic consequentialists. However, this account of moral status does result in judgments about the use of animals in farming and in biomedical research that are substantially more restrictive than are observed in settled practice.

The authors include other novel elements in the middle chapters devoted to a discussion of the canonical four principles. Non-maleficence, often treated as the dreariest of topics in bioethics, is here an occasion for a deep but accessible review of philosophical work on the complexities of characterizing harm. Also noteworthy is the structural decision by the authors to discuss distributive justice and

beneficence together in the same chapter, on the grounds that "the content of one depends on the content of the other." This contributes to a nuanced and unified discussion of obligations to aid and of its demands on individuals that supports a cosmopolitan view of the responsibilities of institutions; however, as discussed below, this decision ultimately reflects an overly narrow conception of discourse about beneficence and of justice in bioethics.

Turning to critique, it would of course be impossible for a single volume to encompass all moral problems in health, and the authors admit to limitations such as predominantly addressing the application of principles in English-speaking high-income countries. Still, there are topics that are central to bioethics discourse and practice that are not only passed over, but for which no approach can be safely conjectured for how the theory might accommodate them. For example, combining the discussion of beneficence and distributive justice could be appropriate for an isolated account of general duties to aid those in need. However, the principle of beneficence in bioethical practice and scholarship is in large part concerned with special duties of beneficence owed by clinicians to their patients. As admitted in the conclusion, DeGrazia and Millum's theory includes negligible consideration of special role-related obligations of clinicians to their individual patients (though in their discussion of justice they consider whether clinicians might be obligated to enter into such therapeutic relationships with poor people lacking medical care). For a theory of bioethics, this is a remarkable oversight covering most of clinical ethics, and one that appears directly related to the dual value structure of rights and well-being considered in abstraction from agents' embeddedness in roles and relationships. Given this structure, the theory seems to offer no foothold for purchase on central bioethical issues such as the dual role of the clinician and investigator, conflicts between confidentiality and duties to warn, the equipoise requirement/use of placebos in clinical research, the therapeutic misconception, and problems in acquiring expertise during the course of medical education.

The combined discussion of justice and beneficence not only represents a truncated conception of beneficence, but also of justice in almost exclusively distributive terms. Within contemporary bioethics there is growing and belated recognition of claims for restorative justice. This is particularly important given the complicity of biomedicine and, in many cases, bioethics itself in scientific racism and in medicalizing disability and other forms of social disadvantage. Alongside questions linked to redress for historic wrongs, there are also core bioethical questions concerning special claims of specific communities in ongoing relationships—such as about international clinical trials, uses of genetic data and biospecimens, and decisional authority in community-engaged research. Here

again, the concern is not merely that important topics may have been omitted given limited space or relevant authorial expertise. Instead, a dual value account abstractly focused on rights and well-being, without essential reference to social identities or situatedness in history, may lack key resources to address claims increasingly regarded as central in bioethics. Recalling social-scientific and other critiques of the centrality of philosophical theory in bioethics, these weaknesses may reflect broader deficiencies in (contemporary Anglophone) philosophy's treatment of moral problems that arise in embedded social and historical contexts.

In summary, DeGrazia and Millum's theory represents a welcome contribution, which in many respects reflects both the distinctive contributions and particular weaknesses of current philosophical approaches to moral problems in health and health care. While a systematic theory of bioethics is a remarkably ambitious project, in the conclusion the authors offer a more modest goal: that readers should emerge better equipped to understand ethical analyses and develop their own positions, regardless of whether they agree with the dual value theory. Given the care, precision and organization of the authors' efforts, this aim will be met for most readers. Novices in bioethics will benefit from this systematic and largely coherent linking of themes across varied bioethical problems, while more experienced readers in bioethics will find much to consider in the authors' specific conceptual and practical proposals.

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