CAN VIRTUE ETHICS BRIDGE EAST AND WEST?

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Neo-colonialism is the process of subtle covert propagation of ideas by colonial powers to convert people living in former colonies to their way of thinking [1]. The western moral values and ideas are propagated as universal values and therefore belonging to all sections of the world population [1]. Post-colonial societies suspect direct exportation of any dominant western ideas into their societies as a direct attempt towards moral colonialism, by promoting ethics and rights founded on western ideals as universal values.

Bioethics as an academic discipline was founded in western world in 20th century as a reaction to the dangerous consequences of newer inventions in the area of science and technology, in order to combine biological knowledge (“bio”) and human values (“ethics”), to save humanity from extinction [2]. Bioethicists utilised both philosophical and multidisciplinary inquiry to reach normative ethical judgements regarding sensitive ethical questions [3]. However, most of these deliberations in bioethics utilised philosophical and scientific traditions predominantly belonging to the western world. There is a growing criticism against globalisation of ethical ideas based on western ideals and scholarships. Many Asian and African critics consider any attempt to import such ethical frameworks as a form of moral neo-colonialism [4].

Recently, many Indian scholars tried to highlight the indigenous understandings of bioethical issues as a counter to the Western model. The ancient Indian medical texts such as Caraka Sarithitā provides several discussions on bioethical issues [5]. Moreover, traditional Hindu concepts such swatantrata ka-ādāras, ahimsa, karma, daya, upakaar etc, also can provide unique opportunity to understand and solve bioethical issues in the local contexts [6]. Similar reactions can also be seen in Pakistan where Islamic religion continue to have a great deal to do with bioethics [7].

Global bioethics utilise different schools of thought while doing ethical inquiry to reach normative conclusions. The most common schools of thought considered are utilitarianism, liberalism, principilism, virtue ethics, and personalism. There is no consensus yet regarding which school of thought in western bioethical tradition can be promoted as a global bioethical framework. A close reading of non-Western criticism of global bioethics suggests that post-colonial societies are not against all forms of Western bioethical traditions, but against some specific forms of bioethical frameworks which are against the basic values shared by their communities.

The most dominant ethical framework in the west currently is Principlism. It is based on the works of Tom...
L. Beauchamp and James F. Childress [8]. Ethical dilemmas are solved by applying the four principles of autonomy, non-maleficence, beneficence and justice. The overemphasis on individual autonomy has been an important issue with this ethical framework in post-colonial societies. Asian societies believes in communitarian values and Western individualistic and liberal view is fundamentally incompatible with non-liberal cultures [1]. Critics of western bioethics also fear that direct exportation of bioethical model based on western idea of autonomy might lead to breakdown of essential social institutions and might diminish respect for social values, traditions, and customs [1]. Any attempts to impose such an ethical framework might be seen as an act of moral neo-colonialism by people belonging to Asian and non-Western societies. Ethical frameworks based on utilitarian and liberal schools of thoughts also will evoke similar response among non-Western world.

A global ethical frameworks based on virtue ethics and personalist school of thought share many non-Western concerns and values. Criticisms of the dominant Western bioethical framework by virtue ethicists are very similar to non-Western and Asian critics [1]. They demand bioethics as a discipline to return to the issues of moral psychology and human flourishing. An ethical theory based on virtue ethics place moral values at the centre of all human living and ensure that morality is an integrated part of lived experience, similar to proponents of non-Western bioethics [1]. Virtue ethics also promotes relational autonomy over individual autonomy in medical settings, which is commonly practiced in Asian societies. The personalist bioethical tradition share common values with many non-Western religious tradition. The significance of human being in ethical deliberations is shared by major religious traditions such as Islam, Christianity, Judaism, Buddhism, Confucianism, and Hinduism. Moreover, Personalism strongly value principle of solidarity [9]. The bioethical framework based on solidarity principle promotes decision making in a more collective way, as practiced in most of the non-Western societies [9]. Any global framework of bioethics that incorporates multiple insights from bioethicists belonging to non-Western schools of bioethics, the virtue ethics, and the personalistic school, might be more acceptable globally and less open to be seen as an act of moral neo-colonialism. A comparative analysis between the positions of ‘developing world bioethicists’ and The work of virtue ethicists was summarised in table 1.

In conclusion, there is a pragmatic need for global ethical framework to regulate novel ethical issues which demands global solutions. However, how we formulate a globally acceptable ethical thinking is a complex challenge. Any attempt to globalise western bioethical framework based on individualistic and mechanistic ethics will be considered as a clear form of moral neo-colonialism by post-colonial societies. However, western bioethical frameworks based on virtue ethics and personalism might provide opportunities to find a common acceptable bioethical thinking between non-Western and Western societies. Central Asian scholars should take active interest in the ongoing debate regarding moral neo-colonialism of global bioethical movements by contributing their local intellectual understandings of bioethical values and should find ways to bridge Eastern and Western differences in the understanding of bioethical issues. One of the important solution to bridge the gap could be to closely evaluate the commonalities among various bioethical schools of thoughts from the West, especially the personalist and virtue ethics, with respect to local indigenous understandings, so that constructive dialogues based on mutual understanding and respect can be initiated.

REFERENCES

Table 1. Comparative table between the positions of ‘developing world bioethicists’ and The work of virtue ethicists

<table>
<thead>
<tr>
<th>Major contributors</th>
<th>Developing world bioethicists</th>
<th>Virtue ethicists</th>
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<tbody>
<tr>
<td></td>
<td>Dr Mahathir bin Mohamad</td>
<td>Elizabeth Anscombe</td>
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<td>Lee Kuan Yew</td>
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<td>Josephine M. Lumitao</td>
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| Approach towards dominant Western bioethical frameworks | Criticise Western bioethical frameworks due to its over emphasis on individualist, principlist and conceptual nature. | Criticise Western bioethical frameworks due to its over emphasis on the concepts of obligation and duty, over the moral nature of the agent. |

| Ethical principles | Based on lived moral virtues and part of the phenom enological world of living experience. | Derived from the concepts such as character, virtue and human flourishing |

| The nature of ethical framework | Based on the cultivation of specific set of virtues in the moral agent. For e.g., Relational will (Loo/b) Together with the person (Kapwa) | Based on the cultivation of virtues to act as a virtuous person who has ideal character traits. For e.g.; Kindness Benevolence Compassion |

| Values | Highly culture specific | More universal |

| Ethical practice | Community-centered actions aiming at promoting loyalty to the family, political order, religious order, business, government, and the wider community | Self-centered actions aiming at human flourishing at individual level. No emphasis on communitarian values. |

| Agreements with the positions compared | Both developing world bioethicists and virtue ethicist criticise dominant Western bioethical frameworks for the absence of emphasis on the moral nature of the agent. Both derive ethical principles from lived moral virtues. Both believes in cultivation of virtues in the moral agent. However, the concepts of right virtues varies. Ethical values promoted by developing world bioethicists are highly culture specific, where as values are more universal in virtue ethics. Both significantly differ in their ethical practice, as virtue ethicist put not much emphasis on community-centered actions. |

Conclusion: There are many common acceptable factors between developing world bioethics and Western bioethics. Any global framework of bioethics that actively consider insights from developing world bioethicists and virtue ethicists might be more acceptable globally and less open to the charge of moral neo-colonialism.
МОЖЕТ ЛИ ЭТИКА СТАТЬ МОСТОМ МЕЖДУ ЗАПАДОМ И ВОСТОКОМ?
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