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Issues for a Catholic Bioethic comprises most of the contributions of an international panel of thinkers to a conference held at Queen’s College, Cambridge in July 1997 to celebrate the twentieth anniversary of the foundation of the Linacre Centre. After an introduction by the editor and an opening address by Cardinal Thomas J. Winning, the book is divided into a number of sections with the following topics: the ecclesiastical context of Catholic bioethics; anthropology; sexual ethics; situating health care; integrity in health care; law, public policy and the pro-life cause; and disputed questions.

In his opening address Cardinal Winning points to the Centre’s mission within the Church, viz., to help “in the exposition and development of a Catholic bioethic that will aid Catholics engaged in health care and biomedical research understand the relevance of Catholic teaching in resolving the moral questions which arise in the course of their work.”

Arguably the greatest challenge confronting Catholics in the health care apostolate is an ancient, but ever new, vision of the human person that seems to have become firmly lodged in contemporary (bio)ethics and jurisprudence. It is the vision of the human person as the ultimate and unique creator, through his will or choice, of any meaning(s) or value(s) his life may have. Closely related to this vision is a theory of rights based on a dualistic anthropology. Cardinal Winning goes to the heart of this challenge when he asks: “Why is it thought justifiable to kill unborn children, the handicapped newborn and the debilitated elderly?” He answers as follows:

The radical justification which is now a commonplace of the bioethical literature rests on the claim that certain human beings do not have a serious right to life. For to have a serious right to life, on the view asserted, one must have developed abilities for understanding, reflection and choice, since without such abilities one cannot value one’s life; and it is only in so far as people value their lives that their lives have value. (17)

If each person takes himself to be, by definition, the absolutely autonomous source of meaning and value, then, as Cardinal Cahal B. Daly points out, the “very concept of universally valid moral principles is... called into question, so that we can say that contemporary thinking about morality makes moral consensus in society virtually impossible, and indeed makes it in principle impossible to call any behavior morally wrong in an absolute
or universal sense.” (23) So we have a crisis of civilization wherein moral relativism or subjectivism (“pluralism”) is replacing moral objectivity and universality or freedom under truth and law. What Newman called a “liberty of self-will” has replaced moral conscience. In this way, as Pope John Paul II noted in Veritatis Splendor, conscience is cut off from the “inescapable claims” of moral truth and anchored instead to a dominant human will. Cardinal Daly points out that this debasing of conscience is found not only in the realm of sex and reproduction but also in politics, in business and finance, in the arms trade, in the practices of terrorism, and in the conduct of war.

Within the Church itself, Cardinal Daly adds, the modern crisis of morality concluded with a crisis in Catholic moral theology, especially after Humanae Vitae. Unfortunately, the logic of the dissenters’ position on contraception obliged them to adopt positions that led to the unraveling not only of the Church’s teachings on sex and marriage but its teachings on morality in general. This weakened the Church’s stand in the face of the many grave evils confronting her in modern society.

Veritatis Splendor was the Church’s response to this crisis within the Church. The Pope emphasized the truth “that there are moral laws which bind universally and there are behaviors which are objectively and intrinsically evil in themselves.” (30) This was followed by Evangelium Vitae which “outlines... a comprehensive and consistent pro-life ethics, indeed a ‘culture of life’ which will confront the growing ‘culture of death’ in modern society.” (31)

Chapters six and seven are devoted to the anthropology which must inform any humane health care policy and practice. First, John Haldane surveys various conceptions of the human person and diverse understandings of the relation between body and mind, soul, and person. In good Aristotelian/Thomistic fashion he argues for a non-materialist but also non-immaterialist (dualist) conception of the person. The hylemorphic view, he thinks, provides a truer basis for a naturalist and objective ethics. Although Haldane clearly thinks that the content of the norms of human flourishing “is given by our nature” and is the basis of our judgment on the goodness or badness of actions, he does not tell us in any detailed way how he views the relationship between the philosophy of human nature as a theoretical science and the principles of ethics as a “work” of practical reason.

In his paper, Gregory Glazor (ch.7) shows how the biblical image of man as made in the image of God exposes various dualist or monistic conceptions of man as a pure material substance or pure spiritual substance or a dualism of the two. He then points to the relevance of this to ethical issues, especially those surrounding the beginning and end of life (v.g. the care of the embryo and of PVS victims) as well as one’s understanding of
pain and suffering (vs. Stoicism and Buddhism). The view “highlights the dangers of fabricating man according to merely human representations and understandings of man’s nature.” Man “not to be made in the ‘image of man’ but accepted as begotten (given) in the ‘image of God’.”(107)

The topic of sexual ethics takes up chapters eight and nine. Jorge V. Arregui presents some reflections on John Paul II’s philosophical and exegetical work on marriage and sexual love. He wades a few steps into the debate about the possibility of deriving the “ought” from the “is” or values from facts. Unfortunately, he gives no reason for thinking that a pure description of facts is a “mirage” or that “there is no level of facts apart from some order of values” or why he thinks that John Paul II “does not think it possible to offer a pure anthropological description free from any moral evaluation.” Surely the Pope distinguishes, as does St. Thomas, between the philosophy of human nature (De Anima) and the practical science of ethics.

Batholomew Kiely, in his paper, points to the need for formation in the virtue of chastity if future generations are “to enjoy trust between the sexes, committed and stable and loving marriages, dedication of parents to children, and the joy of making a total gift of oneself in marriage or in the consecrated life.”(147) A sense of vocation, a respect for the body, and a hope rising beyond immediate gratification are the general requirements for forming this virtue and these are best situated in a context of faith. Other particular requirements include attention to the Tradition of the Church, sexual information that is not merely biological, prayer and sacramental life, awareness of sin, repentance and the sacrament of reconciliation and training in self-mastery.

In his keynote paper, Germain Grisez presents the obligation to care for one’s health as an integral part of one’s personal Christian vocation to “seek the kingdom and prepare material for it.”(152) Grisez analyzes the nature and limits of this obligation as well as of the obligation to care for the health of children and other dependents. He also addresses the health care professional’s special vocation as a vocation to “dedicated service.”(155)

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