A Call to Activism, review of *Theological Bioethics*, by Lisa Cahill

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Christian engagement of moral issues in medicine and biotechnology is nothing new. In the fourth century, Eusebius, chronicler of ecclesiastical history, reported that while pagans fled the plague at Alexandria, Christians went into the city to care for, and even die with, the victims. More recently, the United States witnessed the vigil held for Terri Schiavo, a vigil in which Christians and theological claims played a prominent role.

Though the Schiavo debacle would seem to fall squarely under the purview of "bioethics," it is not what Lisa Sowle Cahill, the J. Donald Monan Professor of Theology at Boston College, has in mind in her proposal for a "theological bioethics." Cahill is one of the leading Catholic moral theologians in the United States, a subtle and flexible thinker whose positions and theoretical framework continually evolve. Her current book marks yet another step, calling for an evolution in "theological bioethics" itself, from theory into practice. Cahill argues "that bioethics in the twenty-first century must be in every case social ethics, not just as theory but as engagement." Christian bioethics in particular should work to mobilize efforts for change, especially changes concerning fair and equal access to health care, both nationally and globally.

After a brief overview of the history of bioethics, Cahill develops her proposal for what she calls a "participatory theological bioethics." What this might look like in practice is then fleshed out in chapters on the end of life; health-care access reform, both national and international; reproduction and early life; and genetics and biotechnology. The book has significant strengths. The first is its almost encyclopedic nature. Cahill includes extensive background on the various issues she covers, summoning both secular and theological perspectives. She generously incorporates voices from across the theological spectrum. Few are left out.

Cahill focuses her attention on individuals and organizations one would not expect to find in a typical book on bioethics. To exemplify her proposed participatory theological bioethics, she highlights such diverse subjects as the Milwaukee Innercity Congregations for Hope (MICAH); hospice; Cardinal Joseph Bernardini; a Jesuit psychiatrist, Angelo D’Agostino, who heads an orphanage and clinic for children with AIDS in Nairobi, Kenya; and many more. She examines closely the work of the Catholic Health Association (CHA; see www.chausa.org), as well as that of the Community of Sant’Egidio, a now-international network of "church public lay associations" committed to prayer, commu-

"Miss Bronson, bring me everything we’ve got on cloning."
niciating the gospel, and solidarity with the poor (www.santegidio.org). Cahill's wise and radical insight is that these are the places where real "theological bioethics" is—and always has been—living.

Politically, *Theological Bioethics* takes liberal and progressive theologians to task for backing away from using public religious arguments. Cahill enjoins them to take possession of their tradition and to begin using what she calls "expansive" and prophetic theological discourse. She argues against the mistaken notion that the language of the public square is neutral. In fact, she notes, it is governed by the very non-neutral traditions of science, economics, and liberalism, traditions that are not afraid to use their own language assertively. "Theological bioethics," Cahill exhorts, "should and can confront these thick traditions with persuasive counterstrategies, symbolic systems, and narratives, as well as with other ethical 'reasons.' The challenge before theologians is not to cast aside a thin discourse for a richer one, but to dislodge the thick discourses that are so widely entrenched."

But perhaps the most important achievement of this book is to turn readers' attention to the significantly overlooked issue of global health. One critic has aptly referred to bioethics in the United States as "quandaries of the rich"; and indeed, most of the dilemmas on which bioethics focuses—stem-cell research, genetics, withdrawing treatment—can only be problems where one has too much health care. Yet the larger and more compelling issue, especially for Christians, ought to be that most of the world lacks access not only to health care, but also to what Cahill calls "the adequate conditions for a healthy life." A tradition that seeks to uphold the sanctity of life and the dignity of the individual while ignoring the hundreds of thousands of preventable deaths that occur each day—not to mention the tragic conditions under which much of humanity labors—is indeed a betrayal of the gospel.

A book's strengths can be the flip side of its weaknesses. The encyclopedic nature of Cahill's approach may be a bit overwhelming for those unfamiliar with the field. In place of some of the extensive background on the issues, a richer and more detailed theological analysis would have been a plus. Theology here is limited to the standard values of justice and preferential treatment for the poor, the common good, and the doctrine of creation. The theology behind these values is only minimally discussed. Second, while the call to engagement and mobilization is laudable (and, I think, right), it is not clear how Cahill proposes to accomplish that. Most theologians who work in the area of bioethics are employed by colleges and universities. For better or for worse, this is the current "social location" of theology, and it is one in which the sort of activism Cahill enjoins is not rewarded, and may even work against junior faculty. CHA, on the other hand, is an organization with a significant budget and a staff of sixty-five people, many of whom are employed precisely as advocates for the kinds of ventures called for
in these pages (for example, supportive care for the dying). Thus, Cahill is really calling for a fundamental change in the ways and places theology is practiced. As a theologian, I endorse this call; yet precisely how the nonspecialist might enter into this participatory theological bioethics is not entirely clear.

Third, one might ask whether the examples Cahill offers as paradigms of “theological bioethics” actually fit the designation. Most of her exemplars—Sant’ Egidio, CHA, Fr. D’Agostino, and others—do not see themselves primarily as theologians or bioethicists. Rather, they understand themselves primarily as Christians embodying the work of the gospel in the world. CHA, for example, refers to its work in Catholic health care as “the ministry.” What value is gained by categorizing these exemplars under the heading of “bioethics”? Might the witness of Cahill’s subjects suggest that perhaps the term “bioethics” is too thin to capture the richness of what these individuals and organizations are about?

This question points to my final concern. Cahill’s exemplars are chosen not solely because they work with “expansive” theological language, or because they are equally committed to justice and the common good, but above all because they collaborate with persons from diverse perspectives to push for changes in policy and practice. Participatory democracy seems to be Cahill’s crucial determinative norm; without it, Christian activists do not enter into her account.

And so, I fear, those Alexandrian Christians I mentioned at the outset would fail her test. They were not collaborating (the pagans had actually fled) or working to change policy; they were simply caring for, and dying with, the sick. But this is not enough for Cahill. While her challenging book pushes theologians to think differently about bioethics, her own examples push her to open the door more broadly. Perhaps there is one more thick tradition to dislodge—the tradition of bioethics itself.

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