

Eubios Journal of Asian and International Bioethics

EJAIB Vol 19 (1) January 2009 ISSN 1173-2571

Copyright ©2009 Eubios Ethics Institute (All rights reserved, for commercial reproductions).

Eubios Ethics Institute World Wide Web: www.eubios.info/index.htm

Official Journal of the Asian Bioethics Association (ABA)

Contents

	page
Editorial: Nature of Bioethics	1
Is there an African Bioethics? - Karori Mbũgua	2
Social Construction of Value and the need for evolution to universal policy of harmonized social system - Kayo Uejima	5
The Relation between Normative and Descriptive Ethics - A Consideration of Empirical Bioethics - Jon Vegar Hugaas	21
Life-Threatening Illness, Hope, and Spiritual Meaning- Making: Buddhist and Christian Perspectives - Neil Pembroke	27
Other information and conferences	31
Order form	32

Editorial: Nature of Bioethics

This issue of *EJAIB* starts the new year with only 4 papers, but ones that look at the nature of bioethics itself, and the directions that bioethics has and should take in the future. The journal is a place for expression of different ideas to challenge the way that we interpret bioethics as a tool for guiding research and policy making. Each takes up a different emphasis, which are natural extensions of the way that each community can interpret the Universal Declaration on Bioethics and Human Rights, and earlier more limited visions of what bioethics includes.

The first paper by Karori explores the topic of whether there is an African bioethics, in a similar way to many papers that have been published in *EJAIB* have explored whether there is an Asian bioethics? While the conclusions of these reflections reveal there is diversity of approaches to bioethics, and that these have some regional commonalities, there may not be one common ethic even within a country. Universal diversity, that was the conclusion of the International Bioethics Survey conducted in 1993 (published in Macer, DRJ, *Bioethics for the People by the People*, 1994), reflects the observation that when it comes to resolving moral dilemmas we see a variety of different ideas processed together to shape the choices and actions we make.

The paper by Neil examines the role of compassion, which is one of the key principles that has been

described as being important in Asian bioethics. The paper by Jon summarises the discussions in Europe on descriptive and prescriptive (normative) ethics. Without the scholarship extended by many on descriptive approaches to bioethics we would not have developed our scholarship of bioethics as far as we have seen. One of the purposes of *EJAIB* was to be an open forum for reflection on just what Asian bioethics is, and to also stimulate a more international reflection on bioethics. More than one thousand papers have been published in *EJAIB*, and there is a growing wealth of knowledge of both types about the ways that bioethics can be constructed.

The paper of Kayo examines how we construct value, and calls for a shift in the underlying values used for construction of what is an ethical social system. As she says, these processes are in evolution, and change, but the roles of ethicists may be to try to direct society as a conscience. Her paper includes a mix of descriptive data, such as lifestyle trends in Japan, along with analysis and development of ideas to describe the many layers that combine and relate to each other to construct life and the world, and the systems under which we operate.

In November, 2008, at the Ninth Asian Bioethics Conference in Jogjakarta, Indonesia, several hundred scholars shared the results of their research, and reflection, on many topics of Asian bioethics. The next (Tenth) Asian Bioethics Conference, in April 2009, will be at the other side of Asia, in Tehran, Iran. It is testament to the aspirations of many scholars to understand ourselves that the ABCs are moving around many countries as well as drawing together a solid foundation of regional scholarship. I urge readers to submit papers to that conference, so that we might be able to engage in deeper reflection of the nature of bioethics, and lessons of real experiences to the frameworks that will shape policy to better outcomes.

-Darryl Macer

Editorial address:
Prof. Darryl Macer, RUSHSAP, UNESCO Bangkok,
920 Sukhumvit Rd, Prakanong, Bangkok 10110, THAILAND
Fax: Int+66-2-664-3772
Email: d.macer@unesco.org

The deadline for the March 2009 issue is 1 March, 2009.

Is there an African Bioethics?

- Karori Mbũgua Ph.D.,
Department of Philosophy, University of Nairobi, P. O.
Box 30197 Nairobi, Kenya
Email: Karori.mbugua@uonbi.ac.ke

Abstract

Is there an African bioethics? This paper addresses this question by first exploring the ongoing debate on the nature and status of African philosophy. It is argued that if African philosophy exists, then by extension an African bioethics must exist since bioethics is a sub-branch of philosophy. Further, a distinction is made between bioethics as a set of moral principles rooted in a people's culture which should guide clinical care and scientific research and bioethics as a discipline in the university, with a set of codes, standards, recognized practitioners and customs. It is argued that bioethics in the former sense has always existed in Africa but bioethics in the latter sense is a relatively new development in the continent.

Key words: Bioethics, Bioethical colonialism, African philosophy, Ethno-philosophy, Professional philosophy.

Introduction

This paper is an attempt to answer the question of whether there is such thing as an African bioethics. In answering this question it is important to focus on a different, though related question, namely, is there such thing as African philosophy? If bioethics is taken to be a subfield of philosophy, then a positive answer to this question would mean that African bioethics exists. But if African bioethics exists then what distinguishes it from, say, Asian bioethics or Western bioethics and why is this distinction important? These are some of the questions that this paper will attempt to answer.

Bioethical Colonialism

In recent years a debate has been ranging concerning whether the principles and methods Anglo-American bioethics are the same as those of other cultures. Various people have argued that the bioethical principles promoted in U.S. bioethics, of respect for autonomy, beneficence, non-maleficence, and justice, are non-existent or unacceptable in other cultures. Some bioethicists, especially from the developing world, have been concerned about what they perceive as the negative consequences of the globalization of bioethics. They see the globalization of bioethics as a form of moral imperialism and an attempt by developed world agencies to advance their biomedical research agenda at the expense of the developing countries. Indeed, many scholars have argued that a truly global bioethics must highlight ethical pluralism by acknowledging the existence of alternative and competing ethical frameworks.

One such scholar is Tamidayo Ogundiran who laments that bioethics in its present form is rooted in and largely dominated by Western culture. Bioethics, he argues, is still foreign to most African countries. He therefore calls for the inclusion of bioethics in the

medical education in Africa. In his own words 'It is now time for Africa to join the rest of the world by introducing ethics education into the curricula in all medical schools where it is not presently taught (Ogundiran 1994: 4). Similar sentiments have been echoed by Munyaradzi Murove when he says that the current discourse on bioethics in Africa is trapped in Western categories of thought and relies heavily on Western analytical philosophy. He maintains that an authentic discourse on bioethics in Africa must take cognizance of the fact that most Africans rely on traditional medicine for their health care needs (Murove 2005).

It is interesting to note that just as with African bioethics, the question of what constitutes the essence of Asian bioethics has been a topic of intense scholarly interest, as seen in the many papers in *EJAIB* since 1995. In a provocative paper entitled, 'The Bogus Debates on Bioethics', Suman Sahai argued that bioethics is a wasteful intellectual luxury which India cannot afford. She maintains that developing countries should not just follow the ethical dilemmas of the North but balance ethics of biotechnology against ethics of poverty. As she graphically puts it: 'If there is an outcry in the West against the recombinant bovine growth hormone rBBST, which increases milk production in cows, it is understandable for a society that is afloat in an ocean of milk. However, is it logical in India, a country with severe milk shortages and many children who do not get minimal nutrition? Should India with its acute fodder shortage and an average milk production of 2 litres per cow per day, spurn on ethical grounds a technology that has the potential to improve this production using the same amount of fodder? (Sahai 1997: 24). Thus, according to Sahai, only wealthy countries can afford the luxury of debating ethical issues arising from latest advances in both medicine and biotechnology.

Hyakudai Sakamoto called for a new global bioethics which he insists must be holistic in contrast to the Western individualistic bioethics. He argues that among the Asian people, the happiness of the community supersedes that of the individual (Sakamoto 2002: 32). But Leonardo Castro was more cautious in his call for an authentic Asian bioethics. He says that in an attempt to assert Asian identity in bioethics, one must be careful not to lump all Asians together. The point is that even within Asia different bioethical perspectives exist. In addition, one must realize that there are certain ethical principles that transcend both culture and geographical boundaries (Castro 1999: 227).

It is however important to note that it is not only Africans and Asians who have voiced concern over the importation of bioethical concepts into their cultures. Diego Gracia in a paper entitled, 'The Intellectual Basis of Bioethics in Southern European Countries' argues that bioethics is perceived by Southern Europeans as something foreign. He asserts that because bioethics made its first appearance in the Anglo-American culture, 'Europeans are trying to 'remake' or to 'recreate' the discipline according to their cultural and ethical traditions' (Gracia 1993: 98).

In the light of the foregoing observations, it is important that we reflect on the question of whether there can be an authentically African bioethics.

Two Conceptions of Philosophy

As already indicated, the question whether or not African bioethics exists cannot be addressed without due cognizance of the answer to the question whether or not an African philosophy exists. A negative answer to this question would imply a negative answer to the former. Similarly, since bioethics is one branch of ethics to assert the existence of an African philosophy is to assert the existence of an African bioethics, which in turn is one of the traditional branches of philosophy.

The question of the existence and nature of African philosophy remains the subject of vigorous debate. In fact a great deal of the literature on African philosophy is nothing but a metaphilosophical debate as to whether such a philosophy exists. The question of the existence of African philosophy was first raised by early European missionaries and anthropologists who claimed that the African mind was pre-logical, pre-rational and antiscientific and therefore incapable of philosophical discourse. It is useful to note that while this question is asked of African philosophy, it is not asked about Western or Oriental philosophy. It is taken for granted that these philosophies exist without question.

Some people think that to speak of African philosophy is to make a huge generalization. The problem is that Africa is not a homogeneous continent. It is a vast region made of over fifty countries and numerous ethnic groups each with a unique identity. Yet other scholars contend that the debate over the nature and existence of African philosophy is no longer interesting. According to these critics, Africans must start *doing* African philosophy instead of endlessly *talking about* African philosophy.

In attempting to answer the question whether African bioethics exists or not, we must first examine the answers that have been given to this fundamental question. Four main orientations in African philosophy can be distinguished: professional philosophy, ethno-philosophy, philosophic sagacity and nationalist-ideological philosophy. For the purpose of this paper, I will only describe the first two trends, namely, ethno-philosophy and professional philosophy.

Ethnophilosophy conceives of African philosophy as the attitude of mind, logic and perception behind the manner in which African peoples think or act. The key proponents of this trend include Placide Tempels, Alexis Kagame and John Mbiti. An ethnophilosopher is committed to the task of describing a world outlook or a thought system of a particular community. Ethnophilosophy advocates that an African philosophy should be concerned with articulating and reconstructing the implicit philosophy behind the habits, customs and beliefs of a society. It treats African philosophy as consisting in a set of shared beliefs, values, categories, and assumptions that are implicit in the languages, practices and beliefs of African cultures; in short the uniquely African worldview. For this reason, African philosophy is seen as an item of communal property rather than an activity for an individual.

Some critics of this orientation such as Odera Oruka have argued that this approach is too culturally specific and descriptive to be described as philosophy (Oruka 1975). Others think the ethno approach to philosophy

represents a form of acceptance of the inferiority of the Africans since it claims that African thinking is intrinsically emotional and occurs in the collective instead of the individual. But Gbenga Fasiku thinks that submitting ethnophilosophy to systematic and critical analysis would make it worthy of the name philosophy (2008: 103)

The other major orientation in African philosophy is professional philosophy which consists in analysis and interpretation of reality in general. The main advocates of this orientation in philosophy include Odera Oruka, Kwasi Wiredu and Paulin Hountondji. According to this view, African philosophy consists of criticism and argument, which are the essential characteristics and conditions for any form of knowledge to be judged as philosophy. In fact professional philosophers explicitly reject ethno-philosophy which is largely descriptive arguing that analysis and clarification of conceptual issues are the hallmarks of philosophy. However, some have objected that philosophy as practiced in African Universities today is strictly speaking not African as it is based on the Western model. Indeed, many of the so called African philosophers are Western-trained. Besides, philosophical teaching in African universities is still limited to teaching ideas and arguments of past or contemporary Western philosophers. Another criticism leveled against the professional approach to African philosophy is that it assumes that Western philosophy is the benchmark by which all other cultures' philosophies are to be understood and measured.

Two Approaches to Bioethics

Following from the two orientations in African philosophy described above, African bioethics can be thought of in two distinct ways, namely, bioethics as a set of moral principles rooted in culture (ethnophilosophy approach) and bioethics as an academic discipline (professional philosophy approach). I will discuss these approaches in turn.

The Ethnophilosophy Approach

An ethnophilosopher will look for African bioethics in African people's culture or world view. This is what might be referred to as *ethnoethics*. And as Patricia Marshall and Barbara Koenig have noted '...denying the importance of cultural background and beliefs, and their significant power to shape and transform the meanings attached to the experience of health and illness, sustains a rendering of bioethics deprived of richness of cultural context' (Marshall and Koenig (2004). The sources of such bioethical principles, especially in Africa where the introduction of writing is relatively recent, will include popular sayings, proverbs, songs, mythology, folklore and other cultural practices.

One important characteristic that should distinguish African bioethics from Western bioethics is that African culture places considerable value on conformity of the individual to the social group. And as theologian John Mbiti, paraphrasing Rene Descartes, aptly puts it, in African culture 'I am because we are, and since we are therefore I am (Mbiti 1969: 108-109). In other words, African ethics is communalistic in nature and is to be contrasted with the Western ethical tradition with its

emphasis on an individual's sense of self and autonomy of being. In that respect, African bioethics has more in common with Asian bioethics than with Western bioethics.

From this point of view it becomes quite apparent that some principles of "Western" bioethics will be in conflict with African communalism. One such principle is the principle of voluntary informed consent which is based on the idea of self-determination, autonomy and individual choice. Obtaining informed consent from patients and research participants in an African setting without some modification of the principle will prove difficult as this will require not just the consent of the individual concerned, but also of the entire community. Of course this will be the case in all societies where the influence of the community on individual decision-making is very high and this includes most Asian societies.

Failure to recognize cultural differences and variations in the understanding of human dignity, health and disease can lead to ethical conflicts. Quoting Rony Brauman, past president of *Médecins Sans Frontières*, Sikku Hellsten has reported on the ethical dilemmas that foreign medical doctors face while working in Africa. In war ravaged Somalia, for example, many Somali youths refused life saving amputations preferring to die with their gangrenous limbs intact. In neighboring Uganda, the moral value that the Western medical professionals and aid agencies give to children and pregnant women was challenged by the local cultural values and belief systems. Food aid allocated to malnourished children and pregnant women was given to the elders instead. The explanation given by the locals was that 'children are a renewable natural resource, while the elderly cannot be replaced' (Hellsten 2008: 72). These two examples demonstrate the need for a culturally sensitive bioethics.

The Professional Philosophy Approach:

As an approach to bioethical discourse in Africa, the professional approach to African bioethics is not likely to be *methodologically* different from Western bioethics. It will be a collection of logically argued ideas of individuals about bioethical issues rather than a body of communal thought. This is because professional philosophers adopt a universalistic definition of philosophy. According to this view philosophy (and in this case bioethics) must have the same meaning in all cultures although the questions prioritized in these cultures will be different.

Unfortunately academic bioethics, like professional philosophy, is still largely foreign in most African countries. Indeed, despite the rapid growth of bioethics research centers especially in Europe and North America, there are still relatively few places in Africa where one can obtain formal bioethics education even at the certificate level. This is hardly surprising considering that even in the West bioethics as an academic discipline did not become established until a few decades ago.

The strengthening of bioethics education and research and the raising of public awareness of bioethical issues in Africa must be given priority. Appropriate structures for deliberation and action on bioethical issues must also be put in place. In this

regard, the launching of the UNESCO Regional Center for Documentation and Research on Bioethics at Egerton University in Kenya and the hosting of an international bioethics conference at the same institution in August 2008 are steps in the right direction but more needs to be done. African bioethicists must consider the possibility of starting a professional society and a bioethics journal which will serve as platforms for the exchange of ideas and research findings.

But it is not enough to adopt a definition of bioethics that stresses the speculative and personal dimensions of the discipline. For bioethics to be practically relevant the individual reflections of African bioethicists must primarily be geared towards resolving bioethical dilemmas that medical practitioners and researchers working in Africa encounter daily. This is what will distinguish African bioethics from other regional bioethics.

Traditionally, bioethics has always been associated with cutting edge biotechnologies such as *in vitro* fertilization, organ transplant, and gene therapy. These technologies are virtually non-existent in most parts of Africa. The principles of U.S. bioethics which were formulated to address ethical issues arising from these advances in medicine cannot therefore be expected to adequately equip African researchers and medical students with the necessary ethical skills to face the bioethical dilemmas that they encounter daily.

Africa is also the poorest continent and arguably the origin of some of the world's deadliest diseases such as AIDS and tropical diseases such as malaria and sleeping sickness. These diseases pose serious moral challenges which African bioethicists must focus on. Controversies over AIDS research and access to affordable AIDS treatment in particular must be given top priority. It is also useful to point out that majority of research participants in clinical trials in Africa are likely to be highly vulnerable due to low levels of education and poverty. African bioethicists must pay special attention to bioethical issues and dilemmas arising from such trials.

They must also bear in mind that traditional medicine remains the most accessible and affordable system of health for the majority of Africans especially in the rural areas. For this reason African bioethics will need to expand its purview beyond Western biomedical systems. There are numerous legal and ethical issues surrounding the practice of traditional medicine that need to be addressed. The most prominent ones pertain to patient safety, the quality of health care, confidentiality and the question of biopiracy. And as Aceme Nyika recently proposed, traditional medicine, like orthodox medicine, should become a regulated profession (Nyika 2007). Indeed, there is an urgent need to develop an ethical code of practice, conduct and confidentiality for traditional medical practitioners in Africa.

Conclusion

We have seen that there are different conceptions of bioethics: bioethics in the sense of set of moral principles rooted in culture and bioethics as an academic discipline. What is not in dispute is the fact that Africa is lagging behind in academic bioethics. As we have already seen Africa has very few well trained

bioethicists and there is no vibrant culture of bioethical discourse among philosophers, scientists and medical practitioners. However, if we think of bioethics in the sense of a set moral codes embodied in a peoples' culture then such a bioethics exists in Africa because no society can survive for long without some grounding in morality. But whatever definition of African bioethics one prefers, for it to be authentically African, Africans must endeavor to fashion it according to their cultural norms as well as practical realities. In any case there is bound to be an overlap between the two approaches to bioethics.

As I have argued in this paper, some of the mainstream concerns, approaches and values of so-called Western bioethics may not be directly relevant to medical practitioners and researchers in Africa. African bioethicists must pay special attention to those bioethical problems that are peculiar to the continent of Africa and third world in general while at the same time not ignoring bioethical problems in the developed world emanating from cutting edge biotechnologies. In any case, as a number of scholars have argued, there exist certain fundamental ethical principles that ought to be applied across national and cultural boundaries.

Acknowledgements

An earlier version of this paper was read at an International Bioethics Conference which was held at Egerton University, Kenya in August 2008. I thank the participants for constructive comments and criticisms.

References

- De Castro, Leonardo (1999) Is there an Asian Bioethics? *Bioethics*, 13: 227-235.
- Fasiku, G (2008) African Philosophy and the Method of Ordinary Language Philosophy, *The Journal of Pan African Studies* 2(3): 100-116.
- Gracia, Diego (1993) 'The Intellectual Basis of Bioethics in Southern European Countries', *Bioethics*, 7(2/3): 97-107.
- Hellsten, S K (2008) Global Bioethics: Utopia or Reality? *Developing World Bioethics*, 8(2): 70-81.
- Marshall, P and Koenig, B (2004) 'Accounting for Culture in a Globalized Bioethics', *Journal of Law, Medicine and Ethics* 32, 252-266.
- Mbiti, J. *African Religions and Philosophy*. Nairobi: Henemann, 1969.
- Murove, F. M (2005) African Bioethics: An Exploratory Discourse, *Journal for the Study of Religion*, 18(1): 16-36
- Nyika, A (2007) Ethical and Regulatory Issues Surrounding African Traditional Medicine in the Context of HIV-AIDS, *Developing World Bioethics* (1): 25-34.
- Orika, H. O (1975) Fundamental Principles in African Philosophy, *Second Order: An African Journal of Philosophy*, 4(1): 44-45.
- Potter, V. R (1971) *Bioethics: Bridge to the Future*. Englewood Cliffs, N. J.: Prentice-Hall, 1971.
- Ogundiran, T. O (2004) 'Enhancing the African Bioethics Initiative', *BMC Medical Education*, 4:21.
- Sakamoto, H (2002) 'Towards a New Global Bioethics', *The Abstracts of Seventh Tsukuba International Bioethics Roundtable*, 15-18 February, 2002.

Social Construction of Value and the need for evolution to universal policy of harmonized social system

- Kayo Uejima,
Lablink, Kumamoto, Japan
Email: kayo@lablink.jp

Abstract

The paper will consider the process of how behaviour shifts from ideals of mind through the phenomenological process of perception that creates the implicit value and the manifest value. Which is more important, selection of value with the manifest value or selection of worthlessness with the implicit value as gestalt? As the social systems change, our values continue to change. The dilemma concerning ethical value arises in the boundary zone between social holon concerning society as a social organization and organic holon concerning life as a being. It is difficult that human beings transcend the boundary zone as a species. There are many bioethical issues in the boundary zone between the developmental process with self as social humans and the developmental process with microcosm as organism.

The paper draws upon integrative science and integrative strategy with the cosmological outlooks of Ervin Laszlo (2007) and Konstantin S. Khroustiski (2007) as transcendent and transcendental perspective. The research presented examines how the mechanism of our values may be developed by a universal approach with a holistic, humanistic and cosmological outlook and mind-set, and used to then create harmonized social systems for construction of sustainable society for this and future generations.

1. Introduction

Fundamental to the determining the value of life is determining how we ascribe value. Is value something related to the activity of our daily life? Is there a difference between daily behaviours and consciousness? Value is an incorporative process that is created by interactions between self, social system and society with social holon. Self-determination is important since each person must make value judgments between real behaviour and ideals. Social systems create norms of values concerning what is valued, and thus as our social system changes, we change our perception of what we think is worthless.

Darryl Macer(1998), wrote that "the imperatives of love includes respect for the ethical principle of self love which argues for empowerment of people so they can make choices according to their values." At the same time, life with universal love can be considered as a metaphysical transcendental actual entity.

I have already written how integrative policy and integrative science are foundations for universal policy that can lead to the creation of a harmonized society by the holistic approach in the September 2008 issue of

EJAIB. It described how a Free Think Tank on a website for integrative science is the first step of Lab Link design as integrative policy (Uejima, 2008).

In this paper the term “integrative science” means integration of science rather than integral science or unified science. Because, of the necessity of universal policy for construction of sustainable society is an edit of science that can contribute to a solution of the problems of modern issues rather than the discovery and development of new science and technology.

In this paper, I show a direction for solution of ethical issues by integrative science as one of the accomplishments that has emerged from daily dialogue and mutual education in Free Think Tank. In the Free Think Tank, I try to create integrative science that can contribute for construction of sustainable society. Such integrative science can show a direction for solution of ethical issues like environmental ethics and bioethics.

2. Extensions of BioCosmology and Evolution

First I would like to review a related philosophical theory. During the Second Joint UNESCO-Kumamoto University Bioethics Roundtable (13-14 December 2008), Dr. Konstantin Khroutski, from Novgorod State University after Yaroslav-the-Wise (Novgorod Velikiy, Russia) had advanced and substantiated his thesis of the three autonomous exploratory realms within the one whole sphere of modern culture. These realms (due to Dr. Khroutski’s appellation) are:

1) Transcendent *Holistics* – which is characterized by a *monistic* (realistic, but irrational) world outlook. *Holistics*, in its philosophical (ethical) or scientific form, – ultimately is reduced to the *transcendent – supersensible* – essence that organizes and rules the world (like God, or Matter, or a mystical force (Hegelian Spirit, for instance), or the notion of Information in modern complex sciences, etc). In rational expression, *Holistics* ultimately can be reduced to the philosophy of Plato, first of all, – to the existence of a transcendent (supersensible) essence that universally directs and develops the actual world.

2) Transcendental *Humanistics* – which is characterized by an *idealistic* (rational, but unrealistic¹) world outlook. *Humanistics* ultimately is reduced, in its any philosophical (ethical) or scientific form, to the *transcendental* – anthropocentric – conscious essences which are rooted in the basic ontological principle of dualism. This principle signifies the fundamental separation of a human’s reason (i.e., her/his idealistic psychological properties) from the constituting (human body) physiological components and the surrounding tangible world (nature, cosmos). In rational relation, *Humanistics* ultimately can be reduced to the philosophy of Kant, first of all, – to the transcendental (*a priori*, universal) properties of a human reason which are able of rational cognition and construction of the surrounding material world. As well, however, any other Western philosophical or scientific conception (that support the priority and the separation of a human reason from the surrounding world) might be used as the basis for *Humanistic* philosophical or scientific

explorations.

3) Biocosmological or anthropocosmist *Realistics* – which is characterized by both realistic and rational world outlook. *Realistics* ultimately is reduced, in its philosophical or scientific form, – to the fundamental principle of *immanent essentialism* (or fundamental functionalism), i.e. *intrinsic (inherent universal)* driving forces of a subject of the life on Earth, which (these driving forces, like Aristotelian *causa finalis*) are opened up before the subject due to (and in the course of) its/her/his *self-dependent purposeful active-evolutionary life activity*. Ultimately, the functionalist effects of this activity (and, hence, a person her/himself) are integrated *in the way of attraction* (absorption, assimilation, but not through a management or guidance) by a Transcendent Cosmic center (Absolute). In other words, we have the selection of a subject’s (person’s) self-dependently (“*from within*”) realized – *functionalist* – effects for their utilization on the higher organic evolutionary level, but not the guiding direction of a subject’s development “*from without*”, as it is in a Transcendent holism. Herein, the most typical example (and the metaphor) is the entire life (ontogenesis) of a cell (any organ) in the human (biological) organism. In rational relation, *Realistics* (Biocosmology, RealCosmism) carries on and develops further the basic principles of Aristotelian original philosophy – its realization in contemporary and future forms.

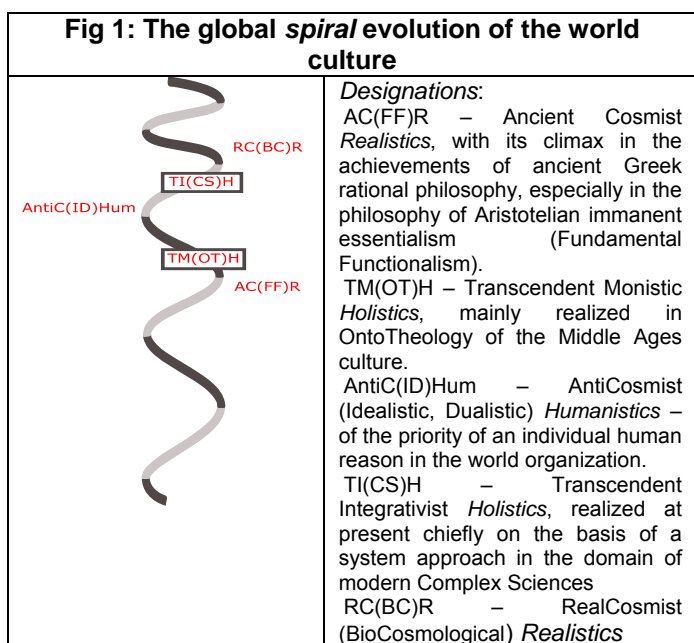
Substantially, Biocosmological conception is actively developed (and represented in the EJAIB, 2002–2008) by the author – Dr. Khroutski. Due to his conclusions, biocosmology is currently constructed as strategic guidelines for future universal (safe and prosperous) development of the global world. In its turn, the dominating form of modern philosophy and science is certainly the Western *Humanistics* that seeks the resolution of universal issues in the reasonable activity of a human being and democratic societies. In the domain of bioethics, Humanistic universalism relies substantially on the reasonable prescriptive activities of bioethical committees and associations. Likewise, transcendent *Holistics* is capable enough of making a claim of a true organizational activity that universalizes the world – herein on the basis of intuitive proposals of wise, morally perfect persons who have succeeded in pursuance of their natural (special) aptitude of realization states of mystical experience (the advanced states of self-transcendence and deep interconnection with the Absolute essence that govern the world – God, Matter, Information, etc.).

Therefore, basically all the three main macro-spheres of the world cognitive activity – Transcendent (*Holistics*), Transcendental (*Humanistics*) and Biocosmological (*Realistics*) – are universal in their strategic aims of self-realization. However, their universality is related to the position on a macro-evolutionary spiral of the world cultural development (Khroutski, 2008). Khroutski’s spiral evolutionary model includes the poles of Cosmism or *Realistics* (of the unity of Man with Cosmos) and the opposite AntiCosmism or *Humanistics* (of the separate existence of Human’s reason and material Cosmos). Substantially, the transition from one pole to another (within the one sphere of Earth’s life evolution and the one spiral ascendance of the world culture) is realized

¹ Inasmuch as *Humanistics* rejects the evidence of the unity of a human being with the world of her/his existence, which is a real (*a posteriori*, proved by natural sciences) truth.

every time through the transitional (intermediate, 'interhemispheric') cultural era. Thus, due to Khroutski's view, the transition from AC (Ancient Cosmism) to modern AntiCosmism was realized through the theocosmism (Cosmobiology²) of Aristotle – the basis (in the world cultural development) for the emergence of mediaeval scholastic *ontotheology* (philosophy of the Middle Ages), which, in its turn, has carried out the facilities (built the foundation) – for the further self-formation of the levels and epochs of Renaissance *ontoanthropology* and the *deism* and *mechanicism* of Enlightenment, of all – for the eventual emergence of modern anthropocentrism (humanism) and scientism, i.e. of current *Humanistics* – AntiCosmist fundamental rejection both of God and Cosmos, and, thus, – of the total rejection of a holistic world outlook.

In Figure 1 is represented the "the global spiral macro-evolution of the world culture", now in the modified form the *EJAIB* 2008 paper (due to the consultations with Dr. Khroutski):



Naturally, in the course of real evolutionary events and in the support of Khroutski's conceptual evolutionary model – we might claim that next stages and levels of the world cultural development (contemporary and future) will realize spontaneously the return of holistic (theocosmic, rational, integrative) world-viewing and the derivative construction of personalist and social development (policy making). Substantially, this is not only a substantial conclusion of the theorizing by Dr. Khroutski, but likewise is the actual challenge of our contemporary global life – to the urgent development of modern Integrativist (Holistic) approaches, which are basically founded nowadays on

a system methodology and are using the cutting-edge achievements of modern science and philosophy.

In the issue, aiming at the development of the original conception of "Universal scientific policy-making" which is realized with reference to Khroutski's BioCosmological conception, – I am going to realize in this paper, firstly, – an overview of the modern area of Integrativist (Holistic) explorations in philosophy and science; next, – to present the characteristics of my own conception of "Universal scientific policy-making"; and, in the outcome, to ascertain the correlation of BioCosmological and "Universal scientific policy-making" perspectives that might be applicable to the future well-being and development of a person and the society.

For solution of the primordial task concerning the structure of human being, evolution of society including individual human beings is necessary. In this case, evolution does not mean only natural selection or mutation evolution. Evolution of society including individual human-beings means intentionally creative transformation concerning the process of the present while including development for individual psychophysical transformation of the past. The evolutionary process as society including human beings means the dynamic process that is an integrated individual diversified process. Therefore, this evolutionary process links to the dynamics of system-transformation of Ervin Laszlo (2007) with Transcendent *Holistics*. He indicated about process in today's world as follows:

"Because of the unsustainability of many processes in today's world, the dynamic of development that will apply to our future is not the linear dynamic of classical extrapolation but the nonlinear chaos dynamic of complex-system evolution."

Thus because of uncertainty with complex system, whole process as world with unsustainability means that individual daily self-determination at the present affects whole decisions at the bifurcation point. In other words, behaviour by daily self-determination of each individual decides collapse or development, and sustenance of the whole world at present. Therefore the elucidation about the mechanism of value concerning emergence of self that underlies self-determination and value judgment is important.

This is connected to universal policymaking for Global Shift University that Ervin Laszlo (2008) indicated for creation of global sustainability. Thus for Global Shift University, phased universal policy with a perspective that can show tangible direction of strategy as business in industry is necessary for construction of sustainable society. I have already discussed this at the Second UNESCO-Kumamoto University Bioethics Roundtable.

3. Background of value

The Oxford English Dictionary defines "value" with as the following:

- 1) The regard that something is held to deserve, importance or worth.
- 2) Material or monetary worth.
- 3) (Values) principles or standards of behaviour.

² Khroutski orthographically distinguishes Aristotelian Cosmobiology and Russian *organic* Biocosmology (and his own conception of BioCosmology) from the entire (*non-organic*) contemporary (dominating) biocosmology that is chiefly occupied with the search of extraterrestrial civilizations.

4) The numerical amount denoted by an algebraic term; a magnitude, quantity, or number.

5) Music the relative duration of the sound signified by a note.

Thus, the meaning of value connects to deserving, material, money, behaviour, magnitude, quantity and number...etc. In short, when we use value as a word, we internalize the meaning as a word like above in our sub consciousness. The word with high frequency of social use becomes a symbol.

"Value" is one of the words that can represent the attributes of humans in modern society with material civilization. We create value by close connection with cognition.

4. The linkage of self and value system as system theory

1) *Consciousness as fundamental system of value*

The fundamental system of value can link to consciousness. Because all events concerning humans are implicated in consciousness. As a holistic perspective approach as an organism, Ludwig von Bertalanffy (1968), who was founder of general system theory, defined that system as complexes of elements standing in interaction. I add the following fundamental concept about system based on the definition of Bertalanffy (1968). A "system" is a non-reducible whole that is intricately organized by interactive constituent as a thing and occasions that is actual entities of flowing process. The whole system of an upper level can become a function or part system in whole system.

Gerald M. Edelman (2004) who is a Nobel-prize-winning cerebral neurologist mentioned about consciousness and information as follows:

"The consciousness is the flowing process, integrity and oneness as the neuron group that operates with decentration in the various domains of brains accomplishes dynamic process."

Information is decrease of uncertainty that is affected by some message. Arnold Mindell (2000) founded the Process Oriented Psychology for psychophysical self-awareness and body-awareness concerning metaphysics by integration of quantum theory, information theory, psychology and the Oriental philosophy. He mentioned about consciousness as follows:

"Consciousness is ability for observing each part of dreaming some aspects of consensus reality. And about above, consciousness is ability that can realize as part of oneself. In short, consciousness is a word concerning interactive relationships between part and other part."

2) *Value system as bio psychological system*

Thus the cognition system concerning explicated consciousness is linked to an Open System Theory of Values value system that Clare W. Graves (1970) had expounded. Graves (1970) showed level of existence in an open system theory with process of individual cognition including neural system as designation of existential states and existential problems of human. Before the foundation of the theory, Clare W. Graves (1959) researched the model or theory of ethical behaviour as the following viewpoint:

"The theory will be derived from the organismic point of view of Rousseau, Smuts, Schweitzer, Lecky, Goldstein, Maslow, et. al. These will be reinterpreted within Krech's concept of Dynamic Neurological Systems and the General Systems point of view of Bertalanffy. Also, it is assumed that as a growth phenomenon, ethical behaviour develops naturally through definable but overlapping stages. This being an orderly progression from a less complex to a more complex stage. The intellectual system, the motivation system, the feeling system, the perceptual system and the ethical system are all in contact. Psychologists study behaviour and one form of behaviour is ethical behaviour."

He analyzed conceptions of the mature adult personality in an operation that he gathered over a long term with psychological measures from above viewpoint for a long periods. Graves (1970) designed the eight levels as existential states and their existential problems. They are experientialistic, cognitive, sociocentric, materialistic, saintly, egocentric, tribalistic and automatic. With these eight levels, he suggested eight major value systems as follow. They are the reactive, the traditionalistic, the exploitive, the sacrificial, the materialistic, the sociocratic, the existential and the experiential value systems. After Don Edward Beck (1999) verified the The Emergent Cyclical Levels of Existence Theory of Graves, he founded Spiral Dynamics Integral as a multidimensional model for describing about evolution of society, transformation of human values, culture and emergence of human nature with values-based model of Graves. The existence theory of Graves affected Integral theory of Ken Wilber (2001) also.

Don Edward Beck (1999) designed eight vMEMEs (value MEME) with each colours as worldview codes in psycho-cultural archeology with Emergent Cyclic Levels of Existence Theory of Graves as a basis for value test. He mentioned about Spiral Dynamics Integral with vMEME as follows:

"Spiral Dynamics was an extension and elaboration of the biopsychosocial systems concept of the original Gravesian research. We must discover the complex, evolutionary models that can provide the meshworks for our contemporary state of fragmentation, find a way to monitor and measure our progress, and then create new and innovative ways to address the difficult problems that continue to hinder our full emergence on the planet."

I show the below about vMEME of his model in the following order based on colours and thinking, one from cultural manifestations and personal display.

- Level 8; Turquoise, Holistic, earth changes
- Level 7; Yellow, Ecological, natural systems
- Level 6; Green, Consensus, community
- Level 5; Orange, Strategic, growth
- Level 4; Blue, Authority, rules
- Level 3; Red, Egocentric, gratification
- Level 2; Purple, Animistic, rituals
- Level 1; Beige, Instinctive, protection

This is integrative developmental theory for emergence of self as evolution and development by vMEME with psycho-cultural archeology. In short, spiral dynamics integrative is a dynamic biopsychosocial system theory integrated between individual

developmental psychobiology and evolution of social culture.

3) Mechanism of Value that links emergence of self and self-destination

I have observed and promoted social relationships and the process between individual self-determination and society by information disclosure in public activity. By dialogue and research with many people in diverse organizations concerning public activity, I consider the mechanism concerning emergence of self as one of integrative science that can solve environmental ethics issue with the following fundamental questions: "How is self created at present?", and "What creates self at present?"

For solution of this question, we can link the vMEMEs of Beck to my nesting hierarchy (Uejima, 2008) as a matrix that can integrate multidimensional all maps (Figure 2). Because I think that all events and occasions concerning humans link to consciousness, I apply vMEME in these diagrams that describe interactions between process and system for emergence of individual self while linking relationships between social system and society at the present. Because I considered that all vMEMEs are implicated in all humans with microcosm as the being at the present by my research to public activity. I already had published the nesting hierarchy of self as matrix (Figure 2) in Uejima (2008).

However, since I don't adopt vMEME as a developmental theory, Level 1 cannot be located in the bottom. I apply vMEME in holon structure that can show interaction theory between process and system that focuses on the present rather than developmental theory. Therefore, I adopt Level 1 of instinctive thinking as the boundary zone between organic holon and social holons. Since the organic holon becomes implicit as a lower holon, it is difficult to generally recognize organic holon concerning transpersonal relations. Whether any social holon affects individual self more strongly is decided by interactive relationships between society and self through social systems of the present.

Meanwhile, since animism found in ethnic tribes like the Aborigines and Native American links to holistic cosmology together with taboos and rites, some animism cannot be easily segmented under a holistic or cosmological framework. Hayao Kawai (2002) who was the most famous psychologists in Japan indicated about the former. Arnold Mindell (2000) indicated about the later. Takao Takahashi (2008) showed that Japanese traditional animism had spirituality and ecological thinking together with taboos and rites. Hyakudai Sakamoto (2002) indicated that Asian people as tribes with a traditional long history is affected by implicit animism and traditional religions like Buddhism, Tao and Tantra in society and they have holistic trends. Therefore, I deleted Level 2 from my earlier diagram as the nesting hierarchy.

4) Summary

While I utilize vMEME by Beck as a base for the value system concerning emergence of self, I designed a nesting hierarchy of self as matrix of all occasion and

events (Figure 2). The value system of humans as organisms links to biosocial psychological systems and cerebral systems based on consciousness. Self is the integration of various social holon including the process as the part in whole with a nesting hierarchy. Self has subordinate and integrative function to the upper holon as social humans. While I utilize nesting hierarchy as the implicated structure concerning ethical issue, I elucidate about mechanism of value as below.

5. Individual value

We live in society with value judgments in daily occasions. We have continual process between behaviour and mind with value as the measure. Most people think only of process of value that we act after self-determination from value judgments with the measure of value thinking in mind. I hope that readers have insight about not only value as the measure but also the implicit process of value as itself.

Though we argue about the dilemma between value of mind and behaviour at special self-determination concerning the crisis of identity, most people do not argue about the difference of value between value of mind and value of behaviour in daily lifestyle. Because most of humans recognize only value thinking in mind as a value of oneself rather than value of behaviour.

The characteristics of human-being and the social task may exist in our individual daily lifestyle. I can show by the following examples gaps between mind and behaviour about health in daily lifestyle in Japan as follows.

1) The public consciousness for health care

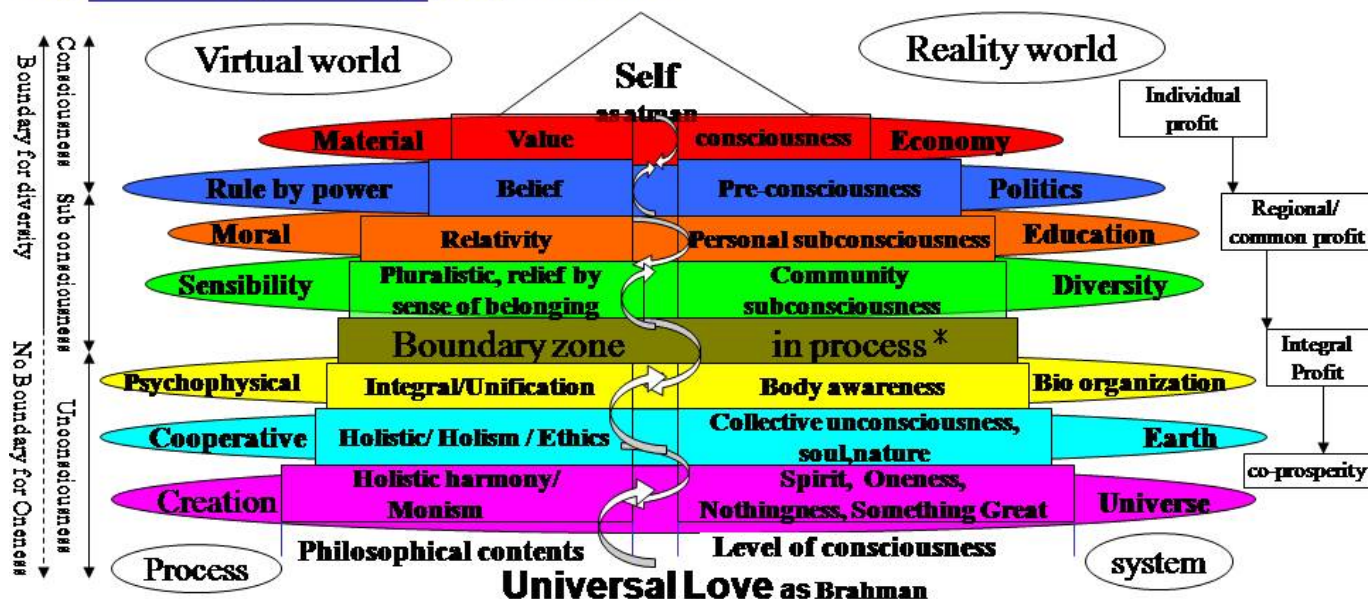
The Hyogo prefectural government announced the results of the "12th public consciousness of health care survey" in Japan in 2006. Hyogo prefecture has wide countryside areas and the city of Kobe located in the metropolitan area. The data includes opinions of both citizens in metropolitan area and citizens in the countryside. Therefore, I utilize this data as the typical data of Japanese sense of value concerning health care. Even if citizens answered about behaviour, the actions are based on consciousness without detailed investigation about the actual time of behaviour. This data shows behaviour that citizens think in mind. Therefore, each answers concern behaviour, value and information sources that can describe sub consciousness in mind rather than actual behaviour. This questionnaire allowed multiple answers, and some examples are shown in Table 1.

By these results, most citizens answered that they had good behaviour for dietary life, rest, sleeping and cleanliness. Most of people gain information concerning health care from mass media like TV and newspaper. Many people often read the newspaper in daily lifestyle. Hence, for health care, most of citizens think that they have reasonable behaviour for their dietary life.

Table 1: Public consciousness over health care (Hyogo prefectural survey, 2006; People were asked whether they gave a positive response to the questions and behaviours listed below, results recorded as %)

(1) Behaviour in daily lifestyle (what do you do to enhance your health?)		(2) Value about daily dietary (what important measure do you take?)		(3) Information source for health care (Where do you receive information?)	
Attention to dietary life	66.3	Consumption of vegetable	49.1	Television	80.5
Rest and sleeping	57.1	Three meals a day	42.6	Newspaper and magazine	64.1
Cleanliness of body	50.7	Balance diet	35.3	Family and friend	56.2

Figure 2: Nesting hierarchy of self as a matrix



* Boundary zone in process means less of boundary between boundary and no boundary.
Boundary zone express instinct of species.

This nesting hierarchy means holachy with holon structure. Each colour shows one holon.
This diagram shows the process concerning emergence of self by philosophical contents as thought.
At the same time, This also shows the system concerning emergence of self by organic system, psychological system and social system.
In sum, this diagram can link process and system for emergence of self.

Table 2: Transition of beverage consumption in Japan (based on the 1990 level as 100%)

	Potable Coffee	Regular Coffee	Instant Coffee	Green Tea	Tea	Carbonated Beverage	Coke	Fruit
1980	26	56	82	114	54	95	96	69
1990	100	100	100	100	100	100	100	100
1995	109	122	98	99	127	99	111	76
2000	115	129	100	112	127	94	114	89
2004	120	147	105	128	116	92	110	68

Table 3: Transition concerning numbers of shops of major chain store in Japan

	Convenience Store Chains	Department stores	Big Supermarkets
1991	9,699	478	1,683
1994	13,431	463	1,804
2002	32,431	362	1,668
2006	34,453	308	1,675

Table 4: Transition concerning the proportion of the population and hours in contact with media in Japan

	Rate of total population (%)			Hours for media (hours)		
	Audience of TV	Listener of radio	Reader of newspaper	Watching TV	Listening to radio	Reading newspaper
1995	92	15	50	3:40	0:22	0:22
2000	91	14	48	3:45	0:20	0:22
2005	90	13	46	3:54	0:19	0:21

2) Transition of annual per capita consumption of vegetables in Japan

People often think that consumption of vegetables is the most valuable aspect of their dietary life. The transition concerning annual consumption of vegetables in kg per capita can be seen from the food balance sheet by Ministry of Agriculture, Forestry and Fisheries between 1988 and 2003 as shown in the inserted figure below. The consumption of vegetable progressively decreases in Japan. The center of Japanese traditional homemade food was vegetables.

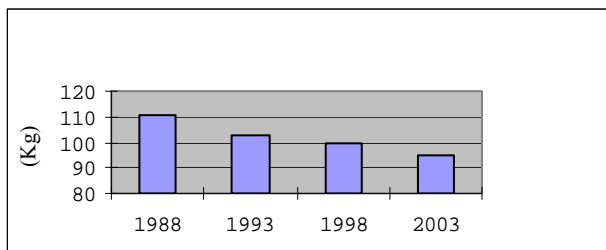


Figure 3: Annual consumption of vegetables (kg per person)

3) Transition of beverage consumption in Japan

The consumption of beverages as actual behaviour of citizens, can be seen from the annual consumption of beverage per capita from beverage consumption survey between 1980 and 2004 by Ministry of Agriculture, Forestry and Fisheries as seen in Table 2. This data is statistical with a score of 100 representing 1990. The growth of potable coffee and regular coffee between 1980 and 2004 is not positive.

Coffee is not a Japanese traditional beverage. However, most people think that oneself has good daily diet. Even if they perceive that vegetable is valuable, when we analyze consumption of vegetable and beverage, we can realize difference between value in mind and value of behaviour of citizens in Japan.

The behaviour of citizens selects coffee as valuable regardless of their minds. If they recognize the value of their behaviour as a daily custom in lifestyle, they

always have conflict. Awareness of the differences between value of behaviour and value of mind raises conflicts rather than dilemma in oneself. Humans as social human cannot always select the actions based on the deeper values in mind. The value of mind creates reality inside oneself with memory as thinking for oneself.

Human beings recognizes thinking time as time of reality. Because our brain creates a time scale by memory in each individual self. Linkage among perception, thinking and memory creates individual time-scale. Gerald M. Edelman (2004) mentioned about time as follows:

“Time is the product in the brain. The creatures with consciousness of higher-order produce the past by remembering and the future by image.”

The value of mind that we think for long periods creates reality for ourselves regardless of realization in society by behaviour. Therefore, I call value of mind as individual value.

Edelman (2004) mentioned about categorization of perception and memory in individual cerebral value system with neuron network as follows:

“The interaction between motor system and sensory system creates global mapping for both generalization of various signal and extraction of common characteristics. The complex global map creates perception categorization and concept. The memory has attribute as follows. The interaction between degeneracy and association produces memory in multidimensional network that the manifold circuit merges. The consciousness arises by the dynamic interaction between the memory and the perception of the present progressive. Human-being has structure concerning sustention of consciousness and learning by the ascending neuron system. Since the spreading with neuraxon in nucleus of brain-stem and hypothalamus creates widespread projection, transmitter can affect much neurons at the same time.”

In the other words, he argues about value system that regulates the response of neuron systems concerning motion control, learning and memory for

survival by function of neuron and structure of brain. The value system in the brain has the effect to bias synapse transmission. Thus, he showed theory of neuronal group selection concerning Neural Darwinism as comprehensive theory with both division and integration in the brain.

6. Social value

Though citizens think that vegetables with dietary life for health care is valuable, they select coffee. Why do citizens buy coffee rather than vegetables? We can observe the reality of lifestyle of citizens with tangible data of major chain stores in Japan. Major chain store in Japan like convenience store chains utilizes the Point-of-Sale system that a sale item, amount, gender and the age of the customer are instantly transmitted to the center for management of information. In short, since major chain stores in Japan analyzes behaviour of consumer by marketing, activity of major chain store is reflected by value as behaviour of consumer.

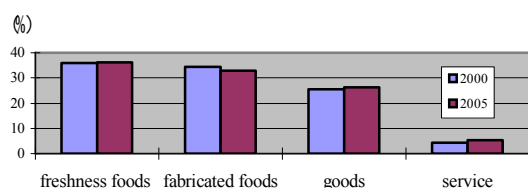
1) Transition concerning numbers of shop of major chain store

The data from the survey of commerce between 1991 and 2006 by Ministry of Economy, Trade and Industry is in Table 3. The convenience store chain increases in spite of decreasing of other major chain store. The numbers of big supermarkets where many citizens buy various fresh food including fresh vegetable decreased.

2) Rates concerning contents of commercial products in convenience shop in major chain store

The rates concerning contents of commercial products in convenience store in 2000 and 2005 in Japan were surveyed by the Japanese Franchise Association. Most commercial products in convenience store are foods. Especially, fresh foods like lunch box and beverage have the highest rate.

Figure 4 : Contents of commercial products



- *freshfoods like lunch box and beverage...etc
- * fabricated foods like cookies and gum...etc
- * goods except foods

This increase is because marketing of the convenience store could apply to the needs of consumers that wish for convenience, efficiency as well as sales of much kind of foods and daily goods. The major convenience store chain in Japan is located on road with parking in residential districts and open 24 hours a day. Though most of commercial products in the convenience store are foods, most of the food is packaged food for convenience of consumer. Therefore, most of Japanese people daily buy potable beverage with fabricated food or fresh food like lunch

box. Actually, we can also look on rapidly increasing of potable coffee in Table 2.

3) Transition concerning rate of doers and hours contacting to media giant

There is also a transition concerning the proportion of persons and hours in contact to a media giant with National time-budget survey between 1995 and 2005 by Nippon Hoso Kyokai (NHK). The data in Table 4 is from weekdays. This data is created by a questionnaire in order to investigate precise time-series actual behaviour. Therefore, this data can be utilized as data that can observe actual behaviour rather than consciousness in mind. In short, this data of time-budget by NHK as actual behaviour can be compared with data of public consciousness of health by Hyogo prefecture as sub consciousness

More than 90% of Japanese people watched TV for nearly 4 hours every weekday. The hours for watching on TV increased more than 10minutes between 1995 and 2005. Half of Japanese people read the newspaper for 22 minutes a weekday. In short, Japanese people gain social information from major mass media. Especially, TV affects Japanese people very much.

4) Construction of social value

In short, the major mass media keeps on creating value with public consensus of humans as an audience. For example, since commercial message of coffee enters the mind of the consumers, they may automatically buy it in a convenience store. Our body including brain may automatically have become addicted to caffeine by daily customs and visual stimulus of commercial message. Commercial messages are advertisements for sale and propaganda for ideology.

The authority of society as a social organization uses vision as a visual symbol and sound as an auditory signal with various social systems for transformation to information from stimulation in perception system. Since humans can usually recognize loneliness, stress and annoyance by various relationships through inter-subjectivity between objective and subjective, humans always keep on requiring pleasure for escape from loneliness by any comfortable and immediate stimulus.

Since we are vaguely aware that daily disjunction between behaviour and mind connects to awareness of daily conflict, we try to forget it. This may be because we feel fear about the conflict between reality of oneself and the reality world of society. There is just another fact on the other side of our fear as gestalt of value.

Various social systems including economic system with mass media and convenience chain store...etc affects the value of behaviour. The value of behaviour creates the world of reality in society through behaviour of humans rather than value of mind.

In the other words, social cognition in yourself affects to value of your behaviour. Social cognition becomes the implicit order for individual cognition process that is created in relationship with objects or others. Human beings have higher social cognition than individual cognition system through evolution.

Ralph Adolphs (2003) mentioned about social cognition that is an attribute of humans as follows:

"We understand ourselves in part by observing other people and their reactions to us. Our ability to think about other people might be an aspect of our ability to re-describe events from several points of view. Just as we can think about other people, we can step outside ourselves and think about ourselves, have conversations with ourselves, and imagine things happening to ourselves in the future."

In addition, he explained about the brains that are specialized for social cognition concerning evolution of species as follows:

"Under one hypothesis, the competition for social skills led to the evolution of cognitive mechanisms for outsmarting others, and fuelled the expansion of the human brain and perhaps the elaboration of certain neural systems. In support of this idea, there is a correlation across primate species between the size of their social group and the relative volume of neocortex."

Thus, since we have higher social cognition as a cerebral attribute of species, we are affected by the social system. I call the value of daily behaviour that individual selects by social cognition as the social value. Social value is not separated between society and oneself. There is social value in interactive relationships between the individual self and society. And social value creates our social "reality" through the social system. In short, the power-wielder in authority with society as social organization can affect and create value and duty with process of obedience of individuals as element in same boundary of social organization.

Some power-wielders and the enterprise keep on creating social value by value system as systematization. They can directly create social value in individual behaviour through perception system with visual sign like commercial message and symbols such as branding, social moral and faith.

After Ralph Adolphs (2003) have introduced various scientific experimental studies concerning social cognition, he mentioned about social signal and the brain process of social information as follows:

"There are parallel processing routes. For instance, pathways involving the amygdala and sub cortical structures can trigger rapid emotional responses, whereas slower emotional behaviour relies on prefrontal and parietal cortical processing that involves self-regulatory components. Second, there is extensive feedback between different processing levels, such that it becomes difficult to assign levels to any particular hierarchy. Third, stimuli are processed in the context of a background, baseline mode of brain operation that might already introduce substantial biases. The brain's baseline activity might reflect a mode of operation that is already tuned to interpreting and categorizing the world as social. About social cognition and emotion, emotions can be thought of as states that coordinate homeostasis in a complex, dynamic environment; in so far as one aspect of the environment is social, emotions will participate in regulating social behaviours. Most studies on social cognition have used visual stimuli, but it is clear that real-life social interactions draw on additional modalities. Whereas touch is an important social communication channel in other mammals, in modern humans it is relatively restricted to those with

whom we have the most intimate relationships. About social signal, audition provides important social signals in addition to language. The intonation of speech — prosody — can signal various emotions, and is recognized using some of the same structures that we use for recognizing facial expressions."

As identified above, I propose that symbols and signs as social signal can be transformed to information by perception categorization in neuron network of cerebral system.

7. The different between moral value and ethical value

Though we can create moral value by various social systems for sustentation of society, we cannot create ethical value by various social systems. The former connects to self as social humans in society as a social organization. The latter connects to life as an organism. We usually create moral value through each social position in society as social organization.

Conversely, authority as the top of social organization creates and teaches moral value for sustentation or improvement of society. Then they may design social systems that can spread and hand moral value from one of social value to individual value by construction of value system with systematization.

We can ask who or what creates our value? If we have children, we are the authority to children of oneself in a social organization as a family. We can create and hand on various moral values including moral value of children through a common system in social organization as family. At same time, as we belong to some social system as servient person with elements through social organization like nation, company or school, an authority in social organization can create or affect our moral value.

In short, we can become both an authority and servient person by our social position. While we always affect value as a process of each other by interactive social relationships, we keep on creating social system and society. Thus transformation of moral value as well as social value with social system by society as social organization derives from characteristics of human beings.

Stanley Milgram (1974) who was a famous psychologist proved about obedience of individual human to authority. He indicated about obedience to authority as follows:

"The humans as social animals have the implicit condition. That is creation of mentality for transforming action of obedience by authority, dependence of self-image to authority, tuning of value and cognition for accommodation to authority by autonomic forfeit of answerability. With channel of symbol, reward and punishment, ideology as framework, humans recognize authority."

If authority changes value systems of moral value as well as social value by improved systematization for sustentation of society, most humans immediately may transform norms of value judgment or moral value as well as social value.

8. The manifest value or implicit value as gestalt

If we spend maximum hours for sleeping, sleeping is the most valuable occasion for our health. If we spend with family for long time in the day, the family is the most valuable for us. Citizens answered rest and sleeping as actions for healthcare in daily lifestyle (Table 1). If we spend maximum hours for working, working is the most valuable occasion for us. At the below, I analyze the value concerning sleeping.

1) Transition concerning rate and hours for sleeping or working at weekday in Japan

The data concerning sleeping is based on answers of all people to Nippon Hoso Kyokai (NHK) surveys (Table 5). The data concerning working is based on answers from only those working. The workers who work more than 10 hours a day increased in Japan. Hours for sleeping gradually decreased. Bedtime for most people is later than 22:00.

About sleeping, most people of advanced nations have only short sleeping hours. For example, 44% of babies of Japanese on their second birthday went to bed after 22:00 in 2004 (Data from findings of the Japanese Society of Child Health). Children of between 8 and 9 ages have 9.2 hours of sleeping time. Junior high school students have 7.5 hours of sleeping time. Junior high school students have 6.6 hours of sleeping time. The value of sleeping is decreasing in Japan.

2) Transition concerning rate and hours for daily activity of women and men at weekday in Japan

Table 6 shows that women perform most of the chores and child-rearing for families in Japan. Shopping gradually increases in both women and men. The comparative value that parents take care of health for children also is decreasing in Japan with a bad condition of sleeping of young children.

3) Summary

Many citizens think that they have rest and sleeping as behaviour for health care, as shown in Table 1. However, hours of sleeping decreased as shown in Table 5. And shopping hours of both women and men increase.

About working, we work with workfellows in organization for long hours while deleting sleeping time. Sleeping and working is necessary for living in society. The work is the most valuable for us. Most people mention working in order to get money for living. Earning more money and high social position becomes the rich lifestyle rather than sustentation of life for upper-middle class of the advanced nations. The money or imposition by social system is the most valuable item for many of us.

When citizens select work with reduction of sleeping time as value of behaviour, they select sleeping that is worthlessness or ignorance to value as gestalts.

There are both manifest value as behaviour and implicit value as gestalt in our selection. The former is

work for profit or imposition by social system. The latter is sleep for health by individual psychophysical system.

Which is more important, the manifest value or implicit value as gestalt? By the changing social system, our value continues on changing. Because social system creates a norm of the value concerning profit or control for sustentation or improvement of each society as organization.

For instance, we can observe value in macro economics in Japan as case study about above. The economic activity concerning supply and demand with money directly expresses manifest value with data as integration of our individual value as data.

When Japan was in a rapid economic growth period, consumer-electronics products were the most valuable. When Japan was in bubble economy period, both land and financial asset were the most valuable.

When Japan is in information-communication technology innovation, numbers and quality of communication and information is the most valuable. If our social system changes, worthlessness changes value. In short, the changing of social system links to changing of value. Because we have self as social animals.

One of the frontiers of neuroscience at the present is Social Neuroscience that John T. Cacioppo and Gray G. Berntson (2002) had founded in 1992. They defined social neuroscience as follows:

"Social Neuroscience studies the relationship between neural and social processes, including the intervening information-processing components and operations at both the neural and the computational levels of analysis. As such, work in social neuroscience builds on work in the neuroscience, cognitive science, and social science. In addition, since they think that humans are social animals, they mentioned both new definition and process concerning relationship of society and individual about memory as follows. Memory makes possible not only the formation of stimulus associations and learning but of social connections, alliances, norms, traditions, culture, and histories that link us to minds of others present and past. This makes possible actions, thoughts, and feelings exceeding anything that could be accomplished by any individual alone. Social relationships subtly embrace us in the warmth of self-affirmation, the whispers of encouragement, and the meaning of belonging. Disruptions or the absence of stable social relationships, in contrast, disturb our minds and biology as few other events can. Elective brain injuries and imaging studies also reveal important links between the brain and social context."

As identified above, I propose that we have social neural-network for boundary with species as higher primates. We establish self as social humans by the relationship between neural network and social processes, including the intervening information-processing components and operations.

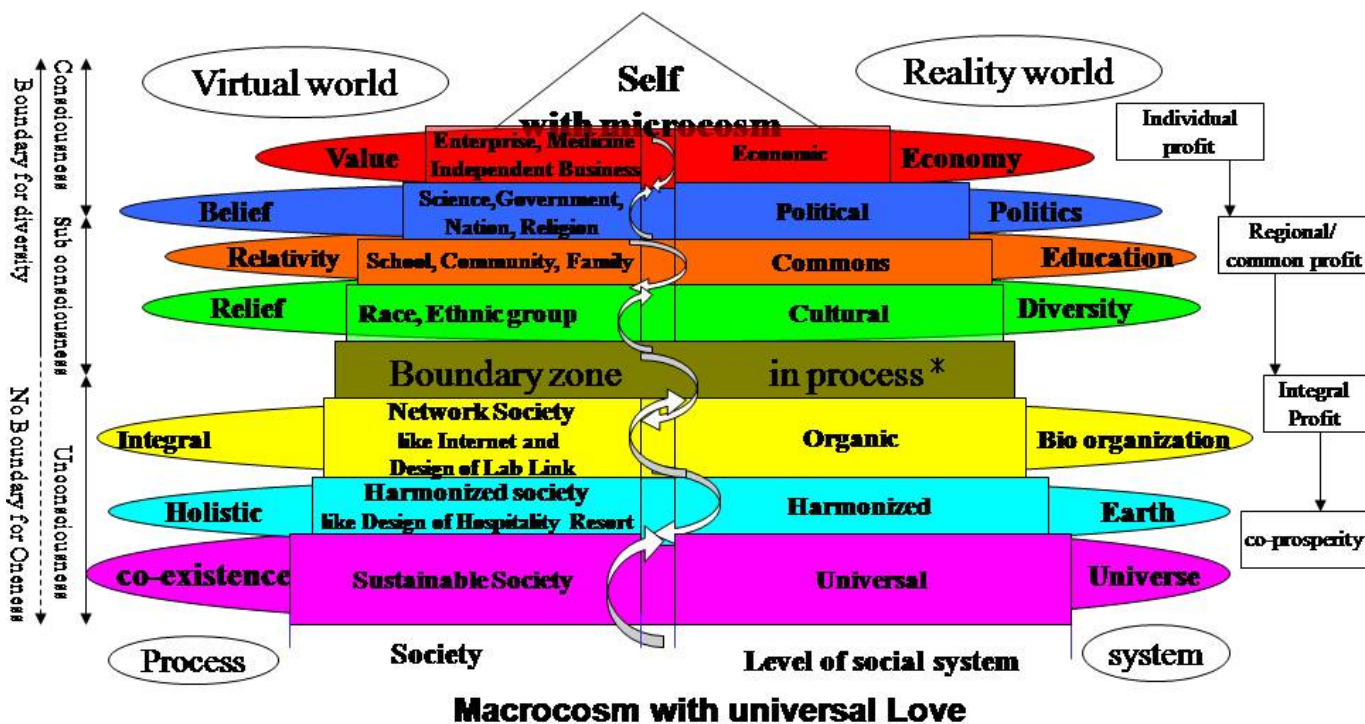
Table 5: Transition concerning proportion of the population and hours for sleeping or working

	Proportion (%)				Hours for daily activity (hours)		
	Person working more than 10 hours	Bedtime (22:00 - 23:00)	Bedtime (22:00 - 23:00)	Bedtime after 00:00	Working	Sleeping of working person	Sleeping of all people
1995	17	34	69	85	7:22	7:15	7:27
2000	21	33	67	83	7:34	7:07	7:23
2005	22	34	68	84	7:31	7:05	7:22

Table 6: Transition concerning proportion of the population and hours for daily activity of women and men

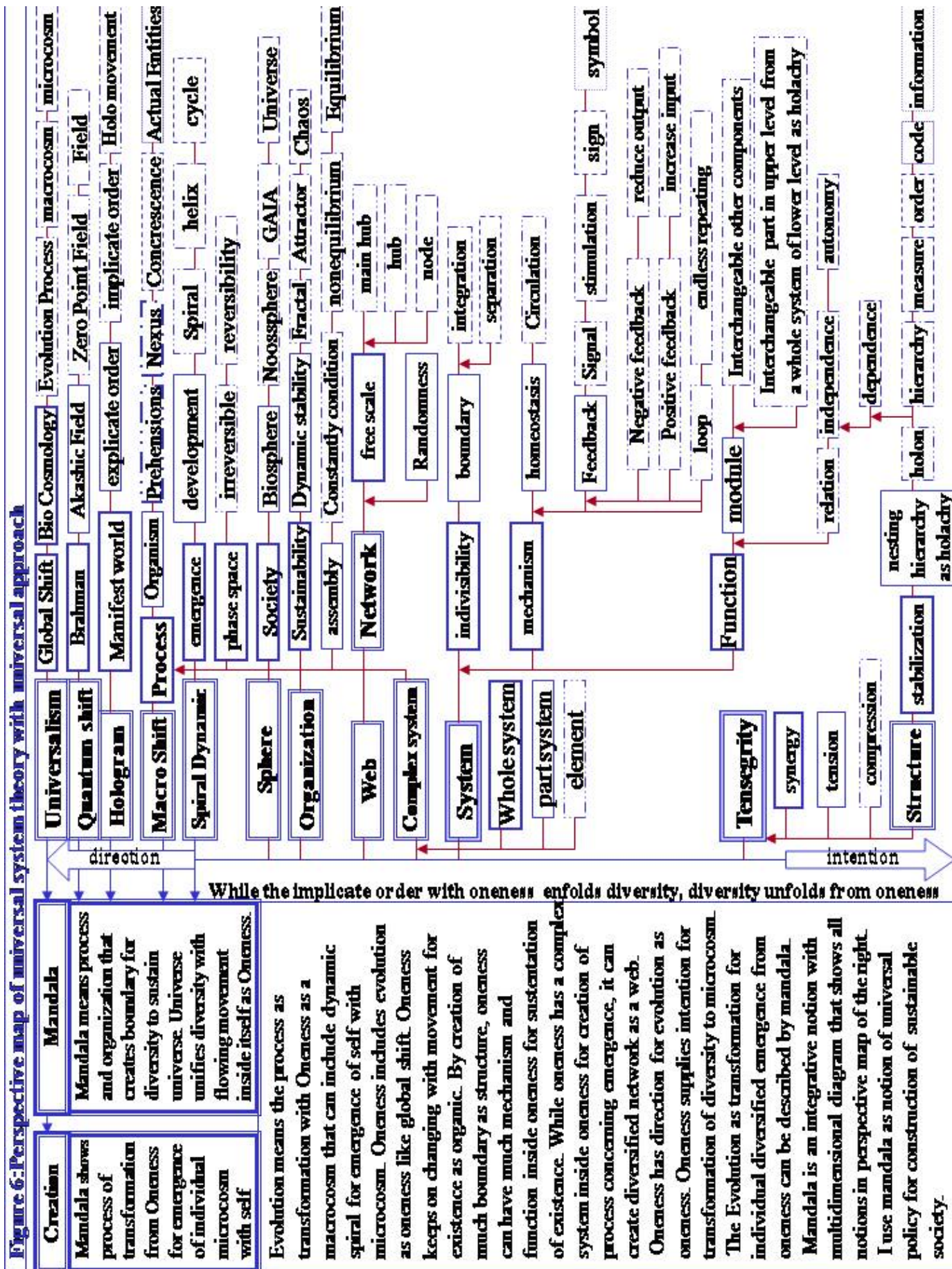
	Hours for daily activity by women (%)			Hours for daily activity by men (hours)		
	Chores	Shopping	Child-rearing	Chores	Shopping	Child-rearing
1995	2:23	0:33	0:52	0:08	0:08	0:06
2000	2:21	0:35	0:41	0:09	0:09	0:05
2005	2:24	0:35	0:44	0:11	0:12	0:06

Figure 5: Nesting hierarchy by interaction of society, social system and self



* Boundary zone in process means less of boundary between boundary and no boundary.

Boundary zone express instinct of species.



9. Value system as systematization by policy

Ludwig von Bertalanffy (1967) thought of value as a symbol with process of perception including phenomenology. Humans use words as symbols while connecting signs like face and repeating action. When symbols connect to memory with signs in the cerebral network by repeating, symbol and sign implicates in sub consciousness. The symbol that we call value automatically links to selection of a boundary. The word that we call value has already become a symbol by high frequency of social use. When humans use words with high frequency of use as symbols, humans transform the symbol into a signal within the cerebral network by repeated action. While we use value, our sub consciousness always grasps deserving, material, money, behaviour, magnitude, quantity and number etc, as the meaning of value.

On the one hand, when we suggest a value system by policy, we consider value system as systematization. In the case of this, the most risk is intention to control individual value by social systems like totalitarianism and communism. In short, argument about value system by policy can link to policy-making or desire in order to control sub-consciousness of citizens.

Value **links** both a process and policy. This is because value as universal policy connects to the process in self of human being. When we argue about value systems or principles and standard of value for sustaining structure in policymaking, we subliminally consider about improvement of social systems for stabilization and maintaining the structure of society that we belong to.

Even if we involuntarily use value systems as systematization in policy, we subliminally may control sub consciousness of citizens to sustain and improve each society as various policies or strategies.

Authority as each social organization that can design social systems can intentionally or involuntarily create all value from social value to individual value by construction of value systems with systematization. Value systems as systematization are created by only thinking of a method as systematization of knowledge.

Only thinking method has a risk. About this risk, I quote an important message of Jiddu Krishnamurti (2001) who was a famous modern Indian philosopher as follows:

"The brain is the source of thought. The brain is matter and thought is matter. Can the brain - with all its reactions and its immediate responses to every challenge and demand - can the brain be very still? It is not a question of ending thought, but of whether the brain can be completely still? This stillness is not physical death. See what happens when the brain is completely still."

10. Can we solve ethical tasks with value of life?

David Bohm (1980) suggested that cosmology is important as the being with wholeness. He indicated about life as follows:

"The life is integral including all as macrocosm. The space and time become implicate and enfolded the life. The life is enfolded by holo movement. Even if life does not manifest as actual entities, life is implicit in situation

of inanimate being. When inanimate being is given information, life manifests as the unfolding process and is implicit as the enfolding process after death."

I suggest that Life is movements that transcend space and time as itself. Life is a macrocosm as an actual entity that transcends all boundaries. Life is a macrocosm with holo movement of wholeness as itself. We keep creating a lot of the deaths and the lives of cell or DNA in oneself as being with extensive continuum of all moments including this moment as organisms. While we also have a lot of the death and the lives in oneself, we keep on living in transcendence of the death and the lives with continuation of this moment.

Is there a difference between the death and life as the being with actual entities? There is only transformation with information, force and energy as movement repeating of the death and life in us. When we argue about the value of life, we involuntarily select a boundary with a symbol that we call value. Therefore we cannot grasp life as macrocosm by concept of value.

11. Value as a process with social holon

Arthur Koestler(1978) created holarchy as organic hierarchy by self-organization of biotic organ as follows: *"The living matter is the integral constructed by sub whole like digestive system and circulating system that continuously can diverge to organelle from individual cell, to individual cell from organization and to organization from organ. Organism has multilevel hierarchy that sub wholes create layers. This multilevel hierarchy is holarchy. The sub whole means holon that have both part and whole. The holon as part in whole has subordinate and integrative function to the upper holon. The holon as whole in part has quasiautomatic assertive function to the lower holon. Holon has code and canon that controls structure and function. Holon also has flexible strategy in order to accommodate environment."*

While he uses holon structure to characteristics of human-being in both organisms and society, he especially pay attention about both destructibility by group mind and defect of cerebral nerve system as species. He explained about the above as follows:

"The group mind derives from desire for belonging by dependent experience of nurturing for long period of early childhood. The potential trend creates group mind as social holon in society. This characteristic of group mind is belief that means communion of common faith system. Therefore organization of belonging, various authorities and various social systems including political system influence individual humans in society by integrative function of social holon. Individual human transforms to assimilation between authority or mass and self by moral, faith, cord and tradition with symbol system and emotional response. The holarchy of society is constructed by social holon like above."

We have self as social animals. We have social neural-networks for boundaries with species as higher primates. We establish self as social humans by the relationship between neural network and social

processes, including the intervening information-processing components and operations.

Self is the integration of various social holons including process as part in whole has subordinate and integrative function to the upper holon as social humans. Each social holon has a self as social animals as shown in Figure 5.

- 1) Economic holon: economic material value that links to reward and benefit.
- 2) Political holon: belief that links to control of someone by acquirement of power.
- 3) Educational holon: educational morals that links to relativity.
- 4) Diversity holon: there is relief by belonging that links to stabilization and dependence of mind.

Value has incorporative processes that are created by interactions between self, the social system and society in the nesting hierarchy as holarchy with various social holon (Figure 6).

I suggest value as a process from the perspective approach of holon structure concerning self. We recognize value that is created by not only interaction between social system and social culture but also interactive relationships between individual persons and bureaucratism of top-down hierarchy in all society. If social system or social culture changes newly, our values also change soon. Since symbols and signs in perception systems are attributes of humans with implicit value, value closely connects to the process of self as social humans. Therefore, I propose a shift to the value as a process from the value system.

12. Primordial cause of ethical issues

How does difference occur between behaviour and mind? We can notice that there is self-determination concerning value judgment between real behaviour and mind. What links to self-determination?

In short, the process of shift concerning behaviour from mind connects to the process of perception concerning phenomenology that creates implicit value and manifest value. This also links to the boundary as social holons that social systems create.

Organic holon as life that links wholeness as macrocosm forms the bottom as structure of self. The life as the bottom of a structure can enfold self that is created by process of all social holons. The self that organic holon enfolds becomes a microcosm. However, we as self cannot perceive in our usual social condition that we are microcosm and macrocosm. Because, there is boundary zone that links to instinct of species. It is difficult that we transcend developmental processes and systems with organs as instinct with species.

However, life as the being of organism is a transcendental actual entity including individual organization with material from the field of metaphysics. In short, life is a macrocosm with holo-movement of wholeness as itself.

The dilemma concerning ethical value arises at the boundary zone between each holarchy. In short, the primordial cause of the ethical issues is the primordial task as structure of human-being rather than task of social system and society.

Especially, the dilemma concerning bioethics and environmental ethics arises in the boundary zone of process between social holon and organic holon. In

sum, the difference between value of life and life of macrocosm links to the difference between social holon and organic holon.

Therefore, if we keep on using only self-concept and value with social holon, we cannot search for primordial solution of various ethical tasks about especially bioethics and environmental ethics.

13. Shift to Universal Love with Life from value as symbol

I think the following key concept is the background of universal policy that can create a sustainable society by the 23rd century. I propose that we use Universal Love with Life as the bottom of the structure, as well as value as a process, instead of a value system. About the ethical basis of corporate social responsibility, Macer (1998) mentioned as follows:

"The imperatives of love respect for the ethical principle of self love supports empowerment of people so they can make choices according to their values. But even if we make the goal as serving love or happiness, it is very difficult to assign values to different people's interests and preferences."

Our psychophysical body is organized by many cells and networks of cell. Each cell has their own love and life. We are multicellular organisms. Our body has many parasites also in itself. We call that we have life of only one to each other. We are the integral of innumerable lives rather than only one.

Many lives in our body always contribute to keeping on living as oneself without hoping to receive thanks and return. Nobody can love for us without complaining and hoping except innumerable lives in us. We with self are Love with microcosm as a being that emerges from macrocosm. This is formation of implicit Universal Love in oneself. Naturally, the final achievement of value as process is Universal Love with Life that is implicated into the bottom of holon structure as the nesting hierarchy (Figures 5 and 6).

I express that Universal Love as Brahman by philosophy implicates in all thing, events, matters, and time-space, as information field (Figure 6). The field has a lot of information. Field is a medium for transformation and metamorphosis with information. As the field of information by philosophy, I propose the field that Universal Love as Brahman that implicates into the bottom of holon structure as the nesting hierarchy can enfold all events, occasions, substances, and time-space.

The above concept is similar to Akasic fields by Ervin Laszlo (2004). Ervin Laszlo is a pioneer of modern cosmology and founder of system philosophy proposed the Akashic Field for an integral theory of everything. He defined Akashic Field about cosmic field as an information field. He described the universe, Akashic field and information as follows:

"The concept of a universe is constituted in the embrace of continuous fields and forces that carry information as well as energy. Information is a real and effective feature of the universe. Information is produced by the real world and is conveyed by a fundamental field that is present throughout nature. Universe becomes the informed universe that is full with information and energy."

I show as holon between yellow and pink coloured holons [see pdf version of *EJAIB* for colour] from Brahman that is outer boundary in this diagram. The upper holons above instinct of species show social holons concerning self as social humans. The lower holons below instinct of species show organic holons concerning life as the being. Instinct of species becomes the boundary between metamorphosis and transformation as information concerning life or social humans.

The reality with all creatures as actual entities has life in body as the being. The reality with life transcends value as process or value system compared to self as social humans creates.

14. Conclusion

First let us conclude about the mechanism of value by integrative science. Figure 6 perspective map sums up the mechanism of value with perspective integrative science as a conclusion. The mechanism concerns homeostasis that emerges from circulation with feedback of various functions. The mechanism with homeostasis contributes to the invisibility of the boundary with the system. In sum, when we grasp our self by systematic and systemic perspective, we can grasp value from the mechanism with self.

As the summary with mechanism of value, since value becomes an integrative mode of the developmental process in humans, value has aspects as a mode that can transform dynamic information depending on the linear transition of time-scale. Therefore, about this aspect with value, developmental theory can explain the concept of the value system with a dynamic spiral.

Meanwhile, as a comprehensive perspective that can include value system, we can utilize system philosophy by Ervin Laszlo with process philosophy as follows. In case of systematic and systemic perspective, the self implicates a dynamic non-linear system with dynamic complex system as well as the diversified bifurcation with Macro Shift by Ervin Laszlo (2008). In this case, value means a module that becomes interchangeable with other components. The value has the aspect of module as function in system with self.

In other explanation about mechanism of value by integrative science that includes dynamic spirals, dynamic system theory, Macro Shift and holackey by Arthur Koestler (1978), the value with module in process of self becomes an interchangeable part in the upper level from a whole system of lower level as holackey.

Self is the integration of various social holons including process as part in whole. Self has subordinate and integrative function to the upper holon as social humans. Value emerges through social system by interactive relationships between human and society that is the process of self. Though value emerges as the upper holon of process with self, the value can be not be lower than the holon of human beings and organic holons.

In short, while value is an integrative mode of developmental process in social humans, value is also an integrative module in the process of self. The value

becomes an interchangeable part in the upper level that emerges as integration from a whole system of lower level as holackey.

Meanwhile, social holons as self with social humans includes biosystems with organisms and social systems with self. While we have implicit memory and development of the past in the process of the present, the value emerges with the process of self that is created through social systems by relationships between social cognition, society as social organization including individual person and external environment including nature at the present.

Secondly, the evolutionary process is important as a process for transformation for construction of a sustainable society. Human beings have a microcosm as well as self. This will link to the transformation of the basic function of cerebral cognition system and psychosomatic perception system with human beings as species. If the form of brain as matter follows function in a new cerebral cognition system and new psychosomatic perception system, we can gain evolution as human-being that lives in both society and nature.

In other words, realistic evolution that we need for construction of a sustainable society is intentionally creation of our psychophysical transformation by oneself. Evolution that we wish as a species among long history of human-being is not development or variation of genes, cells and organization for advance as adaptation. Evolution that we wish as a species is creation of harmony not only between oneself and microcosms but also between oneself and other organism as macrocosm.

Therefore, the first achievement target for individual transformation for the evolution process of the whole world is daily self-awareness to process and relationship between social system and oneself concerning social cognition. The first individual achievement target is awareness by daily insight to Universal Love with Life. The first achievement target as society is construction of a democratic network that can link diversified organization by information disclosure and express of individual self-determination. If you are interested in the Free Think Tank please contact me and Lab Link.

Acknowledgments

I extend gratitude to Dr. Darryl R. J. Macer who teaches and assists about subject of ethics and policy to me. I extend gratitude to Dr. Konstantin S.Khroutski who teaches and assists about subject of philosophy and sociology to me at everyday by website. I extend gratitude to a lot of people including Dr.Jasdev Rai, Dr. Yasuhiko Lee, Dr. Masakazu Kitano, Dr. Takao Takahashi, Dr. Keiji Sakaguchi, Dr.Seiji Komori, Dr. Yoshimasa Kato, Dr. Takashi Yano, Dr. Kiyoshi Ikeda, Dr. Kihachiro Nakajima, Dr. Tamotsu Suzuki, Dr. Kouya Ogino, Dr. Kazushige Kaba, Dr. Kanji Yoshida, Mr. Eiji Tsutsui, Mr. Naomi Nomoto, Mr. Hajime Nonaka, Ms. Sakiko Onaka, Mr. Toshiaki Murakami, Mr. Kensei Tomita, Mr. Seiichiro Matsuoka, Mr. Yoshiaki Sakaguchi, Ms. Yoshiko Soejima, Mr. Hidehiko Kamiya.

I extend special gratitude that guides to me, forest and natural creatures with GAIA. You always guide me. I don't forget your guide and support to me. Finally I thank my universal love and life as my microcosm and my parents very much.

References

Some reference is translated into Japanese.

- Albert, Laszlo Barabasi (2002) "*Linked: The New Science of Networks*", Perseus Books Group, 「ネットワーク思考ー世界の仕組みを読み解く」, NHK出版
- Adolphs, Ralph, (2003) "*Cognitive Neuroscience Of Human Social Behaviour*", *Nature Review Euroscience* Volume 4
- Arthur, Koestler (1978) "*Janus*", A Summing Up :Random House, 「ホロン革命」, 工作舎
- Arnold, Mindell (2000) "*Dreaming while awake*", *techniques for 24-hour lucid dreaming*, Charlottesville, VA.: Hampton Roads, 「24時間の明晰夢」, 春秋舎
- Beck, Don Edward (1999) "*The Search for Cohesion in the Age of Fragmentation From the New World Order to the Next Global Mesh*", Center for human emergence initiating action for global transformation,
- von Bertalanffy, Ludwig, (1968) "*General System theory: Foundations, Development, Applications*", New York :George Braziller, 「一般システム論」, みずす書房
- von Bertalanffy, Ludwig, (1967) "*Robots, Men and Minds Psychology in the modern world*" 「人間とロボット」, みずほライブラリー
- Bohm, David Joseph (1980) "*Wholeness and the Implicate Order*", London: Routledge, 「全体性と内臓秩序」, 青土社
- Christian, Beyer (2007) "*Edmund Husserl*", Stanford Encyclopedia of Philosophy
URL : <http://www.humanemergence.org/home.html>
- Edmund, Husserl (1931) "*Cartesian Meditations*", Springer USA, 「デカルト的省察」, 岩波書店
- Gerald, Maurice Edelman (2004) "*Wider than the Sky: The Phenomenal Gift of Consciousness*", Yale Univ. Press, 「脳は空より広いか」, 草思社
- Graves, Clare W. (1959) "*An Emergent Theory Of Ethical Behaviour Based Upon An Epigenetic Model*", Schenectady, New York.
- Graves, Clare W. (1970) "*Levels Of Existence: An Open System Theory Of Values*", *Journal of Humanistic Psychology* 1970; 10; 131
- Hayao, Kawai (2002) 河合隼雄, 「ナバホへの旅～たましいの風景～」, 朝日新聞社
- Jiddu, Krishnamurti (2001) "*What are you doing with your life?*", Krishnamurti Foundation of America 「人生をどう生きますか?」, コスモスライブラリー
- Laszlo, Ervin (2004) "*Science and the Akashic Field: An Integral Theory of Everything*", Inner Traditions International, 「叡智の海」, 日本教文社
- Laszlo, Ervin (2007) "*Paths to Planetary Civilization*", kosmos journal, Aip.9
- Laszlo, Ervin (2008) "*Quantum shift in the Global Brain*", Inner Traditions Rochester, Vermont
- John, T. Cacippio, Gray G. Berntson (2002) "*Social Neuroscience*" *Foundations in Social Neuroscience*, pp4 - pp.10.
- Khroutski, Konstantin, S. (2003) "*In Search Of The Universal Personalist Approach In Biomedicine: A Cosmist Hypothesis*", *Journal for Interdisciplinary and Cross-Cultural Studies* Volume 3.
- Khroutski, Konstantin, S. (2006) "*Personalist Cosmology as the Ultimate Ground for a Science of Individual Wellness*", *Ultimate Reality and Meaning*. 29/1-2, 2006.
- Khroutski, Konstantin, S. (2007) "*Arousing a Dspute over BioCosmology.Areply to Stephen Modell*", E-Logos Electronic Journal for philosophy
- Macer, Darryl, R. J. (1998) "*Bioethics is Love of Life: An Alternative textbook*", Eubios Ethics Institute.
- Macer, Darryl, R. J. (2006) "The Globalization of Ethics and Balancing Cultural Diversity with Universal Bioethics ": *Philosophical Perspectives on Globalization, History and Philosophy* Volume 5, APPEND.
- Mishra, Godavarisha (2003) "*Advantia in theory and practice*", Oxford Center For Hindu studies Lecture One.
- Oxford University Press (2003) "*The Compact Oxford English Dictionary*".
- Pribram, Karl, H (2006) "*What makes man human: thirty-ninth James Arthur lecture on the evolution of the human brain,1970*", *Journal of Biomedical Discovery and Collaboration*.
- Sakamoto, Hyakudai, (2002) "*A Challenge to the Concept of Human Rights and Human Dignity –From the Philosophical Viewpoint of the Global Bioethics*", *GLOBAL BIOETHICS* Vol. 15 - N. 3.
- Singer, Peter (1993) "*How are we to live? – Ethics in an age of self-interest-*", Reed International Book Australia Pty Ltd.,Victoria, 「私たちはどう生きるべきかー私益の時代の倫理」, 法律文化社
- Singer, Peter (1993) "*Practical Ethics – Second Edition*", Cambridge University, 「実践の倫理」, 昭和堂
- Stanley, Milgram (1974) "*Obedience to Authority ~ An Experimental View ~*", Harper Collins Publishers 「服従の心理」, 河出書房新社
- Stanislav, Grof (1982) "*Ancient Wisdom and Modern Science*", *Ancient Wisdom and Modern Science* (SUNY Series in Transpersonal and Humanistic Psychology: State Univ of New York Press.
- Todorovic, Natasha (2002) "*The Mean Green Hypothesis: Fact Or Fiction?*", Natasha Todorovic and NVC Consulting
- Whitehead, Alfred North (1919) "*The concept of Nature*", The tarner Lecture, 「自然という概念」, 松籟社
- Whitehead, Alfred North (1929) "*Process and Reality*", New York: Macmillan. 「過程と実在」, 松籟社
- Wilber, Ken (1977) "*The Spectrum of Consciousness*", The Theosophical Publishing House, 「意識のスペクトル」, 春秋社
- Wilber, Ken (2001) "*A Theory of everything (philosophy) Theory of Everything: An Integral Vision for Business, Politics, Science and Spirituality*", Shambhala, 「万物の論理」, トランスビュー
- Wilber, Ken (1997) "*The Eye of Spirit: An Integral Vision for a World Gone Slightly Mad*", Shambala, 「統合的心理学への道」, 春秋社
- Yamawaki, Naoshi (2008) 山脇直司, 「社会とどう関わるか～ 公共哲学からのヒント～」, 岩波ジュニア新書

The Relation between Normative and Descriptive Ethics – A Consideration of Empirical Bioethics

- Jon Vegar Hugaas, Cand.theol., Dr.art.
Associate professor, Department of Social Studies
Faculty of Social Science, University of Stavanger,
Norway
www.uis.no/frontpage
Email: jon.v.hugaas@uis.no

Abstract

This article offers a discussion of the relevance of empirical studies to normative ethics focusing on the new trend in bioethics called empirical bioethics. The author sees this trend as an answer to a call made by anthropologists decades ago that ethicists should be more aware of the situatedness of the moral institution of life. Through a discussion of two opposing views expressed in the final publications of the EU-funded EMPIRE-project, the middle way is sought between the misconception of bioethics as pure philosophy on one side and the misconception of bioethics as sociology on the other. The author argues that empirical studies may be of relevance to the normative enterprise in at least three ways as illustrated in the EMPIRE-material. First, there is the relevance of empirical facts as descriptive premises in ethical arguments. Second, there is the relevance of empirical studies as means of mapping moral opinion and moral experience which ought to serve as one of two poles between which one oscillates in moral decision making – the other being the normative ethical theories. Third, there is the relevance of empirical studies of the capacity and function of the human mind, which may tell us something about the range of normative principles and rules.

Keywords: Ethics, normative ethics, descriptive ethics, empirical bioethics.

Introduction

The topic of this article may be approached in different ways. I will take as starting point some reflections on the way the subject of ethics is presented in the introduction to many textbooks. I account briefly for a general presumption when it comes to the relevance of descriptive ethics to normative ethics. Then, I narrow the scope of the discussion in *the direction of bioethics* as one of the most debated areas of applied ethics in contemporary society, and focus on the relation between normative and descriptive ethics within this area by looking closer at that which one may call a new trend in academic bioethics and public policy, viz. the tendency to engage in and rely on more systematic empirically oriented studies when approaching and attempting to solve normative issues. I will address methodological questions which may be raised in this connection and at the end attempt to summarize some ways in which empirical studies may

be of relevance to normative ethics in general and bioethics in particular.

On definitions of descriptive and normative ethics

Ethics is commonly considered to be the study of morality. According to Tom L. Beauchamp and LeRoy Walters (1999: 2), four approaches to the study of morality appear prominently in the literature of ethics. Of these four approaches two are normative and two non-normative. The non-normative approaches are labeled descriptive and analytical ethics or meta-ethics, whereas the normative are divided into general and practical normative ethics. Other ethicists, like William K. Frankena (1973: 4), settle with a first hand division of the study of ethics into three parts – dividing ethics into normative ethics, descriptive ethics and analytical ethics or meta-ethics. This is perhaps the most common division in textbooks and it depends on the recognition of different methodological perspectives applied in the study of morality. In this sense it ignores the distinction which the other two scholars draw between general and applied or practical normative ethics.³

For the purpose of this article, I find it sufficient to operate with the latter division of ethics into three disciplines – i.e. with only one category of normative ethics, since the problem which I address is related to the underlying distinction between different methodological perspectives applied in ethics. This has to do with epistemological questions such as “What is there to know in ethics?” and “How can we know in ethics?” In themselves these questions belongs to the third discipline of ethics called meta-ethics, which is the other non-normative approach aside from descriptive ethics. Meta-ethics addresses logical, semantical and epistemological questions of relevance to the study of morality (Frankena 1973: 5). Thus, it is also concerned with the question on the relation between descriptive and normative ethics.

In order to talk clearly about this relation between descriptive and normative ethics, one ought to start at the outset by defining the two categories in speech. Frankena (1973: 4) describes the work done within descriptive ethics as an “empirical inquiry, historical or scientific, [...] done by anthropologists, historians, psychologists and sociologists.” He explains, furthermore, that the goal of this inquiry is to “describe or explain the phenomena of morality or to work out a theory of human nature which bears on ethical questions” (Frankena 1973: 5). In other words, descriptive ethics is the factual investigation of moral behaviour and beliefs (cf. Beauchamp & Childress 1994: 4-5). This means that the category of descriptive ethics indeed covers a large field of investigations which among themselves are quite different in design and focus, merely having in common that they apply

³ In another work by Beauchamp, normative ethics is divided into general and applied normative ethics (cf. Beauchamp & Childress 1989: 10). However, in the 4th edition of this volume they have replaced “applied” with “practical” arguing that the label formerly used was misleading (cf. Beauchamp & Childress 1994: 4).

empirical methods and focus on issues of morality in one sense or another.

Normative ethics, on the other hand, is determined rather loosely as asking what *really is* right, good or obligatory. Frankena explains, moreover, that it may take the form of asserting normative judgments and giving or being ready to give reasons for these judgments, or it may take the form of debating about what is good or right, with oneself or with others, and reach to normative conclusions on this (Frankena 1973: 4). I like to add, however, that perhaps the most important part of normative ethics is the normative ethical theories on procedures to follow in order to reach to such justified conclusions, and this part of the discipline is quite formal. In my opinion, the task to *establish* a procedure to follow in order to reach to knowledge about right and wrong, good and evil, desirable and undesirable, etc. as well as the *application* of such a procedure are the most important parts of normative ethics.

Normative ethics, like descriptive ethics, is a knowledge enterprise – it seeks the truth about right and wrong in ethical question. But there is also a *practical aspect* to normative ethics which need not be a part of descriptive ethics. The reason why we want to know about right and wrong, good and evil, desirable and undesirable, is that we want to be able to choose and promote the right, good or desirable in life. That normative ethics has to do with practical knowledge does not only mean that it is knowledge *about* the ethical status of different human practices, it also means that it is a kind of knowledge that has a practical aim (cf. Finnis 1983). We do not want to know merely for the sake of knowing, but also so that we may be able to act or live in accordance with this knowledge. Finally, there is also a third element in the practical aspect of normative ethical knowledge: Knowledge about moral affairs is practical knowledge also means that it is knowledge which cannot be acquired without real life experience.

Whereas the choice of adequate methods within descriptive ethics most often is rather uncontroversial, participants in the normative ethics enterprise advocate several more or less different and even contradicting solutions as to how this task should be pursued and which answers should be considered valid. Some have argued that knowledge about purely normative affairs in ethics is a product of reason alone acquired through a particular *moral* intuition. Others have proposed theories which imply that such knowledge will be based on psychological investigations and what is commonly considered to be empirical studies. Others again reject the whole idea of knowledge being implied in the traditional sense of the word when talking about normative ethics.

Without going any deeper into the question concerning the foundation of normative knowledge, I just like to point out that disagreement of this kind makes up part of the reason why it would be a mistake to regard the categories of normative and descriptive ethics as expressing rigid, sharply differentiated approaches, since different approaches often are undertaken at the same time and overlap in goal and content. Rather, the categories in speech should be

taken as broad polar contrasts which exemplify models of inquiry (Beauchamp & Walters (eds.) 1999: 2).

A basic presumption on the relevance of descriptive ethics

In what follows I will reflect on whether and to what extent one may be justified in believing that descriptive ethics also plays and should play an important role in the process of establishing knowledge about what is to be considered normative in ethics. The theories of normative ethics are normally considered to be philosophically and not empirically acquired knowledge. It is, therefore, interesting to notice that the last criterion for a normative ethical theory proposed by the two philosophers Beauchamp and Childress is that such a theory must “be able to account for the whole range of moral experience, including the principles, rules, and judgments affirmed in common morality” (1989: 15). In effect, this means that a normative ethical theory which leads to conclusions which runs clearly counter to the moral experience or intuition of common people should be considered with certain skepticism. According to the two authors, moral theory and moral experience are engaged in a dialectic relationship:

We develop theories to illuminate experience and to determine what we ought to do, but we also use experience to test, corroborate, and revise theories. If a theory yields conclusions at odds with our ordinary judgments – for example, if it allows human subjects to be used merely as means to the ends of scientific research – we have reason to be suspicious of the theory and to modify it or seek an alternative theory (Beauchamp & Childress 1989: 16).

The basic method suggested here is a dialectic one in which one oscillates between moral experience – the knowledge of which is available through ordinary life or more properly through empirical descriptive studies – and normative ethical theories developed through the reasoning of normative moral philosophy. It is a well known method described as *coherentism*. A similar approach is advocated as method of *reflective equilibrium* developed by John Rawls (1971). I find this to be a very good description of what really happens in ethical decision making. It also provides a good clue to how descriptive ethics may be relevant to the normative enterprise. If common morality should serve as a point of reference for normative ethics, which indeed most moral philosophers believe, then a good way to arrange for this to happen, is by the means of empirical studies.

On the use of empirical knowledge in ethics and bioethics

From what has been written above, it follows that the relevance of descriptive ethics to normative ethics goes beyond the fact that both are concerned with the moral institution of life. However, if one turns to the field of bioethics one finds that it is only recently that the results of more systematically elaborated descriptive studies have been published in bioethical journals. In fact, a recent quantitative analysis of the empirical research published in nine peer reviewed bioethical journals during the period from 1990 to 2003, concluded that the proportion of empirical research in these journals increased steadily from 5.4% of the total number of articles in 1990 to 15.4% in 2003. The authors also

found it likely that the importance of empirical methods in medical ethics would increase (Borry et al. 2006: 240-45). A recent dissertation on bioethical end-of-life issues in Japan, points to several such studies, both qualitative and quantitative, of which most are of a newer date (Hugaas 2006). This material corresponds well with the findings of the quantitative analysis just mentioned which indeed points out that not only do such studies represent a *new research trend in bioethics* but also that euthanasia and prolongation of life were the main topic of research in the majority of the articles surveyed.

In a way, one might say that this new trend comes as an answer to a long standing call for a more empirically oriented type of ethics, initially made by anthropologist and others several decades ago. Speaking to moral philosophers, Abraham Edel wrote as follows in the introduction to a book on the subject of anthropology and ethics in the early 60s:

You have dealt with morality as an isolated and self-contained domain, cut off from relations to psychological and cultural processes. Its vocabulary has been explored as though the field were separate and meaningful in total isolation, as though its processes of justification were utterly unique and unrelated to processes in knowledge generally, and a conceptual chasm has been created between fact and value to preserve the distinct character of moral judgment. And what has resulted is often described by contemporary philosophers as a deadlock or impasse in ethical theory (Edel & Edel 2000: vi-vii).

The Edels were concerned about the conceptual chasm which had been created between fact and value, and considered this a major reason why ethics or moral philosophy had moved into isolation. Three decades later, the same point was made by another and perhaps more influential anthropologist, Clifford Geertz:

An approach to a theory of value which looks toward the behaviour of actual people in actual societies living in terms of actual cultures for both its stimulus and its validation will turn us away from abstract and rather scholastic arguments in which a limited number of classical positions are stated again and again with little that is new to recommend them, to a process of ever increasing insight into both what values are and how they work. Once this enterprise in the scientific analysis of values is well launched, the philosophical discussions are likely to take on more point (Geertz 1993: 141).

It is one thing to call for more empirical orientated studies in ethics and another to explain exactly how such material fit in with the normative enterprise of ethics. Unpleasant as it may be, severe philosophical and epistemological problems need to be solved in ethics, but they should not be easily dismissed as irrelevant, even if they are not easily solved. To ignore the existence of these problems because we are not capable of solving them is not wise. Eventually they are bound to turn up again, depending on how deep the ethicists choose to go into the questions of justification and truth. However, this is not to say that the anthropologists quoted did not have a case when it

comes to recognizing the relevance of empirical studies to ethics and, in our case, bioethics.

Moral philosophy in most of the 20th century were predominantly occupied with issues of meta-ethics, such as the distinction between values and facts and the so-called *natural fallacy*, leaving the empirical approach to human morality aside for the anthropologists, psychologists and others to deal with. A problem was, however, that the latter group was not particularly eager to engage in such studies, partly because they did not consider the moral institution of life to be an independent area of life. When some occasionally did, they also tended to ignore the practical aim which is so central to ethics in the first place (cf. Cook 1999). Hence, descriptive ethics was treated as if it was without relevance to the normative enterprise. Only recently have more systematically elaborated empirical studies been designed and conducted in order to assist the ethicist in the normative enterprise, and there still seems to be some confusion concerning how these studies should be treated and in what way they are relevant to normative ethics.

The EMPIRE project – empirical methods in bioethics

In Europe, there was during the years from 2001 until 2003, an EU funded a research project focusing on the use of empirical methods in bioethics. The so-called EMPIRE project had as one of its main tasks to investigate the ways in which data generated by empirical research can be relevant to bioethical thinking and regulation of health care and human use of biotechnology. Results from this project have been published in the book *Engaging the World – the Use of Empirical Research in Bioethics and the Regulation of Biotechnology* (Holm & Jonas (eds.) 2004). There was also issued a final report submitted to the European Commission.⁴ The report is more or less identical with the final chapter of the book.

The book contains independent contributions from scholars engaged in the project, reflecting a variety of views and approaches to the topic in question. The report on the other hand, is an attempt to present the conclusions and bring together the different insights reached through this project in a coherent recommendation. The report harmonizes different points of view expressed in the book, among which some reflect clearly contradicting opinions on the relevance of empirical research to bioethics. In what follows, I will concentrate on a couple of the independent contributions in order to illuminate different principal views on the question in what way empirical studies are relevant to bioethics, and thereby also bring an answer to the question concerning the relation between descriptive and normative ethics.

In particular there are two contributions which stand out in this respect, both located in the first section of the book addressing the question: "What role can empirical research play in bioethics?" The first is an article by the British philosopher John Harris (2004) with the telling

⁴ The report is available on the Internet: www.empire.hum.auc.dk

title "Putting Empirical Studies in their Place." The author categorically rejects that gathering empirical data should be a task of ethics. The other contribution on this question is the article "Can There Be Moral Experts?" by Louise Irving and Nina Hallowell (2004). It can be read as an answer to Harris advocating the opposite view. I do believe that both these articles contain misconceptions of what bioethics should be. Harris represents a lopsidedness to the philosophical side, whereas Irving and Hallowell represents a view which reduces the enterprise of bioethics to some of its tools.

Misconception of bioethics as pure philosophy

Starting with Harris' article, I first of all like to say that there are many good considerations in this article concerning the distinctive character of ethics as a philosophical enterprise. Harris also agrees that facts may be essential in ethical decision making, and offers a good account of how this may be so. When this is pointed out, however, I also like to call attention to a couple of points at which I find him to be less convincing.

The first has to do with his opinion on what should be the task of the bioethicists. According to Harris, there is a fallacy in bioethics much more severe than that discovered by David Hume some hundred years ago, namely that which Harris calls *the empiricist fallacy* or the belief that one can dispose with *oughts* altogether and only focus on the *ises* in bioethics. This is of course a misconception of what ethics is about, and Harris is correct when he identifies it as a fallacy, even though I am not sure if it is as widely committed as he assumes. Harris admits that facts are relevant and even may be essential to ethics, but he still argues that gathering them should not be the business of ethics, claiming that "gathering facts and *deciding what we ought to think about them* are two different sorts of activities" (2004: 19).

In my opinion, this is a point where Harris could be less categorical. I believe that the proposed division of labor is in want of a more nuanced view on the first kind of activity – the gathering of facts. One may agree that the actual gathering of data may not be the primary task for the bioethicist as moral philosopher. But this does not necessarily mean that the ethicist should not be engaged in deciding which data may be of relevance or how these data should be acquired. Surely, it must be better for the ethicist to have an influence on the priorities and designs of empirical studies in order to get as relevant data as possible, than to just sit and wait for such information eventually to appear by chance.

In order for Harris' categorical statement on the division of labor to be true, one need to apply a somewhat outdated view concerning the epistemological status of the sciences, which may still be widely held within certain circles within the sciences but nevertheless is abandoned by most philosophers of science. As Harris is well aware of the appeal to facts does not have the same splendor of objectivity as it used to. It is rather uncontroversial to say that it is not altogether coincidental what the scientists find to be the facts. We do not merely discover the world as it is, gathering facts as if we were picking berries on a fieldtrip. Philosophers like Kuhn (1970) have showed

that the result of scientific enquiries is partly determined by important choices in advance which influence on the outcome. Figuratively speaking, the scientists determines what counts as a berry, what equipment to use, which field to walk in and finally what berries to pick. Even the basic facts or so-called "pure facts" in natural science are products of theory, as pointed out by Popper (1965: 93-95). The theoretical influence on the gathering of empirical data does also entail that this enterprise is *value laded*. This means that explicit ethical values may determine or influence on the gathering of facts in empirical sciences, and more implicit values surely do (cf. Strand 2000).

Instead of just sitting put and waiting for relevant data to float by on a lucky day to make ethical judgments on the basis of, bioethicists in particular and ethicists in general should rather engage in partnership with sociologists, anthropologists, psychologists and natural scientist in order to be sure that they among others also conduct studies which are not relevant to ethics merely *by chance*, but rather because they have been *designed for such a purpose*. Such studies may be occupied with factual question to which the answers serve as premises in ethical decision making or they may be concerned with the moral opinion or experience of groups of people of relevance to ethical questions. As shall be seen later on such studies may also concern the actual validity of widely held beliefs among ethicist concerning the function of human mind or their theory of human nature which bears on ethical questions.

I like to call attention to an example of the first kind, that is, a call for gathering of morally relevant empirical facts which is made by a bioethicist in order to solve an ethical problem. What I have in mind is the call for further *basic* stem cell research in order to decide on the ethical status of therapeutic stem cell research, made in an article by the Norwegian ethicist Jan Helge Solbakk. Solbakk (2004) argues that because of the scientific or *empirical uncertainty* connected with the therapeutic arguments put forth both *pro et contra* human embryonic stem cell research, it is necessary with a limited amount of destructive basic research on human embryos in order to be able to evaluate whether the therapeutic arguments on both sides are valid. This serves as a good example of how the ethicist may collaborate with and call on the scientists to assist in the ethical decision making by providing further factual premises to the discussion. It also shows how empirical uncertainty may be an important factor in the ethical controversy (cf. Strand 2000). Another example of such cooperation between scientists and ethicists has been initiated by the Centre for The Study of the Sciences and the Humanities at the University of Bergen in cooperation with scientific units at the university on the subject of *nanoethics*. This ELSA-project which is called Interdisciplinary Studies of Ethical and Societal Implications of Nanotechnology applies a broad scope methodology in which the ethicists not only are informed by scientists but also participates in a proactive way in dialogue with the scientist (cf. NSC 2006).

The second point I like to make in connection with Harris' article is also related to the disagreement between this and the other article which I will turn to in

a minute. Although Harris has a legitimate concern for the distinctive character of ethics and bioethics as philosophical enterprises, he expresses a classic philosopher's arrogance when assessing the relevance of common morality and public opinion to bioethics echoing the words of my fellow countryman Ibsen's Dr. Stockman: "The majority never has right on its side!" The fact that this arrogance is sprinkled with a sense of humor does not remove the impression of a mere rejection of public opinion as irrelevant to bioethical decision making. Such a general rejection of public opinion falls on its own unreasonableness, especially since it seems to presuppose that public opinion is considered relevant due to quantity, counter to which Harris puts the quality of the philosophical mind.

Misconception of bioethics as sociology

I find it difficult not to read the article by Irving and Hallowell as a direct critique of Harris at this point. As in the case with Harris' article, there are important considerations reflected also in this article, such as the accusation that bioethics tends to give supremacy to natural sciences as provider of factual premises, that bioethics tends to decontextualize ethical issues, and that it is confined only to a limited number of problems which reflects a bias to the interests of the Western world or rich parts of the world (Irving & Hallowell 2004: 29). However, none of these accusations need end in the final claim that bioethics should turn into sociology. It seems like the two authors argue for a change in the basic *philosophy of knowledge* (of bioethics) based on an analysis conducted almost exclusively from the perspective of *sociology of knowledge* (of bioethics).

Irving and Hallowell end up attacking the player, leaving the ball. But disappointments about being excluded from a (dis)course can never be a reason to dismiss the opponents' viewpoints as wrong. Sociology of knowledge may tell us much about how (bioethical) knowledge is used or works as means of power, but such explanations will never be sufficient to settle questions about what is the truth or how the truth is to be disclosed (in bioethics). It is therefore regrettable that the case for empirical studies in bioethics made by Irving and Hallowell boils down to complaints about the exclusiveness of bioethics as a discipline where professional associations "often have high membership dues and registration fees – some by invitation only – etc." (2004:34). The call they make for *a change in world view* among bioethicists as depicted is misplaced and misinformed. At the very end of the text, they write as follows:

"We would argue [...] that the real value of adopting a more empirical perspective within bioethics lies not in the adoption of empirical methods per se, but in the adoption of a different world view. [...] Ultimately, we would argue that it is time for bioethicists to adopt a more sociological perspective" (Irving & Hallowell 2004: 34-35).

Should bioethicists change worldview and apply the sociological perspective as their main perspective, then what would be left of bioethics as a normative discipline? Put differently, what would happen to the

practical aim of bioethics as normative ethics if it was turned into descriptive social science? As pointed out in the beginning of this article, the practical aim is a *sine qua non* for bioethics as normative enterprise. Instead of doing bioethics as a normative enterprise the bioethicist would end up doing what might be called the *sociology of knowledge* (of bioethics), and that is something different.

In my opinion, therefore, Irving and Hallowell take it too far. There must no doubt be a division of labor between the sciences, on the one hand, and philosophy and ethics on the other, although not as rigid as proposed by Harris. Instead of attaching this distinctive character of bioethics and ethics in general as philosophical enterprise, with the methodology implied, suggesting that it should turn into sociology, sociologists and other scientists should rather feed bioethics with factual premises and information on common morality and public opinion on moral issues. The bioethicist, on the other hand, ought to be willing to be informed by such a kind of sociology of morals, and still take seriously the practical aim of normative ethics.

Empirical studies in bioethics: kinds of relevance

I have discussed how empirical studies may be of relevance to bioethics in different ways. I will now summarize the answers suggested during the course of my critique of different views on the relation between descriptive and normative bioethics. As I see it, empirical studies may be of relevance to bioethics in *at least three different ways*, regardless what normative theory one applies. By this I do not wish to question that which may be called the primacy of philosophy of morals in bioethics. However, keeping in mind that there will not be a primacy if philosophy holds the field all alone, one should not be afraid to allow for other perspectives to be applied and other questions to be asked than those belonging to the classical discourse of moral philosophy. As long as bioethics is not reduced to "empirical bioethics" altogether and misses the practical aim of normative ethics of sight, I find it unproblematic and even necessary to rely on empirical input in bioethics.

A. The relevance of empirical facts as premises in ethical arguments. First there are the studies which are occupied with factual question which may serve as premises in ethical decision making. This may in principle be any kind of empirical study, but it may also be studies which are design for such a purpose in particular. As pointed out earlier, the call for further basic stem cell research serves as an example of empirical studies of such relevance. The difference in opinions regarding empirical premises gives rise to a need for further studies within basic stem cell research in order to assess the validity of therapeutic arguments. Another example from the EMPIRE-project is the article by Anne Gammelgaard (2004) which concerns the informed consent process of a recent Danish randomized multi-centre trial called DANAMI-2.

B. The relevance of moral opinion and moral experience. The second type of relevance is the one of social science studies concerned with the moral opinion or moral experience of groups of people, concerning

particular ethical questions. This is perhaps the most common kind of empirical studies conducted within bioethics, as pointed out by Harris. If this kind of studies are conducted merely in order to determine normative ethics by majority opinion alone, then the ethicist should be concerned, and listen carefully to the modified version of the warning from Ibsen's Dr. Stockman: The majority does indeed *not always* have right on their side. However, if such studies are conducted in order to bring the normative enterprise closer to real life, and take the moral experience of ordinary people into consideration in order to find out, for instance, which aspects of the situation are considered by the public to be morally relevant or which norms among the lot people believes should be given primacy, then this is one way among others, in which bioethics ought to be informed by empirical sciences.⁵

C. The relevance of psychological studies of the function of human mind. Finally, there are the kind of studies which concern the actual validity of widely held beliefs among ethicist on the function of human mind or their theory of human nature which bears on ethical questions. Such an example has not been provided in the above standing account. But also an example of this is found in the EMPIRE-material, viz. in the article by Angus Dawson (2004).

Dawson argues that since (a) 'ought implies can', and (b) empirical studies reveal that most research subjects in studies applying randomized methodology in fact *can not* understand and process properly the information provided regarding the trials which they are to participate in, regardless how and how much information they get, then (c) one may conclude that the normative *ought* involved in the principle of informed consent must be rejected when it comes to participation in studies with such a methodology: "The conclusion to be drawn is that if it is indeed impossible to achieve a true informed consent in relation to randomization then we should not be morally required to attempt to do so" (Dawson 2004: 49).

One of the other participators in the EMPIRE-project claims that "when bioethics is approached descriptively, the outcomes of the studies are also purely descriptive" (Takala 2004: 71), but the example from Dawson shows that empirical studies does not only serve as providers of factual premises in ethical decision making, or concerning public opinion in particular issues of moral relevance, they may also tell us something important and even decisive about the range of normative principles. In this particular case, that we can not demand an informed consent in cases where such a consent is not possible due to barriers in the normal psychology of man, at least not of we subscribe to the principle that 'ought implies can'.

Conclusions

Recent publications show that the discipline of bioethics has expanded beyond the domain of purely philosophical investigations – empirical methods have been adopted in the discipline and bioethicists have

engaged themselves in inter-disciplinary projects. The discussion in this paper shows that descriptive ethics indeed is relevant to normative ethics, and that this relevance stretches beyond the point of a simple division of labor between ethicists and empirical scientists. One may therefore conclude that this development in bioethics is both acceptable and commendable. A challenge is of course to put empirical studies in their proper place, without throwing the baby out with the bathwater. In order to meet this challenge, it is important to recognize that there are limits to the relevance of empirical studies. There are possibilities for both use and abuse of empirical knowledge in bioethics as in any field of ethics. Successful application of empirical studies depends among others on what role one assigns to philosophy in the greater picture. The conclusion to this discussion is that philosophical reasoning always will be a *sine qua non* to normative ethics, and as such it should hold the primacy also within bioethics.

Literature

- Beauchamp, T. L. & J. F. Childress (1989) *Principles of Biomedical Ethics*. 3rd ed. New York: Oxford University Press.
- Beauchamp, T. L. & J. F. Childress (1994) *Principles of Biomedical Ethics*. 4th ed. New York: Oxford University Press.
- Beauchamp, T. L. & L. Walters (eds.) (1999) *Contemporary Issues in Bioethics*. Belmont, Cal.: Wadsworth Publishing Company.
- Borry, P., Schotmans P. and Dierickx, K. (2006) Empirical Research in Bioethical Journals. A Quantitative Analysis. *Journal of Medical Ethics*, 32, p. 240-245.
- Cook, J. W. (1999) *Morality and Cultural Differences*. New York: Oxford University Press.
- Dawson, A. (2004) What should we do about it? Implications of the Empirical Evidence in Relation to Comprehension and acceptability of Randomization. In *Engaging the World: The Use of Empirical Research in Bioethics and the Regulation of Biotechnology*, ed. S. Holm and M.F. Jonas, p. 41-52. Amsterdam: IOS Press.
- Edel, M. & Edel A. (2000) *Anthropology and Ethics – The Quest for Moral Understanding*. London: Transaction Publishers.
- Finnis, John (1983) *Fundamentals of Ethics*. Oxford: Clarendon Press.
- Frankena, W. K. (1973) *Ethics*. New Jersey: Prentice Hall.
- Gammelgaard, A. (2004) An Empirical Study of the Informed Consent Process of a Clinical Trial. In *Engaging the World: The Use of Empirical Research in Bioethics and the Regulation of Biotechnology*, ed. S. Holm and M.F. Jonas, p. 99-108. Amsterdam: IOS Press.
- Geertz, C. (1993) *The Interpretation of Cultures – Selected Essays*. London: Fontana Press.
- Harris, J. (2004) Putting Empirical Studies in their Place. In *Engaging the World: The Use of Empirical Research in Bioethics and the Regulation of Biotechnology*, ed. S. Holm and M.F. Jonas, p. 18-27. Amsterdam: IOS Press.
- Holm, S. & Jonas, M. F. (eds.) (2004) *Engaging the World: The Use of Empirical Research in Bioethics and the Regulation of Biotechnology*. Amsterdam: IOS Press.
- Hugaas, J. V. (2006) *Ethos, Ethics and End-of-life Issues in Japan*. Bergen: Allkopi.
- Irving, L. & Hallowell, N. (2004) Can There Be Moral Experts? In *Engaging the World: The Use of Empirical Research in Bioethics and the Regulation of Biotechnology*, ed. S. Holm and M. F. Jonas, p. 28-37. Amsterdam: IOS Press.

⁵ An example of such a study is presented by Levitt et al. (2004).

- Kuhn, T. S. (1970) *The Structure of Scientific Revolutions*. Chicago: University of Chicago Press.
- Levitt, M., Weiner, K. and Goodacre, J. (2004) Stimulating Public Debate on Ethical and Social Issues Raised by the New Genetics. In *Engaging the World: The Use of Empirical Research in Bioethics and the Regulation of Biotechnology*, ed. S. Holm and M. F. Jonas, p. 109-118. Amsterdam: IOS Press.
- NSC (2006) Nanoetik er mer enn føre-var [Nanoethics is more than 'better-safe-than-sorry'] In *Norwegian Science Council Newsletter*, No. 3.
- Popper, K. R. (1965) *The Logic of Scientific Discovery*. New York: Harper & Row.
- Rawls, John (1971) *A Theory of Justice*. Cambridge: Cambridge University Press.
- Solbakk, J. H. (2004) Use and Abuse of Empirical Knowledge in Contemporary Bioethics: A Critical Analysis of Empirical Arguments Employed in the Controversy Surrounding Stem Cell Research. In *Engaging the World: The Use of Empirical Research in Bioethics and the Regulation of Biotechnology*, ed. S. Holm and M. F. Jonas, p. 53-60. Amsterdam: IOS Press.
- Strand, R. (2000) Naivety in the molecular life sciences. In *Futures*, 32, p. 451-470.
- Takala, T. (2004) Who Should Decide and Why? The Futility of Philosophy, Sociology and Law in Institutionalized Bioethics, and the Unwarrantability of Ethics Committees. In *Engaging the World: The Use of Empirical Research in Bioethics and the Regulation of Biotechnology*, ed. S. Holm and M. F. Jonas. Amsterdam: IOS Press.

Life-Threatening Illness, Hope, and Spiritual Meaning-Making: Buddhist and Christian Perspectives

- Neil Pembroke, Ph.D.

The School of History, Philosophy, Religion, and Classics, Forgan Smith Building, The University of Queensland, St. Lucia. Q4072, Australia
Email: n.pembroke@uq.edu.au

Abstract

The concept of hope as meaning-making is discussed in the context of a life-threatening illness. Significant aspects of Buddhist and Christian approaches to making sense of this traumatic experience are presented. Particular attention is given to the roles that compassion and emptiness play in this process. These two teachings are assigned a central place in both Buddhism and Christianity, but their function in the context of a life-threatening illness is understood differently.

Keywords: Life-threatening illness, dying, hope, meaning, Buddhism, Christianity, healthcare.

The spirituality of living with a life-threatening illness can, of course, take either a secular or a religious form. People who do not have a religious commitment may still value the spiritual dimension of life. In all forms of a spirituality of living with the threat of dying, the search for meaning is a vitally important factor. Commonly,

there is a strongly felt desire to experience one's life in the midst of the illness as full of worth and purpose. In the drive to wholeness and integration, persons facing death ask questions such as: Why is there so much suffering? And what is this experience telling me about myself, about the nature of human existence, and about who God is and where God is in my illness? (Cf. Corr, 1991-1992).

This process of meaning-making is associated with an experience of hope for persons living with a life-threatening illness. Shafts of light break into the darkness of an illness experience when one is able to make some sense of it. The ways in which Buddhists and Christians make meaning in their suffering are many. It is necessary in a short essay to be selective. With this in mind, I have chosen to concentrate on two very important notions in our nominated religious traditions—namely, compassion and emptiness. We shall see, though, that the way in which these concepts function in Buddhism and in Christianity is quite different.

It is becoming more widely accepted that effective healthcare requires a holistic approach. Increasingly, healthcare providers are coming to accept the importance of acknowledging and attending to not only the physical, psychological, and social needs of their patients, but also to the important role that the spiritual dimension plays (Anandarajah & Hight, 2001; Culliford, 2002; Koenig, 2000; Larrimore, Parker, & Crowther, 2002; Lawrence & Smith, 2004; Levin, Chatters, & Taylor, 2005). The beliefs and practices of Buddhism and Christianity have helped countless people suffering from serious illness to find peace, hope, and meaning. These religions have been selected for attention here because of their prominence in the Asian region. My intention is to make a contribution to the growing body of literature that seeks to enhance the understanding that healthcare providers have of the way religion aids patients in coping with their suffering.

In order to set the scene for the essay, a brief discussion on the psychology of hope is required. This discussion will indicate that some psychologists seem unable to distinguish clearly between hope and optimism. It is argued, however, that this distinction is an important one and that, moreover, it centers on meaning-making. Optimism refers to a conviction that something will turn out well, whereas hope is the confident feeling that something is meaningful, regardless of how it turns out. This is clearly a crucial distinction in the context of a life-threatening illness. It is quite unlikely that things will turn out well—if turning out well means being cured—but it is very possible to experience the process as deeply meaningful. Buddhists and Christians, it goes without saying, are deeply committed to this view.

The Psychology of Hope

Hope, in general terms, is an expectancy of good in the future (Herth, 1990). Or to be more specific, it is the expectation that future positive feelings will outweigh future negative feelings (Staats & Stassen, 1985).

Hope becomes important to us when we find ourselves in a difficult and trying situation. It is a very

uncomfortable place to be; we feel distressed and worried. We feel trapped by our circumstances. When this is the case, it is easy to fall into apathy and despair. Hope pushes against the forces dragging us down into the depths. What sustains us is the knowledge and the feeling that there is a way out (Cf. Lynch, 1974).

A review of the psychological literature on hope indicates that there are at least three central elements in hoping. First, as has already been noted, hope is associated with an experience of deprivation. When the situation that we find ourselves in is disagreeable and trying, we naturally hope for something better in the future. What is perhaps most painful in such situations is the deep sense of alienation—an alienation of the self from itself—that is experienced. This loss of the integrity of one's selfhood Marcel (1951) vividly describes as "tearing me out of myself" (p. 31).

The second essential element that is regularly identified in a psychology of hope is desire (Capps, 1995; Lazarus, 1999; Lynch, 1974; Staats & Stassen, 1985). When we feel trapped in an unpleasant and distressing situation, our yearning is for a more positive one.

The final aspect of hope that features in the literature is the involvement of both affect and cognition. The affective element is usually associated with desire (Lazarus, 1999; Staats & Stassen, 1985). The person who hopes is gripped by a deep yearning for positive outcomes in the future. The cognitive dimension is expressed through an *expectation* that the current unsatisfactory situation will be superseded by a more agreeable one (Staats & Stassen, 1985). One is sustained by the belief that the present distress will eventually pass.

Many psychologists, after reviewing what has been presented so far, would be struck by the failure to include what they take to be of the very essence of hope, namely, the pursuit of goals. At the forefront of the goal-based approach to the psychology of hope we find C.R. Snyder and his associates (Snyder et al, 1991; Snyder, Cheavans, & Sympson, 1997; Snyder, 2000; Snyder, Cheavans & Michael, 2005). In their early work, they defined hope as "a cognitive set that is based on a reciprocally-derived sense of successful agency (goal-directed determination) and pathways (planning to meet goals)" (Snyder et al, 1991, p. 571). Here the three essential components in the theory—goals, pathways, and agency—are identified. High hope persons are those who find pathways around blockages to their nominated goals, and who have the mental strength to keep moving along those paths.

One question that immediately presents itself upon reviewing the Snyder et al approach is whether or not the experience they describe is really hope. It seems more like optimism to me (Cf. Hobfoll, Briggs-Phillips, & Stines, 2005). Optimism is usually construed as a feeling or conviction that one will prevail in one's quest, despite the obstacles in one's path. In his survey of the psychology of optimism, Pearson (2000) has this to say:

"Optimism enters into self-regulation when people ask themselves about impediments to achieving the goals they have adopted. In the face of difficulties, do people nonetheless believe that goals can be achieved? If so, they are optimistic; if not, they are pessimistic" (p. 47).

Given this interpretation of optimism, it is not surprising that Pearson includes the work of Snyder and associates in his survey. In reviewing their goals-pathways-agency approach, it seems clear that what they are describing is more an optimistic outlook than the experience of hoping. Having said that, it must be acknowledged that there is a significant area of overlap between optimism and hope. When we are feeling hopeful, we also notice that our outlook is more optimistic. It is also true that a sense of hope accompanies an optimistic frame of mind. It is nevertheless very important in a discussion on life-threatening illness to clearly distinguish the two dynamics. Most people who are facing the possibility of an imminent death would not immediately think of optimism as a state of mind to strive for. They more naturally speak about the hopes that they have (Bregman & Thiermann, 1995; Buckman, 1990; Harper, 1992).

Weingarten (2006) helpfully suggests that optimism refers to a conviction that something will turn out well, whereas hope is the confident feeling that something is meaningful, regardless of how it turns out. Persons with a life-threatening illness are not usually brimming with confidence that things will turn out well for them—especially when the disease has progressed and the prognosis has worsened. It may be that they feel optimistic about receiving good palliative care, or about the chances of beating the odds and living longer than expected, or about the fact that their friends and loved ones will stand by them and offer them the love and care that they so desperately need. In this sense, they may expect that things will turn out well. Alongside these positive expectations, sits a strongly felt need to make meaning out of what is happening. Making sense of the experience leads to a feeling of hopefulness. Weingarten is particularly sensitive to this in her writing on hope because she is herself suffering from cancer. In one of her articles, she tells the story of how she experienced her cancer treatment in a very different light—in a much more hopeful light—when she decided to dedicate it to those who are suffering in the world and to those who commit their lives to helping ease that suffering. She tells her story this way:

"My work was to lie in the bowels of a hospital getting zapped by electron particles. However, strapped to the table, as stripped down as one can get, I still had something to offer others: those very same particles that were entering my body and, hopefully, giving me a chance for a long and productive life. How different my situation was from that of the people my South African colleagues were helping, who were not being given state-of-the-art treatment. I saw many connections and a path toward action. After radiation that day, my eighth session, I sent off e-mails to four of my closest South African colleagues:

"As you know I am undertaking radiation treatment. While there are discomforts, I am mindful of how fortunate I am to be able to receive treatment. I am dedicating my next session to the four of you for all that you do for those who suffer with AIDS and for those families, caretakers and communities that suffer as well. In deep gratitude for all that you do."

Sending off the e-mail, I felt back in my life for the first time in months. A few hours later, I devised a plan.

Each day I would dedicate my radiation treatment to a person or a cause whose work in relation to violence I wished to honor. I hoped that the knowledge that someone cared enough about the work they were doing to dedicate their treatment to them would encourage them in the daily challenges they faced" (Weingarten, 2005, 158-159).

Illness, Hope, and Mean-Making in Buddhism and Christianity

Weingarten's practice of dedicating her cancer treatment to those who work with people in deep need has an affinity with the spiritual guidance given to a student living with cancer by the Tibetan lama, Thubten Zopa Rinpoche (Zopa, 1989). The intent in each case is to get outside oneself and the distress one is experiencing through thinking lovingly of others. The lama counsels the ill man thus:

"With compassion you take all the sufferings from human beings and gods, and also from all beings in the lower realms. Breathing in, take the sufferings through the nose like a polluted smoke and this destroys the self-cherishing thought" (Zopa, 1989, p. 1).

In Buddhist thought, self-cherishing is viewed as an arch-enemy. It stems from the illusion that the self is a stable, enduring, and independent entity. Those who are wise, according to the Buddha, know that the self is groundless or insubstantial. The self, and all other phenomena, give the appearance of inherent existence, but the truth is that everything that we encounter is ultimately empty. According to Abe (1995), emptiness (*sunyata*) is the Buddhist ultimate. *Sunyata* is not a "something"; rather, it "completely empties everything, including itself...The pure activity of absolute emptying is true Sunyata" (Abe, 1995, p. 51). In an oft-quoted passage from the Heart Sutra we read: "Form is emptiness, and the very emptiness is form; emptiness does not differ from form, form does not differ from emptiness; whatever is form, that is emptiness, whatever is emptiness, that is form. The same is true of feelings, perceptions, impulses, and consciousness" (In Conze, 1983, pp. 162-163). In the Buddhist view, all that exists is simply a combination of constantly changing and mutually conditioning material and mental conglomerates called the five aggregates or *skandhas*: matter (*rupa*), sensation (*vedana*), perception (*sanna*), mental formations (*sankhara*), and consciousness (*vinna*).

Not-self is the liberating truth of the Buddha (Cf. Williams, 2000, p. 57). Attachment to the self and to its desires ties a person into the cycle of suffering (*samsara*). *"That I experience suffering in cyclic existence is due to self-cherishing; the root of self-cherishing comes from conceiving that beings and things inherently exist, whereas they do not"* (Dalai Lama, 2002, p. 109).

According to the Buddhist perspective, we are plagued by the illusion that "I am the body," and that "I possess the body." When we think of the body as our possession, we fall into the trap of thinking that we have more control over it than we actually do. When serious illness strikes, we are confronted with the painful fact that we actually have quite limited control. Jootla (1993)

observes that this perspective leads to *dukkha* (dissatisfactoriness or suffering): "Sickness demolishes the illusion that we can make the body feel the way we want and that disillusionment, rather than the physical pain itself, causes much of the grief and despair" (p. 206).

Buddhists make a distinction between pain and suffering (*dukkha*) (Gordon, Blackhall, Bastis & Thurman, 2002). Physical and mental pain is inevitable in human existence; there is nothing that we can do to escape from it. However, the Buddha teaches that through meditation, moral action, and wisdom it is possible to transcend suffering. The path advocated by the Buddha leads to the extinguishing of all craving. Human craving has three forms. We crave for sense satisfaction, being, and non-being (Aronson, 2004; Epstein, 2001; Skorupski, 1999). The notion of desire that is associated with the five senses is clear enough; the concepts of the desire for being and for non-being are more difficult to grasp. Craving for being refers to wanting more of what we already have. We desire a partner who satisfies our every whim and fancy, an enhancement of our personal status, more money, and much more besides. Craving for non-being means, in the most general terms, a desire for escape from the problems and pain of life. It indicates a desire for nothingness, a craving for a fall into a peaceful oblivion, into a state or place far from one's worries and troubles. Craving is the seat of the problem. It creates the karmic formations that fuel the cycle of death and rebirth.

The hope of the Buddhist is that through abandoning craving—especially the cherishing of self—and the ignorance that underpins it, *nirvana* is attained. *Nirvana* is the blissful experience of an existence free of craving and therefore free of *dukkha*. This teaching is at the forefront as Zopa (1989) offers the counsel of compassion to the student suffering with cancer:

When the self-cherishing is destroyed, the real "I," the independent, unlabelled, existing-from-its-own-side "I," this "I," which does not exist in reality is seen to be empty. The "I" is merely imputed on the aggregates...So, when the self-cherishing thought is destroyed, the "I" that appears, unlabelled, concrete, and independent, is also destroyed. This leaves some empty space in the mind that can be filled with true happiness and can remove all fears and delusions (p. 1).

Compassion for the suffering of others is viewed as a powerful means of banishing egoism and thereby keeping one's own suffering in a proper perspective. The Dalai Lama tells the story of an experience that brought this truth home to him. He was suffering intense pain as a result of an abdominal infection. On the trip to the hospital in Bihar State, he observed both a small boy and an old man in great physical distress that had simply been left to their own devices. He recalls that

Later, at the hospital, my thoughts kept circling on what I had seen, reflecting on how sad it was that here I had people to take care of me but those poor people had no one. That is where my thoughts went, rather than to my own suffering. Though sweat was pouring out of my body, my concern was elsewhere.

In this way, though my body underwent a lot of pain (a hole had opened in my intestinal wall) that prevented sleep, my mind did not suffer any fear or discomfort (Dalai Lama, 2002, p. 54).

Compassion is also, of course, a central Christian virtue (Nouwen, McNeill & Morrison, 1982; Pembroke, 2007). Followers of Christ are exhorted by the writer of the Letter to the Colossians to clothe themselves with compassion and kindness (3:12). Praying for those who are suffering is an important expression of a loving concern for one's neighbor. Nouwen et al (1982), writing on the spirituality of compassion, view this kind of intercessory prayer as an act of solidarity with the suffering ones. They indicate that this is so "because the Spirit who prays in us is the Spirit by whom all human beings are brought together in unity and community" (p. 108).

It should be noted, though, that Christians do not make the connection between compassion and the hope of liberation that Buddhists do. For the latter group, compassion for all those who suffer aids in the task of destroying the self-cherishing thought. That is, compassion establishes a person in the liberating truth of no-self. Interestingly, the hope of the Christian is also founded on emptiness, but it is emptiness of quite a different form. It is held that salvation comes through emptying out the false self in order that one can be filled with all the fullness of Christ's grace and mercy (Cf. Meador & Jones, 2000, p. 831; Sheehan, 2000, p. 15). As the Apostle Paul puts it in his letter to the Galatians: "It is no longer I who live, but it is Christ who lives in me" (2:19).

Thomas Merton avers that the false self needing to be emptied out is nothing more or nothing less than the sinful drive that afflicts all human persons (Merton, 1949, p. 8). According to Merton, the false self expresses itself through attachment to things, experiences, and ideas that promise pleasure and fulfillment but in the end lead only to emptiness and self-alienation. It is this grasping for things that so damages one's relationship with Christ. Emptiness, he contends, is the path to fullness of life:

For I know I will possess all things if I am empty of all things, and only You can at once empty me of all things and fill me with Yourself, the Life of all that lives and the Being in Whom everything exists (Merton, 1995, p. 49).

A life-threatening illness brings this truth into sharp focus for the Christian (Meadows & Jones, 2000; Sheehan, 2000). It is often reported that in this situation material objects and personal achievements no longer seem to carry the importance or have the attraction that they once did. These things seem quite empty, devoid of meaning. Meaning is found in embracing Christ as one's "superior self" (Merton, 1961, p. 123). This requires emptying the self of its grasping, acquisitive, proud tendencies in order to become hidden with God in the grace and mercy of Christ (Meadows & Jones, 2000). In a word, one's hope in life and in death is Christ.

Conclusion

Hope is a vitally important need and resource for persons suffering from a life-threatening illness. Psychologists and theologians define hope in a number of different ways. The notion of hope as meaning-

making is especially important for those whose lives are threatened by disease. Buddhism and Christianity have helped countless people make sense of life at its extremities. Compassion and emptiness play leading roles in this task. For the Buddhist, the path to liberation from *dukkha* involves exercising a compassion for all suffering beings. Such compassion aids in killing off self-cherishing and associated forms of craving. In letting go of self one realizes the ultimate truth that all is emptiness; the tie-rope connecting one to *samsara* is cut.

Christians express solidarity with those who suffer through their prayers of intercession. The hope of personal liberation is not located here, though. It is through emptying out the false or sinful self in order to be filled with the fullness of Christ that Christians hope to be liberated.

It is commonly reported by people faced with a life-threatening illness that the central teachings of their religion press in on them with a new urgency and relevance. In endeavoring to find meaning in what is happening to them, notions such as the ones discussed above play a vital role.

References

- Abe, M. (1995). Kenotic God and dynamic Sunyata. In C. Ives (Ed.), *Divine emptiness and historical fullness*, 25-90. Valley Forge: Trinity Press International.
- Anandarajah, G. & Hight, E. (2001). Spirituality and medical practice: Using the HOPE questions as a practical tool for spiritual assessment. *American Family Physician* 63, 81-88.
- Aronson, H.B. (2004). *Buddhist practice on western ground*. Boston: Shambhala.
- Blackhall, L., Bastis, M. K., & Thurman, R. (2002). Asian spiritual traditions and their usefulness to practitioners and patients facing life and death. *The Journal of Alternative and Complementary Medicine* 8, 603-608.
- Bregman, L. & Thiermann, S. (1995). *First person mortal: Narratives of dying, death, and grief*. New York: Paragon House.
- Buckman, R. (1990). *I don't know what to say: How to help and support someone who is dying*. Melbourne: Sun.
- Capps, D. (1995). *Agents of hope: A pastoral psychology*. Minneapolis: Fortress Press.
- Conze, E. (1983). *Buddhist scriptures*. Selected and translated by E. Conze. Harmondsworth: Penguin Books.
- Corr, C.A. (1991-1992). A task-based approach to coping with dying. *Omega: Journal of Death and Dying* 24: 81-94.
- Culliford, L. (2002). Spirituality and clinical care. *British Medical Journal* 325, 1434-1435.
- Dalai Lama (2002). *Advice on dying and living a better life*. London: Ryder.
- Epstein, M. (2001). *Going on being: Buddhism and the way of change*. London & New York: Continuum.
- Harper, G. (1992). *Living with dying*. Grand Rapids: Eerdmans.
- Herth, K. (1990). Fostering hope in terminally ill people. *Journal of Advanced Nursing* 15, 1250-1259.
- Hobfoll, S.E., Briggs-Phillips, M. & Stines, L.R. (2005). Fact or artifact: The relationship of hope to a caravan of resources. In R. Jacoby & G. Keinan (Eds.), *Between stress and hope: From a disease-centered to a health-centered perspective*, 81-104. New York: Greenwood.
- Jootla, S.E. (1993). Advising the sick and the dying. *The Middle Way* 67, 204-211.
- Koenig, H.G. (2000). Religion, spirituality, and medicine: Application to clinical practice. *Journal of the American Medical Association* 284, 1708.

- Larimore, W.L., Parker, M. & Crowther, M. (2002). Should clinicians incorporate positive spirituality into their practices? What does the evidence say? *Annals of Behavioural Medicine* 24, 69-73.
- Lawrence, R.T. & Smith, D.W. (2004). Principles to make a spiritual assessment work in your practice. *The Journal of Family Practice* 53, 625-631.
- Lazarus, R.S. (1999). Hope: An emotion and a vital coping resource against despair. *Social Research* 66, 653-678.
- Levin, J.S., Chatters, J.S. & Taylor, R.J. (2005). Religion, health and medicine in African Americans: Implications for physicians. *Journal of the National Medical Association* 97, 237-249.
- Lynch, W.F. (1974). *Images of hope: Imagination as healer of the hopeless*. Notre Dame: University of Notre Dame Press.
- Marcel, G. (1951). *Homo viator: Introduction to a metaphysics of hope*. London: Victor Gollancz Ltd.
- Meador, K.G. & Jones, L.G. (2000). Bearing witness in life and death. *The Christian Century* 117, 830-832.
- Merton, T. (1949). *Seeds of contemplation*. London: Burns & Oates.
- Merton, T. (1961). *New seeds of contemplation*. London: Burns & Oates.
- Merton, T. (1995). *Entering the silence: Becoming a monk and a writer (The Journals, vol. 2)*. San Francisco: Harper.
- Nouwen, H., McNeill, D. & Morrison, D. (1982). *Compassion*. London: Darton, Longman & Todd.
- Pearson, C. (2000). The future of optimism. *American Psychologist* 55, 44-55.
- Pembroke, N. (2007). *Moving toward spiritual maturity: Psychological, contemplative, and moral challenges in Christian living*. Binghamton: Haworth Pastoral Press.
- Sheehan, M.N. (2000). On dying well: How does one live spiritually in the hope of dying well? *America* 183, 12-15.
- Skorupski, T. (1999). Health and suffering in Buddhism: Doctrinal and existential considerations. In J. Hinnells & R. Porter (Eds.), *Religion, health, and suffering*, 139-165. London: Kegan Paul International.
- Snyder, C.R. (2000). Hypothesis: There is hope. In C.R. Snyder (Ed.) *Handbook of hope: Theory, measures, and applications*, 3-21. New York: Academic Press.
- Snyder, C.R., Harris, C., Anderson, J.R., Holleran, S.A., Irving, L.M., Sigmon, S.T., Yoshinobu, L., Gibb, J., Langelle, C. & Harney, R. (1991). The will and the ways: Development and validation of an individual differences measure of hope. *Journal of Personality and Social Psychology* 60, 570-585.
- Snyder, C.R., Cheavans, J. & Sympson, S.C. (1997). Hope: An individual motive for social commerce. *Dynamics: Theory, Research, and Practice* 1, 107-118.
- Snyder, C.R., Cheavans, J. & Michael, S.T. (2005). Hope theory: History and elaborated model. In J.A. Elliott (Ed.), *Interdisciplinary perspectives on hope*, 101-118. New York: Nova Science Publishers.
- Staats, S.R. & Stassen, M.A. (1985). Hope: An affective cognition. *Social Indicators Research* 17:235-242.
- Weingarten, K. (2005). Cancer, meaning making, and hope: The treatment dedication project. *Families, Systems, and Health* 23, 155-160.
- Weingarten, K. (2006). Hope in a time of global despair. Unpublished paper delivered at the International Family Therapy Association conference, Reykjavik, Iceland, Oct. 4-7, 2006.
- Williams, P. (2000). *Buddhist Thought*. London & New York: Routledge.
- Zopa, T. (1989). Using sickness for the path. Unpublished recorded teaching. <http://www.fpmt.org/Teachers/Zopa/advice/pdf/UsingSicknessForthePath.pdf>. Retrieved Sept. 23, 2008.

News in Bioethics & Biotechnology

<http://eubios.info/NBB.htm>

International Bioethics Education Project News

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

UNESCO Asia-Pacific School of Ethics

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

Conferences

For a list of some ethics meetings in Asia and Pacific:
http://www.unescobkk.org/index.php?id=current_and_future_events

Asian Bioethics Association (ABA)

<www.eubios.info/ABA.htm>

Send papers to EJAIB Editorial Office

Editorial address:

Prof. Darryl Macer

RUSHSAP, UNESCO Bangkok,

920 Sukhumvit Rd, Prakanong,

Bangkok 10110, THAILAND

Fax: Int+66-2-664-3772

Email: asianbioethics@yahoo.co.nz

d.macer@unescobkk.org

Send papers to the editor in electronic form if possible. Please use numbered reference style, do not use automatic footnotes or endnotes. Papers are peer reviewed.

The journal is independent of UNESCO and the contents are not endorsed by either Eubios Ethics Institute or UNESCO, but are published in the spirit of academic freedom.

EJAIB Editor: Darryl Macer

Associate Editors

Jayapaul Azariah (All India Bioethics Association, India),

Masahiro Morioka (Osaka Prefectural University, Japan).

Managing Editor: Nobuko Yasuhara Macer

Editorial Board: Akira Akabayashi (Japan), Sahin Aksoy (Turkey), Angeles Tan Alora (Philippines), Atsushi Asai (Japan), Alireza Bagheri (Iran), Gerhold Becker (Germany), Hasna Begum (Bangladesh), Minakshi Bhardwaj (UK), Christian Byk (IALES; France), Ken Daniels (New Zealand), Leonardo de Castro (The Philippines), Ole Doering (Germany), Norio Fujiki (MURS Japan), Tran Han Giang (Vietnam), Thomas Gionis (USA), Dena Hsin (Taiwan), Rihito Kimura (Japan), Abby Lippman (Canada), Margaret Lock (Canada), H. Ahmad Ludjito (Indonesia), V. Manickavel (Nepal), Anwar Nasim (Pakistan), Mary Ann Chen Ng (Philippines), Jing-Bao Nie (China, New Zealand), Pinit Ratanakul (Thailand), Qiu Ren Zong (China), Hyakudai Sakamoto (Japan), Sang-yong Song (Korea); Noritoshi Tanida (Japan), A.K. Tharinen (India), Yanguang Wang (China), Daniel Wikler (USA), Jeong Ro Yoon (South Korea).

How to order books or journal or the CD!

Cheques in local currency are accepted from accounts with major banks in **Australia, Canada, New Zealand, USA, U.K.** (The currency has to be the same as the address of the bank, and the cheque made out to "Eubios Ethics Institute").

Please use the renewal form enclosed and prices are below: Other currencies (use a bank or post draft) and **credit cards use NZ\$ for the Overseas price.**

In **Japan** use postal transfer to the "Eubios Ethics Institute" account 00340-9-32465.

Eubios Ethics Institute Publications (Books sent by SAL post, Journal by Airmail - Price included)**Eubios Journal of Asian and International Bioethics**

Other countries/credit card

Price: US\$35 Euro 35 UK£20 NZ\$40 A\$40 C\$40 ¥3000

NZ\$60

Shaping Genes: Ethics, Law and Science of Using Genetic Technology in Medicine and Agricultureby Darryl Macer, Oct. 1990, 421pp. Cost: US\$20 UK£10 NZ\$30 A\$25 C\$22 ¥2500 Others or credit card **NZ\$30****Equitable Patent Protection in the Developing World**by William Lesser, May 1991, 150pp. Cost: US\$15 UK£8 NZ\$20 A\$20 C\$17 ¥1500 **NZ\$25****Attitudes to Genetic Engineering: Japanese and International Comparisons (Bilingual)**by Darryl Macer, May 1992 330pp. Cost: US\$30 UK£15 NZ\$35 A\$30 C\$30 ¥3000 **NZ\$40****Human Genome Research & Society**Eds: Norio Fujiki & Darryl R.J. Macer July 1992 ISBN 0-908897-03-0 (English), 230pp. ISBN 0-908897-04-9 (Japanese), 240pp. Cost: US\$20 UK£10 NZ\$30 A\$25 C\$22 ¥2000 **NZ\$30****Intractable Neurological Disorders, Human Genome Research and Society** Eds: N. Fujiki & D. MacerFeb. 1994 ISBN 0-908897-06-5 (English), 320pp. ISBN 0-908897-07-3 (Japanese), 340pp. Cost: US\$25 UK£12 NZ\$30 A\$30 C\$27 ¥3000 **NZ\$40****Bioethics for the People by the People**by Darryl Macer,... May 1994 ISBN 0-908897-05-7, 460pp. Cost: US\$30 UK£15 NZ\$35 A\$35 C\$32 ¥3000 **NZ\$50****Bioethics in High Schools in Australia, Japan and New Zealand,**

by D. Macer, Y. Asada, M. Tsuzuki, S. Akiyama, & N.Y. Macer March 1996, ISBN 0-908897-08-1, 200pp.(A4)

Cost: US\$25 UK£15 NZ\$30 A\$30 C\$30 ¥2000 **NZ\$40****Protection of the Human Genome and Scientific Responsibility (Bilingual)**

Editors: Michio Okamoto, Norio Fujiki & D.R.J. Macer, April 1996, ISBN 0-908897-09-X, 210pp.

Cost: US\$25 UK£15 NZ\$30 A\$30 C\$30 ¥2500 **NZ\$35****Bioethics in India** (includes 115 papers from Jan.1997 conference)

Eds: Jayapaul Azariah, Hilda Azariah & Darryl R.J. Macer June 1998 ISBN 0-908897-10-3, 403 pp.

(Printed in India) Cost: US\$30 UK£18 NZ\$34 A\$36 C\$36 ¥3000 **NZ\$45****Bioethics is Love of Life: An alternative textbook**by Darryl Macer, July 1998 ISBN 0-908897-13-8, 152pp. Cost: US\$26 UK£14 NZ\$34 A\$34 C\$32 ¥3000 **NZ\$40****Bioethics in Asia** (includes 118 papers from Nov.1997 conferences, ABC'97 Kobe and Fukui Satellite)Eds: Norio Fujiki & Darryl R.J. Macer Cost: US\$36 UK£20 NZ\$40 A\$38 C\$40 ¥3000 **NZ\$50**

June 1998 ISBN 0-908897-12-X, 478 pp. October 1999 ISBN 0-908897-14-6 (Japanese), 320pp.

Ethical Challenges as we approach the end of the Human Genome ProjectEditor: Darryl Macer, April 2000 ISBN 0-908897-15-4, 124pp. Cost: US\$20 UK£12 NZ\$30 A\$30 C\$30 ¥2500 **NZ\$35****Bioethics Education in Japanese High Schools (in Japanese only)**Editor: Darryl Macer April 2000 ISBN 0-908897-16-2, 112pp. Cost: US\$20 UK£12 NZ\$30 A\$30 C\$30 ¥1000 **NZ\$35****Bioethics and the Impact of Human Genome Research in the 21st Century**

Eds: Norio Fujiki, Masakatsu Sudo, & Darryl R.J. Macer March 2001 (English and Japanese bilingual, 350pp).

Cost: US\$30 UK£20 NZ\$40 A\$38 C\$40 ¥3000 **NZ\$50****Bioethics in Asia in the 21st Century**

Eds: Song Sang-yong, Koo Young-Mo & Darryl R.J. Macer

August 2003 ISBN 0-908897-19-7, 450pp. Cost: US\$35 Euro35 UK£20 NZ\$40 A\$38 C\$40 ¥3000 **NZ\$50****Challenges for Bioethics from Asia** Ed: Darryl R.J. MacerNovember 2004 ISBN 0-908897-22-7 656 pp. Cost: US\$35 Euro35 UK£20 NZ\$40 A\$38 C\$40 ¥3000 **NZ\$50****A Cross Cultural Introduction to Bioethics** 2006, 300pp. (A4)Editor: Darryl Macer Cost: US\$35 Euro35 UK£20 NZ\$40 A\$38 C\$40 ¥3000 **NZ\$50****The Eubios CD-ROM**all journals + all books ++ (English version) **US\$190** **NZ\$400**

Please send a copy of the whole page.

Please find my cheque for: _____ I wish to receive a free copy (only for developing countries)

Please charge my VISA / MASTERCARD card for **NZ\$**

Account # _____

Expiry Date _____

Signature _____

Want to join the IAB Bioethics and

Date (D/M/Y) _____

Genetics Network(Yes/No)

Mailing address: _____

Email: _____

Fax: _____

Research Interests (for Network): _____

You can Fax this order page to Int+66-2-664-3772 (AND Email to: asianbioethics@yahoo.co.nz)