



# Newsletter

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## *From the Desk of your Coordinators:*

We are pleased to present the version of the Policies that will govern us until our Biannual Conference in Brazil. Please take the time to look at the Policies, particularly if you are on the Advisory Board, serve as a Country Representative, or are interested in applying for a travel and/or registration grant. Note that the Grants Committee consists of Anne Donchin, Viola Schubert-Lehnhardt, and Susana Sommer. Also, note that there has been a change in the Program Committee for the 2002 Brazil Meeting. Because of an extraordinary opportunity to pursue her own research and writing work for a year at Duke University, Hilde Nelson will not have the time to serve as co-chair with Debora Diniz. Fortunately, Sue Sherwin has agreed to take Hilde's place. The full Program Committee includes Sue Sherwin, Debora Diniz, Laura Shanner, Susana Sommer, and Rosie Tong. Congratulations to Hilde and much appreciation to Debora.

Plans for Brazil are already in motion. Sue and Debora have been contacted by Dr. Volnei Garrafa, the Congress organizer for the Sixth World Congress of the International Association of Bioethics (Oct. 31 -Nov. 3). A satellite meeting of FAB is already included in the IAB's planning for their Sixth World Congress (FAB's Fourth Biannual Conference). The likely dates for the FAB meeting are October 29-30, 2002. Dr. Garrafa will be working directly with Debora and Sue, and indirectly with the rest of the Program Committee. We are looking forward to seeing as many of you as possible in Brazil.

We are especially interested in hearing your ideas about the direction in which FAB should proceed. We also are interested in soliciting any ideas you might have about improving the web page, the listserv, and the Newsletter. Just because our organization is functioning well does not mean that it cannot function better. Please contact us, a mem-

ber of the Advisory Board, and/or your Country Representative with your thoughts about how FAB should shape itself in the year 2001 and beyond.

Best wishes,

*Sue Sherwin and Rosie Tong, Coordinators*

## **Perspectivas bioéticas**

*Director: Florencia Luna*

This is the first journal wholly devoted to bioethics published in Argentina. It began in 1996; now it is arriving at its 11<sup>th</sup> issue. Spanish writing authors and the inclusion of translations of well-known international philosophers such as Ruth Macklin, Margaret Pabst Battin and others have contributed to a rational discussion of bioethics in a very conservative society where bioethics has been monopolized by the Catholic Church. Although devoted to bioethics in general, it has always endorsed feminist views about problems, especially those related to reproductive health. Issues can be obtained at: [nrightetti@flacso.org.ar](mailto:nrightetti@flacso.org.ar)

*Susana E. Sommer*

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# FAB Abstracts: IAB 2000

What follows are the second half of the abstracts from papers presented at FAB 2000. (The first half appeared in the November 2000 Newsletter.)

**Babies for Sale: Commodification and Internet Adoptions**  
Toni Schossler, Institute for Medical Humanities, University of Texas-Medical Branch, USA, toni2scott@ev1.net

The Internet has been utilized to reunite adult adoptees with their biological families, to facilitate matching between families at opposite ends of the country, and to make adoptions faster and easier than ever before. However, the Internet is first and foremost a market tool. Not only does the Internet offer to all members of the adoption triad the advantages of modern technology, it also adds market values as an entirely new dimension to the goals of adoption. The Internet has certainly not caused the intrusion of market forces into adoption, but it has made them exceedingly prominent and it has brought the role of money to the foreground. Most disturbing, is the element of commodification that the Internet encourages. The fact that a particular adoptive situation is presented with a price tag is the bothersome factor. Like many other new and innovative technologies, it is easy to overlook the dangers associated with the Internet for all of its benefits. This paper hopes to bring attention to the dangers of Internet adoption and propose some regulation of the Internet's content.

**Technology and Justice in Health Information Distribution**  
Jean Amoura, M.D., University of Nebraska Medical Center, USA, jamoura@unmc.edu

One major outcome of the women's health movement was the empowerment of patients by increasing their access to health information. With the information explosion brought about by online networks, enormous amounts of health information have become readily available online, but the potential down sides of this transforming technology have yet to be fully elucidated. One such problem is that the poor and illiterate (both more likely women, especially in developing nations) are far less likely to be able to reap the benefits of these systems. Also, the appeal of this technology as applied to medical information underscores individualism and privacy, values of prime importance to middle-class white Americans but less significance to other segments of society. Strengthening policy for health education is essential, particularly education via formats shown to reach the underserved, in the U.S. and around the world.

**Justice for Women: It Is Not a Matter of Theory Alone**  
Kausar S. Khan, Community Health Sciences, The Aga Khan University, Pakistan, kausar.skhan@aku.edu

A theoretical construct of justice is often unable to address actual cases of injustice. Each of the four fundamental institutions of society, the home, community, the market and the state, have their own ways of embodying gender injustice. Class and gender discrimination forms the nexus of injustice. The injustices persist, hidden behind the silence of women and reinforced by the silence of the onlookers--especially when the state, the largest of the institutions, is indifferent to the plight of women, and is negligent of its obligations to the poor. An example of the above phenomenon is Pakistan. Pakistan is representative of many coun-

tries where the theory of justice is not practiced in ways that affect real people. For example, research on women in Pakistan generates information that often does not help the women who are the basis of that research. The sociocultural determinants of poor women's health contribute extensively to the high MMR in Pakistan and are ignored by researchers. While researchers see the conditions in which women live in Pakistan, nothing is done to change those conditions.

**The Influence of the British Scheme for Regulating Reproductive Technologies: Feminist Perspectives (Panel)**  
Anne Donchin, Department of Philosophy, Indiana University, USA, adonchin@iupui.edu

In 1990 the British Parliament passed the Human Fertilisation and Embryology Act which established an authority to monitor uses of gametes and embryos outside the human body. Subsequently, a host of other countries have modeled their own regulatory proposals on the British scheme. This panel explores the ethical framework on which this model is based, focusing on its significance for women's health, gender paradigms and family norms. Presenters: **Anne Donchin, Margrit Shildrick, Roxanne Mykitiuk and Debora Diniz.**

**Genesis of the Human Fertilisation and Embryology Authority: A Feminist View**  
Anne Donchin, Department of Philosophy, Indiana University, USA, adonchin@iupui.edu

Britain was the first country to initiate systematic regulation of embryo research and fertility services. Many others followed, often looking to Britain for guidance on how to rein in their own fertility industries. This paper examines the institutionalization of fertility services in Britain, explores feminist apprehensions about this regulatory scheme, and argues for a more pragmatic model responsive to a broader diversity of interests.

**Reconfigurations of Reproductive Difference**  
Margrit Shildrick, Research Fellow, Staffordshire University and University of Liverpool Dept of Primary Care, England m.shildrick@liverpool.ac.uk

As the introduction and potential of new biotechnologies concerned with human reproduction have accelerated at the turn of the century, the major regulatory body in Great Britain, the HFEA, has clung tenaciously to the social and moral structures of post-Enlightenment liberal humanistic society. Although it acknowledges that the changes in reproductive practice have presented serious challenges to conventional ideas, the HFEA is swift to reassure critics that the centres and clinics under its control are acting properly. What is meant by this is not that the field has been opened up to new and more adequate paradigms, but that the normative standards of modernism--the inherent value of the nuclear family, individual best interests, protection of the vulnerable--have been recuperated. Whilst I accept that certain safeguards are necessary, it is not clear that the HFEA's ethical

framework is adequate to the developments of a postmodern age. I ask what difference it would make if we accepted that the issues thrown up by the potential to vary the conditions of reproduction, of motherhood, and indeed of the human being itself, would be better addressed by a postconventional set of considerations that specifically seek to break down the binary categories of the normal and the abnormal, of fertile and infertile, of motherhood and fatherhood. And what would be the dangers of adopting this more fluid and open approach?

### **Regulating Reproductive and Genetic Technologies in Canada**

Roxanne Mykitiuk, J.D., Osgoode Hall Law School, York University, Canada, mykitiuk@yorku.ca

In 1996 the federal government of Canada introduced as Bill C-47 the Human Reproductive and Genetic Technologies Act, intended to establish criminal law sanctions for various practices relating to reproduction and genetic research. At the same time a white paper promised to establish a regulatory body and framework within which the regulation of acceptable practices would take place. Under the various pressures of an upcoming federal election, however, the proposed regulatory body failed to materialize and Bill C-47 died. In its place a voluntary moratorium has continued in effect, and little explicit legislation related to NRGs has been passed in Canada at either the federal or the provincial/territorial level. However, the federal government has promised that new NRG legislation will be introduced in 2000 to address both regulatory issues and prohibited practices. This paper will either evaluate and respond to such legislation as may have been introduced before September, or will discuss state inaction as a form of state regulation. In my view inaction is itself an instance of quasi-legal and state regulation, which needs to be examined from a feminist perspective for its implications for women/gender and health.

### **The Fewer the Better? An Egalitarian Feminist Analysis of Multiple Gestation**

Mary B. Mahowald, Ph.D., University of Chicago Center for Clinical Medical Ethics, USA, mm46@midway.uchicago.edu

After describing circumstances in which multiple gestation arises, different methods and risks of fetal termination, and the risks to pregnant women and potential children of multiple pregnancies, I critique the terminology used in discussing methods of fetal termination with pregnancy preservation (FTPP). The perspective I then bring to the topic is a version of feminism which demands that differences be identified and evaluated for the extent to which they are associated with gender inequality. My analysis of specific cases, both real and concocted, leads to the conclusion that on empirical as well as ethical grounds, "fewer are better" is an appropriate guideline for infertility specialists as well as women. If this guideline were prevalently applied, the incidence of multiple births might return to its natural rate of occurrence, i.e., less than one-third of the current rate in countries where fertility drugs and in vitro fertilization are utilized.

### **Insights from Anthropology About Ethics and Assisted Fertility Technologies**

Kate H. Brown, Ph.D., Creighton University, USA, kbrown@creighton.edu

This presentation uses anthropological concepts and ethnographic findings to explore ethical questions surrounding the use of assisted fertility technologies (AFT) for human reproduction. My comments focus on the interplay of individual agency and socio-cultural imperatives for women seeking AFT in a variety of cultural settings. Questions include: To what extent does AFT expand "choice" for individual women, or is AFT a medicalized extension of the social control of women? Are exploitative gender roles reinforced by AFT, or can these medical options enhance the status of vulnerable women who are otherwise unable to conceive? What equations of risk/benefit do women construct when seeking AFT? Drawing on anthropological research about fertility, gender roles, and kinship, I provide an analytical framework that is attentive to both local circumstances and general principles of feminist ethics such as relationship (e.g. kinship obligations and patterns of exchange and power) and rights (e.g. the freedom to choose and equal access to AFT).

### **A Feminist View of Artificial Reproductive Technology Applications in Turkey**

Serap Sahinoglu-Pelin, M.D., Ph.D., Ankara Medical School, Turkey.

Since 1979, a lot of couples have had babies through ART methods. There are presently about 15 centres in existence for this purpose in Turkey. There are two approved regulations in operation, the second being an improved form of the former. During ART application, the body of the woman concerned is directly affected. After every application, the possibility of not having a living baby can adversely affect the physical and psychological state of the female in question. This trauma can sometimes be beyond endurance. In the two approved regulations mentioned above, the ethics of ART applications has been questioned. This paper will discuss ART applications in Turkey, as viewed by feminists.

### **Who Should Have Access to Artificial Reproductive Technologies? A Comparison of Restrictive and Liberal Regulatory Frameworks**

Cynthia H. Cassell, M.A., Duke University Medical Center, USA, casse002@mc.duke.edu

Due to ethical issues, assisted reproductive technologies (ART) continue to challenge many people's religious, political, and philosophical viewpoints. The extent to which regulation should govern such areas as human reproduction and procreative liberty remain contentious. Consequently, a consensus concerning the need for regulation of ARTs has been extremely difficult to attain, particularly the question of who should have access to ART. This paper examines two current models of restrictive and liberal regulatory frameworks of eligibility requirements in ART regulation. The restrictive regulatory framework is based on the *Infertility Treatment Act 1995* in Victoria, Australia. The liberal regu-

latory framework is found in self-regulation of eligibility requirements in the United States. This paper evaluates these regulatory frameworks using two principles fundamental in a liberal society: respect for autonomy and the prevention of harm to others. It is found that both regulatory frameworks cause undesirable moral consequences and therefore eligibility requirements are morally unjustified.

### **It's All in Your Head! Gendered Social Construction of Three Diagnostic Categories (Panel)**

Barbara Secker, Coordinator, University of Toronto Department of Philosophy and Joint Centre for Bioethics, Canada, bsecker@chass.utoronto.ca

Within a feminist bioethics framework, three papers explore the gendered nature of three socially-constructed, allegedly medical conditions: (1) decisional (in-)competence, (2) mental retardation, and (3) gender identity disorder (GID). All three papers share central methodological, ontological and political assumptions regarding the importance of resisting a naturalization of these conditions, working with a relational, contextualized notion of autonomy, and the centrality of situated gender in relation to principles of social justice. Panel participants are **Barbara Secker, Licia Carlson and Kathryn Pauly Morgan.**

### **A Feminist Social Constructionist Philosophy of Mental (In)competence**

Barbara Secker, University of Toronto Department of Philosophy and Joint Centre for Bioethics, Canada, bsecker@chass.utoronto.ca

This presentation sets out different theoretical senses of social construction and then illustrates these by showing how social construction enters into the legal medicalizing of the concept of mental / decisional incompetence and associated assessment practices. Arguing that the cognitive deficit model camouflages genderized threats to care, autonomy and justice, the presentation brings into focus the devastating risks to women's moral and legal personhood posed by the medical/legal institutionalization of competency assessment practices.

### **Diagnosing Feeble-Minded Women: Feminist Bioethical Lessons To be Learned from the History of Mental Retardation**

Licia Carlson, Department of Philosophy, University of Seattle, USA, licia Carlson@hotmail.com

This presentation explores the hidden gender dimension of the category of mental retardation. It shows how complex social, political and philosophical factors enter into the construction of naturalized typologies of persons labeled mentally retarded. Looking specifically at the history reveals a complex gender web of power among women in various roles, such as institutionalized inmates, caregivers, mothers, researchers and feminist reformers. Attention is also directed to the symbolic role played by the concept of the feeble minded woman in generating an oppressive set of political and therapeutic practices targeted at all women regarded as deviant and assimilable to this symbolic norm particularly with respect to reproductive and genetic rights.

### **Farewell to Tomboys: Some Reflections on the Scary Dimensions of the Diagnosis of Gender Identity Disorder**

Kathryn Morgan, University of Toronto Department of Philosophy, kmorgan@chass.utoronto.ca

This presentation examines the diagnostic category of Gender Identity Disorder in the current Diagnostic and Statistical Manual of the American Psychiatric Association, particularly as it applies to women and girls. Seen as one of many mental illnesses captured under the increasingly vague pathological umbrella of gender dysphoria, gender identity disorder-identified girls and women are increasingly subjected to institutional confinement and surgical, pharmaceutical and other invasive therapeutic interventions. The presentation examines the ontological and socio-political presuppositions built into the diagnostic criteria, drawing linkages to other instances of the medical pathologizing of girls' and women's behaviour.

### **Care and Autonomy in Discussions on Psychiatric Patients' Rights: A Perspective from the Netherlands**

Selma Sevenhuijsen, Department of Communication and Welfare, University of Utrecht, the Netherlands, s.sevenhuijsen@fss.uu.nl

Guy Widdershoven, Department of Communication and Welfare, University of Utrecht, the Netherlands

In the first part of this paper we present a normative analysis of Dutch policy discussion on Ulysses contracts for psychiatric patients. We argue that the discussion until now has been dominated by an ethics of rights. The discussion focuses on the question of whether those contracts can be seen to be in accordance with principles of autonomy as self-determination. In the next section we go into the question of whether an ethic of care could contribute to the discussion. Three characteristics of the ethics of care can be considered relevant: the notion of care as a moral practice, its conception of moral subjectivity and the idea of an alternative moral epistemology. Against this background we discuss the potential contribution of notions like communicative interaction, relational autonomy, ambiguity, responsibility and trust, with the goal of substantiating the conclusions via empirical research in the tradition of grounded theory.

### **Contextualizing the Discussion: A Feminist Policy Methodology**

Lenore Kuo, Center for the Study of Women and Society, City University of New York Graduate College, USA, lkuo@gc.cuny.edu

How can feminist theorists develop policies which are coherent, defensible and adequately contextualized which demonstrate the appropriate awareness of and response to the current situation of diverse constituencies of women, which universally includes gender subordination? This paper argues that any adequate public policy analysis must consider the current practice, current conceptual construction, innate qualities and ideal of the relevant activity in order to coherently advocate for a specific policy position. Traditional philosophical policy analysis failed to consider all four aspects, overemphasizing the role of the ideal, viewing conceptual constructions as timeless universals, believing that the existence of some minimal innate qualities justified

essentialism, and speculating about current practice. I will discuss in what ways each of these four features of an activity is important to policy formation, as well as suggesting necessary changes in philosophic research methodology. Throughout I will be using prostitution policy to explicate my position.

### **Feminist Bioethics: Going Forward in the New Millennium by Going Back to Basics**

Carol Quinn, University of Syracuse, USA, [cquinn@mailbox.syr.edu](mailto:cquinn@mailbox.syr.edu)

In December 1999, the Portland Oregonian ran a five-part series on human testing of the pesticide azinphos methyl, more commonly known by its (Bayer Corporation) brand name, Guthion (December 5-9, 1999). Guthion is classified as a Class I pesticide — the most toxic. Most recently, in 1998, Bayer Corporation sponsored human trials of the pesticide Guthion on university students in Britain and Scotland. Pesticide companies have made widespread use of human trials, in the U.S. and abroad, since the 1960s. Such trials on newborns (in Milan, Italy), prisoners (in a state of California Department of Public Health sponsored test), and others, are often conducted without the subjects' consent. Unfortunately, unethical or dubiously ethical experimentation is not uncommon despite several measures in place to prevent them. The medical community, despite its great advances in genetics, reproductive technologies, and so on, still has not got it right with respect to basic human decency. This paper will serve as an introduction by way of summary for a four-part lecture series I am developing which puts forth four key virtues — dignity, integrity, respect, and trustworthiness — which I suggest must be inculcated in the bioethical community. Here I challenge standard conceptions of these terms, drawing on insights from the testimony of experimental victims.

### **Women and Contemporary Bioethics: Legacy, Paradox and Affirmation**

R.R. Kishore, M.D., L.L.B., Indian Society for Health Laws and Ethics, India, [kishore@giasdla.vsnl.net.in](mailto:kishore@giasdla.vsnl.net.in)

In a world which takes pride in its human content and aspires to preserve it as a common heritage of humanity, women continue to be the victims of fanaticism, violence and indignity. In an order claiming to be founded on science, ethics and liberty, 585,000 women die every year due to causes attributable to pregnancy and childbirth. Bias against women is a global phenomenon. Women, who have long been identified with pregnancy, childbearing and domestication, have come under additional pressure due to the advent of newer fertility techniques, intensifying the pro-natalist sentiment for biologically related children. In India, 30-50% of HIV positive persons are women, most of whom have been infected via heterosexual transmission, owing to their inability to refuse sexual intercourse. In this paper I analyze the existing scenario and conclude that gender equality is an inseparable component of life and liberty, and women's empowerment is a prerequisite for social security, economic advancement and health for all.

### **The Ethics of Placebo-Controlled Trials for Maternal-Fetal HIV Transmission in Developing Countries**

Patricia C. Farrell, University of Washington, USA, [pfarrell@u.washington.edu](mailto:pfarrell@u.washington.edu)

In September 1997, an editorial appeared in the *New England Journal of Medicine* denouncing the conduct of clinical trials in Africa, Asia and the Caribbean that were designed to reduce maternal-fetal transmission of HIV. The controversy surrounding these trials centered on the use of a placebo control. Bioethicists have supported both sides of this controversy--one group maintaining that the only reliable methodological regimen is the classical clinical trial using a placebo-controlled arm; the other stating that only when there is no known treatment can a placebo be used. These two positions reflect an ontological and epistemological as well as an ethical divide. In order to investigate the foundational bases for this important problem in the ethics of clinical research, I use Margaret Urban Walker's discussion of the *theoretical-judicial models of ethics* and the *expressive-collaborative models of ethics* to analyze the texts of the discussion of this issue.

### **Women at the Center: The Relationship between Science and Ethics in HIV/AIDS Vaccine Trials In Developing Countries**

Linda M. Richter, School of Psychology, University of Natal, South Africa, [richterl@psy.unp.ac.za](mailto:richterl@psy.unp.ac.za)

Doug R. Wassenaar, School of Psychology, University of Natal, South Africa

Young women in developing countries, most especially in southern Africa, have the highest risk for HIV infection and currently have the highest prevalence rates in the world, reaching 40-50% in some areas of South Africa. This group is frequently spoken about as the axle around which the wheel of infection and spread turns, by means of their sexual relationships with men, their connection with their children through pregnancy, birth and breast feeding, and their role as caretakers of the sick and dying. Young women are also the target group of HIV vaccine trials already in progress and planned to begin in Africa in the next two years. Through the activities of the HIV/AIDS Vaccine Ethics Group at the University of Natal, funded by the South African AIDS Vaccine Initiative, we have investigated several aspects of ethical trial practice in a rural community identified as a potential vaccine site. These include informed consent and understanding of trial design concepts, such as randomization and placebo. This paper reflects on the current female focus of AIDS prevention activities in developing countries in terms of gender injustice, and the relationship between science and ethics. In particular, it deals with the problems of treating ethical practice as separate from scientific practice. Instead, we will argue that scientific reliability and validity are intrinsically dependent on ethical practices, as evidenced from social psychological studies of participant behavior in research.

### **Misogyny, Homophobia and the HIV Pandemic** Elizabeth Crock, RMIT University, Australia

Historically, the negative evaluation of female sexuality has formed the foundation for the stigmatization of male homosexual behaviour. Male homosexual behaviour was widely accepted in ancient Greece and Rome, but attained its privileged status only by using female sexuality as a negative reference. Passivity or effeminacy are strongly stigmatized in male citizens. Recently, too, feminists and lesbian and gay writers recognise that the essence of men's hatred of male homosexuality is their horror of female sexuality and the fear of such potential degradation in themselves. In this paper I argue that misogyny is at the root of homophobia, and that it is implicated in a pivotal way in the HIV pandemic. Homophobia must be acknowledged to be a consequence of misogyny and ethical approaches to the HIV epidemic must address this if they are to promote justice and enable prevention.

### **Feminist Perspectives on Wellness: Women's Autonomy, Empowerment, Health and Community (Panel)**

Annette Dula, Ed.D., Tuskegee University National Center for Bioethics and Research, USA, [dula@spot.colorado.edu](mailto:dula@spot.colorado.edu)

The purpose of this panel is to broaden the current notions of women's health into the rubric of wellness. We argue that women's health depends on meeting economic, emotional, political, sociocultural, and spiritual, as well as physical, needs. Health, so defined, or *wellness*, is rooted in autonomy, empowerment, and community. We will provide three examples of how women's wellness is undermined, and how it can be enhanced through feminist action. Panel participants: **Anette Dula, Margo Okasawa-Rey, Gwyn Kirk, Alison Jaggar.**

### **Militarization, Wellness and Autonomy**

Professor Gwynn Kirk, Women's Studies, Hamilton College, USA, Margo Okasawa-Rey, San Francisco State University, USA

The degradation of the natural environment due to military operations contributes to high incidence of certain negative health effects. That is but one example of the ways in which women's well-being is undermined by militarism. This paper discusses the work of the East Asia-US Women's Network Against Militarism, a project concerned with the effects of the US military presence on women and children in Okinawa (Japan), South Korea, and the Philippines. The focus of our work is on increasing the effectiveness of grassroots organizing in support of women and Amerasian children, a much neglected and stigmatized group, in the face of continual violence against women and children by the US military personnel, and the negative health effects of environmental hazards caused by military operations. Relatively little work has been done on this complex topic, which raises sensitive questions of violence against women, racism, and national sovereignty and security. We argue for a re-definition of security that could ensure the well being of women, as well as of children and men, throughout the world. We draw on frameworks that link race, class, gender, nation and the global capitalist economy, and start from an anti-militarist, anti-imperialist perspective.

### **Globalizing Gender Justice, Women's Autonomy and Human Care**

Professor Alison Jaggar, Philosophy and Women's Studies, University of Colorado at Boulder, USA, [jaggar@spot.colorado.edu](mailto:jaggar@spot.colorado.edu)

Globalization has become a buzzword that means very different things to different people. It is often presented as the result of recent technological advances, but in fact intercontinental travel and trade have always existed. Even capitalist globalization is not new. Instead, the age of European imperialism produced the steeply sloping playing field onto which the contemporary form of capitalist globalization was introduced in 1945 as the world turned to reconstructing societies that had been crushed by war. Fifty years ago, many people were optimistic about the possibility of creating new social orders that would be more free, equal and just than those undermined or destroyed by war. Today, as the global economy becomes ever more tightly integrated, advocates of this integration make even more dazzling promises. These include prosperity, peace, environmental protection, democracy and an end to racism and ethnocentrism. The promises also include an end to ancient forms of patriarchy and the inclusion of women as full participants in politics and the economy. This paper surveys some of the ways in which the breaking of these promises has had disastrous consequences for women's health around the world. It argues that taking seriously the goal of promoting good health for women requires a renewed commitment to fulfilling these promises, and that this, in turn, requires a transformation of the current model of globalization.

### **A Neglected Bioethical Issue: The Health of Women of Color**

Annette Dula, Tuskegee University National Center for Bioethics, USA, [dula@spot.colorado.edu](mailto:dula@spot.colorado.edu)

The poor health of women of color is an ethical issue of global magnitude. It is an ethical issue because poor health status is often a result of the unfair distribution of resources; it is a global issue because poor health is a phenomenon of women of color regardless of whether they live in the industrialized countries of the Americas and Europe or the less industrialized nations of Asia and Africa. Certainly mainstream bioethicists, and particularly feminist bioethicists, have commented on issues like female genital mutilation and even the ethics of research on populations in poor countries. However, they have for the most part not explored the commonalities that contribute to the poor health of women of color in the US and in other countries. Women of color, whether from the north or the south, have similar problems that diminish their well being: the lack of access to adequate housing, employment and health care; lack of personal autonomy and agency. Unfortunately the absence of well being in women of color is a common and accepted fact in both the US and in other countries where women of color live. Using African American women as one example, I will examine factors that influence the general well being of women of color and discuss bioethical issues relevant to women of color in the north and the south.

**Lesbian Ethics and Bioethics: Making Connections (Panel)**  
Aida Santos, Coalition Against Trafficking in Women-Asia Pacific, Philippines, afs@qinet.net

This panel, moderated by Aida Santos, will explore the relationship (actual and potential) between lesbian (bio)ethics and the larger bioethical discourse. Participants are **Jeanelle de Gruchy, Aida Santos** and **Alison Brookes**.

**Between Assimilation and Recognition: Lesbian Healthcare Ethics**

MaryAnn Bendfeld, Department of Philosophy, Dalhousie University, Canada ma.bendfeld@ns.sympatico.ca  
Susan Sherwin, Department of Philosophy, Dalhousie University, Canada, susan.sherwin@dal.ca

This paper is concerned with examining the site at which ethical decision-making in healthcare operates. As many feminist bioethicists have noted, this site is social and political. As such, it is subject to various forms of discrimination, including discrimination against gays and lesbians. Various legal initiatives seek to prohibit discrimination on the basis of sexuality, their aim being generally to treat gays and lesbians as just like everybody else and gay and lesbian partnerships the same as heterosexual marriages. We argue that bioethicists may miss relevant factors that should be considered if they view gays' and lesbians' situation simply as similar to that of heterosexuals. We explore areas where attention to difference is important to bioethical deliberations.

**Ethics that Exclude: A South African Case Study**

Jeanelle de Gruchy, Ph.D., Nottingham Health Authority, UK  
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South Africa is emerging from decades of systematic racial and other forms of discrimination, which have affected every aspect of civil society, including the health sector. Following the first democratic elections in 1994 there have been attempts within the health sector to address the involvement by health professionals in human rights abuses during apartheid. One particular research project aimed to document the human rights violations experienced by gays and lesbians in the military in the context of medical care, and to explore how the military, through psychiatrists, constructed homosexuality as deviant behavior. This paper discusses the difficulty encountered in receiving approval from the ethics committee of one of the national science councils. It explores the ways in which ethics' can be used as a method of exclusion for research that challenges hegemonic heterosexuality.

**Lesbian Ethics: Dis/Advantages From the Margins**

Alison Brookes, Ph.D., La Trobe University, Australia  
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This paper will discuss the potential of engagements with and critiques of health disciplines' practice and theory that are facilitated by exploring issues from marginal positions. It is not new for marginalised groups to engage with and critique health care practices and theory. What is less common is the question of what ethical frameworks developed

by such groups have to offer the development of bioethical theory. Lesbian ethics, while influenced strongly by, and often framed by, feminist ethics, has much to offer bioethics. The central claim of the paper is that lesbian ethics has much to offer as well to the development and implementation of models of healthcare.

**Property and Women's Alienation from Their Own Reproductive Labor**

Donna Dickenson, Medical Ethics and Law, Imperial College London, UK, d.dickenson@ic.ac.uk

There is an urgent need for reconstructing models of property to make them more woman-friendly. However, we need not start from scratch; both canonical and feminist authors can sometimes provide concepts which we can refine and apply towards women's propertylessness. This paper looks in particular at women's alienation from their reproductive labor, building on Marx and Delphy. Developing an economic and political rather than a psychological reading of alienation, it then considers how the refined and revised concept can be applied to concrete examples in global justice for women.

**Trust As Framework For Organizational Ethics**

Susan Dorr Goold, M.D., Internal Medicine, University of Michigan, USA, sgoold@umich.edu

It is widely acknowledged that trust is a vital component of and basis for relationships between clinicians and patients, and that these interpersonal trust relationships have moral content. Trust is particularly important in health care, and is present in relationships with organizations such as hospitals and insurers as well as with clinicians. In this paper I will describe the relationship between individuals and health care institutions using trust as a conceptual framework, then draw conclusions for the ethics of health care organizations and argue for a trust-based account of organizational morality. Next I will describe the nature and elements of trust-based institutional/individual relationships. Finally I will discuss conditions which influence trust, and contrast those with conditions of trustworthiness. A better understanding of institutional trust will provide insight into the morality of organizational actions.

**Science and Moral Agency in a Complex World: Longino's Feminist Virtues**

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Increasingly urgent calls for a new contract between science and society are being heard, prompted in large part by the extremely rapid developments involving genetics and biotechnology in medicine and agriculture, and by equally pressing issues concerning the deteriorating state of the physical environment and the biosphere. However, a demand for a new contract retains the idea that these two spheres of human activity are somehow separate, that there is an interface between science and society across which negotiations need to take place. This view also leads one to posit a demarcation line between the scientific and social agency of scientists, across which scientists ought to nego-

tiate their own moral positioning. My current work draws on Helen Longino's feminist virtues to show that these virtues allow us to transcend such a dichotomous perspective. This alternative approach is based on an understanding of scientific knowledge as social knowledge. Within this conceptual framework, scientists are always and indivisibly both knowledge-creating and social agents. Seeing scientists as agents situated in complex social systems whose agency may be guided by Longino's virtues, provides fresh insights and possible routes toward a science for the twenty-first century.

### **Is a Global Bioethics Possible? Some Feminist Perspectives**

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In this paper I argue that a global bioethics is possible. Specifically, I present the view that there are within feminist approaches to bioethics some of the conceptual and methodological tools needed to forge a bioethics that embraces the health-related concerns of developing and developed nations equally. To support my argument I discuss some of the challenges that have historically confronted feminists. If feminists accept the idea that women are entirely the same, then feminists present as fact the fiction of the essential woman. Not only does woman not exist, she obscures important racial, ethnic, cultural and class differences among women. However, if feminists stress women's differences too much, feminists lose the power to speak coherently and cogently about gender justice, women's rights and sexual equality in general. Analyzing the ways in which the idea of difference as well as the idea of sameness have led feminists astray, I ask whether it is possible to avoid the Scylla of absolutism (imperialism, colonialism, hegemony) on the one hand and the Charybdis of relativism (postmodernism, fragmentation, balkanization) on the other. Finally, after reflecting upon the work of Uma Narayan, Susan Muller Okin and Martha Nussbaum, I conclude that there is a way out of this ethical bind. By focusing on women's, children's, and men's common human needs, it is possible to lay the foundation for a just and caring global bioethics.

### **Reproductive Health and International Development Assistance: Is Reform Fair to Women?**

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There is increasing pressure on international development agencies to carry out reforms that will make them more accountable to stakeholders for the resources that they control. A main platform of these reforms is an emphasis on identifying and achieving developmental and organizational results. This paper focuses on international development aid in reproductive health, and examines how these reforms may effect women's equitable access to resources. How can we ensure that such reforms are in the interests of women, and that the definition of results, the ways of measuring results, and the strategies for achieving them are responsive to the needs of poor women in developing countries, rather than a reflection of the interests of the developed world? How can we ensure that women are involved in defining and monitoring results, and that these do improve women's lives?

### **Women's Views on Justice in Health Care: Experiences from Germany**

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At the end of the century Germany is undergoing a great debate on health care reform. Will Germany continue to have a healthcare system based on financial solidarity between the generations, between genders, between the rich and the poor, between the chronically ill and more or less healthy people? The paper presents results of empirical research which shows that men and women disagree about what is to be expected from further development of medical techniques, and on what counts as justice in health care. Both agree that competition of providers--one of the cornerstones of the new system, according to politicians--should have little or no place in the health care system. The paper concludes with a description of how German women are trying to realize their vision of a healthcare system for the next century.

### **Emerging Health Pluralism, Priority Debates and the Visions of Tomorrow**

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Medical and health care is no longer a fiduciary relationship between a physician and a patient; many new players have descended on the scene. In a world where requirements of health range from safe drinking water to breast prostheses, biotechnology can range from humanizing animals to creating new life forms, and human rights can range from the rights of the dead to the rights of the unborn, conceptual inadequacies and competing--and sometimes conflicting--interests have enhanced the possibilities of ethical miscarriage. In light of this range of issues, priority setting poses a formidable challenge. Prioritizing means harmonization of legitimate interests of diverse parties, within the parameters of value concepts and socioeconomic constraints. This calls for radical reassessment of fundamental concepts. This paper addresses 10 essential issues that need to be faced in setting health priorities for the new century.

### **The Value of Difference**

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This paper describes the experience of a community member serving on Institutional Review Boards in the United States. It delineates her successes, disappointments and personal development. There is particular emphasis on the importance of broad community participation with suggestions for more aggressively responding to the Federal Regulations which call for diversity in race, gender and cultural background. The author recognizes the weakness of the health establishment's response to the mandate and the concomitant weakness of the role played by the community representative and suggests ways to remedy the essentially undemocratic nature of today's research review. The paper describes this member's interest in women as participants in research from which they have been unfairly excluded, the belief that an increase in persons not affiliated with the institution would strengthen the ethical basis from which decisions are made, and the need to develop strategies to balance the power relationships within the membership.

## **Moral Reasoning and the Review of Research Involving Human Subjects**

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Research ethics committees can be understood as a special case of an important move made in moral life: showing respect to others by reasoning about their interests. In this paper I argue that while impartiality, the ideal of moral reasoning that asks moral thinkers to refrain from giving special weight to particular preferences, needs, or attachments has generated fruitful insights as the preferred way of showing moral respect to persons who may participate in research, it lacks resources for illuminating the intricacies of how research can be unethical. For research review to offer meaningful gestures of moral respect--understood as promoting the ideals of respect for persons and social equality--it should adopt a conception of moral reasoning that embraces rather than resists or underestimates the influence of particularity. Dialogical reasoning that embraces particularity can be especially potent for the most vulnerable members of particular societies, as well as for potential subjects in economically underprivileged countries where research is carried out with the financial support of more affluent ones.

## **Revising International Guidelines for Biomedical Research Involving Human Subjects: The Role of Feminist Bioethics** Janet Borgerson, Sweden

Feminist bioethics is uniquely suited to deal with conceptual issues arising in the debate over the ethics of international health research. On a world-wide scale, the practice of human subject use is undergoing a formal shift, and we need to focus energy on issues that are being debated on this global scale. Feminist ethicists have long dealt with the troublesome aspects of personhood: who is excluded and who included, particularly in regard to race, sex and class. But Robert J. Levine and others have argued that personhood is a western concept, and that in transporting it across cultural lines, naïve westerners engage in cultural imperialist domination. Informed consent is also being reconceptualized. Feminist Bioethics must draw upon its analytical and theoretical resources and participate in the redefinition of critical terms and global policies through which poor people, often of color, are potentially the most exploited.

## **Keeping Abreast of the Silicone Breast Implant Debate: A Feminist Critique**

Jennifer A. Parks, Department of Philosophy, Loyola University, USA, jparks1@luc.edu

My paper considers questions of risk and rationality as they relate to the use of silicone breast implants. In it, I treat a variety of questions, including the following: How can we determine acceptable levels of risk with regard to these implants? Can (or should) we distinguish between women's use of implants for cosmetic (augmentation) versus reconstructive (post-mastectomy) purposes? Is an objective, neutral scientific account of the harms to women caused by these implants possible? Should corporations like Dow Corning be responsible for highly contested claims that their silicone implants are harmful? My analysis of risk, rationality, and the ethics of silicone breast implant usage is intended to deepen and further the current media, bioethical, and legal debate surrounding this issue; for, as I will argue,

public debate surrounding silicone breast implantation has failed to deal satisfactorily with questions about sexist biases in rationally assessing its medical risks.

## **Xenotransplantation and the Blurring of Species Lines**

Dr. Elizabeth McGregor, Harvard Medical School, Harvard University, emcgregor@caregroup.harvard.edu

Xenotransplantation, the transplantation of animal cells, tissues or organs between species (in our case study "Ethics, Science & Governance", between the pig and humans), raises several ethical issues. Perhaps most important is the risk that a pig virus would infect the human recipient and would be transmitted from that recipient to the general public causing an epidemic not unlike AIDS. That the potential of such a risk exists is clear; the magnitude of the risk is unknown. Other ethical issues include: the North-South divide, since benefits are likely to accrue to individuals in industrialized nations although the burden of any potential global pandemic would be borne by developing nations as well; the legal and theological issues regarding the creation of transgenic animals; the blurring of species individuality, and the need to have international agreement since a pandemic would not respect national boundaries. From the standpoint of women and children, special attention needs to be shed on issues such as the differential access to this technology, the differential impact on vulnerable populations of any potential pandemic similar to the AIDS virus, the commodification of the human body and its parts, the sacredness of life and our impulsion to extend its limits at great societal cost. This paper seeks to stimulate vigorous exchange on a feminist framework for consideration of one of biotechnologies most remarkable future possibilities - the transplant of organs across species lines. Co-presenter: **Victoria Martins**

## **Medical Research, Ethics, and Women: Revision of the Declaration of Helsinki on the Agenda of Feminist Bioethics**

Dr. Marilena V. Correa, Instituto de Medicina Social da UERJ, Mcorrea@ism.com.br

The Declaration of Helsinki represented a crucial ethical landmark for the clinical research involving human beings. Since 1964, when the Declaration was promulgated, a series of revisions and modifications were applied to the original text, but they did not alter its humanist character and its international force for the regulation of clinical research. For the past four years, a proposition for a profound revision of the ethical principles guiding the Declaration has been debated. In case this proposition is approved, the clinical international research with human beings will be radically modified, further increasing the vulnerability of certain social groups. The advocates of the new version of the Declaration defend the necessity of establishing nationally defined ethical references, thus suppressing the universalistic and supra-regulatory character of the declaration. In this context, it is of crucial importance to critically analyze the ethical arguments employed by the advocates of the new proposition, which will require a redefinition of the condition of protection to vulnerability included in the Declaration. In this article, we show the historical process that led to the promulgation of Declaration of Helsinki and the most recent debates about the new draft. The article analyses the social implications of the new text for underdeveloped countries, arguing for a political consideration of the concept of vulnerability.

# Book Review Section

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A review of **Violence Against Women: Philosophical Perspectives**, edited by Stanley G. French, Wanda Teays, and Laura M. Purdy. Ithaca and London: Cornell University Press, 1998. 260 pages, \$49.95 cloth; \$16.95 paper.

This collection of essays is divided into five thematic parts (sexual assault, domestic violence, sexual harassment in legal and medical contexts, pornography and prostitution, and policies and perspectives on violence), almost each chapter relating excruciating accounts of violence perpetrated against women. Although the collection painfully reminds the reader of these persistent atrocities, the subtitle is somewhat misleading. While some authors succeed in establishing clear links between philosophical thought and the specificity of violent acts against women (see the excellent chapters written by Clelia Smyth Anderson and Yolanda Estes, as well as Arnold R. Eiser's contribution), theoretical backdrops in the remaining chapters tend more to take inspiration from medical anthropology (Abby L. Wilkerson), feminist legal theory (Debra A. DeBruin, Wanda Teays, Catharine A. MacKinnon), sociology (Roksana Nazneen, Semra Asefa), international relations and development theory (Natalie Dandekar), feminist critique (Nadya Burton), and politico-judicial analyses (Patricia Kazan, Catharine A. MacKinnon).

Indeed, taken as a whole, the anthology revolves more around issues pertaining to feminist legal theory and the philosophy and history of law rather than philosophy per se. The important presence of feminist legal analysis is not surprising in light of the fact that feminist-based laws or the enforcement of existing ones offer perhaps the most practical way of eradicating violent acts against women. However, and as most of these essays point out, existing laws oftentimes do not suffice even when serious political attempts at enforcing them are made. In addition, and superbly demonstrated by the philosophical development made by Anderson and Estes in their chapter, "Myth of the Happy Hooker," the nature of violence inherent to the encounter between a prostitute and a "client" implies much more than what any law could encompass; it involves a form of moral evaluation by both the prostitute and the "client" relative to this act of mutual "objectification" and the harm engendered by it. In the final analysis, what this particular chapter illustrates also functions as a fundamental but rather hidden leitmotif throughout the anthology, that is to say, the necessity of obtaining a profound understanding of differing philosophies and cultural world views that strongly resist integrating international human rights texts in general and feminist legal analysis in particular.

The only criticism I would have, then, is that *Violence Against Women* constitutes more of an interdisciplinary feminist approach than a purely philosophical one to different forms of violence specifically directed towards women. However, this does not take away from the quality of the essays within, and the book's pedagogical potential for introducing specific contours of violence against women through numerous case studies.

Jennifer Merchant, *Paris*



A review of **Thinking About the Baby: Gender and Transitions Into Parenthood**, by Susan Walzer. Philadelphia: Temple University Press, 1998. 224 pages \$49.95 hardcover; \$16.95 paper.

The other day I was having lunch with a faculty colleague who had been a college acquaintance. Talking about his homelife, a wife and ten-year-old daughter, he said, "We have done things the traditional way, I guess; my wife stayed home after we adopted our child." Given the lessons of Susan Walzer's book, in case feminists didn't already know this, we are even more sure than before that this arrangement even in modern-day professional families with feminist leanings and egalitarian aspirations is not an accident; it didn't "just happen".

Think about people we know in our professions, at our hospitals, and universities, and law practices. If we are in heterosexual households raising a child or two, how many of us "just happen" to find that women reduce their employment or leave it entirely when children are young? If you thought that Nancy Chodorow's groundbreaking (but now twenty-two-year-old book) *The Reproduction of Mothering* couldn't still be true, read Susan Walzer and take another look. Regardless of education and class, and regardless of whether they remained in or out of the paid labor force, the white married women in her admittedly small sample (25 couples) became primary caretakers of their infants and toddlers in twenty-three out of twenty-five of the couples she interviewed--not in the 1970s, but in the late 1990s. In her clear, readable prose, Walzer tells us about the lives of these

couples whom she interviewed after their children were at least a year old. What she tells us may not be new news, but it is also not very good news, at least for anyone committed to egalitarian marriage and parenthood. Not only is the news not good as it applies to the marriages and worklives of the grownups, one wonders how good it is for the children (a topic not actually addressed in the book). Walzer's own focus is on how women and men experience their lives as parents: what parenthood does to their marriages, to their division of domestic labor, and to its effects on worklives outside the home. She also pays attention to how each partner understands the feelings and experiences of the other, and she learns that fathers and mothers each have beliefs that conform to what we might have thought were outdated media images of "Leave it to Beaver" or "The Brady Bunch." She discusses how the television show "Home Improvement" reflects the reality of mothers being, or intending-to-be, nurturant and present for children, and fathers being productive and economically providing, and relatively absent from the home and from the children. She traces the show's popularity (both with her particular interviewees and the nation in general) to its portrayal of a family that is, in the words of one of the fathers in her sample, "a little traditionalist."

For Walzer, a sociologist, women and men are "behaving in ways that 'real' women and men, as socially defined, are expected to behave." Even if they do not always live up to normative conceptions of femininity or masculinity, Walzer's new parents--especially the mothers--are well aware of those norms and generally seem embarrassed, apologetic, or defensive about the lapses. The mothers are also generally less happy in their lives and their marriages than are their husbands, who are less involved with the new babies than the mothers would wish. Not surprisingly, the men struggle with social messages that they should be more involved with their children and their wives than they are, or than they want to be, and the men also report feeling relatively neglected by their partners, who are spending much of their psychic and practical energy on meeting the needs of their children or worrying about how they are failing to do so.

What Walzer's interviews reveal (supplemented by the abundant sociological literature she cites to place her study in context) is that today's women may be carrying round and trying to fulfill scripts of 1950s mothers, but they are not enjoying themselves very much, even if they are enjoying their children. They feel the lack of support and involvement of their male partners, often miss contact with women friends, and feel inadequate to the task they believe themselves required to perform. If they are working at jobs they enjoy, they often worry that they are not sufficiently present for their children; strikingly, neither they, nor their partners, seem to worry about how absent the fathers are, or why the mothers are the ones thinking they should "do it all." Walzer faults the media, as well as professional literature on bonding, breast-feeding, and parental advice books, for putting mothers in a bind and generally taking fathers

off the hook. She quotes a variety of sources that tell women about their "unique" relationship with their babies that comes from their biological connection of gestation and lactation. She quotes other sources that urge women to remember to attend to their husbands, who often feel neglected by the baby, but finds no sources that tell men anything about paying attention to the needs and concerns of their wives. Her concluding chapter moves from description and analysis of her data to sensible, if not novel, recommendations for social policy and clinical practice. Bioethicists may have less interest in the recommendations for changing pay equity and workplace policies, but they should pay attention to her advice for clinicians, who could make a difference in helping new parents survive the transition to parenthood. She reports that the transition to parenthood adversely affects a large proportion of marriages, and ultimately, the mental health and well-being of mothers, fathers, and their children. It is a wonder that family and social life are not worse than they are today, given the difficulty and distress Walzer describes. Her book is not powerfully or beautifully written, but it contains information that our students should know. It can be read by undergraduates and medical students, and the findings and recommendations are worth consideration.

Adrienne Asch, Wellesley College



A review of **Notes from a Narrow Ridge: Religion and Bioethics**, edited by Dena S. Davis and Laurie Zoloth. Hagerstown: University Publishing Group, 1999. 302 pages, \$55.00 cloth; \$24.95 paper.

The connection between bioethics and religion has always been an important one; much of the early discussion of issues in bioethics occurred in religious spheres. The impetus to separate the secular discipline from its religious foundations is a relatively recent development. As scholars now begin to recognize the limits of the autonomy-centered ethic and think in terms of the community, religion once again emerges as a cornerstone. This anthology attempts to illuminate the connections between bioethics and religion and to suggest ways that ethicists with backgrounds in religious studies and/or theology can contribute to the discussion.

Dena Davis's introductory essay, "It Ain't Necessarily So: Clinicians, Bioethics, and Religious Studies" is a recasting of her 1994 article that appeared in the *Journal of Clinical Ethics*. She argues that the proper function of bioethicists with a religious studies background is to publish work that is useful to clinicians, specifically by describing the current behaviors and practices of members of the religious group in question rather than offering an esoteric recounting of theology or justification. To illustrate the necessity of this approach, Davis offers an example of a phy-

sician who encounters real, live Jewish patients for the first time in a New York residency, to demonstrate how disparate the “official” sanctions for religious belief and the actual practices of religious believers often are.

Laurie Zoloth takes up this criticism in the concluding essay of the anthology, “Faith and Reasoning(s): Bioethics, Religion, and Prophetic Necessity.” Zoloth notes that the disconnect between the descriptive and normative is not a new problem, nor is it easily solvable. But the answer must come from within the tradition itself—a tradition that, Zoloth charges, Davis has largely misunderstood. As a means to answering the larger question, that is, the challenge of the “tasks of method and content” in Jewish bioethics, Zoloth expands her previously published argument for the “centrality of the prophetic voice in Jewish medical ethics” (p. 255).

In between these solid anchors rest twelve chapters that broadly address the intersection between bioethics and religion. In chapter two, “Bearing Witness: Religious Resistance and Meaning,” Courtney S. Campbell argues that religious communities ought to take seriously their responsibility for furthering moral discourse in areas of medicine. Ronald Carson’s “Focusing on the Human Scene: Thoughts on Problematic Theology” explores further the practical decision making that arises from experience, and investigates how Christian theology can augment the discussion of bioethics.

James Childress takes an issue-oriented stance in chapter four, “Religion, Morality, and Public Policy: The Controversy about Human Cloning,” and gives a largely historical view of how the National Bioethics Advisory Commission incorporated religious viewpoints into the debate about bioethics policy regulations. This can be nicely connected to chapter 10, “Religious Ethics, Bioethics, and Public Policy: Cost or Contribution?” where Michael Mendiola wonders about the relevance and practical applicability of religion in public policy.

Dolores Christie takes a different approach to the issue in chapter five, “Relativizing the Absolute: Belief and Bioethics in the Foxholes of Technology,” by giving a useful account of what religion does, and hence implicitly argues why we should take religion seriously in bioethics. Christie argues that religion articulates *who* a believer is, *what* particular and concrete story reinforces this identity, *where* the believer is located in relation to the sacred, *how* the believer sees the world, and *with whom* she is in community regarding these beliefs. This insightful discussion directly addresses Davis’s concerns, as the recognition that religion is an embodied practice, one that shapes individuals in particular ways, allows us to see the intersection of religion and bioethics. A person’s religion cannot be separated from the person’s self, and moral decision making, whether with regard to medical issues or to some other concept, must take account of this. Thomas Shannon continues this theme in chapter seven, “Bioethics and Religion: A Value-Added Discussion.”

Christi’s views move nicely into the discussion by H. Tristram Englehardt in chapter six, “Whose Religion? Which Moral Theology? Reconsidering the Possibility of a Christian Bioethics in Order to Gauge the Place of Religious Studies in Bioethics.” Englehardt argues that not only can religion play a helpful role in bioethics, but that in fact it fulfills

a void that philosophical bioethics cannot in a postmodern world. In chapter eight, “Bioethics and Religion: Some Unscientific Footnotes,” Stephen Lammers offers some musings on the problems generated by principle-based, philosophical bioethics and how a Christian theology might solve some of these problems. The theme of the function of religion and how religion is essential to the achievement of the human good is explored by Lawrence O’Connell and Martin Marty in chapter 12, “Religious Beliefs and Bioethics: A Crossed Relationship.”

The remainder of the collection, which includes articles by Ronald Green, Karen Lebacqz, and Daniel Sulmasy, further addresses the relationship between bioethics and religion, and argues for the notion that underlying much of traditional bioethics is in fact a fundamental grounding in religion that is often neither recognized nor addressed.

A strength of this collection is the diversity of its authors and perspectives. Theologians, philosophers, lawyers, and scholars of religious studies speak to the issue of the link between bioethics and religion from different experiences and worldviews and with different approaches.

Of course, a person’s strength is often also her weakness, as is the case with this anthology. Although the articles represent a range of different perspectives, there was little flow between them, and as a result the reader finds herself shifting back and forth from one track to another with alarming frequency. This could bespeak a problematic organizational schema: it would be helpful to begin the collection with the articles that address what the role of religion and theology are, and then later address the more practical and applied issues. And while two of the strongest articles serve nicely as the anchors, it would be better to juxtapose them more closely. This rearrangement would help to dispel the appearance that some of the articles are much closer to falling off the edge of the “narrow ridge” than are others.

It was somewhat disconcerting that the vast majority of the articles focused exclusively on Judaism and Christianity as the examples of religion in bioethics, when it has become increasingly apparent that predominantly non-Western religious traditions often provide the greatest challenges for contemporary clinicians and ethicists. Hence, either a more comprehensive anthology is needed, or else the editors of this collection should have been more explicit in the limitations of its perspective.

Finally, I was deeply distressed by the paucity of feminist religious thinkers in this text. A common criticism of the foundations of religious belief is that the sources of such tenets often arise from a patriarchal, authoritarian schema where the contributions and roles of women are marginalized at best. Given the continuing problematic role of women in medicine, and given the plethora of articles published by bioethicists on the rights and needs of the oppressed, it is curious that this issue was not addressed. Specifically, we need to ensure that incorporating religious views into our moral decision making does not continue to sanction the domination of women by patriarchal power structures that serve to further silence the voice of the minority.

**Toby Schonfeld**, *University of Tennessee, Knoxville*

A review of **Prenatal Testing and Disability Rights**, edited by Erik Parens and Adrienne Asch. Washington, DC: Georgetown University Press, 2000. 371 pages, \$65 cloth; \$23.95 paper.

Prenatal testing today offers prospective parents the possibility of selecting not just whether to have a child but, to an extent, the kind of child they will have. As the introduction to *Prenatal Testing and Disability Rights* notes, the disability rights critique of prenatal testing for genetic disability has so far received very little serious analysis by either bioethicists or medics. The book is the result of a two-year project undertaken by the Hastings Center that drew together scholars from disability and mainstream communities and that aims to fill this gap.

The book is divided into four sections. The first consists of two chapters giving an overview of the disability rights critique, followed by background information on the current state of prenatal genetic testing in the United States. The second section, on parenthood, disability, and prenatal selection, includes personal accounts of the experience of prenatal testing. There is also a valuable summary by Philip M. Ferguson et al. of empirical research on the impact of disability on families, which reaches the (perhaps inevitable) conclusion that the impact is extremely variable, but also highlights the less frequently touted point that overall adjustment and well-being of families does not seem to be affected by having a disabled child. (The authors ask the pertinent question of why these data are not well known.)

The third section concentrates on the “message” sent by prenatal genetic testing. One of the disability community’s criticisms is the expressivist argument: prenatal testing plus abortion for a particular trait sends a message to the community as a whole, and to disabled people with that trait in particular, to the effect that “We think that living with this trait is so awful it would be better to be dead.” Several contributions here weigh up whether this is the message that is sent, whether it can be interpreted that unambiguously, or indeed whether the act of choosing to have prenatal testing can properly be viewed as a “message” at all. In any case, the message received may be very different from whatever is intentionally sent by individuals making a personal decision, or by healthcare systems in the range of tests they offer, and this has particular relevance in the context of the call for better public education about disability. It would have been interesting to see a further discussion of exactly how those on the receiving end interpret such a message, and how a different public understanding of disability might change this.

I found the fourth section, on policy making and delivering diagnostic services, less satisfying than the rest. In addition to personal bias on my part, this may reflect the lack of consensus in the working group on whether ethical or practical lines should be drawn at all, which obviously hampered the drawing up of policy guidance. As Jeffrey R. Botkin notes in his contribution, there was not enough time for the group to develop the policy implications of not drawing lines between disabilities, or between disabling and nondisabling conditions. The consensus that seems to emerge in this section is essentially a liberal one favouring personal autonomy, but strongly coupled to the adequate provision of information. Writer after writer emphasises the

need for accurate, adequate, and accessible information that “strives to convey the wholeness of life with a particular condition, rather than information that is merely medical,” and for this to be provided in a pre-test setting. As Eva Feder Kittay says, “Knowledge is crucial . . . and the time to get informed is not just when you are facing the decision.” This is a key ethical issue to emerge from the book.

The editors make it clear that the working group sometimes could not agree. In fact its members did not reach unanimity on one of the most fundamental issues: how much of disability is socially constructed and how much is intrinsic to the impairment. The disability critique says that disability is (wholly or largely) socially mediated rather than a biological given. Erik Parens makes the interesting suggestion here that the disability community uses the moral significance of the person to question the significance of the disabling trait, and that this may be as flawed as the move made by the majority community when it uses the trait to deny the moral status of the person. Clarifying what we think about disability is important: while prenatal diagnosis currently poses its choice as “have a child with a disability, or have an abortion,” it won’t be too long before techniques of preimplantation genetic diagnosis or gene therapy mean the choice will be presented as “have a disabled child, or have a child without that disability” and then we will really have to face the issue squarely.

It is difficult to do justice to this excellent book in a short space; I find myself wanting to quote so much from it that I’m in danger of reproducing large chunks of text. A particularly strong feature is its balancing of the more theoretical contributions with personal, or personally grounded, accounts. Thus Mary Ann Baily writes of “Why I Had Amniocentesis,” Eva Feder Kittay reproduces part of an e-mail correspondence with her son about her severely disabled daughter, Sesha, and Steven J. Ralston provides “Reflections from the Trenches” as a perinatologist. If I have a criticism it is that the argument from within the disabled community is presented as being more monolithic than I find it. A casual reader could be forgiven for coming away with the impression that all members of the disability community oppose prenatal diagnosis and selective abortion; but life’s more complicated than that, and some don’t, or not always. It would have been interesting to illustrate the diversity of opinion within the disability community by including a contribution by a self-identified disabled person in support of prenatal diagnosis.

But this is a minor criticism of a book that will become a standard work in the field and that is a worthy conclusion to the Hastings Center’s project.

**Jackie Leach Scully**, *University of Basel*



# Policies of the Feminist Approaches to Bioethics Network (FAB)

The Following are the now-approved policies governing the mission and function of FAB.

## I. Administrative Structure of FAB

FAB is committed to a nonhierarchical, nonelitist administrative structure. It is guided by two Co- Coordinators who are assisted by an Advisory Board. The Treasurer, Assistant Treasurer, Membership Secretary, *Newsletter* Editor, Country Representatives Coordinator, Listserv/Web Site Facilitator, and IAB Liason are ex officio members of the Advisory Board. In addition, no fewer than six and no more than nine other FAB members constitute the Advisory Board.

Appointed ex-officio members serve two-year terms, renewable at the discretion of the Co- Coordinators. Elected members serve four-year terms at the end of which they rotate off the Advisory Board for at least one two-year period, unless an insufficient number of members choose to run for election to the Board. In such an event, an elected Advisory Board member may serve two consecutive terms.

## II. Roles and Duties of the Co- Coordinators

- The Co- Coordinators are elected or re-elected by FAB's members every two years, sometime during the period of September through November in even-numbered years. New officers take office on January 1 of odd-numbered years.
- The Co- Coordinators perform the following duties:
  - Appoint seven officers for two-year renewable terms:
    - Treasurer
    - Assistant Treasurer
    - Membership Secretary
    - Listserv Facilitator Web Site Facilitator
    - *Newsletter* Editor
    - Country Representatives Coordinator
    - Liaison with the International Association of Bioethics (IAB)
  - Appoint the following three committees:
    - Grants Committee
    - Nominating Committee
    - Program Committee for the Biennial International FAB Conference
  - Revise old policies and develop new ones biennially or as needed.
  - Assist appointed and elected FAB members with their tasks as needed.
  - Facilitate the work of FAB, making certain that deadlines are met, projects are initiated and completed, and communication networks are maintained.

## III. Roles and Duties of the Advisory Board Members

- The Advisory Board members are elected or re-elected by FAB's members sometime during the period of September through November in even-numbered years.
- The Advisory Board members perform the following duties:
  - Respond to the Co- Coordinators' requests for advice and assistance in a timely manner.
  - Suggest new initiatives and programs for FAB, assuming responsibility for them as time, resources, and personal energy permit.

## IV. Roles and Duties of the Treasurer and Assistant Treasurer

### A. Roles and Duties of the Treasurer

- The Treasurer is appointed or re-appointed by the Co- coordinators every two years.
- The Treasurer performs the following duties:
  - Serves as an ex-officio member of the Advisory Board.
  - Serves as an ex-officio member of the Grants Committee.
  - Appoints, with approval of the Co- Coordinators, a FAB member to be an Assistant Treasurer. The Assistant Treasurer is an alternative signatory on the FAB account and may share any of the following responsibilities (although the Treasurer retains ultimate responsibility).
  - Maintains an organizational bank account in the name of "The Audre Lorde Memorial Fund for Bioethics Research" that complies with legal rules for non-profit organizations. It should include both a checking and a money market component.
  - Coordinates with the Membership Secretary in mailing the biennial membership renewals and expected voluntary contribution forms.
  - Coordinates with the Assistant Treasurer to make periodic requests for additional voluntary contributions to the Audre Lorde Fund in the *Newsletter*, on the Listserv, at the Biennial International FAB Conference, and at other selected national and international gatherings which FAB members attend.
  - Collects the biennial expected voluntary contributions and handles currency con-

- versions as needed.
- Deposits all expected voluntary contributions and additional voluntary contributions to FAB in the organizational bank account.
- Acknowledges all large and small contributions to the Audre Lorde Fund in a letter or e-mail message.
- Draws checks for disbursements of FAB monies (subject to approval of Co-Coordinators for amounts judged to be substantial).
- Maintains a record of all deposits to and disbursements from the FAB treasury. Is prepared, when requested, to give the Co-coordinators the total balance in the account with estimates of any anticipated upcoming expenses.
- Presents a biennial Treasurer's report at the Biennial International FAB Conference.
- Saves all annual reports and bank statements for a minimum of three years to be prepared for a governmental audit.

#### B. Roles and Duties of the Assistant Treasurer

- The Assistant Treasurer is appointed or re-appointed by the Treasurer every two years, with the approval of the Co-Coordinators.
- The Assistant Treasurer performs the following duties:
  - Serves as a signatory to the Audre Lorde Fund.
  - Shares responsibilities with the Treasurer as mutually agreed.
  - Cooperates with the Treasurer to make periodic requests for additional voluntary contributions to FAB in the *Newsletter*, on the Listserv, at the Biennial International FAB Conference, and other selected national and international gatherings which FAB members attend.

#### V. Roles and Duties of the Membership Secretary

- The Membership Secretary is appointed or re-appointed by the Co-Coordinators every two years. If necessary, she may request funds from the FAB Treasury to pay an assistant to help her perform her duties.
- The Membership Secretary performs the following duties:
  - Serves as an ex-officio member of the Advisory Board.
  - Works with the Treasurer in mailing the biennial membership renewals and ex-

- pected voluntary contribution forms.
- Receives membership and renewal forms, keeps paper files of them, and enters them into an electronic database and the FAB Web Site.
- Works with the Country Representatives Coordinator in keeping information about FAB members up-to-date.
- In January of each year, sends each country representative a list of members in her country, membership forms, and "What Is FAB?" information sheets.
- Provides the Co-Coordinators, Advisory Board members, the Country Representatives Coordinator, the Book Review Editor, and the Country Representatives with the FAB membership list.
- Provides, upon request, to FAB officers and those writing grant proposals, upon request, the total membership figures and breakdown of those figures.
- Sends address information electronically to the *Newsletter* mailing firm and provides them with the return-address labels biannually on dates worked out with the *Newsletter* Editor.
- Attempts to find the correct addresses when *Newsletters* are returned and, when necessary, removes lost members from the electronic database.
- Maintains and updates membership forms and organizational information sheet ("What Is FAB?") and mails them to persons who inquire about FAB and to FAB members who plan to distribute them at conferences.
- Maintains a special e-mail address to respond to inquiries, to welcome new members, and to tell prospective members how to obtain membership forms.

#### VI. Roles and Duties of the Listserv Facilitator Web Site Facilitator

- The Listserv Facilitator/Web Site Facilitator is appointed or re-appointed by the Co-Coordinators every two years.
- Ordinarily, the Listserv Facilitator/Web Site Facilitator is the same person, unless there is good reason to divide these two positions.
- The Listserv Facilitator/Web Site Facilitator performs the following duties:
  - Serves as an ex-officio member of the Advisory Board.
  - Reports about ongoing work as needed or upon the Co-Coordinators' request.
  - Provides an institutional base for the Listserv and Web Site.
  - Monitors the Listserv by reading each

message sent to it and observing an informal policy of not posting commercial messages, petitions to be signed and forwarded, or alerts about e-mail viruses on the Listserv, as they may be spurious or out-of-date.

- Maintains the Listserv subscriber list, adding or removing subscribers as requested and updating addresses.
- Designs the Web Site and periodically updates its contents.
- Posts important standing information regarding FAB, such as its current policies, officers, and representatives.
- Invites FAB members to submit materials (e.g., course syllabi and unpublished essays) with the understanding that not all submitted materials will be posted and that those that are posed will be periodically rotated.

## VII. Roles and Duties of the *Newsletter* Editor

- The *Newsletter* Editor is appointed or re-appointed by the Co-coordinators every two years.
- The *Newsletter* Editor performs the following duties:
  - Serves as an ex-officio member of the Advisory Board.
  - Reports about ongoing work as needed or upon the Co-Coordinator's request.
  - Appoints a Book Review Editor for the *Newsletter*.
  - Oversees the production of the semi-annual *Newsletter*.
  - Serves as a point of collection for submissions to the *Newsletter*.
  - Organizes a calendar of events of interest to FAB members.
  - Works with the Book Review Editor and the Co-Coordinator on goals for each *Newsletter*.
  - Copy-edits and proof-reads all text and lay out of the design.
  - Works with the publishing and mailing houses to produce and send out the *Newsletter*.

## VIII. Roles and Duties of FAB Liaison to the IAB

- The FAB Liaison to the IAB is appointed or re-appointed by the Co-Coordinator every two years.
- The FAB Liaison to the IAB performs the following duties:
  - Serves as an ex officio member of the Advisory Board

- Reports about ongoing work as needed or upon the Co-Coordinator's request.
- Communicates information about FAB to the IAB's President, *Newsletter* Editor, and Biennial International Conference Program Chair as necessary.
- Keeps FAB's membership informed about IAB programs and policies that are of interest to FAB.

## IX. Roles and Duties of the Country Representatives Coordinator

- The Country Representatives Coordinator is appointed or re-appointed by the Co-coordinators every two years.
- The Country Representative Coordinator performs the following duties:
  - Serves as an ex-officio member of the Advisory Board.
  - Appoints Country Representatives for two-year renewable terms following a call for nominations (including self-nominations) on the List-Serv and in the *Newsletter*.
  - Reports about ongoing work as needed or upon the Co-Coordinator's request.
  - Issues a call for Country Representative nominations (including self-nominations) in the *Newsletter* and on the Listserv as needed. At the same time, contacts active Country Representatives to determine their interest in continuing as their country's Representative.
  - Receives nominations (including self-nominations) and composes a slate of Country Representatives, if feasible, for presentation at the Biennial International FAB Conference.
  - Introduces Country Representative nominees (new and continuing) who are present at the Biennial International FAB Conference.
  - Provides the Co-Coordinator, the Membership Secretary, the *Newsletter* Editor, and the Listserv Facilitator/Web Site Facilitator with full contact information for new and continuing Country Representatives.
  - Writes a column for the *Newsletter* to introduce and welcome new Country Representatives and reintroduce continuing Country Representatives to FAB's members.
  - Appoints replacement Country Representatives in the event of resignation and, as the need arises, appoints new Country Representatives for countries not previously represented in FAB. May consult with Co-Coordinator and Advisory Board members before making such appointments.
  - Keeps Country Representatives informed of important developments in FAB Network activities.

## X. Roles and Duties of the Country Representatives

- The Country Representatives are appointed by the Country Representatives Coordinator for two-year renewable terms, starting in January of odd-numbered years. Country Representatives must 1) be members of FAB; 2) have easy access to e-mail and some ability to read and write English; and 3) be willing to fulfill the duties of a Country Representative actively.
- Active Country Representatives who wish to continue in service are encouraged to re-nominate themselves to the Country Representatives Coordinator. No more than two Country Representatives are appointed per country. If more than two people wish to be Country Representatives for any given country, then the Country Representatives Coordinator helps them devise a rotation schedule.
- The Country Representatives perform the following duties:
  - Recruit new FAB members.
  - Supply feminists who are interested in bioethics with information about FAB, including direction to the FAB website, membership forms, and the “What Is FAB?” information fliers.
  - Serve as contacts for and coordinators of FAB participation in any FAB-related country activities.
  - Subscribe to the FAB listserv if it is not financially burdensome.
  - Announce FAB-related forthcoming events, projects, and local developments using such means as the Listserv, Web site, and/or *Newsletter*.
  - Use the FAB membership list provided by the Membership Secretary to be informed about the members in their country.
  - From time-to-time submit articles to the FAB *Newsletter* on recent developments in bioethics and feminist issues in their countries.
  - Respond promptly to messages and queries from the Country Representatives Coordinators, the Co-Coordinators, and the Advisory Board.
  - If time and resources permit, Country Representatives may like to consider the following activities:
    - Set up an appropriate communication system (e.g., a Distribution List) for FAB members regarding FAB conferences and FAB-related activities in their country or elsewhere.
    - Liason with local bioethics and healthcare organizations in their country and arrange for FAB presentations, panels, or speakers at their conferences, when it is both desirable and possible to do so.
- Organize panels and roundtable presentations for the Biennial International FAB Conference. Encourage and facilitate FAB members’ attendance at the Conference.
- Support for Country Representatives:
  - Membership Secretary provides the Country Representatives with a current FAB membership form, a “What is FAB?” form, and a current list of members in their country at the beginning of each term.
  - The Co-coordinators and the Country Representatives Coordinator keep Country Representatives informed of important developments in FAB.
  - Eighteen months before the Biennial International FAB Conference, the Grants Committee will help Country Representatives identify funding sources to which FAB members might apply for travel to the conference. The lead time will give potential funders the opportunity to include funding for FAB participation in their annual budgets.
- Removal of Representatives:
  - Country Representatives who fail to contribute to the *Newsletter*, engage in any other recognizable FAB-related activity, or respond to messages from the Country Representative Coordinator, the Co-coordinators, or the Advisory Board, will not be re-nominated at the end of the two-year term.
  - Country Representatives who find that they are unable to meet their responsibilities as outlined above should consider identifying and recommending to the Country Representatives Coordinator a replacement representative for their country.

## XI. FAB Nominating Committee

The current Co-Coordinators appoint a three-member Nominating Committee, chosen from nominations and self-nominations after an appeal on the Listserv. The Co-coordinators attempt to have some diversity among this committee’s members, who must have belonged to FAB for at least a year and be able to consult with each other by e-mail in time to prepare a slate by the Biennial International FAB Conference. The Nominating Committee selects its own Chair.

## A. Preparation of Ballot for Election of Co-ordinators and Advisory Board Members

The Chair of the Nominating Committee makes an appeal for nominations via the Listserv and when feasible the *Newsletter*. Nominations are sought for new or continuing Co-ordinators and Advisory Board members to serve two-year terms. Each nominee must be willing to serve and have a nominator and a second. Current Co-ordinators are encouraged to re-nominate active Advisory Board members and/or to nominate new Advisory Board members; inactive Advisory Board members should not be re-nominated.

Advisory Board members must have belonged to FAB for at least a year; candidates for Co-Coordinator must have belonged to FAB for at least two years and have actively demonstrated their involvement in FAB. Diversity and international representation are sought, but Advisory Board members must have easy and frequent access to e-mail. After the Nominating Committee selects a slate, each nominee is asked to provide a brief (75 words or less) biographical sketch, including degrees, field of work, positions held, and activities relevant to FAB's mission.

The Nominating Committee then prepares a ballot and an accompanying document with biographical sketches. Space is provided for write-in candidates.

## B. Procedures for Election of Co-ordinators and Advisory Board Members

- The Nominating Committee prepares the slate of candidates prior to the Biennial International FAB Conference. It is communicated to FAB's members at the Conference, on the Listserv, and through the postal service when appropriate.
- After the Biennial International FAB Conference, the Membership Secretary posts or e-mails the ballots to FAB's members who return them to the Chair of the Nominating Committee by the deadline she/he sets. To avoid competition and to welcome and encourage volunteers, our elections take the form of ratifications rather than contests. This procedure is intended to preserve historical memory and provide continuity.
- After the deadline for returning the ballots, the Chair of the Nominating Committee counts the ballots and sends personal messages to each candidate. Election results are then announced on the Listserv and sent to the *Newsletter*.

## XII. FAB Grants Committee

- The Co-ordinators appoint a three to five member Grants Committee who select their own Chair.
- The Treasurer is an ex-officio member of the Committee.

The Grants Committee performs the following duties:

- Announce available grants on the Listserv and in appropriate publications in order to give applicants ample time to prepare a grant proposal for the Committee. The deadline for the Biennial International FAB Conference in even-numbered years should be announced in the *Newsletter* a year before that Conference.
- Eighteen months before the Biennial International FAB Conference assist the Country Representatives in identifying funding sources to which FAB members might apply for travel to the Conference. The lead time will give potential funders the opportunity to include funding for FAB participants in their annual budgets.
- Consider all eligible applications for travel and registration grants and rank them according to the Rationale and Criteria for Grants, listed below.
- Consult with the Co-ordinators about the applicants' rankings.
- Notify all applicants of the Committee's funding decisions in a timely manner in order to facilitate registration and preparation for the Biennial International FAB Conference.

## A. Application Procedure for Travel and Registration Grants

In order to be eligible for a grant, applicants must have been members of FAB for at least one year at the time of application. To apply for a travel grant, FAB members presenting a paper at a FAB or FAB-related conference must submit both a brief abstract of their paper and a brief statement of need to the Grants Committee. FAB members seeking a registration grant must submit only a brief statement of need to the Grants Committee.

In addition, all applications should include the following information:

- Full name of the applicant.
- Full contact information, including any relevant institutional, or organizational affiliation.
- The conference that the applicant wishes to attend, including location and dates.

All applications should be sent to the Chair of the Grants Committee, or to a committee member nominated and announced by the Chair.

All applicants must adhere to the announced deadline for applications, which is ordinarily set as May 1 of each year.

All applicants for assistance in attending the Biennial International FAB Conference must adhere to the announced deadline for applications, which is ordinarily set at March 1 of even-numbered years.

For FAB-related conference support, when funds are available, FAB members of at least one year who plan to organize FAB panels, workshops, or roundtables for an appropriate conference may apply for small grants to assist in travel expenses for FAB participants.

All applications should be submitted to the Chair of the Grants Committee, if possible eight months before the event, and should include the information requested above, plus an outline of the project, the names of proposed FAB participants, and the amount of funding requested.

## **B. Rationale and Criteria for FAB Travel and Registration Grants**

FAB has limited funds to provide travel grants to help FAB members participate in FAB or FAB-related conferences. FAB also tries to assist members in developing countries to secure funding from other sources.

Applicants for FAB travel grants must be FAB members for at least one year. With rare exceptions, grants are provided only to support participants who are presenting papers at FAB or FAB-related conferences. Ordinarily, individual grants do not exceed \$600 (U.S. dollars), which can be paid out in the form of cash, airline tickets, or accommodations. Depending on the availability of funds, exceptions to the \$600 (U.S. dollars) limit are considered, but honored only when all other alternatives have been explored and exhausted. Preference is given to support participation in the Biennial International FAB Conference.

In addition, FAB has limited funds for registration grants. FAB members for at least one year seeking support to attend a FAB or FAB-related conference are eligible for these grants. Preference is given to active members of FAB, particularly those who have inadequate institutional support.

Ordinarily an individual FAB member will only be eligible for a maximum of \$600 (U.S. dollars) in FAB travel grants within any two-year period. In ranking application, the FAB Grants Committee will also take into account previous FAB-related grants awarded to the applicant and give some preference to applicants who have not been funded by FAB previously. The FAB Grants Committee considers all eligible applications and ranks them based on the following consideration:

- Whether the applicant's paper will diversify and/or enrich feminist approaches to bioethics.
- The applicant's history of continuing service to FAB or active participation in FAB activities (e.g., being a Country Representative or Advisory Board member).
- The applicant's access to alternate funding.
- The centrality of the conference to FAB's mission.

## **XIII. FAB Biennial International Conference Program Committee**

The Co-Coordinator appoint a three to five person Biennial International Program Committee who select their own Chair. At least one member of the Committee must reside in the country where the Conference is held. The final program must be approved by the Co-Coordinator.

The Program Committee performs the following duties:

- Coordinate on-site arrangements with relevant persons.
- Work with the International Association of Bioethics whenever it is feasible as well as desirable to do so.
- Invite keynote or plenary speakers.
- Issue a call for paper abstracts (papers are not required prior to the Conference.)
- Determine which paper abstracts are of sufficient quality to merit a place on the program, the ethos of which is maximum inclusivity.
- In a timely manner, send out acceptance or rejection notices to those who have submitted a paper abstract. In addition, send out detailed instructions for actual presentation of the papers.
- In consultation with the Co-Coordinator, prepare a final program, participant list, and packet of abstracts for inclusion in the Biennial International FAB Conference registration materials.
- Contact the List Serv Facilitator/Web Site Facilitator and the Editor of the *Newsletter* to publicize the final program.
- Report on Biennial International FAB Conference proceedings in appropriate forums such as the *Newsletter*.



# FAB Announcements

## RENEWAL OF MEMBERSHIP

In February renewal forms were sent to FAB members who joined FAB from 1993 through 1999. Countries in this mailing were Australia, Belgium, China, France, Germany, India, Italy, Korea, New Zealand, The Netherlands, The Philippines, Spain, UK, USA. Country reps, members from Argentina, and some active overseas members were sent instead an e-mail message with the list of new categories. We plan to request renewals of interest from Canada and Brazil in late May.

We had a very poor return — only about 50% of our list. Failure to respond may mean that we used an incorrect address; that someone has lost interest in FAB; that a mailroom throws away the Newsletter as junk mail; or that a member did not take seriously our request for renewal. Rosie's assistant made quite an effort to find nonrespondents so we could decide which ones to remove from this mailing.

Many thanks to those who sent renewal forms, and special thanks to contributors to our Audre Lorde fund, particularly those who generously added funds earmarked for scholarships. And do let your Membership Secretary know when you move.

## MEMBERSHIP RENEWAL FOR CANADIANS

In February, FAB renewal forms were sent to most members who joined FAB in the years from 1993 through 1999. The purposes of this mailing were to confirm members' continuing interest in FAB, get hard-copy forms for our files, and solicit help for the Audre Lorde Fund. We had hoped to eliminate uninterested members before posting this Newsletter.

Due to complications and time constraints, we were not able to send forms to our Canadian members. Therefore this Newsletter will be the last one routinely sent to all Canadians now on the list. In future, it will go only to those who indicate a positive interest in receiving it.

Canadians are our second largest national group, and we have now designed a special form for you. We expect to mail it in late May or early June. The completed form should be postmarked by August 15 if you wish to receive the next Newsletter.

## BACK ISSUES OF OUR NEWSLETTER

We have extra copies of back issues of the FAB Newsletter. If you'd like any of these, please send (for each one) 76 cents in stamps and a mailing label or your name and address neatly printed on a sheet of paper. And please indicate which issues you want. Members outside the U.S. may e-mail Becky Holmes at: [joinfab@fnr.umass.edu](mailto:joinfab@fnr.umass.edu) for instructions.

Vol. 6 #1 (March 1998)

Vol. 7 #1 (May 1999)

Vol. 7 #2 (November 1999)

Vol. 8 #1 (May 2000)

Vol. 8 #2 (November 2000)

Send your request to Membership Secretary Becky Holmes, address in the contacts list, page 21.

## FAB'S AD HOC 'INTERESTS' COMMITTEE

In late January we set up an ad hoc committee to choose new interest categories for our Directory. Volunteers from a request in the listserv were Laura Shanner, Rosie Tong, Jackie Scully, and Becky Holmes. We worked assiduously via e-mail using data from interests previously chosen by members and also considered new categories some of you had suggested. We finally settled on twelve categories, which we abbreviated as three-letter codes. Each of these includes several subinterests.

These new codes were incorporated into the renewal forms that were then sent in February to FAB members who had joined from 1993 through 1999. They also replaced the old two-letter codes on the membership form that can be accessed from our FAB web site. And they can be found by clicking on 'codes' at the top of our Directory-on-Line. Each of these sites has a clickpoint to find the expanded list of subinterests.

Members who joined in year 2000 and early 2001, please access these new codes and make selections to replace your two-letter choices. Then e-mail these to Becky Holmes at: [joinfab@fnr.umass.edu](mailto:joinfab@fnr.umass.edu) so that the entire database will eventually contain only the new codes.

## LOOKING FOR A PACK RAT

For the preservation of FAB's records we need a special location, independent of the changing FAB leadership. We're looking for someone with a talent for collecting things and keeping them organized who will serve as FAB's archivist.

These would be paper archives, not the cyberspace ones that Hilde Nelson is keeping. The collection would include all issues of the Newsletter; membership forms; annual membership lists; ballots from our elections; key e-mail messages that include special announcements; FAB policies; some financial records.

The archivist should have a fairly permanent location and expect to serve in that capacity for a number of years. She will not have to seek documents — it will be the responsibility of appropriate leaders to send these to her.

Currently documents are kept by Anne Donchin, Becky Holmes, and Rosie Tong. Different bits of the archive can be duplicated and kept in other locations so that the archive can be reassembled in case it is destroyed by fire. For example, the Kennedy Institute of Ethics has a complete collection of our Newsletters.

If you're interested in this service for FAB, please contact coordinator Rosie Tong.

# FAB Contacts

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## FAB COUNTRY REPRESENTATIVES

Contact these members who have volunteered to be country representatives if you want to initiate a group project, receive back copies or membership application forms, etc. If your country is not included and you would like to volunteer, send a message to Wendy Rogers, left.

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# Calendar of Events

## May

**Gender Issues in the Care of the Dying and Bereaved**, May 14-16, London, Ontario, Canada. Sponsored by King's College Centre for Education about Death and Bereavement. Details: King's College Centre for Education about Death and Bereavement. Tel: 1-519-433-3491; Fax: 1-519-432-0200; E-mail: [jmorgan@julian.uwo.ca](mailto:jmorgan@julian.uwo.ca); website: [www.wwdc.com/death](http://www.wwdc.com/death).

## June

**Twenty-Second Annual Health Law Teachers Conference**, Boston, MA, USA, June 1-2, 2001. Sponsored by the American Society of Law, Medicine and Ethics (ASLME). For more information, please visit the website at [www.aslme.org/conferences](http://www.aslme.org/conferences) or contact: Sarah Black, Conference Director, ASLME, 765 Commonwealth Avenue, Suite 1634, Boston, MA 02215. Phone: 617-262-4990, ext. 12; Fax: 617-437-7596. E-mail: [sblack@aslme.org](mailto:sblack@aslme.org)

**Bioethics Beyond the Sound Bite: Intensive Bioethics Course XXVII**, Kennedy Institute of Ethics, Georgetown University, Washington, DC, June 5-10, 2001. CME credit provided by Georgetown University Medical Center, Office of Continuing Profession Education. Details from: Course Coordinator at Tel: 1-202-687-8099; E-mail: [kicouse@gunet.georgetown.edu](mailto:kicouse@gunet.georgetown.edu); or [www.georgetown.edu/research/ki](http://www.georgetown.edu/research/ki).

**Ethical Issues in International Health Research**, Boston, MA, USA, June 11-15, 2001. Sponsored by The Harvard School of Public Health, Center for Continuing and Professional Education. Co-sponsored by Tufts University School of Medicine, etc. For more information, visit the website at: [www.hsph.harvard.edu/ccpe/register.html](http://www.hsph.harvard.edu/ccpe/register.html)

**Ethics of Research with Humans: Past, Present and; Future**, Seattle, WA, USA, June, 11-15, 2001. Contact: Marilyn Barnard, University of Washington, Dept. Medical History & Ethics, Box 357120, Seattle, WA 98195-7120, USA. Email: [mbarnard@u.Washington.edu](mailto:mbarnard@u.Washington.edu)

**Faculty Summer Institute at Dartmouth College**, June 17-29, 2001, Hanover, New Hampshire. During the summer of 2001, the Ethics Institute at Dartmouth College will offer an intensive two-week program on Teaching the Ethical, Legal, and Social Implications of the Human Genome Project. This program is funded by the National Human Genome Research Institute. Details: Barbara J. Hillinger, Tel: 1-603-646-1263; Fax: 1-603-646-2652; Email: [barbara.hillinger@dartmouth.edu](mailto:barbara.hillinger@dartmouth.edu), 6031 Parker House, Dartmouth College, Hanover NH 03755; Website: [www.dartmouth.edu/artsci/ethics-inst/elsi\\_index.html](http://www.dartmouth.edu/artsci/ethics-inst/elsi_index.html).

**A Not-So-Kind-or-Gentle-World: Ethical Issues in Disability and Aging**, June 29-30, 2001, Maywood, Illinois. This two-day symposium will examine ethical issues in disability and aging. Details: Mark Kuczewski, PhD, Director, Neiswanger Institute for Bioethics and Health Policy Stritch School of Medicine, Room 280 Loyola University Chicago, 2160 South First Avenue, Maywood, IL 60153, E-mail: [mkuczew@lumc.edu](mailto:mkuczew@lumc.edu).

**The Australian Institute of Health, Law and Ethics (AIHLE)**, June 28-July 1, 2001, Australia. The 5th Annual Conference of the Australian Institute of Health, Law and Ethics will be broadly based around the theme of Science, Technology and Culture. Details: Website: [murdoch.rch.unimelb.edu.au/aihle](http://murdoch.rch.unimelb.edu.au/aihle); E-mail: [aihle@cryptic.unimelb.edu.au](mailto:aihle@cryptic.unimelb.edu.au).

## July

**International Multidisciplinary Health Ethics Conference**, Hamilton Island, Queensland, July 25-27, 2001. Sponsored by the Royal College of Nursing, Queensland, Australia. For more information, see: [www.rcna.org.au](http://www.rcna.org.au) or contact: Julie Spencer, MRCNA, Professional Development Programs Manager, P.O. Box 219, Deakin West, ACT 2600, Queensland, Australia. Phone: 011-61-2-6282-5633 or 011-61-2-6283-3405. Fax: 011-61-2-6282-3565.

**International Multidisciplinary Health Ethics Conference**, July 25-27, 2001. Sponsored by the Royal College of Nursing, Queensland, Australia. To be held on Hamilton Island, Queensland. The aims of the conference are: 1. To provide a forum to explore the many facets of health ethics; 2. To promote discussion, understanding, analysis and practice of health ethics. Details: see [www.rcna.org.au](http://www.rcna.org.au) or contact: Julie Spencer, MRCNA, Professional Development Programs Manager, P.O. Box 219, Deakin West, ACT 2600, Queensland, Australia. Tel: 011-61-2-6282-5633 or 011-61-2-6283-3405; Fax: 011-61-2-6282-3565.

**Ethics in Biomedical Research**, Thammasat University, Bangkok, July 30-August 3, 2001, Thailand, in collaboration with the University of Bergen, Norway. Application **deadline: 15 May 2001**. Venue: Faculty of Allied Health Sciences, Thammasat University, Rangsit Campus, Thailand. Thammasat University may be able to obtain course fee assistance for individuals who would not be able to attend without support. Please include a letter stating the need for assistance with the application form. More Information : [www.ethica.uib.no/thammasat.html](http://www.ethica.uib.no/thammasat.html)

## August

**American Medical Women's Association's Advanced Curriculum on Women's Health - 2<sup>nd</sup> International Conference**, August 3-5, 2001, Cleveland, Ohio. This comprehensive CME course on women's health is being co-sponsored by the prestigious Cleveland Clinic Foundation. The conference is designed for all physicians and practitioners who care for women patients. Details: Julie Dogil at the AMWA Foundation, or call 1-703-838-0500; Fax 1-703-549-3864; E-mail: [info@amwa-doc.org](mailto:info@amwa-doc.org)

**Summer Seminar in Health Care Ethics**, Seattle, USA, August, 6-10, 2001. Contact: Marilyn Barnard, University of Washington, Dept. Medical History & Ethics, Box 357120, Seattle, WA 98195-7120; E-mail: [mbarnard@u.Washington.edu](mailto:mbarnard@u.Washington.edu).

**15<sup>th</sup> European Conference on Philosophy of Medicine and Health Care**, "Wisdom in Healthcare", Lisbon, Portugal, August, 16-18, 2001. Contact: [h.tenhave@efg.kun.nl](mailto:h.tenhave@efg.kun.nl).

## September

**Continuing Professional Development: The Annual Intensive 5-day course on Medical Ethics**, Imperial College, London, UK, September 17-21, 2001. Organized in collaboration with the Institute of Medical Ethics. This course has approved by the Royal College of Physicians for 25 Continuing Medical Education (CME) credits. For further details, please contact: Bang Nong, Centre for Continuing Education, Imperial College, 526 Sherfield Building, Exhibition Road, London SW7 2AZ United Kingdom; Tel: +44 (0)20 7594 6882; Fax: +44 (0)20 7594 6883, Email: [b.nong@ic.ac.uk](mailto:b.nong@ic.ac.uk); website: [www.ad.ic.ac.uk/cpd/medeth.htm](http://www.ad.ic.ac.uk/cpd/medeth.htm).

**Health, Law and Human Rights: Exploring the Connections: An International Cross-Disciplinary Conference**, Philadelphia, Pennsylvania, USA, **September 29 to October 1, 2001**. This conference will bring together leaders in public health advocacy, research and administration. This conference is being convened by the American Society of Law, Medicine and Ethics. Scholarships will be available. CME and CLE credits will be available. For more information contact American Society of Law, Medicine & Ethics, 765 Commonwealth Avenue, Suite 1634, Boston, MA 02215, Tel: (617) 262-4990, Fax: (617) 437-7596, Email: [info@aslme.org](mailto:info@aslme.org), website: [www.aslme.org/conferences/body.html](http://www.aslme.org/conferences/body.html)

## October

**Annual Meeting of the American Society for Bioethics and Humanities (ASBH)**, October 25-28, 2001, Nashville, Tennessee. To be held at the Renaissance Nashville Hotel. For information on the Society or the Annual Meeting visit the ASBH's website at: [www.asbh.org](http://www.asbh.org).

# Call for Papers

**Morality in The 21st Century, October 26-28, 2001, Newark, Delaware.** The American Philosophical Association and the Philosophy Department at the University of Delaware are jointly sponsoring a conference on moral issues confronting us in the 21st Century. This conference celebrates the 100<sup>th</sup> anniversary of the APA and the 25th anniversary of the APA at the University of Delaware. The conference is funded by the Baumgardt Fund of the APA and the Class of 1955 Ethics Endowment Fund of the University of Delaware Philosophy Department. You are invited to submit papers on any topic within the general area to be addressed by the conference. Papers should not exceed 12 pages (25 minutes reading time), and should be accompanied by an abstract of no more than 200 words. Send papers to: Department of Philosophy, University of Delaware, 24 Kent Way, Newark, DE 19716; please mark your envelope "APA/UDEL Conference". Papers and abstracts should be received by **May 31, 2001**.

**Bioethics at the Beginning of the 21<sup>st</sup> century: Canadian Bioethics Society 13<sup>th</sup> Annual Meeting & Conference,** The Fairmont Winnipeg, Winnipeg, Manitoba, October 11 - 14, 2001. The CBS 2001 Abstract committee invites members of the Canadian Bioethics society and other interested persons to submit proposals for papers, workshops, colloquia and posters developing the Conference theme. The Committee will be particularly pleased to receive proposals addressing enduring questions in bioethics in a novel manner; critically anticipating issues in bioethics; contemplating the place of "imagination" in ethical reflection; identifying new areas of research in bioethics; discussing "moral imagination" and ethics consultation; and describing innovative approaches to teaching in bioethics. Abstracts must be received by **June 1, 2001**. Submit abstracts to: Dr. Jim Read, Chair, CBS 2001 Abstracts Committee, The Salvation Army Ethics Centre 447 Webb Place Winnipeg, Manitoba R3B 2P2. E-mail: James.Read@sallynet.org. For detail about the abstract and the conference, please check website at: [www.hsc.mb.ca/cbs2001/](http://www.hsc.mb.ca/cbs2001/).

**Social Epistemology: A Journal of Knowledge, Culture and Policy. Special Issue on Feminist Epistemology.** For this issue, we invite paper submissions that explore the influences of feminist epistemology on issues of concern for social epistemologists broadly speaking, and/or further the development of feminist epistemology by considering the most pressing challenges it faces. Papers should be sent in duplicate to: Mark Webb, Philosophy Department, Texas Tech University, Box 43092, Lubbock, TX 79409-3092. Detail: Mark Webb, E-mail: mark.webb@ttu.edu or Heidi Grasswick, E-mail: grasswick@middlebury.edu. **Deadline: August 15<sup>th</sup>, 2001.**

**Conference on Ethics Across the Curriculum,** January 30 - February 3, 2002 at the University of Florida-Gainesville. On pedagogical and philosophical issues that arise in teaching ethics in disciplines other than philosophy  
**Submission Guidelines:** Papers should be approximately

20-25 minutes reading time (or abstracts of approximately 200 words, which state the thesis claim and the structure of the major arguments of the paper). Because this is an interdisciplinary conference, speakers are requested to consider the audience diversity as they prepare their presentations. Accepted papers may be submitted for publication in the Society's journal. A separate cover sheet with the author's name, address, school, email, and telephone number should accompany each paper. Speakers will be selected by a blind review conducted by the conference organizers. Selected speakers will be notified on a rolling basis. Deadline for submission is **September 1, 2001**. Submissions should be sent via e-mail to the Secretary-Treasurer of the Society, Steven Scales, at [sscales@towson.edu](mailto:sscales@towson.edu) or by hard copy to Dr. Stephen Scales Department of Philosophy & Religious Studies Towson University, 8000 York Road Towson MD, 21252. For more information, please check website at [www.rit.edu/~692awww/seac/conferences.html](http://www.rit.edu/~692awww/seac/conferences.html).

## Dalhousie University Canada Research Chair in Bioethics

The Department of Bioethics in the Faculty of Medicine at Dalhousie University is seeking to appoint an individual to a Canada Research Chair faculty position in Bioethics. The Canada Research Chairs program was established by the Government of Canada to foster world-class centres of research excellence in a global, knowledge based economy. This is a full-time tenure or tenure-track appointment at the level of assistant or associate professor, and candidates must have potential to lead in their research field.

The successful candidate will have a Ph.D. in sociology or anthropology, or a closely related field, and a proven record of research excellence related to health care and bioethics. Experience with empirical research methodologies is considered an asset. The successful candidate will continue to develop his or her own research agenda and contribute to existing research programs within the Department of Bioethics. Current research programs include values and medical education, genetics and ethics, and research ethics. Other responsibilities will include participation in undergraduate and post-graduate medical education, as well as administration. The successful candidate will be appointed at the level of assistant or associate professor.

Applications including CV, a one page outline of a five year research plan, and names and addresses of three references should be forwarded to: Prof. Françoise Baylis, Acting Department Head, Department of Bioethics, 5849 University Ave., Halifax, NS B3H 4H7, Canada. The review process will begin May 1, 2001 and continue until the position is filled.

In accordance with Canadian Immigration requirements, this advertisement is initially directed to Canadian citizens and permanent residents of Canada. Dalhousie University is an Employment Equity/ Affirmative Action employer. The university encourages applications from qualified Aboriginal people, persons with a disability, racially visible persons and women. For more information please contact Carolyn Ells, Tel: 902-494-3801; Fax: 902-494-3865; website: [www.medicine.dal.ca/bioethics](http://www.medicine.dal.ca/bioethics).

## Get Involved in FAB

### To Join FAB

Members receive the semi-annual newsletter, which contains helpful announcements of upcoming events and opportunities, book reviews, and articles of interest to those working in feminism and bioethics. To join, send a request for a membership form with your name and address, either by mail or electronically to Becky Holmes (see page 21). Or print a membership form [www-unix.oit.umass.edu/~fholmes/joinfab.html](http://www-unix.oit.umass.edu/~fholmes/joinfab.html).

### To Contribute to the Newsletter

We welcome contributions of all sorts: articles, announcements of upcoming events, information about articles or books you have published or find useful, reviews of books. Book reviews are organized by Hilde Nelson. Any other contribution should be forwarded to Maggie Little (both addresses on p. 21). *It's particularly helpful if you can send them in electronically.* **Deadline for submissions to the next newsletter is September 15, 2001.**

### Change of Address

The newly redesigned and updated FAB website now has a much simpler URL. To visit the site, simply type: [www.fabnet.org](http://www.fabnet.org). We hope you will find this address easier to remember! For queries about the site or contributions to it, please e-mail the webmistress, Hilde Nelson, at [hlnelson@msu.edu](mailto:hlnelson@msu.edu).

To subscribe to the list, send a SUBSCRIBE FABLIST command in the body of the email to [listserv@list.msu.edu](mailto:listserv@list.msu.edu), followed by your full name. Example: SUBSCRIBE FABLIST Hilde L. Nelson. To unsubscribe, send a SIGNOFF FABLIST command in the body of the email to [listserv@list.msu.edu](mailto:listserv@list.msu.edu). This time, you don't give your name.

Debora Diniz and I, who guest edited the special Feminist Bioethics issue of BIOETHICS, are enormously grateful to all the FAB members who served as reviewers, thereby enabling us to meet the very tight deadline imposed on us. Your insightful and judicious comments were invaluable in enabling us to sort through the mountain of submissions we received.

A hearty "thank you" to all of you and also to all the FAB members who responded so promptly to our call for papers. We wish it had been possible to publish many more. Watch for the issue due in July.

**Anne Donchin**, Professor of Philosophy  
*Indiana University, Indianapolis*

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# Feminist Approaches to Bioethics