



Newsletter

November 2000

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From the Desk of your Coordinators:

We hope that everyone who came to the Conference in London at Imperial College arrived home safely and with the feeling of time well spent. It is such a pleasure to meet in person (at last!) people with whom we've corresponded and come to consider friends over great distances, and to meet even more people who are new to the network. Welcome aboard! We want to express our heartfelt thanks to the many people who made the conference come together, both in planning and participation. Now that we're home, the two of us feel joyous and exhausted all at the same time. On one hand, the program seemed far too full and demanding; on the other, the incredible substance and diversity of presentations, issues and attendees could have engaged us all for weeks before we might feel that we were "done" until the next time. Clearly, FAB's members have much to say about the present and future of bioethics, and how feminists can make bioethics more sensitive to women's needs and rights in a profoundly diverse world. We continue to be amazed about how many books and articles FAB members throughout the world have published and how many FAB members are activists as well as academics.

Both formally and informally, many attendees highlighted the need for FAB's evolution to include increased activity in policy formulation, grass-roots activism, and social and political reform as well as the development of bioethical theory. Looking ahead to our next biennial conference in Brazilia, the program committee (headed by Debora Diniz and Hilde Nelson) are already thinking of ways to make FAB more truly global and "on the ground" while continuing to support the cutting edge of academic feminist scholarship. When we next meet, we hope our sessions will feature multiple languages, with as many workshops and roundtables as paper presentations. What is inspiring about FAB's members is their desire never to sit on their laurels, but to think of new and better ways of doing things. Keep those creative ideas flowing!

There are three important matters to which we wish to draw your attention: First, we want to finalize our policies over the next three months. The most recent revisions will appear on the Web Page and/or the listserv shortly. If you have suggestions about how to improve them, please contact Rosie Tong. The Advisory Board wants to make certain that our membership is satisfied with the policies before they give their final approval on January 1, 2001. The policies will be reviewed every two years.

Second, we intend to maintain closer contact with our Country Representatives and the Country Representatives Coordinator, Wendy Rogers. FAB members need to know what is going on in countries other than their own and how to expand FAB's mission within their own country. Networking takes work, particularly when an organization is aiming to establish global as well as local lines of communication. The wonderful thing about a network is that nobody has to wait for an invitation – if you'd like to initiate or enrich local or topical networks, go for it! We'll help in any way we can.

Third, please read our summary of the Business Meeting in London and don't hesitate to volunteer for as many initiatives and programs as you wish. Our momentum is tremendous, and yet there is always so much more that needs to be done. We need your help, ideas, energy, passion, good humor, and support. The future of FAB is up to each of us and all of us.

With affection and appreciation,

Rosie Tong and Laura Shanner

In This Issue:

| | |
|------------------------------|-----------|
| Reports from FAB 2000 | pp. 2-4 |
| Announcements | p. 5 |
| Abstracts: IAB 2000 | pp. 6-13 |
| Bioethics in France | pp. 14-15 |
| Book Review Section | pp. 16-19 |
| FAB Contacts | p. 21 |
| Calendar of Events | pp. 22-23 |

Reports From FAB 2000, London

Report on the Meeting of Country Representatives at FAB 2000 in London

FAB 2000 provided the opportunity for many of our country representatives to meet face to face, some for the first time and some to renew old friendships. We met for an informal lunch, which acted as a forum for country reps to discuss issues of importance. These ranged from communication within FAB through to larger questions about the relevance of FAB in supporting bioethics in diverse communities. I have briefly summarised the main issues from the meeting:

International Representation

The meeting looked at ways of increasing international representation and involvement at FAB conferences:

Possible changes to the format of the conference with fewer paper presentations. One suggestion was for a round table session in which participants speak for a maximum of five minutes each followed by discussion. Another suggestion was for "remote panels" in which conference attendees would discuss issues identified by FAB members not present. This would allow participation in the conference for those unable to afford airfares and registration etc. The panels could range from interactive discussions aimed at producing practical solutions through to plenary debates. Taping and transcribing/translating the sessions would allow feedback to those proposing the topics. Encouraging and supporting regional meetings.

Relevance of FAB

Discussion of this issue focussed on the difficulties of linking with people from diverse disciplines who would not necessarily describe themselves as feminists or bioethicists, and explaining how and why FAB is relevant and useful. Suggestions included:

Development of a resource list to be published on the website, building on Becky Holmes' bibliography supplemented with nominations from country reps for material in languages other than English.
Free copies of the FAB anthologies to be supplied to each country rep for placement in a public library.
Greater use of the FAB network to develop collaborative international research, recognising that Western countries are better funded than developing countries are thus able to share expertise and funding.
Greater emphasis within FAB on pressing international and grass roots issues, such as GM food and patenting of seeds.

Communication Issues

Within FAB: reps identified a number of strategies to improve communication such as the provision of lists of country members and of other reps' email addresses; regular contributions by reps to the newsletter; email notification of the newsletter

publication, with a link to the web address of the current issue; and consideration of providing Spanish translation of newsletters.

About FAB: reps identified the need for accessible information to give to potential members, and to assist in explaining about the activities of FAB. This material would also be useful for information stands at conferences.

Some of the communication issues are administrative and I will be working with others towards solutions over the next few weeks. I hope that the discussion about international involvement and relevance of FAB will spark debate, both on the list-serve and in the next edition of the newsletter.

Thanks to all who attended the lunch, to those reps who were unable to attend either the conference or the lunch, and to Becky Homes for helping with the never-ending task of trying to keep accurate address lists.

Wendy Rogers, University of Edinburgh

I'd like to announce that Laura and I have appointed the members of several committees.

The Grants Committee consists of Anne Donchin, Viola Schubert-Lehnhardt and Susana Sommer.

The Program Committee for the 2002 Brazil Meetings consists of Hilde Nelson, Debora Diniz, Laura Shanner, and Susana Sommer.

The Ad Hoc Treasurer/Membership Committee consists of Anne Donchin, Becky Holmes, and Wendy Rogers.

Thanks for all your help.

Love, Rosie

Minutes: FAB Business Meeting, September 20, 2000

London, UK

Reports from Coordinators:

- A. The meeting was called to order by Rosie Tong and Laura Shanner.
- B. Thanks were extended to the many people who made the FAB 2000 conference happen. Special gratitude is extended to Alastair Campbell and Donna Dickenson from the IAB for their roles in supporting both the FAB satellite meeting and the FAB session within the IAB meeting. Karen Marshall and Elaine Smith of "Inanyevent" were invaluable in handling registrations, preparations and on-site services. Catherine Lawrence and Kate Home-Smith were wonderful student volunteers on-site. Philippa Kelly and Roger Wibrew from Imperial College's conference office were essential both before and during the event. Many FAB members contributed toward orchestrating the conference, drafting nominations and policies, and of course, attending and presenting.
- C. Rosie Tong presented the policies for FAB that have been under revision for several months. The policies will be distributed over the listserv on the website. Comments and suggested revisions should be forwarded to Rosie for final amendments prior to the Board's final vote on them and their appearance in the April-June, 2001 newsletter.

Reports from Officers:

- A. Anne Donchin, Treasurer
The fiscal period September 30, 1998 – August 31, 2000 (all figures in US dollars)
Opening balance of the Audre Lourde Memorial Fund on September 30, 1998: \$4716.44
Income: approx. \$2600 from individual members plus \$3800 from institutional sources to fund expenditures such as the newsletter
Expenses: \$3300 on administrative expenses, plus \$2900 in grants for the FAB 2000 conference.
Current balance: \$5343.94
- B. Becky Holmes, Assistant Treasurer/Membership secretary
Including new membership forms received at the conference, FAB now has 376 members from 28 nations.
FAB is debating whether to adopt regular dues (with a sliding scale). In the meantime, we are requesting a "voluntary expected contribution" every other year from members to support the network. Suggested contributions for 2000 are the equivalent (in any currency) of US\$10 for students/unemployed, \$20 if salary less than equivalent to \$40,000, and \$30 for all others. To date, only about 27% of FAB members have made voluntary contributions, leaving FAB with

minimal resources. There was some discussion of mechanisms for sending renewal reminders and handling dues payments, which were also discussed a bit later.

Membership forms (and eventually, the membership database on the web) are being updated to expand the range of areas of interest. Becky reports that she is looking forward to passing these duties she has done for several years (and wonderfully well, add the coordinators) to someone new.

- C. Hilde Lindeman Nelson, Listserv/Web facilitator and reporting for Maggie Little, Newsletter editor
Since Hilde has moved from Tennessee to Michigan State University (US), the web and listserv are relocating as well. The new addresses are listed in the "contacts" page in the newsletter. Only about 1/3 of members subscribe to the listserv.
- D. Wendy Rogers, Country Representative Coordinator.
Wendy summarized the discussion of the Country Reps' meeting earlier that day and has issued a call for new representatives.
A key goal is to increase communication among the Reps and the Coordinators/ Board, providing greater support for network development.
- E. Sue Sherwin, IAB Liaison
The relationship between FAB and IAB was briefly outlined. FAB is one of several networks that formed at the first IAB international conference in 1992. To date, FAB is the only active network and the IAB leadership is very supportive.
FAB is an IAB satellite network, not a subset of IAB. Many FAB members are not IAB members, although joining IAB is encouraged both for the benefits of connecting with a larger membership and also to increase feminist presence in "mainstream" bioethics. The majority of IAB members are not members of FAB.
While IAB's financial and practical support is crucial to FAB, FAB's policies, conference program, and other substantive matters are completely up to FAB's membership with no imposition from IAB.
We want to include much more frequent reports of FAB's news, priorities, publications, etc. to the IAB via the IAB newsletter, etc.

Reports from Committees:

- A. Nominating Committee: The slate of nominees for the 2001-2003 Co-coordinators and Advisory Board was announced. [Please see page --- for the slate and voting information]. Anne Donchin, Joan Callahan and Sue Dodds were thanked for their efforts in developing the slate.

- B. Grants Committee: Anne Donchin, Sue Dodds, Viola Schubert-Lehnhardt, Juan Guillermo-Figeroa (amounts in US dollars). Ten travel grants were awarded for the FAB 2000 conference from the Audre Lourde Fund, for a total of \$2900. An additional \$1300 was retrieved from a previous Ford Foundation grant to supplement additional presenters.
- C. 2002 Biennial FAB International Conference Committee: Debora Diniz and Hilde Lindeman Nelson are the co-coordinators for the 2002 conference in Brasilia, Brazil, with Dirce Guilhem, Susana Sommer and Laura Shanner appointed to the program and conference planning committees. The 2002 conference will likely feature multiple conference languages, and we hope to increase greatly the presence of workshops, roundtable discussions, activist support, etc. in addition to the more traditional academic paper presentations. Ideas and volunteers are welcome at all times! Please contact Hilde or Debora.
- D. An ad hoc committee has been formed to investigate options regarding dues and memberships, with special attention to managing and streamlining membership renewals, updates and communication. Anne Donchin (Treasurer), Becky Holmes (Membership Secretary/Assistant Treasurer) and Wendy Rogers (Country Representatives Coordinator) will coordinate the efforts.

Open Discussion from Floor

Discussion focused on ways to expand FAB's international and activist presence. Several suggestions were raised, including: Increasing linkages among academic bioethics, policy makers, and clinical and activist "front line" workers. Special attention might be given to involvement in government ethics advisory committees. A good place to start such links is across the listserv for sharing news, requesting information or assistance, etc. FAB might increase outreach activities to university Women's Studies programs, and especially to graduate students in a variety of fields. Foster greater exchange of ideas, problems and insights across languages, cultures and disciplines. The biennial conference program can promote such activities with more workshops and roundtable discussions in addition to traditional papers, and communication may also be promoted in local/national conferences, informal meetings among nearby members, listserv/newsletter contributions, etc. A continuing theme from the coordinators, officers and board members is that there are so many wonderful things to pursue that many of us feel overwhelmed by the corresponding responsibilities. Insight, energy and activity as volunteers are welcome from anyone, at any time!

Conclusions

Rosie and Laura both extended their great appreciation to the members for their insights, enthusiasm and far-ranging interests. Once again, FAB members have shown themselves to be creative, passionate and committed individuals.

Rosie reminded the members to have a look at the policies and to send any suggestions to her; to send any

suggestions for the next conference to Debora Dinez or Hilde Nelson; to send in their membership form and contribution, and to look for the slate of nominees and ballot in the near future.

Laura closed by thanking Rosie, the Board and the members for two wonderful years as a co-coordinator, and more broadly for remaining the lifeline of a feminist bioethicist amid career transitions.

FAB 2000 By the Numbers

132 registered participants (plus several attendees who did not register for the full session)
 69 of these were members at the start of the conference
 23 countries represented among the registrants
 18 countries represented among the presenters

20 FAB members presented at IAB *in addition* to the FAB sessions on Sept. 21.

Thanks to Becky Holmes for compiling this data

Call For Nominations For Country Reps

FAB is seeking nominations, including self-nominations, from FAB members who are willing to stand as country representatives for the period January 2001 to December 2003.

To date we have had representatives in 19 countries (see list on Contacts page). The duties of a FAB country rep include recruiting new members, publicising FAB and supporting FAB-related activities in their countries. Many of our existing reps are willing to stand for the new term, however we will have vacancies for countries including Japan, Israel, New Zealand, Colombia and the United Kingdom as well as any countries which do not yet have a representative. In addition, we welcome new nominations from countries which do already have reps. If we have more than one nomination for any country, we will ask those people to devise a rotation schedule.

If you would like more information, or would like to nominate yourself or someone else, please contact Wendy Rogers (wendy.rogers@ed.ac.uk)

Wendy Rogers, University of Edinburgh

Announcements

Oak Human Rights Fellowship 2001 Focus: *Gender and International Human Rights*

The Oak Institute for the Study of International Human Rights at Colby College is soliciting nominations for the Oak Human Rights Fellowship for the fall of 2001.

The Oak Fellowship offers an opportunity for prominent practitioners in international human rights to take a sabbatical leave from their work and spend a semester (September - December 2001) as a scholar-in-residence at the College. This provides the Fellow time for reflection, research, and writing. Following the period of the award, it is expected that the Fellow will return to her or his human rights work. For the fall of 2001, the Oak Institute seeks a practitioner in the field of gender and international human rights. Possible areas of interest include but are not limited to: the international sex trade, domestic violence, women and labor rights, rape as a form of war crime, struggles related to sexuality/sexual orientation, among others. We especially encourage applications from those who are currently or were recently involved in "on-the-ground" work at some level of personal risk.

The Fellow will receive a stipend and College fringe benefits plus round-trip transportation from the Fellow's home site, housing for a family, use of a car, and meals on campus. The Fellow will also receive research support, including office space, secretarial support, computer and library facilities and a student research assistant.

Nominations for the Oak Fellowship for the fall 2001 semester should be sent to: Professor Mary Beth Mills, Anthropology Department, Colby College, Waterville, Maine 04901

Fax: 207-872-3474 / 3752; e-mail: oakhr@colby.edu;
Tel: 207-872-3813/3683

NOTE: Completed applications from nominees must arrive no later than **January 10, 2001**. Please ensure that nominations reach the Institute with sufficient time for us to forward applications to nominees and for nominees to meet the application deadline. More information - including APPLICATION FORM - is available on the Institute's Web site at <http://www.colby.edu/oak>. We plan to announce the final selection by March 30, 2001.

Teaching The Ethical, Legal, and Social Implications of the Human Genome Project *A Faculty Summer Institute at Dartmouth College*

The Ethics Institute at Dartmouth College announces a Summer Institute for faculty from liberal arts colleges and universities who are interested in developing a course on the ethical, legal, and social implications (ELSI) of the Human Genome Project (HGP). We will offer an intensive two-week ELSI teaching program during June of 2001. The

Faculty Summer Institute will be an intensified version of a successful program offered at Dartmouth during past summers. Faculty participants will collaborate with leading experts on the social implications of the HGP, examine cutting-edge issues in human genetic research, learn new skills of multidisciplinary teaching, and acquire knowledge, material, and support to successfully teach an ELSI course at their home institution.

Institute participants will be competitively selected from a pool of applicants who demonstrate excellent teaching skills and have a commitment to multidisciplinary teaching. Applications are being solicited from two-person interdisciplinary teams as well as individual faculty. Every effort will be made to ensure diversity among the participants in terms of academic discipline, gender, race, and ethnicity. This program is funded by the National Human Genome Research Institute. Institute participants will receive a modest stipend. In addition, all materials, campus lodging, and many meals will be provided. Please contact Barbara J. Hillinger for program application:

Tel: 603-646-1263;
Fax: 603-646-2652;
Email: ethics.institute@dartmouth.edu.

US Mail:
6031 Parker House
Dartmouth College
Hanover NH 03755

Do You Still Wish to Continue As a FAB Member?

FAB has initiated a new policy requiring biennial membership renewal.

This coming January (2001) members will receive by post a letter containing a renewal form. To maintain membership, please return the form to the Membership Secretary. Recent contributors to the Audre Lorde Fund and new members who joined in 2001 with a contribution to that fund will not receive the mailing until 2003.

Becky Holmes, Membership Secretary
joinfab@fnr.umass.edu

FAB Abstracts: IAB 2000

Report for the FAB conference in London

The Feminist Approaches to Bioethics network met in conjunction with the Fifth World Congress of Bioethics in London in September, presenting a rich program to the 160 international participants. Over a hundred delegates from 18 countries presented papers at the two day network conference that preceded the International Association of Bioethics Congress at Imperial College Kensington, and at least 20 network members presented papers at the 600 member IAB conference that followed.

Because of the variety of disciplinary backgrounds represented, bioethics conferences are characterized by a variety of presentation styles. Argument and anecdote, theory and narrative, normative and empirical presentations appeared side by side on the conference program. Individual case narratives and specific surveys indicating differential effects of various policies and practices on women were presented by clinicians and social scientists in many of the panels, alternating with thoughtful theoretical discussions by the many feminist philosophers who are members of the FAB network. The variety of disciplines, approaches and international perspectives made for a rich opportunity for learning and collaboration.

The conference appropriately opened with a history of FAB by Becky Holmes. IAB was founded in 1992, and the affiliated feminist network has been running satellite meetings at their biannual meetings since 1996. Holmes accompanied the history with an extensive list of books published by FAB affiliates worldwide. Hilde Nelson, Laura Shanner and Laura Purdy also presented plenary sessions, and Susan Sherwin, Rosemarie Tong, Donna Dickenson of Imperial College, Hasna Begum from Bangladesh and Kausar Khan of Pakistan presented papers in the afternoon of the first day of the IAB conference, on the theme of Global Justice for Women.

Because of the impact of reproductive technologies on women's lives, a number of the panels and presentations discussed reproductive issues. The importance of different social and cultural contexts, as well as inequities in distribution of various services and technologies, became very obvious as representatives from different countries spoke. Abortion services, contraception, fertility services, and genetic testing have very different social contexts across the globe, and consequently very different social impacts, as was revealed in talks by representatives from Turkey, China, India, Mexico, Argentina and Brazil. Assisted reproductive technologies from a feminist point of view were the subject of eight papers, ranging from the specific to the theoretical. Cynthia Cassell from the USA discussed the difference between liberal and restrictive regulatory frameworks, while Debora Diniz and Maria Fontes lamented the gap between introduction and regulation of fertility treatments in Brazil. Susana Sommer and Maria Victoria Costa discussed access to contraceptive services in Argentina, and Juan Guillermo Figueroa - Perea of Mexico presented research on male reproductive processes.

The proliferation of tests and research deriving from the new genomics was also widely discussed by participants. Predictive testing for BRCA1 and 2 was examined by three Italian representatives, who worried about the disparate availability of testing and counseling; they urged that all testing be accompanied by counseling. Canadian Lori d'Agincourt-Canning expressed concern that the gendering of the respon-

sibility for disclosing genetic information in the same context tended to disproportionately obligate women. The intimate connection between prenatal testing and pregnancy termination decisions emphasizes the way in which prenatal testing is a woman's issue. Alison Brookes of Australia explored an ethic of care in relation to women's decision-making around prenatal diagnosis.

A large number of papers in the IAB conference explored the progress and problems of establishing international bioethics conventions to govern biomedical and genetic research, and several sessions at FAB considered many of the same issues. International research and the absence of consistent regulation across research sites raises troubling issues for both researchers and research participants, and gender implications of such research was discussed by speakers from the US, Sweden, Brazil and Canada. Among the research issues discussed were IRBs, biotechnology, and xenotransplantation. International research protocols on HIV positive women in Africa was the subject of panels at both the FAB and IAB conferences, and there was a well-attended panel on research ethics raising policy issues associated with regulation of research.

Bioethics education—on the high school level in Japan, in a nursing school curriculum in Brazil, and in medical education in the United States and Canada—was the subject of several useful and critical panels. Feminist implications of research and treatment on various specific populations were presented, including older women, mentally ill women, and the disabled. The impact of discrimination—on the basis of mental capacity, physical capacity, race or sexual orientation—was discussed by participants from the US, Brazil, Australia and Canada.

Philosophical discussions of many standard bioethics topics were given a feminist twist as speakers at the conference drew theoretical implications from their specific areas of study. Justice, autonomy, trust, and care are among the staples of bioethics discussion. Autonomy was discussed in 8 different papers, and there was considerable consensus about the ways in which a relational concept of autonomy differs from the more traditional liberal individualistic interpretation of that concept. Susan Goold of the USA and Wendy Rogers from Australia discussed the importance of trust, as did Rosamond Rhodes in an IAB session. Hilda Nelson, in one of the four plenary sessions, discussed justice, as did Alison Jagger and Viola Shubert-Lenhardt from Germany.

An international conference presents many challenges, from the initial decisions of presenters about what is "global" about their chosen topic, to logistical problems of the organizers as they seek out the commonalities of disparately conceived papers for grouping in sessions, to attendees as they choose among concurrent sessions. The invigorating experience of the three days in London brought home to those attending a complex message of how much we have in common, how different social contexts inflect similar problems, and how much we can learn from each other. Plan now to attend the next FAB conference in Brazilia in 2002!

Mary Rorty, *Stanford University*

What follows are half of the abstracts from FAB 2000; the other half will appear in the spring newsletter.

History of FAB as Revealed by Her Newsletter

Helen Bequaert (Becky) Holmes, Ph.D., *Center for Genetics, Ethics and Women, Amherst, MA, USA*

In July 1993, the first issue of FAB's newsletter appeared, with Rosie Tong as editor. After discussing the evolving editorship, I shall analyze the newsletter's contents through 2000, which reveal the establishment of country representatives, the creation of FAB's advisory board, and the development of three international conferences. In late 1993 our listserv was established in Utrecht and in 1998 moved to Knoxville Tennessee. In 1996 our web page was initiated in Washington DC and then in 1999 transferred to Charlotte, North Carolina. My special emphasis will be our newsletter's book reviews, usually of books written by FAB members, with 41 different FAB members serving as reviewers. From these books and from other earlier "classics" using feminist approaches to bioethics, I shall recommend essential background literature for feminists who are sensitized to the failings of mainstream bioethics and shall propose what still needs feminist attention.

Feminist Bioethics Reconsiders Justice

Hilde Lindemann Nelson, Ph.D., *Department of Philosophy, Michigan State University, USA*

Given that the standing moral theories are shot through with male bias, and given that these theories purport to yield moral judgments that transcend historically and culturally variable forms of practice, it would seem that feminist bioethicists must reject a transcendental understanding of justice. But in that case, how can we make sense of the enterprise of globalizing gender justice? In this talk, I'll argue that moral judgments' objective truth or falsity does not rest on the transcendent nature of moral concepts such as justice, and indeed, that the notion of transcendence does no work. I'll then develop a particularist understanding of justice, arguing that there are no codifiable, law-like moral concepts of any kind. Just as one cannot capture the comic nature of a situation by pointing to its physical features, so one cannot capture the notion of *justice* by specifying some complicated function of features of actions. Instead, the contribution made by any nonmoral feature to an action's moral status depends on whatever other nonmoral features are present or absent. You see the gestalt of the nonmoral features and judge the action to be just—on the basis of that gestalt. I'll suggest that the particularist view of justice is more useful for feminist bioethicists than is the transcendental view.

Policy Issues for the Care-Minded: Focus on Genetics (Panel)

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

This panel will address the meaning and implications of caring and being cared-for in the context of conditions for which genetic testing is available or will be available in the future. The conditions examined include mental retardation, breast cancer, physical anomalies and sexuality. Cultural assumptions and practices are addressed, and recommendations proposed. Panelists: Debora Diniz and Maria Fontes, Gaia Marsico, Eva Kittay, Alison Brookes.

Good-Bye, Sarah Jane

Salud Zaldivar, *Research Institute for Tropical Medicine, Philippines* - ludyzal@nsclub.net

On June 12, 2000, the country's leading newspapers carried headlines on the burning issues regarding the unresolved peace negotiations, failing economies, independence day rites, and the announcement of Sarah Jane's death. Sarah was the Philippines' first health educator to give a human face to the 1,339 Filipinos with HIV/AIDS when she publicly acknowledged her seropositive status in 1994. Her charm and often candid response to sensitive and controversial issues of sexuality and human rights made her an instant celebrity. The problems started when her role as AIDS educator seemed to be in conflict with the realities of her personal life. Upon her death, the Secretary of Health said, "We consider Sarah one of the heroines at efforts to keep the incidence of AIDS in the Philippines relatively low." She left two children, aged 7 and 2, whose custody will have to be decided by the Department of Social Welfare, which is headed by the Vice President of the Philippines. As we say adieu to Sarah, the headlines that coincided with her milestone have found their niche in the country's history. In whatever order of priority they are dealt with, the issues surrounding Sarah's life and death will involve many other lives.

Women, Genetic Anomalies and Sexuality: The Omission of Medical Care in Brazil

Debora Diniz and Maria Fontes, *University of Brasilia, Brazil*, debdiniz@zaz.com

In cultures like Brazil with a strong emphasis on body aesthetics, the image and integrity of the female body are determining factors for the construction of sexual and gender identity. In our fieldwork on the sexual and gender identity of women with physical deformities of genetic origin, we verified that there is no health policy in Brazil to address the sexuality of such women. In the absence of attention to sexual and reproductive issues, these women, usually healthy from a sexual and reproductive standpoint, elaborate discourses in which they appeal to a mistaken auto-diagnosis of sterility in order to reconcile themselves to the fact that maternity and an active sexual life are culturally denied to them.

Genetic Counseling and Predictive Testing for Breast Cancer in Italy

Gaia Marsico, Ph.D., *Bioethics, University of Pisa, Italy*, gamarsic@tin.it

Francesca Toricelli, *Careggi Hospital, Florence, Italy*, f.toricelli@dfc.unifi.it

Mariella Immacolato, M.D., *Legal Medicine, Massa, Italy*

The identification of BRCA1 and 2 as genes associated with some hereditary breast and ovarian cancers calls attention to the diffusion of genetic testing and the impact genetic information may have on women. As genetic knowledge increases and new tests are introduced it is imperative that we stress the importance of counseling and care of the women impacted by them. It is important to ask whether genetic information really empowers women, and how to protect women's autonomy. In the Italian context there is an imbalance between the diffusion of genetic testing and the availability of counseling. There is a

growing interest in genetic counseling but there is insufficient attention paid to the providers' knowledge of ethical and legal controversies related to genetic testing. In the case of prenatal diagnosis there is a real possibility of pressure on women's control of their choices because of a lack of attention to counseling. As tests become available for genes for cancer susceptibility we need to work on policy issues in predictive genetic testing, on availability of counseling, and on the empowerment of women. In this genetic era we have many important questions to address. Is there a duty to know our genetic susceptibility? How does such knowledge affect women's choices? How can these issues be addressed in the context of healthcare? How can we increase women's consciousness of genetic testing and the associated ethical and social issues?

When Caring is Just and Justice is Caring: The Mentally Retarded and the Women Who Care

Eva Feder Kittay, *State University of New York at Stony Brook, USA*, ekittay@ccmail.sunysb.edu

The care of the severely disabled is intimately intertwined with the fate of women of all races and classes who care for their disabled children, husbands, lovers, parents and other relations. It has even more impact on the fates of poor women, especially women of color, who are offered few opportunities to do work other than caring and domestic labor for pay. Whether done for wages or out of familial duty, dependency work is poorly compensated and largely unrecognized. It is not fully integrated into national or global economies, although economic systems depend upon it, nor is it addressed in our understanding of justice. Those who are disabled, especially when the disability involves a mental impairment, are vulnerable to neglectful or abusive care taking. Without attending to the just and caring treatment of dependency workers, we cannot hope to provide adequate and reliable care for those whose ability to survive depends upon their attention. I will focus on recent instances of the mistreatment of the mentally disabled in the US and globally to argue for a global policy of integrating the costs of caring into the global economy and for the need for a just treatment of dependency work.

Prenatal Diagnosis, Care, and Women's Decision-making

Alison Brookes, *La Trobe University, Australia*, alison.brookes@latrobe.edu.au

Australian interviews with women making decisions about prenatal diagnosis illustrate the importance and influence of care. The research findings suggest that the acceptance of disability is not the only factor in women's decisions about prenatal testing. Women discussed their decisions with reference to personal care (including both personal needs and perceived ability to provide care) and community care (including levels of community welcome and nurturing, expectations of discrimination, and consequences of oppression). This paper will discuss the concept of care as treated by research participants as a right, as a duty and as an obligation, and will explore an ethic of care in relation to women's decision making around prenatal diagnosis. The paper will conclude by exploring the impact of the research findings on future research, development and implementation of prenatal diagnosis.

Disclosure of Genetic Risk Information: The Gendering of Responsibility

Lori d'Agincourt-Canning, *University of British Columbia, Canada*, dagincou@interchange.ubc.ca

The question of who "owns" genetic information is

increasingly a focus of ethical inquiry. Several recent critiques of predictive testing suggest that persons with a genetic disorder have a moral duty to disclose that information to other family members. The justification for this obligation is that genetic information can benefit members throughout a biological kinship and thus should be widely shared. In this paper, I consider this issue from a different vantage point: How does the gendering of responsibility shape the moral duty to disclose genetic information? Gender is partly comprised of distinct assignments and assumptions of responsibility (Walker, 1998). Thus, there is a danger that gendered patterns of socialization will make women feel that they should take primary responsibility for disclosing genetic information to others. Qualitative research with women who have undergone genetic testing for breast cancer susceptibility will consider the gendered forms that genetic responsibility might take.

Technological Diagnosis of Fetal Anomalies: Ethical Issues in Individual Choices and Public Policy

Susan Dodds, Ph.D., *University of Wollongong, Australia*, susan_dodds@uow.edu.au

Rebecca Albury, *University of Wollongong, Australia*, rebecca_albury@uow.edu.au

This paper examines some of the tensions raised by the use of such technologies as ultrasound and genetic testing to diagnose fetal anomalies before birth. Various common law jurisdictions have considered the use of such technologies in connection with the regulation of assisted reproduction technologies. This paper is part of a larger project comparing the policy approaches of Australia and Canada, focusing upon the ambiguous status of women, who are represented as both choosing citizens and vulnerable reproductive beings. We explore prenatal diagnosis from within a framework derived from contemporary feminist critiques of bioethics and concepts of citizenship and personhood from social theory. Why is testing being conducted—under what circumstances, and with what expected outcomes? What does the debate about prenatal diagnosis reveal about personhood, social citizenship, illness and disability?

Procreative Liberty and Responsible Motherhood

Hille Haker, hille.haker@uni-tuebingen.de, and Sigrid Graumann, sigrid.graumann@uni-tuebingen.de, *Center for Ethics in the Sciences & Humanities, Tuebingen University, Germany*

The new possibilities of assisted procreation and genetic diagnosis can be seen as tools for a new quality of family planning. The common goal of pre-natal and pre-implantation genetic testing, *in vitro* fertilization, reproductive cloning, or germ line gene therapy is to fulfill the desire of prospective parents for genetically related healthy children. In bioethics, the presumption of embryo and fetal rights and the fear of negative psychosocial and sociocultural consequences are the central arguments against these new technologies. The desires, interests or rights of the affected women are the most important arguments in favor. But some feminists are skeptical about whether the new reproductive technologies really empower women. A more clear determination of the desires, interests or rights of women in terms of "reproductive autonomy" and "procreative liberty" is a prerequisite for any moral evaluation of the new technologies. In this paper we focus on the desires of prospective mothers from the perspective of feminism and moral philosophy, relating these terms to feminist political experience and contemporary ethics.

Drawing a Line: Situating Moral Boundaries in Genetic Medicine

Jackie Leach Scully, *University of Basel, Switzerland*, scully@bluewin.ch

Feminist ethics shares a common ground with the perspectives of other marginalized embodiments. Bioethics traditionally focuses on establishing moral limits between different types of acts. However, boundaries are established by communities and individuals who differ in the constraints shaping their moral world, including the experience of different embodiments. The analogy of phase boundaries in physical chemistry provides an alternative way of looking at the issue of “drawing a line” in ethical discourse. Instead of trying to locate the “correct” moral boundary, we can work from a commonly accepted boundary to examine the constraints of the moral world that are being used to establish it. Genetic interventions into the human body provide acute examples of boundary establishment and the conflict between the moral architecture of different communities, such as medical personnel and disabled people. In this paper I use this alternative perspective to examine conflicts in gene therapy.

The Wondrous Egg: Autonomy, Assistance and Feminist Bioethics (Panel)

Marilyn Coors, Moderator, *University of Colorado, USA*, marilyn.coors@uchsc.edu

Feminist bioethics has had only limited and partial effects in the lives of the majority of women, attributable, perhaps, to the focus on equality. Nowhere are the insufficiencies of equality feminism more evident than in the bioethical quandaries around assisted reproductive technology and the sale of eggs. A panel has been assembled that will address these issues from a diversity of disciplines, viewpoints, and strategies, as indicated in the following abstracts:

A New Feminist Perspective

Marilyn Coors, Ph.D., *University of Colorado, USA*, marilyn.coors@uchsc.edu

A new perspective on feminism will be offered in order to assess the potential reduction of women to units of production and their eggs to marketplace commodities. Such a perspective recognizes women as equal in dignity but unique in biology. However, biology should not be interpreted to imply a static nature dictated by genetics. Rather, the focus is on the uniqueness of each gender and the particular bioethical considerations that uniqueness entails.

The Clinical Perspective

Marcelle Cedars, M.D., *University of Colorado Health Sciences Center, USA*, marcelle.cedars@uchsc.edu

From a medical perspective, oocyte donation offers the opportunity for a biological relationship with a child to couples who would otherwise not have this option. Particular issues which will be addressed are the challenges that have to do with weighing the “rights” of the recipient relative to the donor, the use of terms such as “donation” (although compensation is given), the “voluntariness” with which women “elect” to donate, and the financial concerns involved. This raises ethical issues of autonomy, consent, beneficence (is the embryo an Other?) and justice.

“Eggs For Sale”: A Dramatization

Theresa Jones, Ph.D., *University of Colorado Health Sciences Center*, therese.jones@uchsc.edu

As a bridge to encourage general discussion of the ethical, medical and political issues of assisted reproductive technology raised by the three presenters, a readers theatre piece will be presented. This readers theatre, adapted from Rebecca Meade’s article in the August 1999 issue of *The New Yorker*, “Eggs for Sale,” will dramatize the multiple voices and viewpoints of women currently involved in the practice of egg donation and sale.

Culture, Autonomy and Female Genital Cutting

Diana Tietjens Meyers, Ph.D., *University of Connecticut, USA*, dmeyers@uconnvm.uconn.edu

Feminist studies of FGC provide ample evidence that both accommodators and resisters often exercise effective agency with respect to this practice. My paper develops a theory of autonomy-within-culture that incorporates these findings. I review the range of worldwide FGC practices — including “corrective” surgery for “ambiguous genitalia” in Western cultures as well as the various initiation rites observed in some African and Asian cultures — and the diverse cultural rationales for different forms of FGC. To clarify women’s agentic position with respect to FGC, I analyze a number of educational programs that have enhanced women’s autonomy in regard to this practice. I argue that certain educational programs succeed in augmenting women’s autonomy because they strengthen introspection, empathy, and imagination skills and, in general, that gaining autonomy consists of developing and exercising a complex set of skills. This understanding of autonomy entails neither endorsement of FGC nor resignation to its persistence.

Autonomy, Informed Consent and Access to Contraception in Latin American Societies: Respecting Women’s Autonomy

Susana E. Sommer, *Universidad de Buenos Aires, Argentina*, susana@clacso.edu.ar

Maria Victoria Costa, *Universidad Nacional de La Plata, Argentina*, vcosta@huma.fahce.unlp.edu.ar

The principle of respect for autonomy occupies a prominent place in contemporary theoretical and applied ethics, serving for instance as a foundation of the legal and moral doctrine of informed consent. In spite of its wide acceptance, the idea of respect for autonomy has recently been subject to several criticisms. It has been argued that it is not an adequate principle for medical practice in societies like the Latin American ones, in which people are supposedly not used to, or do not want to, be informed and exercise their capacities for decision making. In the present paper, we will provide a defense of the notion of respect for autonomy, outlining its importance for the design of public policies and for improving medical practice in Latin American societies and, in particular, women’s experiences as patients. Our method for providing such a defense will consist in an extended discussion of the practice of contraception in Argentina, including a brief account of recent laws and a description of current medical services. This discussion highlights the importance of taking to heart the principle of autonomy in order to increase the scope of women’s personal control of their reproductive decisions and to improve the quality of their lives.

The Importance of an Autonomy-Enhancing Education in Combating Child Sexual Abuse: Challenging Family Privacy Rights for the Best Interest of the Child

Patricia Illingworth, J.D., Ph.D., *Northeastern University, USA*, pillingw@lynx.neu.edu

Child sexual abuse, as well as other kinds of abuse and neglect of children, are widespread and their consequences

harmful, both to the individual who is abused and to the community. I will argue that considerations of equal opportunity, prevention of child sexual abuse and community well being speak for ascribing to children a positive content right to an autonomy-enhancing education. Given the conditions that give rise to child sexual abuse, an education that fosters autonomy will help to protect children from abuse. Moreover, it will open up their opportunities to compete in the world by fostering a high level of trust, and enhance the social good of cooperation in the community.

Justice, Organ Procurement and the ‘Pregnable Body’: A Feminist Alternative to the Gift Metaphor

James Lindemann Nelson, Ph.D., *Michigan State University, USA*

National policies for procuring organs from dead human beings differ in intriguing ways. The U.S. requires explicit advance permission from the donor, or contemporary authorization by the donor’s family, while in several European countries, people are assumed to have given consent to provide organs unless there is explicit reason available to believe otherwise. These differences invite speculation about the connection between moral and social understandings prominent in these countries and their procurement practices. However, there has been little attention to gender’s role in influencing assumptions about the nature of interpersonal relationships as these bear on procurement policies. Focusing primarily on the U.S., I examine its dominant metaphor (transplantable organs as “gifts”) drawing attention to gender-normative themes that help entrench the ideology of donation. I contrast gift discourse with alternative metaphors for the relationship between those in need of vital organs and those who may be able to provide them, drawn from female abilities—specifically, the potential to gestate, or “pregnability”—and examine how changing metaphors can influence the moral understanding undergirding different procurement policies.

The (Altruistic) Virtue of Care

Chris Gastmans, Ph.D., *Catholic University of Leuven, Belgium*

It will be argued that care is a foundational normative concept in the ethics of the caring professions. The characterization of care as an altruistic moral virtue will be explored. A fundamental characteristic of the attitude which is inspired by the virtue of care is that a shift takes place from the interest in our life situation to the situation of the other, the one in need of care. Following a discussion of two dimensions of care, one cognitive and one affective-motivational, it will be argued that there are dangers in promoting an emotivist concept of care. We will summarize our description of the virtue of care as “a dispositional quality which manifests itself in caring behaviors and which is directed to the well-being of the other.”

Is Trust in Medicine a Practical Option for Women?

Wendy A. Rogers, *Flinders University of South Australia, Australia*, wendy.rogers@flinders.edu.au

Trust in both the institutions and practitioners of medicine is an important part of good health care. Trust allows us to access medical care, to give full and frank accounts of illnesses suffered, to bare ourselves for examination, and to accept the advice and treatment offered. Yet the history of medicine is littered with examples of abuses of trust, many of which have been abuses of the trust of people in disadvantaged positions, such as women or people of colour. In this paper I explore the nature of trust in medicine, and outline the ways in which trust can increase the goods of medical

care. Despite these benefits, trust in medicine raises specific problems for women such as paternalism, stereotyping and exclusion from research. These problems require us to reconceptualise the ways in which women may develop trust in medicine.

Do Life Threatening Illnesses Threaten Women’s Autonomy?: The Importance of Hope

Jennifer Beste, *Yale University, USA*, jennifer.beste@yale.edu

In contemporary American oncology, certain physicians assert that their duty of beneficence conflicts with the imperative to respect patient autonomy and tell the full truth about medical prognosis. In cases where revealing negative medical information about a patient’s condition will impede hope and perhaps compromise the best possible medical outcome, they affirm that non-disclosure of medical information best fulfills the duty of beneficence. After evaluating the claim that life-threatening illnesses negatively affect women’s autonomy, I argue that the supposed conflict between beneficence and autonomy is a misperception which rests on an inadequate understanding of hope. Drawing on insights on hope from Gabriel Marcel and William Lynch as well as on interviews with breast cancer patients and women who have undergone bone marrow transplants, I will propose that fostering hope *requires* respecting women’s autonomy, as well cultivating physician-patient relationships that are grounded in trust, truth and empathy.

Latent Integrity and Addiction

Carolyn McLeod, *University of Western Ontario, Canada*, cmcleod2@julian.uwo.ca

Still prevalent in most Western societies is a stereotype of addicts as weak-willed and lacking in integrity. This stereotype conditions the responses of many of us, including some healthcare providers, to the lives of people with addictions. I challenge that perception by defending a feminist account of integrity that leaves room for ‘latent integrity’ among many people with addictions, especially those who face severe material or psychological deprivation. People with addictions possess latent integrity to varying degrees, but knowing that many possess it to some degree is important for healthcare providers who seek to respond in a just way to addictive behavior. Further, understanding better what integrity demands is important for addiction treatment counselors who want to encourage greater integrity among people with addictions. My conception of integrity is informed by recent feminist theorizing about integrity, and is empirically grounded in stories of the lives of some people who have suffered addictions.

Narrative Repair: Restorative Transformations of Grievance and Loss

Martha Montello, Ph.D., *University of Kansas Medical Center, USA*

Medicine is an intrinsically narrative enterprise, but its clinical stories are often difficult to translate into an idiom that is useful for the living actors of the medical dramas of loss and grieving: patients, families and the clinicians who care for them. Healthcare workers need to be trained to perform *restorative transformations* from the narratives of biomedicine to narratives meaningful to people whose lives are affected by illness and loss. Irrevocable loss represents an altered life narrative. Through a close reading of three texts by women authors, this paper illustrates the process of *narrative repair*, the process of psychological and spiritual change, acceptance and healing necessary in recovering from irrevocable loss.

Everyday Nursing Ethics in Japan and the United States

Peggy Wros, R.N., Ph.D., *Linfield College, USA*,
pwros@linfield.edu

Dawn Doutrich, R.N., Ph.D, *Washington State University, USA*,
doutrich@wsu.edu

Shigeko Izumi, R.N., M.S.N., *Oregon Health Sciences University, USA*

Much of the current discourse regarding nursing ethics as an ethics of care has been initiated by Western nurse philosophers and ethicists. Based on feminist values of connection, relationship and community, voices of nurses around the globe must be included in the discussion. In the feminist tradition, an inclusive nursing ethics should evolve from descriptions of nursing practices which reflect nurses' values and concerns in various nursing contexts, including diverse cultures. This pilot study is a secondary analysis of data from two narrative studies of nurses in the U.S. and Japan. Both were phenomenological studies in which nurses' stories were analyzed using hermeneutic methods. The current research compares a sampling of stories from the two previous studies, describing similarities and differences in the moral concerns of nurses and using feminist theory as a basis for analysis.

Expanding the Range of Medical Humanities: Globalization and Its Emerging Convergences

Lois L. Nixon, Ph.D., *University of South Florida, USA*,
lnixon@hsc.usf.edu

With some exceptions, medical humanists in the United States have relied primarily on a rich body of works by North Americans to illuminate the story and human face of medicine. Now other voices and visions from those who previously were unheard are contributing to a growing body of work dealing with birth, death, illness and suffering, but from unfamiliar perspectives. This proposed session considers non-North American literature, art and film to show how the body of work used by medical humanists, like that of ethicists, is expanding rapidly to reflect emerging convergences between familiar, nationalist works and situations and those exposed in recent years by forces of globalization and cultural diversity.

Feminism and Abortion: Complicated Loyalties

Ruth Groenhout, *Calvin College, USA*,
rgroenho@calvin.edu

While feminist theory has begun to recognize differences among women as an important factor in feminist theorizing, the recognition of differences has not been extended to treatment of abortion as an ethical issue. If we work within ethical frameworks generated by theorists working within Black feminist thought, ecofeminism, or an ethics of care, however, we find that the standard account of abortion as a matter of freedom of individual choice is too simplistic to capture the moral complexity of the issues raised by abortion. Feminist theorists need to open up the issue of abortion to moral complexity rather than treating it as the litmus test of feminist orthodoxy. In particular, the resources generated by some of these alternative theories provide better theoretical starting points for understanding the ethical complexity of abortion in non-Western contexts than can be provided by standard liberal individualist accounts of abortion.

Using the Perspective of Gender in Social Research on Reproduction (Panel)

Juan Guillermo Figueroa-Perea, *Moderator, El Colegio de Mexico, Mexico*,
Jfigue@colmex.mx

Focusing on specifically Latin American discourse, this

panel considers several aspects of research on reproductive issues. The participants are Juan Guillermo Figueroa-Perea, Susana E. Sommer, Maria Victoria Costa and respondent Aida Santos.

Bioethical Analysis of 'Reproductive Choice' and Female Foeticide in India

D. Jayalakshmi, Ph.D., *University of Madras, India*

This paper aims at the analysis of the social context of reproductive choice leading to female foeticide, and traditional ideologies influencing the ethical perceptions of medical practitioners. The son-cult in India incorporates ideologies about the son as the perpetuator of the family lineage, provider and protector of the family and as agent of economic security for the family. This ideology implies that female children are unwanted and in recent times gender discrimination starts even before the birth of the child. Despite legal attempts to limit disclosure of sex, prenatal diagnostic tests which reveal the sex of the fetus are often followed by abortion of female fetuses. The result is a patriarchal society oppressive of women, involving not only female infanticide but sex selection abortions which deny the right of female children to be born.

Reflections on the Ethical Implications of Misuse of Medical Technologies in India

Krishnaraj Shanthi, *University of Madras, India*,
santi49@yahoo.com

India is one of the very few countries in the world that has an adverse sex-ratio for the population as a whole. Research studies indicate that the missing females include those who are victims of malnutrition, delayed health care and other forms of childhood abuses including infanticide and foeticide. Three issues are taken up for discussion in this paper: population policy of the government of India and the experimental use of contraceptives on women; misuse of medical technologies to abort female babies at the family level; and the practice of killing female infants to avoid the problems associated with bringing up girl children in the Indian social milieu. There are three gender questions: Since raising a family is the joint responsibility of both husband and wife, why should women alone be held responsible for limiting the size of the family? Why is there such a radical disparity rate in sterilization between men and women? What are the long-term consequences of female foeticide and infanticide on the sex ratio? The ethical issues involved here are: Do we have the right to kill female children just because they are female? Why should women be forced to undergo abortion and repeated pregnancies with grave consequences to their health? What are the bioethical implications? What is the future for females? The second part addresses a case study in Tamil Nadu, analyzing interlinkages between and among government interventions, cultural practices, and women's reproductive health. It concludes with positive recommendations to empower women to meet the current challenges.

New Reproductive Technologies in Brazil: A Debate Awaiting Regulation

Professor Debora Diniz, *University of Brasilia, Brazil*,
debdiniz@zaz.com

Professor Dirce Guilhem, *University of Brasilia, Brazil*,
guilhem@unb.br

The first announcement of a baby born through assisted reproduction in Brazil occurred in 1984. The precocity of the use and dissemination of this technology in the country was not followed by elaboration of national laws or resolutions to regulate the procedure. In this legislative and ethi-

cal vacuum, there are frequent denunciations involving doctors who hyperfertilize women or are involved in abusive experiments. In this paper we analyze the ethical and normative dilemmas of one case broadly publicized in the national media, involving a 39 year old poor sterilized woman who became pregnant through assisted fertilization and is now in her sixth month of pregnancy with quintuplets.

Fat is an Ethical Issue! An Interpretative Analysis of *anorexia nervosa*

Simona Giordano, *University of Manchester Centre for Social Ethics and Policy, UK*, mewxgsg2@stud.man.ac.uk

Until Susie Orbach declared that “Fat is a feminist issue”, eating disorders were mainly considered a clinical problem. This paper shows that eating disorders are also an *ethical* issue, and explores the important ethical connotations of abnormal eating. The attachment of moral value to eating and fasting is sometimes manifested in literature. Quotes from Tolstoi and Kundera and the link between fasting and mysticism in the Christian tradition are explored. The interpretative analysis supports the idea that anorexia, rather than a symptomatic behaviour, or one resulting from an over-indulged vanity, should be regarded as the result of an over-strict morality, as a form of asceticism, aimed at lightness (detachment from the conditions of material existence) and at the domination of the phenomenal (moral integrity). If this alternative way of viewing anorexia is persuasive, this might change the perspective from which a scientific analysis of eating disorders should start.

Shattered Image: The Limitations of ‘The’ Face of Beauty

Diana Harris, M.A., *Albert Einstein Healthcare Network-Germantown Community Hospital, USA*, dianah@sas.upenn.edu

To achieve perfection is an incessant quest. Individuals are driven by the idea of attaining flawlessly sculptured faces and bodies — to look as aesthetically “complete” as possible. Americans embrace a tacit perceptual norm that “even” wins over “odd,” homogeneity wins over complexity, less is more, and paradoxically, more is best. Regardless of continual, even revolutionary social change, there is an immortal visual and psychological pursuit for uniform structures. Hidden premises that govern our moral positions and emotional responses to individuals are predicated on culturally validated ideas of beauty and normalcy. This paper discusses the socio-historical and normative dimensions of this unremitting fixation, tracing its movement into our contemporary cultural landscape. It analyzes how the metaphorical nature of the face fuels one’s obsession with beauty. Ultimately, in a world where aesthetic ideals are transient and vary between cultures, a self-reclamation for “beauty’s sake” carries heavy physical and psychological costs.

The Pregnancy Relationship: In Search of a New Metaphor

Laura Shanner, Ph.D., *University of Alberta, Canada*, laura.shanner@ualberta.ca

The physical and metaphysical state of pregnancy is a puzzling phenomenon because the maternal-fetal relationship does not really involve two distinct individuals in the usual sense. We face two conceptual hurdles: the pregnant woman is somehow “more than” or “different from” her non-pregnant self due to the presence of the embryo/fetus, while the fetus is a person-in-progress living inside someone else’s body rather than an independent entity. Pregnancy should thus be understood as involving “more than one but less than two” individuals. Through pictures (but no equations!), I explore metaphors from fractal mathematics. “Inter-dimensionality” is a mathematical concept of dimensions greater

than 1 (a line) and less than 2 (area). If we can come to understand a concept of dimension between our comfortable distinction between 1 and 2 dimensions, then we might also come to understand the unique condition of pregnancy as more than 1 but less than 2 persons.

Medicalization, Medical Necessity and Feminist Medicine

Laura Purdy, Ph.D., *Wells College*, laura.purdy@utoronto.ca

One of the most common feminist objections to the current healthcare system is that it medicalizes the female body. It defines normal functions (menstruation, pregnancy and menopause) and natural states (for instance, breast size) as pathological states for which medical treatment is appropriate. Such medicalization is believed to be promoted by economic factors and a desire to control women. However, this critique is considerably less straightforward than it might seem. I argue that the concepts on which it depends require philosophical analysis, and that the critique itself may presume a particular (and inadequate) view of medicine and healthcare.

Several Features of Research on Male Reproductive Processes

Juan Guillermo Figueroa-Perea, *El Colegio de Mexico, Mexico*, jfigue@colmex.mx

Demography, medicine and developmental psychology privilege some assumptions when conducting research on reproduction, placing primary emphasis on women as the objects of research, while considering men as complementary or secondary influences on how women experience reproduction or on the conditions under which their children are born and raised. Inclusion of the gender perspective has enabled us to question methodological approaches that have feminized the study of reproduction, and is enabling us to rethink the role of males in reproductive processes in a more comprehensive manner. Rather than being concerned solely with the conditions under which women reproduce or their processes for self determination, such terms may be considered relational processes. Naturally in those processes women’s health is still of interest, not as a phenomenon randomly supported by males, but rather as a joint responsibility of both. Similarly in exploring rights and responsibilities, guarantees for the self-determination of the different actors involved in reproduction take on new meaning, since males must assume their responsibilities more explicitly in order to exercise their reproductive rights. The paper presents several analytical proposals on how to construct categories and indicators for the purpose of identifying exchanges between men and women in reproductive processes in a relational way.

Respect for their Privacy: Reflections on Studying Mainland Chinese Women’s Experience of Abortion

Jing-Bao Nie, MD, PhD, *University of Otago Bioethics Centre, New Zealand*, jing-bao.nie@stonebow.otago.ac.nz

Chinese attitudes toward privacy differ from the western ones in striking ways—but privacy matters and ought to be respected. Interviews with 60 Mainland Chinese women on their moral understanding of abortion revealed complex differences between Chinese and Western approaches to privacy and confidentiality. Although personal privacy and individual liberty have been seriously devalued by the official ideology of Mainland China in the past five decades, there is considerable support for both in the moral and political ideals of early Daoism. In order to successfully carry out social science research in China, interviewers must take these differences into consideration. This paper explores the parameters of privacy in China, as conditioned by Chi-

nese history, and suggests some dangers of the Western-style research presuppositions of informed consent and privacy in interviewing. Although there has been feminist criticism of modern social research, done humanely and morally it can help the victims of exploitation, oppression and discrimination find their voices. Presented by: Laurel Baldwin

Is Medical School a Humiliating Institution? Implications for Moral Relationships in Medicine

Kelly A. Edwards, MA., Ph.C., *University of Washington School of Medicine, USA*, edwards@u.washington.edu

This paper explores institutions of medical training and practice, and considers the way in which humiliating practices pervade these medical institutions. My theoretical lens is borrowed from Israeli philosopher Avishai Margalit who claims that a decent society is one whose institutions do not humiliate. He discusses three senses of humiliation: treating another as non-human, rejection from an encompassing group, and acts intended to lead to, or highlight, another's lack of control. I illustrate these features with examples from recent empirical studies of medical training and practice. Finally, I draw some lessons from women physicians which suggest how medical education might respond to this critique. Rather than laying more ideals over the top of such dehumanizing behaviors, perhaps what medical education needs is to foster a critical self-examination process. An abusive system works because of silences. With a self-critical and open attitude, perhaps medical training and practice can become "decent societies."

What Assumptions Frame Medical Students' Perception of the Doctor/Patient Relationship?

Katherine H. Hall, M.D., *University of Otago, New Zealand*, khall@gp.otago.ac.nz

Chrys Jaye, M.D., *University of Otago, New Zealand*

This study analyzes and compares underlying assumptions about the doctor-patient relationship, including assumptions about power and gender, and the influence of medical school training on these assumptions. 360 medical students, 180 beginning their first medical school year and 180 in their fourth year of training, were invited to complete a questionnaire containing two short scenarios. The first scenario involved a family practitioner with an assertive patient with early Alzheimer's disease, the second a surgeon with a passive patient with inoperable cancer. In each case, the patient requests euthanasia. No gender was specified for either doctor or patient. Participants were asked to describe what they thought the doctor should do in each case, and what sort of patient would make this type of request. Analysis included the ascribing of gender via pronouns, issues of power, the role of specialist versus non-specialist doctors, and the influence of medical training upon these assumptions.

Teaching About Reproductive Technology in a Japanese High School

Izumi Otani, Kokubunji, *Tokyo Metropolitan Senior High School, Japan*, KHA00347@nifty.ne.jp

The goal of bioethics education is to try to make students ponder how men and women should live, and how they should face reproduction. While thinking about the parent-child relationship, students question the propriety of reproductive technology using the Baby M case as an introduction. Japanese high school students do not have an earnest desire to have children at their stage of life, but they do have a strong curiosity about sex itself, and some already have sexual experience. At the same time, because of their age, they can easily imagine themselves in the posi-

tion of children who were born by reproductive technology. When we look back on our history, both in the Orient and the West, women have been subject to prejudice and discrimination. While equality is encouraged by the government, there is a division of work based on gender: "Men for careers, women for domestic work." It is possible to introduce a feminist viewpoint into education by taking it as a topic of the classes on reproductive technology. The experience of teaching bioethics over the past decade will be related to the present situation in Japan, while analyzing responses obtained from high school students who think about the future of reproductive technology.

Teaching Bioethics in a Nursing School in Brazil

N.M. Diniz, Bioethics, *Londrina State University, Brazil*, nzdiniz@uel.br

M.L. Garanhani, *Londrina State University, Brazil*, maraga@onda.com.br

Kiyomi Yamada, *Londrina State University, Brazil*

As of the year 2000 the Nursing Course of the State University of Londrina will be implementing an integrated curriculum based upon a problematization methodology. In this methodology the student constructs knowledge through the observation of reality. Recent scientific progress has made necessary the introduction of discussions on bioethics within higher education courses, including the nursing course, which has as its guiding principle 'life's protection: health as a right.' The integrated curriculum has a thematic configuration and bioethics is inserted in all modules of the four years of the course like a sap that permeates and feeds the thematic tree. The intention is to contribute to nurses' ethical formation.

The Perception of Gendered Moral Arguments in Medical Discourse

Elisabeth Conradi, *University of Goettingen, Germany*, econrad@gwdg.de

Nikola Biller-Andorno, *University of Goettingen, Germany*, nbiller@gwdg.de

Claudia Wiesemann, Department of Medical Ethics and History of Medicine, *University of Goettingen, Germany*

Empirical research involving gender perspectives can provide important contributions to current discourses in medical and nursing ethics. However, such research risks re-enacting gender differences in its very analyses. In our project we try to address this problem by shifting the perspective: The question is not whether men and women differ in their moral argumentation, but rather how arguments with reference to gender are perceived by participants in moral discourses. In the first part of our project, we provide a systematic analysis of gendered moral arguments in German medical and nursing ethics literature. In a second step we carry out an empirical study on the prevalence and status of gendered arguments in individual moral reasoning. The empirical part includes a case-based questionnaire. Our sample consists of 1st and 3rd year medical students, as well as 1st year and graduate nursing students with about 200 persons for each subset. The questionnaire will be presented and discussed.



THE PATENTING OF GENES, FRENCH LAW, AND THE 1998 EUROPEAN DIRECTIVE

Jennifer Merchant

What does patenting genes have to do with feminist bioethics? Though the link does not seem obvious, it certainly exists. Probably one of the main concerns of feminist bioethics is to prevent the instrumentalization of the human body. The possibility given to individuals and/or private companies to patent genes transgresses this limit fixed by most feminist as well as mainstream bioethicists. In its 1994 bioethics law, France explicitly prohibited the patenting of any human particle, no matter how small, basing this on the notion of protecting human integrity. Organs, body parts, cells, and genes, even when separated from the human body still represent the trace of the person from which they come, and therefore deserve continued protection from any and all sorts of instrumentalization without having obtained previous, informed, and signed consent from the individual involved.

A European Directive is now seriously challenging this important clause of the French bioethics law. A Directive is a legal framework and/or law (*loi-cadre*) decided upon during a special reunion of the Council of Ministers (assembling the more important Ministers from all member countries), and in certain cases, co-decided by a vote by the European Parliament. The Directive defines a goal to be attained (*loi-cadre*) but does not impose the means to do so. In other words, all European member countries must – by a certain deadline – implement the *loi-cadre* but may choose the way to go about it (legislative vote, executive decree, or referendum). If the member country does not comply, it can be subject to sanctions by the European Community, and this is a perspective that France is now facing.

The contested Directive, entitled “Legal Protection of Biotechnological Inventions,” was adopted in 1998 by the Council of Ministers, and also approved of by a European Parliament vote under heavy pressure from biotechnological industry interest groups. Quite simply, it allows for the patenting of newly discovered human genes. The Directive set the deadline for national implementation at July 30, 2000. However, several countries along with France have not yet complied, notably Holland, Italy, and also Norway (as a member not of the European Union but partaking in the European economic space). These three countries filed a suit just after the passage of the Directive in the European Court of Justice declaring

that “such a blatant instrumentalization of living human material constitutes an intolerable disrespect for human dignity.” However, the European Court of Justice has delayed rendering its decision, and the grim deadline has passed, now resulting in formally expressed threats of severe financial sanctions by the European Union, notably against France.

Following two years of silence (indeed, the French minister present at the Council of Minister’s reunion voted in favor of the Directive), the French government made a formal statement on June 7th denouncing the Directive, Justice Minister, Mme. Guigou, declaring that it was “totally incompatible with French law,” more notably the 1994 bioethics law. Meanwhile, a petition calling for the rejection of the Directive has been launched by the French deputy, Jean-Francois Mattei (from the right-wing party *Democratie Liberale*) and has received multipartisan support as well as numerous signatures from well-respected French scientists. The French national bioethics committee has also recently come out with its own condemnation of the Directive. Last but not least, Research Ministers from the G8 (United States, Great Britain, Germany, Italy, Russia, Japan, Canada, and France), joined by Ministers from Brazil, China, Mexico, and India, made a formal declaration denouncing the patenting of genes during their June 2000 meeting devoted to bioethics.

The terms of the debate are thus laid out on the table: either human genes represent the common patrimony/matrimony of humankind and thus deserve privacy protection, or they can become objects of private appropriation. It is highly unlikely that the aforementioned efforts and declarations corresponding to the first category will yield the desired fruit, simply because European Community law, and especially European Directives, outweigh national law. The only recourse remains the decision of the European Court of Justice, expected by the end of 2000. But this was a risky path that Holland, Italy, and Norway chose to follow, for in the event that the Court decide in favor of maintaining the Directive, then no other recourse remains, and the battle is lost for those three countries as well as for France, who will then have to completely transform the very philosophy of its national bioethics law.

DELIVERING ANONYMOUSLY (*ACCOUCHEMENT SOUS X*)

Jennifer Merchant

In France, and ever since a 1966 law, it is possible for a pregnant woman to deliver her child anonymously within a public hospital/obstetrical setting, leave the child in the hands of social services and up for adoption, and walk away from the delivery room knowing that the child will never be allowed to find her. This is called an *accouchement sous X* (hereafter, ACX). Thirty years later, in 1996, this law was amended to allow birth mothers to “end the secret” (*lever le secret*) if they so desire, which then would allow a child access to records kept at the place of birth as well as social services archives. This framework has recently come under intensive attack from a plethora of associations under the leadership of the CADCO (*Coordination des Actions pour le Droit a la Connaissance des Origines*, www.cadco.asso.fr) and supported by some national political leaders who are calling for the abolition of ACX in the name of the “right to know one’s origins”. Indeed, when compared to other European countries, only France and Italy give women the possibility to deliver anonymously, all other countries having a variety of legal frameworks that more or less allow children-turned-adults to either obtain information about their parents and/or even contact them, sometimes against the parents’ wishes. In addition, and since the introduction of ACX to the French Civil Code of Law in 1993 (formally inscribed only within the Family Code of Law), any person who provides information about an ACX mother can be accused of committing a misdemeanor and sanctioned.

At first glance, then, it would seem that France’s system is an unfair and inhuman one from the standpoint of children born under ACX. However, it is very important to remember that the passage of this law was the fruit of French feminist efforts to create alternatives – in the absence of legalized contraception and abortion - for women who were in the throes of unwanted pregnancies. It was also argued before French lawmakers at the time that opting for an ACX protected women from social stigma, as well as preserved the anonymity of women who were victims of incest or rape. This of course did not prevent women from then pursuing their aggressors, it was argued, but rather encouraged

them to do so, no longer having the burden of an unwanted child.

Now that contraception and abortion are legalized, and for the most part financed by the public health system, ACX is no longer necessary, respond CADCO and Jean-Paul Brey, French deputy and author of a bill to abolish ACX. It is likely that this bill will meet with approval in the French Parliament when it drafts a new Family Code of Law, voting scheduled for January 2001. However, in that event, the French bioethics 1994 law will also require profound modification. Presently, the law firmly stipulates that all gamete donations used in reproductive technologies must remain totally anonymous. Pressure to constitute a “right to know one’s origins” could easily reverse this clause. In an attempt to resolve that issue before it occurs, French law professor Pierre Murat has suggested the establishment of two kinds of ACX that could be proposed to the expectant mother: the “traditional” ACX option where the future child would have no access to information, or a more flexible option wherein the mother could choose to leave behind any information on herself and family, and even express her accord that the future child contact her if so desired, including the terms of this encounter (exchange of letters only, telephone calls, or actually meeting), accompanied by the possibility that she change the terms before the child reaches eighteen years of age. This would leave the French bioethics law relative to reproductive technologies intact, thus maintain a continued supply of gametes which, in the event of revealed origins, would certainly decrease their availability. Thus, an important debate to follow in the upcoming months.

FAB depends on its members’ contributions to maintain communication and fund travel grants to our members, especially those in developing countries. If you haven’t sent a contribution in some time, put FAB on your holiday gift list. We now are able to accept contributions in ALL currencies. Mail your check to our treasurer, Anne Donchin (see Contact page for address).

Book Review Section

A review of **Medical Harm: Historical, Conceptual, and Ethical Dimensions of Iatrogenic Illness**, by Virginia A. Sharpe and Alan I. Faden. Cambridge: Cambridge University Press, 1998. 280 pages, \$28.95 paper.

In the wake of the Institute of Medicine's report on medical errors (2000), medical mistakes and errors have been in the headlines of popular news as well as medical journals. Many medical institutions are scrambling to find ways to minimize the risks to patients and restore public confidence. Virginia Sharpe and Alan Faden have written a book that will be of great use to those trying to understand and minimize medical harm.

Sharpe and Faden offer a thorough exploration into the concept of medical harm. Their aim with this detailed work is to bring to bear a conceptual framework with which to consider specific normative questions relating to the notion of medical harm.

Medical practice, the authors point out, has always functioned with a peculiar tension. While doctors are charged with the injunction to "do no harm," medical diagnosis and treatment necessarily involve risk. They quote David Hume, "'Tis impossible to separate the chance of good from the risk of ill" (p.1). Risk may be inevitable, but what is acceptable risk? And what is a reasonable notion of accountability? The conceptual framework the authors offer shifts our focus from the individual practitioner to wider systems-level issues. In this era of interdisciplinary team care and managed medicine, this shift seems both significant and appropriate.

Medical Harm is divided into three parts. The first part is dedicated to describing the historical context for harm and accountability within the profession of medicine. The second part turns to the conceptual and ethical considerations for these same notions. This is an especially useful section of the book, as much that is written in the shorter journal articles about medical risk and harm does little to define or explore these terms. The final part of the book provides empirical examples of regulatory mechanisms and offers a formal recommendation for future work. The authors offer significant detail and for the casual scholar of medicine or medical ethics, a sampling of chapters from each section may provide sufficient food for thought and discussion.

Sharpe and Faden's specific recommendations include a now familiar list of quality improvement strategies: surveillance, information systems, research, and evidentiary standards of care. The authors' more original

contribution here involves considering how training and medical systems affect individuals' behavior. The authors identify a need to overcome "the ethos of infallibility" (pp. 232-24). Because physicians are expected to be an objective authority, there is a code of silence around admitting uncertainty or error in the medical profession. This felt need for silence is reinforced by the highly litigious nature of our society. Unfortunately, as the authors point out, malpractice reform will need to be addressed before the medical profession can feel comfortable talking openly about mistakes.

Finally, Sharpe and Faden remind us that the original use of "iatrogenic illness" came from the psychiatry literature, referring to a phenomenon where the physician could bring about an illness by naming it for the patient. The current use of iatrogenic illness refers primarily to adverse drug reactions and nosocomial infections. I would encourage the medical ethics and education communities to consider Sharpe and Faden's framework for thinking about medical harm carefully as they develop and revise guidelines for professional practice. And in so doing, they should not forget the origin of this concept and recall that physicians' words can also render harm. Even as they advocate for attending to systems-level issues, Sharpe and Faden recognize the covenant that still lies between physician and patient—that is, first, do no harm.

Kelly A. Edwards, *University of Washington*



A review of **Mother Time: Women, Aging, and Ethics**, edited by Margaret Urban Walker. Lanham: Rowman & Littlefield, 1999. 301 pages, \$26.95 cloth; \$18.95 paperback.

The task of this volume, as described by Margaret Urban Walker in the introduction, is "to begin an exploration of assumptions, practices, and policies that affect women's experiences in aging in morally significant ways" (p. 2). Three assumptions guided this impressive group of authors: (1) aging is not just about being sick or dying; (2) gendered roles influence the experience of aging, and; (3) reflection on this issue is not only important for women, but for ethics more generally.

Several questions unite the book's varied projects: What is aging? What is the appropriate feminist response

to aging? Is there one appropriate response? How do women resist the “dominant culture that denigrates women’s bodies as it makes them invisible” (p. 15)? How does aging affect identity and agency? Does the narrative of decline and progress shape and define women’s experiences of aging in negative ways?

In my view, the most difficult task before these authors was to find a way to talk about gender and aging that encourages positive valuations of age while simultaneously resisting overly romanticized views (e.g. age is wisdom, wrinkles are beautiful, etc.). For the most part, the authors have succeeded. Diana Meyers and Frida Kerner Furman remind us of how dominant cultural norms of attractiveness profoundly affect women’s self-perceptions. Furman’s essay relies on interviews with a group of “older Jewish women” at Julie’s International Salon. Meyers looks to the literature on cosmetic surgery to illuminate the experience that is “familiar to many aging women meeting a stranger in the mirror” (p. 24).

The least romanticized view is presented by Sandra Lee Bartky. A self-proclaimed pessimist, she writes, “I see old age, for the most part, as a series of losses” (p. 61). Bartky’s catalogue of the “social and cultural losses of the elderly” is grim indeed: loss of social and professional networks; intellectual, moral, and cultural obsolescence; loss of significant others; loss of the admiring gaze; loss of opportunity for sexual connection. Nevertheless, her whimsical fantasy about the elderly widows in her Chicago neighborhood leaves you with a sense that Bartky too wants to envision a world where being an elderly woman has its rewards. But, alas, fantasies provide minimal comfort.

Some authors take us beyond fantasies to some concrete practical options. Robin Fiore’s proposal for “cooperative living arrangements” is provocative; particularly in the way that it raises difficult questions about care, dependence, and autonomy. Fiore is concerned that old women be able to secure “appropriate supportive care without surrendering dignity” (p. 245), a concern that resonates with Sara Ruddick’s discussion of the virtue of “wise independence” in her essay on virtues and age. Joan Tronto also explores the practical implications of living arrangements and argues that an ethic of care approach provides a richer way to understand the moral problems related to age-segregated housing. Martha Holstein’s discussion of home care as the site of injustice related to age and gender is a reminder of practical concerns.

Several of the authors point to the way that the narrative of progress and decline shapes our understanding of aging as total loss. Walker’s critique of approaches that have equated autonomy with “the career self” and James Lindemann Nelson’s suggestions that discussions of death’s harm must consider gender are two examples. Hilde Lindemann Nelson explores the narrative constitution of identities and critiques linear versions that, when dominant, can be oppressive. She also provides strategies for resisting the dominant narratives by identifying good

and effective counterstories.

Susan Wendell, Joan Callahan, and Anita Silvers explore resistance to the narrative of progress and decline in the context of the medicalization of aging. Wendell, for example, discusses how psychosomatic diagnoses are more likely to be given to middle-aged and old women. This reinforces the cultural expectation that for women aging is a matter of self-control. Another element of the medical experience is brought to our attention in Peggy DesAutels’s essay on the way older women’s religious commitments are often discounted.

Daniel Callahan takes on the difficult issues related to justice and allocation. He claims that reforms that help women would be beneficial to society as well. This reinforces an important theme running through this volume, namely, that presuming that gender and aging issues can be bracketed off to the side simply mimics the way society marginalizes the old and those perceived as less-abled.

Of course, one would have liked to see more attention to race and ethnicity in this volume. While not always explicit, there is a sense that the “women” being described in these essays are white. Nevertheless, Walker’s claim that this volume is meant “as a sampler, an experiment, and an incitement to further, larger and different discussions” (p. 4), offers hope that others will address these omissions.

Aline Kalbian, Florida State University



Review of **Genetic Maps and Human Imaginations: The Limits of Science in Understanding Who We Are**, by Barbara Katz Rothman. New York: W. W. Norton & Company, 1998. 272 pages, \$24.95 cloth.

Rothman interweaves a warm, compassionate narrative of lived experience, of life unfolding over time—giving birth, raising a black child, family stories, working with midwives, her own family’s experiences with cancer, moments with friends and strangers—with a powerfully argued critique of society’s current love affair with genetics. In what is a relatively short text, Rothman manages to provide a wide-ranging and in-depth account that foregrounds the human dimension in the overriding current obsessions—in particular race, disability, same-sex preference, prenatal diagnosis, reproductive technologies, and cancer as a “genetic disease.” A wealth of information on the science of genetics is provided in accessible, nontechnical language and thoroughly debunks the hype surrounding these issues. Rothman’s

sustained clarity of vision and her sensitivity to cultural context are outstanding. Her contrasting accounts of the specific forms of racism present in the United States, New Zealand, and the Netherlands are particularly illuminating. This comparison serves to expose even more compellingly how North American racism and the North American discourse on race and genetics are linked. Another thread running through the book is Rothman's premise that genetics and its associated technologies have gained such a grip on people's thinking because Western societies approach ultimate questions through discourses of technology, in fact attach these questions to the latest technological frontier:

As science, the Human Genome Project, this attempt to map all of the genes, and the new deterministic thinking that has been accompanying it, is a lot like the man-on-the-moon project of a generation ago. It pulls together a lot of the scientific community, gives it a finite goal, and inspires much talk about human control. But as I think about the Human Genome Project, the words of a Leonard Cohen song keep running through my mind: "No, they'll never, they'll never reach the moon now. At least not the one we are after." They want to understand our place in the cosmos. They find some interesting rocks. They want to understand the meaning of life. They are finding some interesting proteins. We're always trying to find the meaning of life and our place in the cosmos. The meaning of life is no more to be found in the genetic code than in the composition of rocks. (p. 221)

This, to me, is one of the most important points made, as it reveals much of the psychological hold genetics exerts and the dead ends it leads into. This is an important book. As Ruth Hubbard states in her review on the book's dust jacket: "Whatever your plans for today or fears for tomorrow, set them aside and read this book. It will change the way you see the world."

Sylvia Nagl, *University College London, United Kingdom*



A review of **The Abortion Debate in the World Arena**, by Andrej Kulczycki. London: Routledge, 1999. 240 pages, \$85 cloth; \$24.99 paper.

In *The Abortion Debate in the World Arena*, Andrej Kulczycki contributes significantly to the exploration of the abortion debate's complexity. Several kinds of evidence--interviews, ethnographic data, and legal, medical, and public health statistics--are interpreted to show how domestic and international forces, especially the Catholic church and women's organizations, in Kenya, Mexico, and Poland influence trends in abortion practices,

the use of contraception, the nature of discourse about abortion, and public policy-making.

His historical, cultural, and statistical methodology sheds fresh light on issues such as "demographic transition [of abortion trends] and reliance on abortion for fertility regulation, as well as struggles over gender roles, laws, relations between church and state, the influence of other social actors, and the way the policymaking system works" (p. xiv). *The Abortion Debate in the World Arena* examines dynamics of the abortion issue in countries that have been excluded from the American and European centers of controversy and study. Kulczycki's approach results in a richly contextualized advance toward understanding the "beliefs, values, motivations and strategies of important agents and actors engaged in the abortion dispute" (p. 34).

Scholars as well as interested members of the public will profit from reading this work. Certainly it is a powerful teaching tool for conveying the conceptual, social, and moral intricacy of abortion. Kulczycki advocates "better informed research on abortion" (p. 6) and provides a global perspective not pursued in other fine examinations of abortion, such as William LaFleur's *Liquid Life* and Kristin Luker's *Abortion and the Politics of Motherhood*. He takes up many of the key themes that these works do, but his analysis focuses on specific regions of the world in ways that have not yet been explored with this intensity in the literature on abortion.

Christy A. Rentmeester, *Michigan State University*



A review of **Genetics, Cloning, and Bioethics: How Does Science Affect Our Lives?** by Susana E. Sommer. Buenos Aires: Editorial Biblos.

In a context in which noticeable progress has been observed in the application of technology and where the equitable use of the knowledge generated by science is not so clear, I find more than welcome any serious reflection informing us about the characteristics of genetic knowledge and its use, but which does not impede advances in the process of understanding the essential features of human beings. The book *Genetics, Cloning, and Bioethics* begins with a chapter on "the search for perfection or the longing for immortality" and, based on that, discusses certain features of the Human Genome Project within the framework of a critical reflection on science and the role of genetics in this search for knowledge production. Then the author presents a discussion of some aspects of gene therapy and treatment, later offering some comments on new ways of procreating. With these references, she pinpoints some of the ethical dilemmas associated with this topic. Lastly, the author

proposes a series of reflections on genetic counseling and outlines certain critical dimensions of cloning. On the basis of those dimensions, she talks about the advantages and disadvantages of sexual reproduction. The book does not delve deeply into many of the issues it addresses, but does provide the reader with a general review of several of these topics, making them accessible to non-specialized readers who are nevertheless interested in genetics.

One of the appeals of genetics is that it implies a search for the perfection and longing for immortality to which Sommer refers in the first chapter of her book. But it also involves trying to comprehend more precisely what human beings are all about, as has been acknowledged by other geneticists. However, this search entails many risks involving discrimination justified by genetic differences and by the increasingly sophisticated characterization of those differences. Susana Sommer's text helps us arrive at an interpretation of the strong points of genetic research and seriously consider the consequences of the authoritarian use of knowledge produced by such research. It also reminds us of other social characteristics associated with the kinds of discriminatory processes to which we human beings are usually subjected. For that reason, it is not possible to discuss ethical aspects of genetics and cloning without taking into account the social contexts in which these branches of science can be used.

When reconstructing the features of genetic research, Sommer specifies the risks of labeling people. Then she goes on to suggest the need to explore more fully the moral value of science. I believe that such a discussion would be greatly enhanced if the author not only systematized individual or group informed consent, to which she refers, but also the commitments of researchers with the persons who allow research to be conducted, i.e., research subjects, both in terms of not harming them and also promoting benefits such as sharing information with them. With this, it is important to foster the empowerment of research subjects regarding the reality about which they were interviewed. Sommer carefully describes several ethical dilemmas related to genetic research, such as having information on illnesses that can not be prevented or cured, the creation of guilt, and the psychological effects resulting from the knowledge acquired, as well as discrimination or the loss of genetic variation in specific societies. These aspects are sometimes discussed more among ethicists, scientists, and geneticists, but much less so among other social actors who, at different times and in different ways, contribute information to the human genome and who can be affected by the consequences of interventions in this realm. So I find her proposal to foster a process of public approval very positive, although we have yet to clearly specify the means for achieving this and putting it into practice.

Sommer warns us about the "commercialization" of people and the tyranny of technologies. She questions what reasons people could have for having offspring when they know that their child has some kind of genetic problem. That leads her to reflections that have not received

sufficient attention as of yet regarding what said assessment of an individual's reasons for having children implies for the majority of the population who are never asked about this matter and who therefore, it would seem, are not obliged to justify their reproduction, such as persons who are fertile and do not resort to artificial insemination or to some type of genetic test.

One of the major social changes that may result from the widespread use of prenatal diagnoses, in the light of advances in genetic knowledge, is questioning the social meaning of reproduction and its conditions. This is subject to considerable risks and is dealt with according to Manichaeic interpretations. As Sommer wisely points out, it would seem that when confronted with certain kinds of diagnoses, the correct attitude or, what is even a more delicate matter, the "only proper form of action" would be to have an abortion. This issue becomes even more complex in a context in which abortion is not depenalized. Thus, the information provided by the author is useful for interpreting an important ethical dilemma and encourages discussions of such dilemmas in society.

Something similar occurs when Sommer deals with the topic of cloning in a general fashion, since she discusses the characteristics of sexual reproduction. She also states that we need to clarify the assumptions underlying that reproductive approach; from this qualitative approach, heterosexual practices are no longer assumed as obvious. This makes it possible to question different types of social inequalities (such as gender inequalities) underlying known reproductive patterns. It is interesting that the author addresses the difficulty of finding morally acceptable reasons for reproduction through cloning. Yet her argument could be applied to questioning the supposed moral validity of sexual reproduction experienced under unequal conditions with an ambivalent role played by males. In addition, this is validated by sexist interpretations in disciplines such as demography and medicine, in which males are treated as secondary actors in the reproductive process. Ironically, that role has not been challenged by males, probably due to the privileges they enjoy thanks to their position in society and, specifically, within the context of reproduction.

Sommer's book concludes with a reflection concerning the need to share the information obtained through research, partly by weighing its costs and benefits. While it is understandable that we take precautions due to the possible effects of genetic research which can be beyond the control of academic communities, of the users of genetic technologies, and of society in general, it is also logical that some people are enthusiastic about exploring certain facets of the identity of human beings which, in one way or another, obliges us to rethink the meaning of reproduction, one of human beings' basic dynamic processes.

Juan-Guillermo Figueroa-Perea, *El Colegio de México*

Job Announcements

Mercer University School of Medicine (MUSM), Macon, Georgia. Assistant Professor, Biomedical Ethics Program, A full-time (12-month), tenure-track position at the assistant professor level. Qualifications include a Ph.D. in Philosophy/Bioethics/Medical Humanities and/or equivalent background/experience, clinical experience, and interest in undergraduate medical school teaching. Send a letter of application, curriculum vitae, and names of three references to: Dr. Robert J. Moon, Associate Dean for Academic Affairs and Research, Mercer University School of Medicine, 1550 College Street, Macon, Georgia 31207-0001. For more information contact: D. Micah Hester, Ph.D., at 1-(478) 301-4030, or visit the website <<http://website.mciworld.com/~dmh.ksh@mciworld.com>>

University of Pittsburgh, Pittsburgh, PA. The Consortium Ethics Program (CEP) invites applications for the position of Assistant Director. This position is a one-year, renewable, non-tenure appointment at the Research Assistant Professor level in the Department of Medicine. The proposed start date is August 1, 2001. The successful applicant should have a Ph.D., J.D., or clinical degree with a firm background in biomedical ethics. Experience teaching in a clinical setting is a must. The CEP is the healthcare ethics education network of western Pennsylvania. Send CV, 2 letters of recommendation, one writing sample (20 pages or less), and a letter of intent to Rosa Lynn Pinkus, Ph.D., CEP Search Committee Chair, Center for Bioethics and Health Law, 3708 Fifth Avenue, Suite 300, Pittsburgh, Pa 15213. In order to ensure full consideration, applications must be received by **December 15, 2000**.

University of Oregon, Eugene, OR. The Philosophy Department is seeking a scholar in feminist philosophy. Applications are invited for a tenure track position. Rank open, but a senior candidate is expected to have an outstanding record of publication, teaching and professional activity. Area of Specialization is Feminist Philosophy but the department will consider other specializations for distinguished senior candidates only. Send C.V., three letters of recommendation, and a writing sample to: Search Committee Chair, Department of Philosophy, 1295 University of Oregon, Eugene, OR 97403-1295. Review of applications will begin on November 10, 2000. EO/AA/ADA institution committed to cultural diversity. More information about the department can be found at our website <http://darkwing.uoregon.edu/~uophil/>

Purdue University, West Lafayette, IN. Office of Research Administration seeks nominations and applications for the position of Institutional Review Board (IRB) Administrator. Review of applications will commence November 1, 2000, and continue until the position is filled. For detailed information about responsibilities in the position, qualifications expected, and contents of the application dossier, check the FAB listserv archives or contact: Peter E. Dunn,

Office of Research Administration, 1071 Hovde Hall, Purdue University, West Lafayette, IN 47906. 765-494-6840 (voice) pedunn@purdue.edu

Slate of candidates for FAB Officers and Board, 2001-2003

Co-Coordinator: Rosie Tong and Sue Sherwin

Advisory Board (elected): Gwen Anderson, Debora Diniz, Susan Dodds, Laura Purdy, Mary Rorty, Aida Santos, Laura Shanner, Viola Schubert-Lehnhardt, Susana Sommer

Advisory Board (ex-officio members appointed by the Co-coordinators): Anne Donchin (Treasurer), Becky Holmes (Membership Secretary/Asst. Treasurer), Maggie Little (Newsletter Editor), Florencia Luna (Liaison to IAB Board), Hilde Lindeman Nelson (Listserv and Website Manager), Wendy Rogers (Country Representatives Coordinator)

All candidates will serve a 2-year term beginning January 2001. Ratification of the nominees will take place by mail ballot following the FAB conference in London. Members in good standing will have the opportunity to add write-in candidates at that time.

Ballots will be sent out in early November.

Our thanks to the Nominating Committee (Anne Donchin, Joan Callahan and Sue Dodds) for their work, and to all the members who responded to the call for nominations.

FAB Contacts

FAB STAFF

Co-COORDINATORS

Rosemarie Tong
Philosophy Department
Center for Professional
and Applied Ethics
The University of North
Carolina at Charlotte
9201 University City Blvd.
Charlotte, NC 28223-0001
Tel: 1-704-547-2850
Fax: 1-704-547-2172
rotong@email.uncc.edu

Laura Shanner
John Dossetor Health
Ethics Center
8220 114th St., # 222
University of Alberta
Edmonton, Alberta
T6G 2J3 Canada
Tel: 1-780-492-6676
Fax: 1-780-492-0673
laura.shanner@ualberta.ca

EDITOR-IN-CHIEF

Maggie Little
Kennedy Institute of
Ethics
Georgetown University
Box 571212
Washington, DC 20057
Tel: 1-202-687-2312
Fax: 1-202-687-8089
littlem@gunet.georgetown.edu

BOOK REVIEW EDITOR

Hilde Nelson
Dept. of Philosophy
508 So. Kedzie Hall
Michigan State
Unliversity
East Lansing, MI 48824
Tel: 1-517-353-3981
Fax: 1-517-432-1320
hlnelson@msu.edu

TREASURER

Anne Donchin
Dept. of Philosophy
Indiana University
425 University Blvd.
Indianapolis, IN 46202
Tel: 1-317-274-8926
Fax: 1-317-278-4579
adonchin@iupui.edu

MEMBERSHIP

Becky Holmes
Center for Genetics,
Ethics, and Women
24 Berkshire Terrace
Amherst, MA 01002
Tel: 1-413-549-1925
Fax: 1-413-549-1226
joifab@fnr.umass.edu

FAB ADVISORY BOARD MEMBERS 1999-2000

Gwen Anderson
gander@leland.stanford.edu

Jeanelle de Gruchy
Jeanelle@degruchy1.freeserve.co.uk

Susan Dodds
susan_dodds@uow.edu.au

Anne Donchin (left)

Maggie Little (left)

Laura Purdy
laura.purdy@utoronto.ca

Wendy Rogers
wendy.rogers@ed.ac.uk

Mary Rorty
mvr2j@leland.stanford.edu

Aida Santos
afs@pacific.net.ph

Viola Schubert-Lehnhardt
kd.Schubert@verwaltung.uni-halle.de

Susan Sherwin
ssherwin@is.dal.ca

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, below right.

ARGENTINA

Maria Victoria Costa
calle 43 n°1078 dto.E
(16 y 17)
1900 La Plata
Tel: 54-221-4211577
Fax: 54-11-47870533
vcosta@huma.fahce.unlp.edu.ar

Florencia Luna
Ugarteche 3050 60 139
1425 Buenos Aires
Tel/fax: 54-11-4806-1042
florluna@pccp.com.ar

AUSTRALIA

Gail Tulloch
Janet Clarke Hall - Royal Parade
Parkville VIC 3052
Tel: 61-3-9349-7100
Fax: 61-3-9349-7104
Gail.Tulloch@jch.unimelb.au

AUSTRIA

Herlinde Pauer-Studer
Institut für Philosophie
Universität Wien,
Universitätsstr. 7/3
A-1010 Vienna
Tel: 43-1-42-77/47-475
Fax: 43-1-42-77-94-74
Herlinde.Pauer-Studer
@univie.ac.at

BRAZIL

Debora Diniz
Universidade De Brasilia
Faculdade de Ciencias da Saude
Nucleo de Estudos e Pesquisas
em Bioetica
SQSW 104 F 605 - 70660-406
Tel: 55-61-344-7889
e 307.3946
Fax: 55-61-343-1994
debdiniz@zaz.com.br

Alejandra Ana Rotania
Rua Jose Tassarolo Santos, 70
Nova Friburgo RJ 28.625-140
Tel/fax: 55-24-523-5282
alecari@uol.com.br

CANADA

Laura Shanner (left)

COLOMBIA

Ana Gonzalez Velez
calle 34 # 14-52 Bogota
Tel: 57-1-287-2100
Fax: 57-1-287-5530
acgonzalez@interred.net.co

FRANCE

Jennifer Merchant
Center for Research for Women
Lane Hall, South State Street
University of Michigan
Ann Arbor, MI 48104
Tel: 1-734-615-6462
Fax: 1-734-764-9533
jenmerch@umich.edu

GERMANY

Viola Schubert-Lehnhardt
Albert Einstein Strasse 14
06122 Halle
Tel: 49-345-805-4840
Fax: 49-345-552-7035
kd.schubert@
verwaltung.uni-halle.de

INDIA

Krishnaraj Shanthy
Dept of Econometrics
University of Madras
Chepauk, Chennai- 600 005.
Tamil Nadu
Tel: 91-44-471-3528
Fax: 91-44-566693
santi49@yahoo.com

ISRAEL

Naomi Gale
HOD of Sociology & Anthropol.
Ashkelon Regional College
12 Ytzak Ben-Zvi
POB 9071, Ashkelon 98211
Tel: 972-2-5826923
Fax: 972-2-5818235
naomigale@hotmail.com

ITALY

Gaia Marsico
Via Luigi Russo 36
57121 Livorno
Tel: 39-586-409258
Fax: 39-586-428235
gamarsic@tin.it

JAPAN

Naoko Miyaji
Dept. of Hygiene
Kinki University Sch. of Med.
377-2 Ohno-Higashi
Osaka - Sayama
Tel: 81-723-66-0221, ext. 3275
Fax: 81-723-68-4676
miyaji@med.kindai.ac.jp

NETHERLANDS

Dymphie van Berkel
VOP, Heidelberglaan 2
3584 CA Utrecht

Tel: 31-30-534-977
Fax : 31 30-534-777
d.vanberkel@fss.uu.nl

NEW ZEALAND

Barbara Nicholas
90 Malcolm Ave.
Beckenham - Christchurch
Tel: 64-3-337-2040
barbara@paradise.net.nz

PHILIPPINES

Aida Santos
Bldg. 15 Unit 41
BLC Road 1, Pag-asa
Quezon City, Metro Manila
Tel/fax: 63-2-927-5572
afs@pacific.net.ph

SOUTH AFRICA

Laurel Baldwin
16 Clairwood Avenue
Highlands Estate
Vredehoek
Cape Town 8001
Tel/fax: 27-21-461-2730
lbaldwin@intekom.co.za

SWITZERLAND

Jackie Leach Scully
Arbeitsstelle für Bioethik
Institut für Geschichte un Ethik
der Medizin
Universität Basel
Schoenbeinstrasse 20
4056 Basel
Tel/fax: 41-61-332-1519
scully@bluewin.ch

UNITED KINGDON

Ailsa McLaren
75 Victoria Chase, Colchester
Essex CO1 1WB
Tel/fax: 44 1206-575921
ailsa@jupiter84.freeserve.co.uk

UNITED STATES

Hilde Nelson (left)

Coordinator of country rep.
Wendy Rogers
Department of General Practice
Levinson House
20 West Richmond St.
EH8 9DX UK
Tel: 44-131-650-9456
Fax: 44-131-650-2681
wendy.rogers@ed.ac.uk

Calendar of Events

2000 November

Ethics and Genetics: Advanced European Bioethics Course, University of Nijmegen, The Netherlands, November 16-18, 2000. Specialists from various countries will discuss ethical aspects of genetics. For information, call: 0031-24-361-5320; Fax: 0031-24-3540254; or E-mail: n.steinkamp@efg.kun.nl

End-of-Life Decision Making: What Have We Learned Since Cruzan? Kansas City, Missouri, November 17-18, 2000. Conference jointly sponsored by The American Society of Law, Medicine & Ethics, Midwest Bioethics Center, and The Regional Medical Education Department, a two-day program geared to legal counsel, risk managers and health care professionals. For more information, including a full agenda and online registration, visit: www.aslme.org/conferences or contact Sarah James at 1-617-262-4990; E-mail: sjames@aslme.org.

December

Law and the Humanities: Constructing Law and Disability, Canberra ACT, Australia, December 4-5, 2000. Sponsored by Humanities Research Centre, Australian National University; School of Law and Legal Studies, La Trobe University; and Faculty of Law, University of New South Wales. The conference aims to explore the role of law in achieving justice for people with disabilities. Justice Michael Kirby of the High Court of Australia will speak at

the conference dinner on the implications of the human genome project for people with disabilities. Details from: Lee Ann Marks at: +61 3 9479 1245; E-mail: l.marks@latrobe.edu.au; or Melinda Jones m.jones@unsw.edu.au. The Provisional Program, Registration Form and Ansett Group Fare Discount information for this conference are available on the website: www.anu.edu.au/HRC/activities/conferences_2000/marks_jones.html

2001 January

A Decade of ELSI Research, Natcher Conference Center, National Institutes of Health, Bethesda, MD, January 16-18, 2001. Sponsored by the National Human Genome Research Institute and the Department of Energy. This conference will provide an opportunity to reflect on the past, present and future of ELSI research. It is open to everyone in the ELSI community and also to those who would like to learn more about the ELSI program or would like to become more involved in ELSI research, education and outreach activities. Detail: Tel: 1-301-402-4997; www.ethics.ubc.ca/brynw/Confs01.html

March

Southeastern Women's Studies Association Annual Conference, Boca Raton, Florida, March 16-18, 2001; Special Student Conference March 15. Sponsored by

Florida Atlantic University's Women's Studies Center. This conference proposes to address the practical and theoretical challenges of moving from formal guarantees to substantive gains. Details from: Josephine Beoku-Betts, Tel: 1-561-297-3865. For the conference registration form and more information please visit: www.wsc.fau.edu/sewsa2001; or E-mail: beokubetts@fau.edu.

April

Palliative Care in Education and Practice: An Intensive Course for Medical and Nursing Educators, Harvard Medical School, Boston, MA, April 24-May1, 2001, and November 14-20, 2001. Sponsored by Harvard Medical School Center for Palliative Care and The Robert Wood Johnson Foundation. The curriculum will be delivered in two blocks. CME credits are based on attendance at both. To view course information on-line, visit: www.hms.harvard.edu/cdi/pallcare; or call 1-617-724-4597; Fax: 1-617-724-8693; E-mail: pallcare@partners.org.

June

Twenty-Second Annual Health Law Teachers Conference, Boston University School of Law, Boston, MA, June 1-2, 2001. Sponsored by the American Society of Law, Medicine and Ethics (ASLME). For more information about the conference, including a full agenda, information about continuing medical or legal

education credits, details about the pre-conference workshop on "Emerging liabilities with genetic testing," and on-line registration through a secure server, please visit the website at www.aslme.org/conferences or contact: Sarah Black, Conference Director, ASLME, 765 Commonwealth Avenue, Suite 1634, Boston, MA 02215. Tel: 1-617-262-4990, ext. 12; Fax: 1-617-437-7596. E-mail: sblack@aslme.org

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; or visit: www.georgetown.edu/research/kie.

July

Women in Philosophy Conference, School of Philosophy, University of Tasmania, Hobart, Tasmania, June 30-July 2, 2001; and **Australasian Association of Philosophy Conference**, July 1-6 2001. For information on WIP conference contact: Dr Marguerite La Caze, E-mail: marguerite.lacaze@utas.edu.au; Dr Leila Shotton, E-mail: l.shotton@utas.edu.au. For information on AAP Conference contact: Ms Sandra Kellett, E-mail: kellett@utas.edu.au; Professor Jeff Malpas, E-mail: jeff.malpas@utas.edu.au, or Ms Eliza Goddard, e-mail: Eliza.goddard@utas.edu.au.

Call for Papers

Feminist Cultural Production: Critical Debates and Practices. The Editorial Board of RFR/DRF would like to solicit original manuscripts for publication in an upcoming issue on Feminist Cultural Production. Contributions will examine the broadening field of feminist cultural production as well as feminist critiques and dilemmas arising from cultural practices. We seek research articles and shorter discussion papers that engage concerns in feminist cultural production, such as the impact of relations of power; institutional and systemic issues; social identities and politics of difference; agency, subjectivity, and performativity; ethics; pedagogies; technologies; audiences, reception and consumption; interventions, resistances, and cultural appropriations. Papers can be sent in English or French. For further information, authors are advised to contact the RFR office at: Editors, RFR/DRF, OISE/UT, 252 Bloor St. West, Toronto, Ontario M5S 1V6 Canada. Tel: 1-416-923-6641; E-mail: rfrdrf@o...
Deadline: November 30, 2000.

Knowing Subjects: Human Lives, Human Worlds. The George Washington University Graduate Program in the Human Sciences will explore the position of the knowing subject and related questions in its 7th Annual Conference, April 20-21st, 2001, a conference to celebrate the work of Peter Caws on his 70th birthday. Various approaches to Caws' interests

from scholars in different disciplines are solicited. Send a 250-word abstract with your name, affiliation, and contact information by 15 January 2001 to: Knowing Subjects, The Human Sciences Program, 2035 F St., N.W., The George Washington University, Washington, D.C., 20052. For more details and information about possible topics, see www.gwu.edu/~knowing or inquire from knowing@gwu.edu or stephanij@US.IBM.com.

6th Annual Ethics and Technology Conference, Santa Clara University, April 27-28, 2001. This two-day conference focuses on the theme, "The technology of the future and how we will deal with it ethically." Papers should incorporate some element of the future path of technology in either the information or biological areas. Sponsored by the Markkula Center for Applied Ethics; the Center for Science, Technology and Society; Boston College; and Loyola University, Chicago. For further information please contact: Dr. Neil R. Quinn Jr., Presidential Fellow, Santa Clara University (MCAE), 500 El Camino Real, Santa Clara CA 95053, nquinn@scu.edu; Tel: 1-408-554-5723; Fax: 1-408-554-2373. Paper Submission Deadline: **December 15, 2000.**

Gendered Violence: Epistemologies and Practices, University of Kentucky, Lexington, Kentucky, March 30-31, 2001. **The Third Annual Graduate Student Conference, Women's Studies Program.** A free conference with no registration fee.

We invite submissions of 250-word abstract proposals for special sessions, paper presentations, panels, and performances that address the epistemologies and practices of gendered violence. The theme is intentionally broad to encourage a diversity of topics. Mail or E-mail abstracts and registration forms by **Friday, January 12, 2001.** For a list of suggested topics, submission information, a registration form, and mailing address, e-mail or phone Kristi Branham at: krbranl@pop.uky.edu, 1-859-257-1388; or visit: <http://www.uky.edu/AS/WomenStudies/>

Melancholia: Philosophical and Clinical Dimensions. The Association for the Advancement of Philosophy and Psychiatry (AAPP) is requesting abstracts for papers to be presented at the 2001 Annual Meeting, May 5 and 6, 2001, in conjunction with the American Psychiatric Association Meeting in New Orleans, Louisiana. Papers on the theme of melancholia may emphasize phenomenological, experimental, theoretical, historical or case oriented approaches. Abstracts should be 600 words or less, and must be accompanied by the author(s) name, mailing and email address, and telephone number. Identifying information should be on a separate sheet to facilitate AAPP's blind review policy. Abstracts must be submitted in triplicate to: Jennifer Radden, Ph.D., Philosophy Department, University of Massachusetts at Boston,

Boston, MA 02125. Submissions must be post-marked by November 30, 2000. Incomplete and/or late submissions will be returned to sender. Abstracts will be refereed by members of the AAPP Executive Council and their designees, and acceptances will be mailed no later than January 15, 2001. Authors with accepted abstracts will read their papers at the 2001 Annual Meeting. Accepted papers will be presented within a strict 30-minute time limit. Questions about this procedure or the above announcement may be directed to: Jennifer.Radden@umb.edu; tel: (617) 287-6546; fax (617) 287-6511.

Society For Philosophy in The Contemporary World, 2001 Annual Conference, "Philosophy in the Contemporary World," St. John's College, Santa Fe, New Mexico, July 23-27, 2001. What to submit: 2 copies of a 12 page paper (25 minutes reading time) on any topic within the generally open theme of Philosophy in the Contemporary World. Papers are due **February 1, 2001.** Send submissions to: Dr. Andrew Fiala, Philosophy and Humanistic Studies, TH 331, University of Wisconsin, Green Bay, 2420 Nicolet Drive, Green Bay, WI 54311-7001. E-mail: fialaa@uwgb.edu. For further information: fialaa@uwgb.edu or call: 920-465-2088 or visit: www.phil.stmarytx.edu/spcwhm/CFP.htm

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 from the FAB website: www.uncc.edu/fab or from 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 April 15, 2001.

Change of Address for the Web Site and Listserv

The new URL:

<http://www.msu.edu/~hlnelson/fab>

The new listserv address for POSTING messages is:

fablist@list.msu.edu.

To subscribe to the list, send a SUBSCRIBE FABLIST command in the body of the email to 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. This time, you don't give your name.

Bibliography

A Decade of Books by FAB Members

This bibliography that Becky Holmes had available in London has now been posted on the FAB web site. Access it at:

<<http://www.msu.edu/~hlnelson/fab/>> and click on Bibliography.

FIRST CLASS

FAB Membership Secretary
24 Berkshire Terrace
Amherst, MA 01002

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Feminist Approaches to Bioethics