

Toward Critical Bioethics

VILHJÁLMUR ÁRNASON

Abstract: This article deals with the question as to what makes bioethics a critical discipline. It considers different senses of criticism and evaluates their strengths and weaknesses. A primary method in bioethics as a philosophical discipline is critical thinking, which implies critical evaluation of concepts, positions, and arguments. It is argued that the type of analytical criticism that restricts its critical role to critical thinking of this type often suffers from other intellectual flaws. Three examples are taken to demonstrate this: premature criticism, uncritical self-understanding of theoretical assumptions, and narrow framing of bioethical issues. Such flaws can lead both to unfair treatment of authors and to uncritical discussion of topics. In this context, the article makes use of Häyry's analysis of different rationalities in bioethical approaches and argues for the need to recognize the importance of communicative rationality for critical bioethics. A radically different critical approach in bioethics, rooted in social theory, focuses on analyses of power relations neglected in mainstream critical thinking. It is argued that, although this kind of criticism provides an important alternative in bioethics, it suffers from other shortcomings that are rooted in a lack of normative dimensions. In order to complement these approaches and counter their shortcomings, there is a need for a bioethics enlightened by critical hermeneutics. Such hermeneutic bioethics is aware of its own assumptions, places the issues in a wide context, and reflects critically on the power relations that stand in the way of understanding them. Moreover, such an approach is dialogical, which provides both a critical exercise of speech and a normative dimension implied in the free exchange of reasons and arguments. This discussion is framed by Hedgecoe's argument that critical bioethics needs four elements: to be empirically rooted, theory challenging, reflexive, and politely skeptical.

Keywords: bioethics; biotechnology; critique; dialogue; hermeneutics; normativity; power; rationality

Critical Thinking in Bioethics

As a philosophical discipline, bioethics is inevitably critical in the sense that it implies critical evaluation of concepts, positions, and arguments, as is typically associated with critical thinking: "In its exemplary form, it is based on universal intellectual values that transcend subject matter divisions: clarity, accuracy, precision, consistency, relevance, sound evidence, good reasons, depth, breadth, and fairness."¹ No doubt, this kind of critical thinking can be most valuable, especially if all of the intellectual values mentioned in the preceding definition are respected at the same time. However, in practice, analytical criticism is all too commonly exercised with clarity, and consistency, but at the cost of accuracy, precision, depth, breadth, and fairness. Philosophical bioethics, which restricts its critical role to such analytical criticism, often suffers from other intellectual flaws (partly because of pride in the excellence of the approach taken). In order to demonstrate this, I briefly discuss three examples of these flaws: (1) premature criticism, (2) uncritical self-understanding, and (3) narrow approaches to bioethical issues.

Premature Criticism

Within a certain type of analytical criticism, it is common for commentators to be so eager to criticize individual statements and arguments that the point of the

author under discussion never gets a real chance. Continental authors who often write in a different style than those trained in the Anglo-Saxon analytical tradition are at risk of this unfair treatment. The contribution to bioethics of the German philosopher and social theorist Jürgen Habermas is a case in point.² John Harris, a champion of analytical criticism in bioethics, refers to Habermas's arguments as "mystical sermonizing"³ without making any real attempt to understand them—for example, by relating them to other aspects of his communicative ethics or critical social theory. Besides violating most of the intellectual values of critical thinking, this approach has serious hermeneutic flaws. I am referring to the intellectual principle that holds that, before a position can be sensibly criticized, it needs to be understood. As John Stuart Mill pointed out: "A doctrine is not judged until it is judged in its best form."⁴ The aggressive style that is often employed in analytical criticism—jumping at individual arguments without relating them to the whole context in which they acquire meaning and significance—is characteristic of premature criticism.

Harris's remark is made in an exchange with Tom Baldwin, who refers to Habermas's discussion of "our embodied character (*Leibsein*) as a natural phenomenon and not something which has been, in some respect, deliberately imposed upon us by others, even by our parents."⁵ In his reflection on Habermas's text, Bernard G. Prusak points out that this point is one in which "Habermas differs from his Anglo-American interlocutors."⁶ Prusak instructively shows how Habermas draws on Helmuth Plessner's phenomenology, which analyses the experience of the lived body, and points out the relevance of this perspective for Habermas's argument. Contrary to Prusak's approach—his paper is "devoted to critically examining Habermas's arguments against so-called positive eugenics"⁷—Harris discusses the point about the body in 'objective' terms. Ignoring lived experience, he simply states: "The evidence is that human beings are fairly robust and well able to adapt to new conceptions of themselves and their place in the universe."⁸ This statement sweeps aside Habermas's approach—which invites us to imagine how a person's relation to her body might be affected by genetic programming—as "mystical sermonizing" that is to be corrected by scientific evidence in which "human beings" are placed in one category and personal experiences do not count.

It is worth noting in this context that, near the end of his paper (which is of substantial length), Prusak writes: "The thrust of Habermas's argument here is clear, but evaluating it would take another paper."⁹ This is a clear example of an approach in which it is seen as relevant to make the thrust of the argument clear before it is properly evaluated and criticized. Harris's sweeping statement was made in a short comment, but in a chapter he wrote about Habermas's position two years later, he says that his book "is an important work to understand" and discusses a couple of Habermas's arguments.¹⁰ In the style of a witty analytical criticism and rhetoric, however, individual arguments are taken out of context, attacked from a very different viewpoint, and deemed "obscurantist."¹¹ Surely, Habermas's text is quite difficult to read, but that should make even more pressing the demand to try to understand it in light of his important thinking. If Harris's approach is evaluated in terms of the intellectual values listed as hallmarks of critical thinking, we see that it emphasizes clarity and consistency, but the rest of the values—that is, accuracy, precision, relevance, sound evidence, good reasons, depth, breadth, and fairness—are not properly observed.

Uncritical Self-Understanding

John Harris also writes about Habermas that “he takes the debate to a depth that neither rationality nor evidence can reach.”¹² It is striking that Harris uses the notion of rationality here. The main bulk of Habermas’s entire philosophical project is an attempt to explain and differentiate the notion of rationality. In fact, Habermas’s criticism of liberal eugenics needs to be understood in light of his worries about the colonization of the lifeworld, which is characterized by instrumentalization of domains and practices that are properly conducted by communicative rationality.¹³ Harris himself employs a rather simplistic notion of instrumental rationality regarding individual preferences with a limited sense of social context. The theoretical horizon of this approach implies many pre-judgments, which frame the subject matters and how they need to be discussed in a certain way. As has been convincingly argued in philosophical hermeneutics,¹⁴ such pre-judgments can become blinding prejudices if they are not acknowledged. Only by seeking to be aware of one’s own pre-judgments is it possible to do “away with that naive objectivism,”¹⁵ which is, for example, demonstrated by what Habermas has called instrumentalizing attitudes toward the person.¹⁶

An interesting attempt has been made in philosophical bioethics to argue for the importance of respecting conflicting approaches by attempting to understand the different rationalities or intelligibilities embedded in them.¹⁷ This position invites mutual respect among advocates of divergent views and avoids many of the intellectual faults that I have associated with analytical criticism: “People should listen to each other more and try to understand each other’s ways of thinking.”¹⁸ Matti Häyry argues that there is a variety of diverging—but not mutually exclusive—normative views in bioethics, the justification of which “depends ultimately on the choice of worldviews, attitudes and ideas about the foundations of moral worth.”¹⁹ What counts is to understand the internal intelligibility of each position and to abandon the claim that any view should be endorsed by everyone.

From a hermeneutic standpoint, this position has many merits, such as emphasis on being aware of one’s theoretical presuppositions and the affects they have on one’s reasoning and substantial views. The weakness of this approach, however, is that it is limited to a “hermeneutics of faith” in the sense that it is preoccupied with explicating the meaning of views and how they are rooted in different worldviews. The upshot of this is a friendly “nonconfrontational rationality” that is also relatively uncritical because the main criterion for critical assessment is internal consistency of the different viewpoints. This works better with some rationalities than with others. Positions developed by the logic of instrumental rationality, which in this context aims at satisfying individual desires and preferences, can be assessed by their contribution to (a certain conception of) human happiness. Häyry takes the bioethics of John Harris and Jonathan Glover as clear examples of this and writes that “these authors conceptualize the ethical questions of germ-line therapies purely in terms of harms and their preventions.”²⁰ This description could be generalized to other topics, with the addition that what counts for these authors in the determination of restrictions on individual preference satisfaction are harms and the prevention of such harms to individuals.

Positions that obey value rationality in Max Weber’s sense of the term,²¹ on the other hand, proceed from the “givenness” of moral values that need to be

protected. These values are deeply rooted in a culture and are thus constitutive of the identity of individuals or populations. Protection of these deep-rooted values takes precedence over individual preference satisfaction, as reflected, for example, in the positions of Leon Kass and Michael Sandel. The intelligibility of these views can be assessed by the internal consistency of their arguments, which aim at protecting the substantial values that the authors deem most precious.²² From this perspective, the good life cannot be assessed apart from communal values, which provide individuals with sources of meaning and a sense of belonging.

Häyry's approach is fruitful in its attempt to try to understand the incommensurable intelligibility of instrumental rationality and value rationality and to evaluate their internal consistencies. However, it does not fit as well with positions, like that of Habermas, driven by communicative rationality, because here it is impossible to avoid an exchange of arguments. The rationality of his view is to be ascertained not from the substantial position taken on particular issues but from the mode of argumentation employed to deal with them. In particular, communicative rationality is made manifest in the way in which participants in practical discourse deal with disagreement. Do they revert to some kind of violence, distortion, or deception, or are they willing to engage in an honest and unconstrained dialogue?²³ This approach inevitably moves beyond the hermeneutics of faith to a "hermeneutics of suspicion,"²⁴ which attempts to uncover ideological distortions and power relations that stand in the way of a free exchange of arguments and sensible discussion.

From this perspective, positions that are driven both by instrumental rationality and by unconditional value rationality suffer from serious shortcomings that stand in the way of their functioning as critical positions in philosophical bioethics. With instrumental rationality, as it is employed in the writings of John Harris, for example, comes an uncritical belief in developments in biotechnology²⁵ and their contribution to human happiness. The subject matters are typically framed in a narrow way, as I discuss in the next section. Positions fuelled by value rationality, on the other hand, tend to have an uncritical belief in the fundamental importance of certain traditional norms, which they are not willing to test in a free dialogue. Neither of these "rationalities" are able to engender positions worthy of the name "critical bioethics." Moreover, by emphasizing that the viewpoints emerging from these rationalities "[depend] ultimately on a choice of worldviews," Häyry exempts their presuppositions from critical scrutiny. This is well captured in the following quotation from Habermas: "The 'ought' of pragmatic recommendations relativized to subjective ends and values is tailored to the *arbitrary choice (Willkür)* of a subject who makes intelligent decisions on the basis of contingent attitudes and preferences that form his point of departure; the faculty of rational choice does not extend to interest and value orientations themselves but presupposes them as given."²⁶

Narrow Approaches to Bioethical Issues

Every approach in bioethics affects what questions are posed, how issues are framed, and how that puts certain issues high on the agenda while others are neglected. It seems to me that two dimensions tend to be overlooked in bioethical analysis: the social and the existential. In terms of the social dimension,

I have in mind the implications that implementation of a new biotechnology may have for social practices or institutions. Regarding the existential dimension, I refer to the effects that implementation of a new biotechnology may have on human self-understanding and ways of life (as is recognized in phenomenological analyses). It is striking how both these dimensions tend to be neglected in bioethics. This is largely due to the framing of issues in terms of individual preferences and prevention of harm to individuals according to the logic of instrumental rationality. In light of this view, bioethics can be depicted in terms of a metaphor of fence building. We are on the way to progress, led by advances in science and biotechnology, and the main role of bioethics is to make sure that no one will get hurt on the way by building fences or ethical frameworks that protect individuals from possible harms.

This raises several questions that need to be addressed by critical bioethics. I single out three of them. The first question concerns the direction of the field: Do we question enough where we are heading? Is it a way to progress? The benefits of genetic research and other types of “promissory science,”²⁷ for example, tend to be overrated. Moreover, some of the “benefits” that are implied in the promises of “revolutionizing health care”²⁸ and “transforming the practice of medicine”²⁹ may not turn out to be desirable.³⁰ This calls for a critical scrutiny both of the politics and rhetoric behind the building of expectations that is driving these trends and of the probing of issues like what good healthcare is, and even what good human life is.

The second question has to do with how these issues and questions are to be discussed. They should be discussed not only in the classical monological fashion of philosophical reflection and argumentation, but also by considering and facilitating the democratic conditions for deliberating these questions. The latter is a vehicle for communicative rationality, recognizing that, in a democratic society, such questions can be properly dealt with neither in terms of maximization of individual preferences nor by a reference to deep-seated traditional values. According to the perspective of deliberative democracy, “courses of action are chosen because they are based on reasons which all could accept,”³¹ or, at least, “those who are bound by the action.”³² This concerns the prevailing views in bioethical discourse on citizens: the protective view and the benefit view.³³ The former emphasizes protection of individuals from harms, whereas the latter focuses on the benefits that developments in biotechnology will bring to humankind. Although they have different logic and can be clearly separated conceptually, these views tend to be intertwined and go naturally together in bioethical discourse. Preventing harm to individuals is a necessary condition for beneficial use of biotechnology. The most interesting aspect of the two views is the presuppositions they share regarding citizens, who in both cases are seen in a passive role. Harms and benefits are objectively defined without emphasizing the need to engage the citizens in an informed dialogue about biotechnical policies.

The third question regards the unintended social consequences that an implementation of new biotechnology can have for social practices and institutions. The individualistic *Problemstellung*, or framing of issues in terms of personal preferences and prevention of harm to individuals, basically excludes this social dimension. Such analysis may require sociological and philosophical imagination, if only to counteract the expectation building of special interest

groups perpetuating the process. Personalized medicine is a case in point. The moral issues raised by that project must not be restricted to an evaluation of risk for individuals but need to be explored in light of the broader social implications, such as to what extent personalized medicine could affect our systems of healthcare and whether it might undermine its solidaristic basis.³⁴ If such wider implications of biotechnology are not considered in bioethics, it may prematurely legitimize a particular practice. Such bioethics is also at risk of becoming ideological in the sense that a narrow approach may inadvertently cover up important moral questions and thus serve the special interests of the promoters of a practice. In this way, bioethics can be reduced to an innocent accomplice or mere instrument in the fabric of science and technology. Such concerns have been voiced and should be taken seriously:

Critics [of bioethics] wonder whether, whatever their intentions, the field and its practitioners engage in narrow and distorted analyses and serve ultimately to perpetuate existing relations of power. They claim that bioethicists, as they participate in a growing number of settings and find themselves in new kinds of relationships, and even careers, may be enhancing the power of certain individuals and institutions rather than serving the citizenry as “watchdogs” or social critics, challenging injustice and strengthening the ethical capacities integral to a pluralistic democracy.³⁵

Critique as a Social Analysis of Power

We have been considering shortcomings of bioethics in which philosophical critique is exercised mainly or exclusively in terms of analytical criticism. We have introduced two kinds of responses to this, which can be summarized in terms of hermeneutic awareness of the context of the statements and positions being criticized, and awareness of the theoretical presuppositions that form the basis of the analytical criticism. The critique regarding narrow approaches in bioethics invites a quite different kind of critique that can also be characterized in terms of hermeneutic awareness, but it is one that has to do with social analyses of the power relations and ideology at work in the discourse around biotechnology.

An interesting example of such an approach is Nicholas Rose and Carlos Novas’s influential analysis of “biological citizenship.”³⁶ The authors draw on empirical examples to show how developments in biotechnology are shaping contemporary citizens. In this way, their analysis reaches not only the social dimension but also the existential dimension, or the way in which individuals shape their lives and expectations in light of developments in biotechnology. Rose and Novas ask, “What kinds of active biological citizens are being shaped, and to what ends?”³⁷ They demonstrate how individuals are harnessed for the creation of “bio-value” in the constitution of the “citizen consumer.” This process is fuelled by a “political economy of hope”³⁸ but is largely driven by the activity of the citizens themselves through several projects—hence the notion of biological citizenship. Nevertheless, Rose and Novas’s analysis of this phenomenon is mainly—and perhaps realistically—framed in a discourse of production and marketing strategies.

To be sure, this is a sociological rather than philosophical analysis, although it can often be hard to draw a clear line between such approaches, especially when

the sociological analysis is theoretical and not strictly empirical. In any event, it is valuable for philosophical bioethics to be informed by and in dialogue with social science analyses of bioethical issues.³⁹ In the context of this article, this must be particularly emphasized because of the need for critical bioethics to be sensitive to the wider social implications of biotechnical projects and policies. The particular example of Rose and Novas—which I have selected here to demonstrate bioethical critique as a social analysis of power—however, has certain shortcomings that I find instructive to consider in relation to the idea of critical bioethics.⁴⁰ These shortcomings have to do with a lack of normativity, which is partly related to the use of concepts that restrict the critical power that they harbor.

I take as examples two concepts—biological citizenship and scientific literacy—which both play an important role in Rose and Novas's analysis. Though they are critically employed, the critical role of these concepts in the analysis is limited to demonstrating the social constitution and self-constituting activity of the citizen-consumers. As a consequence, the main focus is on certain forms of self-imposed subjugation, whereas other important aspects that these concepts can be used to reveal are neglected. As regards literacy, it is important to distinguish between manipulation and understanding in the self-formation of individuals. Rose and Novas refer to "the Prozac website" of the pharmaceutical company Eli Lilly as an example of a collection of techniques "to promote a particular version of scientific or biological literacy" or "self-education of active biological citizens."⁴¹ No attempt is made to evaluate the quality of the information conveyed or whether the citizens will be better equipped to understand and interpret the subject matter. Nevertheless, such things need to be regarded as relevant elements of literacy and self-education, and without them, these concepts lose their normative or critical power.

Similar things can be said about the employment of the notion of citizenship. It turns out that the kind of biological citizenship that is being shaped is one of brand culture, "where trust in brands appears capable of supplanting trust in neutral scientific expertise."⁴² Although it is important to recognize this type of molding and self-formation of individuals in contemporary societies, a process properly characterized by the authors in terms of the shaping of "citizen-consumers," such an analysis misses a quite different critical perspective opened up by the notion of citizenship. Being a citizen needs to be distinguished from being a subject and is not properly characterized in terms of compliance to brand culture and advertisements of the drug industry, regardless of how active the self-formation of the consumers is. Here, normative theories of citizenship can provide other critical perspectives, ones that are more resistant to the social engineering at play in the processes that are "transforming . . . citizens into a potential resource for the generation of wealth and health."⁴³ This description refers to large-scale genetic biobank projects, as a resource for mining the population that goes willingly into "the service of biovalue," driven by the "economy of hope."

It has been convincingly argued that the discourse of hope that conveys the great expectations related to biomedical innovations has immunized itself against critique.⁴⁴ If philosophers of bioethics are concerned about the impact of their analyses, they need to be aware of the dynamics that are at play in the social discourses about biotechnology. According to analysts of "biocitizenship,"

who have demonstrated through examples how the perceived urgency to find cures for cruel diseases—which, as stated by optimistic bioethicists, can reduce great harm and suffering—controls the course of events, the danger of this state of affairs is that it will result in “the loss of a critical, normatively oriented political space.”⁴⁵ To place this in the context of our previous discussion, the logic of instrumental rationality, which consists in finding the most efficient means to chosen goals, permeates the social discourse about biotechnology. This is an urgent challenge facing bioethics and biopolitics in contemporary society.

Toward Critical Bioethics

It has been well argued that critical bioethics has to take social science seriously,⁴⁶ because it can provide an “opportunity to improve the way ethical work is done, and expand the range of topics open to ethical scrutiny.”⁴⁷ Adam Hedgecoe discusses four characteristics that he thinks are needed for bioethics to be called critical: it needs to be rooted in empirical research, it needs to test and change its theories in light of empirical evidence, it needs to have reflexive awareness about the nature of knowledge production, and it needs to be politely skeptical toward claims made both by other bioethicists and by those who provide the material in empirical research. I briefly reflect on these characteristics in light of my previous discussion.

These four characteristics imply that critical bioethics must find the appropriate balance between remaining distant from and participating in the subject matters it is trying to understand. This is clear in the position taken toward empirical bioethics research. Hedgecoe emphasizes that although bioethical analysis must always be rooted in empirical research and be informed by what participants in a particular setting have to say about the subject matter, it also needs to have normative wings to acquire a critical distance from the claims made by these participants. This is similar to the dialectical tension between the hermeneutics of faith—the attempt to understand the meaning of a situation as it appears in lived experience—and the hermeneutics of suspicion, which takes a more external, critical perspective toward the subject matter. In fact, the role of empirical analysis is largely to provide the participatory perspective, for example, by conveying the subjective experience of both the couple undergoing prenatal diagnosis and the practitioners involved in it. But if bioethical analysis was limited to this, it would “lack much of the rigor and the ‘bite’ that modern medical ethics has.”⁴⁸

This position provides a most important reminder of the critical status of philosophy in empirical bioethics. This has often been neglected and sometimes even explicitly downplayed by positions drawing on philosophical hermeneutics in the spirit of neo-Aristotelianism.⁴⁹ But if this approach is properly fleshed out in terms of “dialogical practice,” it inevitably implies a critical element that must not be subordinated to the normative claims embedded in practice:

The central place of dialogues as interactive processes in dialogical empirical ethics implies that the ethicist does not primarily act as an expert with specific knowledge or moral authority regarding a specific subject, but rather as someone who enhances interactions between groups of people, and between practice and theory. Instead of judging a situation

from an outsider position, an engagement with the practice under consideration is required. This does not mean that the ethicist uncritically accepts what participants in a practice think or claim. The process of engaging with a practice is itself motivated and situated. The ethicist will try to make sense of what stakeholders express from his own perspective, and this may include a critical examination of ideas expressed by stakeholders. This, however, is not an external critique but the start of a dialogical learning process, in which both the ethicist and the stakeholders change.⁵⁰

This description captures well the role of dialogue as an internal critique, but the question is whether critical bioethics does not, in addition, require an external critical element of the type that Hedgecoe calls “polite, informed scepticism.” This point is fleshed out in a way typical of the hermeneutics of suspicion: “The truth is often more complex than people claim.”⁵¹

In this regard, the critical role could be exercised no less by a social science analysis than by philosophy. The lessons that philosophical bioethics can learn from sociology are by no means limited to rooting analysis in empirical research; they may also include developing a “sociological imagination.”⁵² This can, for example, help philosophers to place their analyses in a broader social context and to reflect on the unintended consequences of implementing new biotechnology. Critical social analyses of the kind carried out by Rose and Novas, discussed previously, can also make philosophers aware of the limits of normative analysis in a society powered by the dynamics of social engineering and new technologies of the self. Against these trends, the critical normative resistance motivated by the slogan “the truth is often more complex than people claim” is even more urgent. This does not mean that the theorist becomes armed with a monological message about how things really are; rather, it means that he facilitates a critical informed discussion about the subject matters and the various conditions in which the discourses about them are embedded.

A crucial element of critical bioethics mentioned by Hedgecoe is reflexivity. This element combines parts of what I referred to previously as the existential and social dimensions and also harbors the hermeneutic aspect of being aware of how one’s theoretical presuppositions shape the way in which the subject matter is understood. In other words, reflexivity is a matter of self-awareness in the personal, sociological, and epistemological sense and involves being aware of how all these factors “shape our instinctive and intellectual responses to biomedical technologies.”⁵³ In order to serve properly in critical bioethics, this aspect must not be taken to the cynical extreme of reducing every claim to its individual or cultural origin—that is, seeing every claim as simply reflecting personal interests or social power relations. In an authentic dialogue that is characterized by an undistorted exchange of arguments, led by the subject matter under scrutiny, the force of these personal and social elements are minimized. Therefore, it is of utmost importance, in order to provide the conditions for a critical bioethics with a normative intent, to facilitate the conditions for communicative rationality in free dialogical practices.

Concluding Words

I have argued in this paper that critical bioethics is characterized by hermeneutic sensitivity and awareness in the following ways. First, in order to respect the

values of critical thinking, it must try to understand the context of the arguments and positions under scrutiny. Second, in order to avoid being caught in its theoretical presuppositions, it needs to reflect on them and be aware of the way in which they frame the subject matter. Third, critical bioethics asks about the broader social implications of biotechnology and does not restrict its critical assessment to the effects on individuals. Finally, critical bioethics aims to enhance dialogical practices and the normative power of reasoning by the free exercise of argumentation and public deliberation, and to criticize the power relations that thwart them. In this way, critical bioethics can provide resistance to the loss of a critical, normatively oriented political space that threatens contemporary societies.

Notes

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46. Hedgcock A. Critical bioethics: Beyond the social science critique of applied ethics. *Bioethics* 2004;18:120–43, at 135.
47. See note 46, Hedgcock 2004, at 135.
48. See note 46, Hedgcock 2004, at 134.
49. Cf. van der Scheer L, Widdershoven G. Integrated empirical ethics: Loss of normativity? *Journal of Medicine, Health Care and Philosophy* 2004;7:71–9. I have criticized this position in Árnason V. Sensible discussion in bioethics: Reflections on interdisciplinary research. *Cambridge Quarterly of Healthcare Ethics* 2005;14(3):322–8.
50. Widdershoven G, Abma T, Molewijk B. Empirical ethics as dialogical practice. *Bioethics* 2009;23(4):236–48, at 248.
51. See note 46, Hedgcock 2004, at 140.
52. See note 46, Hedgcock 2004, at 143.
53. See note 46, Hedgcock 2004, at 138.