

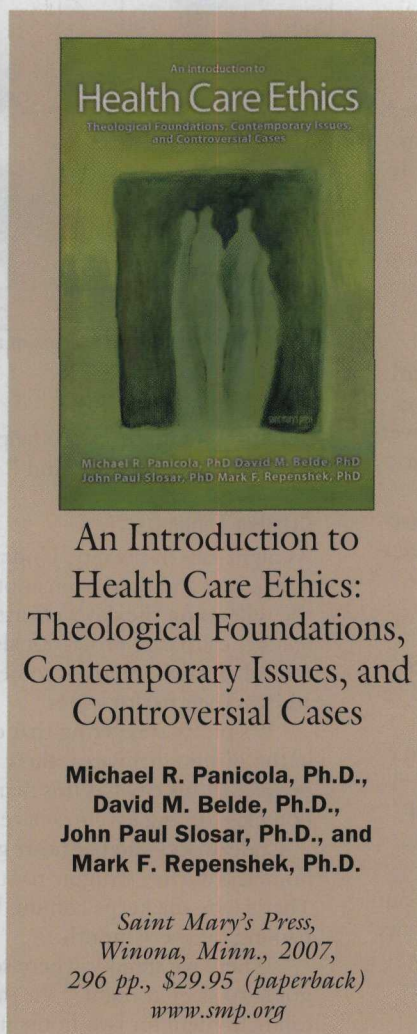
BOOK Review

BY PAUL J. WOJDA, Ph.D.

Courses in biomedical and health care ethics have become popular features of the undergraduate curriculum. Typically offered as electives in philosophy and religion/theology departments, the popularity of the courses is easily explained. Whether through personal experience (e.g., caring for a sick or elderly relative) or through mass media coverage of controversial cases and issues (e.g., Terri Schiavo and human embryo research), students know they will be studying cases that *matter*. The primary challenges in such courses are (in increasing order of difficulty): to help students more clearly articulate just why these things matter; to appreciate the necessity of practical wisdom — not just more science and technology — in addressing the moral questions raised by contemporary medical research and practice; and to develop a non-relativistic response to the reality of practical and conceptual pluralism in debate regarding medical-moral decision-making, whether individual or social.

These challenges are compounded by the fact that few undergraduates arrive at college with even a minimal grasp of the knowledge and skills that have come to define the *interdisciplinary* field of health care ethics. Some of the influential factors contributing to the growing complexity of the field include the history of Western medicine; science, technology and culture; law, policy and political theory; philosophical analysis of concepts; and theological inquiry.

Given these challenges and complexities, one would have to be brave indeed to attempt an introductory textbook on health care ethics aimed at first- and second-year undergraduates. However, that is precisely what the authors of *An Introduction to Health Care Ethics* have accomplished. The results, on the whole, are commendable. The book presents an



informed, balanced and creative approach that addresses all of the fundamental challenges encountered in teaching the subject to novice students.

The book adopts a format similar to more advanced versions in the genre. The first four chapters establish a “normative basis” from which, in the remaining four chapters, a spectrum of mostly clinical issues is addressed (e.g., abortion, end-of-life care, assisted reproductive technology, genetic testing). The similarities end there. Because the authors presuppose little knowledge on

the part of their intended audience, the first four chapters read something like a brief introduction to contemporary ethics and moral reasoning. Brief case studies punctuate the text, and are clearly designed to stimulate the sort of engaged, personal moral reflection and discourse that are among the book’s main objectives. The authors are laudably disinclined to provide “easy answers” to hard cases.

At the end of almost every chapter are helpful suggestions for further reading, as well as multimedia aids for instructors, such as contemporary films and television shows. These latter are welcome additions, as current public debate in health care ethics is often framed by powerful dramatic performances on both large and small screens (e.g., *Million Dollar Baby*, “ER”).

The authors introduce the standard typology of major ethical theories — “virtue-based,” “duty-based” and “consequentialist” — in order to help students clarify differences in moral argument, and thereby “to engage more effectively in ethical dialog.” While marginally helpful as a learning device, this typology proves rather shopworn. It smuggles some potentially counterproductive assumptions about the nature of ethics as a purely descriptive science and, in this context, actually seems redundant, because the authors’ normative proposal — a teleological one that emphasizes human flourishing — incorporates all three ethical theories.

The virtues provide a language for articulating our moral growth as agents called to right relationship (i.e., love) of God and neighbor. Principles disclose the goods at stake in moral action, human dignity and justice above all, and help us specify which virtues apply in particular situations. Discernment of what is right necessarily comprehends the many circumstantial features, including consequences that attend moral choice. Attention is paid throughout the text to

“external criteria,” such as Scripture, church teaching and a community’s values, principles and laws — all necessary components of any serious account of moral discernment. But the criteria do not prevent the need for practical wisdom in their application to individual cases.

Based on their normative backdrop, the authors propose three guiding questions in such instances:

- Whom are we becoming (as individuals and/or communities) through this action?

- Is our action consistent with whom we ought to become as individuals and/or communities?

- Will our action truly promote right relationships and contribute to the overall well-being of ourselves and others?

Theological matters are lightly glossed over in the book, which is certainly its primary weakness. Jesus is identified as the divine/human model of perfect virtue, and principles of human dignity and justice are rooted in the doctrine of the *imago dei*. Beyond that, however, the authors seem relatively uninterested in what difference theological convictions, biblical narrative, or the historical practices of the Christian community might make in how one asks and answers the many moral questions raised by contemporary medical research and practice.

Oddly, the authors disavow any distinctively *Catholic* intentionality here, though it would be hard to mistake their approach — including, ironically, their disavowal — as anything other than Catholic. The point of the Catholic theological tradition, of course, is not simply to provide foundations or “external criteria,” but to provoke students to consider, in the midst of their moral reflections, why human flourishing itself matters.

Criticism aside, this book provides undergraduates studying health care ethics for the first time an instructive and understandable examination of the subject matter.

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