

# 中華生命倫理學通訊

## Chinese Bioethics Newsletter

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### In This Issue

#### Theme: Developing Bioethics in the Greater China Region

Editor: ZHANG Ju

Opening Statement.....1	Abstracts.....3
Opinion Paper.....2	News and Current Events.....3

### OPENING STATEMENT

#### *Communicating Bioethical Concerns*

IP Po-Keung & QIU Ren-Zong, Chief Editors

Few events have the power to evoke human awe and wonders and transform societies like the advancement of technologies. Classic examples abound. The telephone, the automobile, electricity and recently, the personal computer, to mention only a few most prominent examples. The proper use of technology surely can empower human society and enhance individual freedoms. However, the advancement of technology seems to far outpace the development of our moral, legal and social institutions within which technologies are used. It has been increasingly apparent that our basic institutions, including our morality and value systems are becoming more and more obsolete in helping us to deal with technologies responsibly and rationally.

Modern biomedical technologies have joined forces with other technologies to open up new possibilities for society which we could not have possibly imagined before. They are also beginning to transform the way we live and see ourselves in some fundamental way. The way which we procreate, deal with severely handicapped newborns and the terminally ill, save lives and handle death, for example, has taken new forms and often dilemma-ridden dimensions. The meanings of parenthood, family, health, life and

death as well as humanhood have been subject to constant rethinking and redefinition as a result of their fateful impact. These technologies, in the wake of bringing us new opportunities and possibilities, have also brought to us agonising and difficult choice. They have forced us to reexamine some basic old assumptions about our own existence and have raised many new fundamental questions. The biotechnologies which give us new powers may not entail the rationality that licences us to use them. But do we have the proper moral guidance in using these powers? Is our existing morality capable of providing such a guidance? Are our present institutions well-prepared to tackle these thorny issues? Are we cognitively and ethically prepared to be able to take on board these issues? These are indeed complex and taxing questions.

We, as a group of concerned academics and practitioners from Beijing and Hong Kong recognise the need to have a forum to communicate and share information and views in this important area in the region comprising Mainland China, Hong Kong, Macau and Taiwan. To meet this need, we have decided to establish a newsletter to serve as an information network for those who are interested in bioethics in the region concerned.



Given the diverse social, political and economic background of these places, the need for a common network of communication is beyond doubt.

Academics and professionals in the field of biomedicine who are interested in the moral, legal, institutional and social aspects of modern biotechnology, as well as practices and policies in the region are welcome to contribute. Reports on current events or cases and policies as well as comments and short critical discussions on bioethical issues are also welcome.

As a pilot project, the newsletter will be published quarterly. It will be distributed to interested persons and institutions, including related government agencies and non-government organisations both local and overseas, in the biomedical and related fields. The language of the newsletter will be in either Chinese or English. The project will run on a trial basis for one year. Its continuation will depend very much on the extent of support we will get.

An Editorial Board, with members from the Mainland China and Hong Kong, is responsible for all editorial matters. We look forward to participation by colleagues and friends in other Chinese regions. The Newsletter has a Board of distinguished Advisors who will be constantly giving us guidance and advise.

We hope our modest effort can help initiate communications and exchanges among interested parties in this region and beyond. With your support, we hope our effort will contribute to a better understanding of the impact of biotechnology on society and with it, the creation of a more enlightened attitude and deeper awareness of these

important and complex bioethical issues.

### OPINION PAPER

#### *Aspects of Bioethical Ethics in Hong Kong*

MAN Si-Wai, The Chinese University of Hong Kong

Generally, there are two main conceptual approaches in the bioethical discourse of Hong Kong, that I call the "static" and "dynamic" ones respectively. One prominent brand of the static ("deductive") approach is that which has emerged from the long tradition of Christian concern for applied ethical issues and is currently still being

conducted under the main motifs of that particular theological framework. Variations exist only as a result of divergence in interpretation of the Christian doctrines by different sects or denominations. Local academic studies or taught courses in bioethics also tend to adopt the "static" approach, though the overarching principles subscribed to do not necessarily have a religious origin.

Another recently emerged trend takes a more "dynamic" turn. Not surprisingly, the discussions are mostly engaged by practitioners in their personal capacities, and often appearing in popular media such as newspaper and magazine columns. Instead of being systematic analysis, they often take the form of reporting and reflection on real-life cases which call for ethical decisions. Moreover, in highlighting the relevant organizational, policy and societal factors involved in these cases, the full complexity of the decisions and decision contexts are captured in these discussions. The issues covered span across a large scope, ranging from macro ones such as fair distribution of medical resources to micro-decisions concerning patient - medical personnel relationship. Interestingly, the ethical concern of the professionals also extends into the practical realm, with some members of the nursing professionals becoming founders of a Patient's Rights Group.

All these take place amidst the general trend of social development in Hong Kong, which is underlined by an increase in public participation in the policy process and vocal demand for the public sector to become more accountable. Though this democratization process may not be directly related to the furtherance of ethical reflections, it nevertheless enhances a healthy sense of communal belonging which is conducive to ethical discourse. Still, there is such a great deal of catching up to do in bioethics of Hong Kong in order that the society can keep its head above the sea change created by the fast development of the medical science, technology, institutions and their management frameworks. Hopefully, the sad scenario of having a gander selection clinic set up for years without any legal or ethical structure to confront and monitor it, as well as other similar oversight, will not be repeated in the future. Instead, in order to attain a higher degree of ethical awareness, it is useful to sustain the trend of increasing public



participation in the policy process through better checks and balances systems. This will help maintain an open public forum whereby medical personnel of all ranks, ethicists, theologians and citizens' rights advocates can contribute.

## ABSTRACTS

### *What has Bioethics to Offer the Developing Countries?*

QIU Ren-Zong

*Bioethics*, Vol. 7, No. 2/3, 1993, pp. 108-125

*Intellectual basis of bioethics in developing countries* Factors which promotes the transplantation of bioethics to developing countries include the ethos of the love of technology and the determination to apply it in healthcare and other fields though a comparative prosperity and stability are necessary for it, a quasi-democracy, market economy and recognition of pluralist belief/value systems, weakening of paternalism in medicine. The booming moral dilemmas and value conflicts during the period of modernization or paradigm-shift are a fruitful soil for the transplantation of bioethics.

*Each has its own hard nut to crack* As soon as advanced technologies were applied to the healthcare of developing countries, the various ethical dilemmas emerged as they did in developed countries. The sensational report on the success of these technologies which are actually no more than halfway technologies has caused patients' over-expectation to solve their health problems. The application of modern biomedical technology strengthens not only its power of solving medical problems, but also helps to solve non-medical problems, or meets individual or societal non-medical needs. Many developing countries have their own long-standing cultural tradition which may run counter to the values implied in modern biomedical technologies. These countries have not eradicated poverty and so the resources available to healthcare are very limited. There are four dichotomies more crucial to bioethics in these countries: Can vs. Ought - does what can be done technologically ought to be done ethically; Paternalism vs. Autonomy; Modernity vs. Tradition; Universalism vs. Relativism - both ethical imperialism and ethical barbarianism should be rejected.

*Change of thinking in bioethics* Bioethics has to change its emphasis if it offers more help to developing countries. Change the rights approach, more balance between rights and duties. Change individualistic orientation, more balance between individuals and community or society, even humankind. Change technological worship, more balance between loving technology and loving wisdom. Bioethics should be a biophilosophy which inquires into the meaning of life and the meaning of health. Cooperative efforts jointly made by developed and developing countries are needed to solve several cross-culture or cross-country bioethical issues.

## NEWS AND CURRENT EVENTS

### *Goals of Medicine*

International Project in China

To solve the healthcare dilemmas confronted with our humankind, the Hastings Center at New York State, United States has organized an international project on the Goals of Medicine since 1993. Medical professionals and allied scholars in 13 countries have been involved in this world-wide effort, in order to recognize and clarify common views on healthcare and medicine.

The Chinese sub-project is conducted by a group of medical professionals - either in western medicine or traditional Chinese medicine, philosophers, healthcare managers and related academics. Up to now, the Chinese Group has held several workshops or seminars to discuss the essential issues, such as, definition of health, biomedical research, medical care, medical education and the traditional Chinese medicine; they have already published some reports and articles on these topics and participated in the International Meeting of Goals of Medicine.

(LU Wei-Bo/ZHANG Ju)

### *The Difference Between the East and the West*

Beijing - San Francisco Study of Medical Practice

This is a cooperative project between UCSF School of Medicine and Peking Union Medical College. Believing that the views of American and Chinese physicians about ethics in clinical setting may be quite different and that current approaches to medical ethics do not pay much attention to cultural difference, the researchers hope to describe the



difference in doctor's approach to common problems in medical ethics.

The researchers try to compare the opinions of 40 internists in Beijing and San Francisco, 20 on each side, about the best way to approach several cases that are examples of common problems. These cases illustrate dilemmas about truth-telling, euthanasia and disclosure of diagnosis of HIV/AIDS, etc. Doctors are asked to choose the best approach and explain the reason of their choice.

The physicians to be interviewed are selected at random from lists of hospitals and internists on both sides. The interviews have been conducted in the doctor's native language face-to-face or on telephone. All interviews have been finished before July this year. Now the study is in process of collecting and analyzing data. The result will be published soon. At least, the study justifies that there are some differences between American and Chinese while people make medical decisions, either professionals or the public. (ZHANG Ju)

#### IN NEXT ISSUE

Theme: Reproductive Health and Ethics

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Editor: YU Kam-Por

General Education Division

Lingnan College

Tuen Mun, N.T., Hong Kong

Tel.: 852-2616-7490; Fax: 852-2572-5170

E-mail: YUKP@FS1.LNC.HK

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##### Chief Editors:

dr. **IP Po-Keung** (葉保強)

Open Learning Institute of Hong Kong, Hong Kong

Tel.: 852-2789-6690; Fax: 852-2391-3184

E-mail: PKIP@OLIV1.OLI.HK

prof. **QIU Ren-Zong** (邱仁宗)

Chinese Academy of Social Sciences, Beijing

Tel. & Fax: 86-10-512-2025

E-mail: CHENQIU@SUM.IHEP.AC.CN

##### Executive Editor:

prof. **ZHANG Ju** (張 琚)

State Science and Technology Commission, Beijing

Tel.: 86-10-851-2643; Fax: 86-10-851-5006/4

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