



europäische allianz katholischer frauenverbände
european alliance of catholic women's organisations
alliance européenne d'organisations féminines catholiques

Why bioethics? - Bioethical issues facing people today **Andante Summer School, 12-16 August 2015 in Vienna**

Facilitator's Report

Fifty-five women from fourteen different countries, among them sixteen women from central and eastern Europe, gathered to learn about and consider one of the most challenging issues of our time: how to make good ethical decisions about medical and technological interventions in matters of life and death, and the shaping of human life and human persons. This is bioethics.

Dr Sigrid Sterckx, professor at the University of Ghent, Belgium, invited us to consider what ethics is all about. She encouraged us to consider, question, and engage in dialogue, pointing out that when people give up on an argument we are left without any means of development or progress. Ethics demands dialogue and debate. To illustrate this, she led us through a series of 'thought experiments' involving runaway railway carriages. It became clear that even we, a group of committed Catholic women, could not agree on the best course of action to take in each specific case. Dr Sterckx showed us how habit, emotion, reason, fear, even proximity, may contribute to what we decide to do; and of course, what we don't do, for deciding to do nothing is also an ethical decision.

Dr Myriam Wijlens, a canon lawyer, professor at the University of Erfurt, Germany, spoke about canon law as the place where the pastoral concerns of the Church and the doctrines are brought into dialogue. She worked through a number of cases with us, noting that in order to breach canon law an act must be deliberate, and free. Imputability [moral responsibility] is assumed by canon law, but no-one can be penalised for an action that was not free, acting with both 'internal' and 'external' freedom. It is quite difficult to be excommunicated!

In her second talk, Dr Sigrid Sterckx explored ethical issues at the end of life. She pointed out that legal rulings influence ethical arguments, often determining the 'direction of travel' of the debate. Dr Sterckx examined a number of legal cases, mainly from the USA and Canada, in which judges had come to varying conclusions about end of life challenges:

https://en.wikipedia.org/wiki/Vacco_v._Quill

[https://en.wikipedia.org/wiki/Carter_v_Canada_\(AG\)](https://en.wikipedia.org/wiki/Carter_v_Canada_(AG))

https://en.wikipedia.org/wiki/Cruzan_v._Director,_Missouri_Department_of_Health

The cases show that judges may draw different conclusions in different circumstances. As in her previous talk, Dr Sterckx showed us that ethical decisions are rarely simple, and that care and attention are necessary in every case.

Dr Sigrid Muller, Professor at the University of Vienna, Austria, introduced us to current thinking on the relationship between ethics, faith and spirituality. She began by noting that traditional families and personal networks are breaking down, and that as a result a new set of values is emerging: individualism, the privatisation of ethics, a fear of taking sides on ethical matters, or of questioning the decisions of others. The Christian argument that life is good, created by God, redeemed in Christ and intended for eternal glory is simply not understood. Faith in technology replaces natural law, and technology is evaluated in positive terms. Christians must engage and argue for what we believe: for a universal perspective, concern for value as such, not 'value for me'.

Dr Mary McHugh, specialist in kidney disease, University Hospital of Durham, UK, introduced us to the practitioner's perspective, speaking about ethical decision making as a working doctor.

A common framework for contemporary medical ethics uses four basic principles:

- Autonomy - the patient has the right to refuse or choose their treatment;
- Beneficence - a medical practitioner should act in the best interest of the patient;
- Non-maleficence - "First, do no harm": the practitioner should always be aware of risk, and should do nothing that will harm the patient;
- Justice – so far as possible, resources should be shared fairly and the practitioner should act without fear or favour, focusing on the needs of the patient.

These principles, and especially the principles of autonomy and justice, require the practitioner to communicate honestly with the patient, and make sure that the patient has, and understands, all the information relevant to any decision that has to be made. Dr McHugh's presentation emphasised what we had learned from Dr Sterckx's thought experiments: often there is no 'right' answer to an ethical dilemma, and we have to struggle to find the best course of action under the circumstances.

Dr Regula Ott, University of Zürich, Switzerland, and **Dr Sigrid Muller** in her second talk, dealt with developments in technology that are already creating ethical dilemmas, and will create more in future. Technologies are becoming available that will enable parents to have embryos screened for genetic defects, or specific traits, before implantation or during pregnancy. Genetic engineering to correct defects may soon become genetic engineering to produce 'designer babies'. These technologies are creating new moral horizons. How should we, as women in the Church respond? Is it enough simply to say 'No'?

Plenary: What can we do?

An important role for Andante is to be a space for critical reflection, where women from across Europe can come together and consider these questions in an atmosphere of friendship and openness. In 2014 the International Theological Commission wrote in *The Sensus Fidei in the Life of the Church*:

"...What is less well known ... is the role played by the laity with regard to the development of the moral teaching of the Church. It is therefore important to reflect also on the function played by the laity in discerning the Christian understanding of appropriate human behaviour in accordance with the Gospel. In certain areas, the teaching of the Church has developed as a result of lay people discovering the imperatives arising from new situations. The reflection of theologians, and then the judgment of the episcopal magisterium, was based on the Christian experience already clarified by the faithful intuition of lay people...."

[See the full text on the Vatican website:

http://www.vatican.va/roman_curia/congregations/cfaith/cti_documents/rc_cti_20140610_sensus-fidei_en.html]

It is important that we contribute to this conversation from our distinctive experiences. In order to do this, we must first raise awareness, and then encourage informed debate, and when we are ready, speak to the Church Hierarchy out of our experience.

As a community we can share information and understanding, and counter poor and inaccurate advice and information. We can try to ensure that counselling is informed, and offered by people who have practical experience and insight into, for example, bringing up a child with Down's Syndrome and the impact of a Down's child on family life. We can identify the support that women might need in a variety of morally complex situations, and see how it might be offered.

Andante has the opportunity to be a voice for Catholic women in Europe, by asking questions, seeking information, critically evaluating information from a Catholic perspective, and sharing what we learn with each other. We have the opportunity to challenge the assumptions of secular legal and social thought by giving due weight to the gospel values of human dignity, solidarity, care for life, justice, and responsibility.

All Andante member organisations should work towards annual meetings with their Bishops' Conference, as happens already in Germany, in England and Wales, and in some other countries.

We noted how important it is that we, through our organisations, are able to study and understand Church documents. We can then address the fear of new technologies that seems to underlie some negative attitudes within the Church Hierarchy, and participate in the development of Church teaching in the complex world of bioethics.

In this context we noted the importance of having documents, including the important Vatican II texts, translated into all European languages so that they can be read, studied and put into practice.

COMECE, the Commission of the Bishops' Conferences in the countries of the European Union, works on bioethics: how can Andante contribute? www.comece.eu

The Council of Europe has a Committee that works on bioethics: www.coe.int/bioethics

As members of Andante and of our national Catholic women's organisations we can help one another to listen to the Church Hierarchy, and also to be listened to by them, and be heard. In secular contexts we can promote the value of life and the importance of protecting life from beginning to end.

We can be a voice for the voiceless: most especially for women who are vulnerable, excluded or marginalised in our competitive consumer societies.

We can help to identify the causes of negative and anti-life decisions and so contribute to the growth of a moral community informed by Christian values and directed to the common good.

For this reason it is important that we meet in different countries and cities and that our friendships and deliberations join East and West, North and South and bring the Catholic women of Europe together.

