The Development of Global Bioethics and the Emergence of Human Rights: A Historical-Developmental Perspective

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THE DEVELOPMENT OF GLOBAL BIOETHICS AND THE EMERGENCE OF HUMAN RIGHTS: A HISTORICAL-DEVELOPMENTAL PERSPECTIVE

1. INTRODUCTION

In 1988, Van Rensselaer Potter coined the term “global bioethics” in response to the need for moral wisdom to transcend the particularities of “bioethics,” a term he previously established in 1970 to describe the developing new philosophical enterprise that aimed to address the moral challenges inherent to human life and flourishing. In so doing, Potter hoped to integrate the more specific problems of bioethics into a larger interdisciplinary effort to address global issues pertaining to the bridge between present and future, nature and sociology, science and human values, and the respective relationships each shares with human existence.¹ From the very start, then, Potter used the term “bioethics” to mean something different than most scholars do today, intending to include, as Henk ten Have notes, “macro” issues pertaining to “peace, pollution, poverty, politics, and progress”² within its notional scope. The consideration of matters critical to the human populace was, for Potter, an issue of significant and growing concern. New insights into the “science of survival” today remain critical to the endeavor to respond to contemporary challenges and current issues posed by biomedicine.³

Prior to Potter’s global vision, it was years of slow scientific progress that transformed the medical ethics of old into the bioethical enterprise that exists today.⁴ The unspoken social mores of biomedicine had, until then, “served both as a regulator of professional relationships and as a demonstration of professional reliability; it also encouraged professional monopoly over healing.”⁵ As Albert Jonsen remarks, in the decades following World War II “the untroubled medical conscience began to feel some qualms. New intellectual resources were summoned to struggle with the new questions: What is benefit? What is harm? Who should live? Who should die? How should the expensive resources of health care be distributed? Who should decide?”⁶ Philosophers, theologians, and other social professionals now found themselves amid the conversation over just which moral norms passed the rigorous examination of practical reason. Modern “bioethics,” bilocated⁷ in its birth, was thereby founded. By 1971, the invention of bioethics would indelibly baptize widespread discourse over the appropriate moral responses to dilemmatic issues in medicine and the biological sciences.⁸

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2. ten Have, “Potter’s Notion of Bioethics,” 60.
3. ten Have, “Potter’s Notion of Bioethics,” 60.
The global conception of bioethics established by Potter may ultimately reference the impetus of its existence: the effort to discover which rights oblige in complex, morally-dilemmatic circumstances. As Lynn Hunt comments, “human rights only become meaningful when they gain political content. They are not the rights of humans in a state of nature; they are the rights of humans in society.”9 Understood in this light, bioethics may be understood as the moral response to justly conceived human rights in the medical and scientific context. In essence, then, the enterprise of bioethics, and global bioethics particularly, is intimately linked with the emergence of discourse over human rights. A growing interest in global bioethics today hints at the idea that contemporary understandings of human rights as found in and related to biomedicine are expanding and deepening. However, a growing chasm between the aims and methods of modern-day bioethics and the just distribution of healthcare worldwide suggests the need to revisit Potter’s understanding of bioethics and its global nature, particularly as they relate to the development of human rights discourse.

To be sure, the issues of immediate import to the conversation over how and why the development of global bioethics relates to the emergence of human rights discourse are manifold, and any singular analysis of topics, no matter how sweeping, will unavoidably fall short of adequacy. This essay recognizes such limitations, and thus aims to briefly address but three: (i) the broad development of Potter’s conception of global bioethics, (ii) the general emergence of human rights, and (iii) the perils and promises of the relationship shared between global bioethics and human rights. Hence, the aim and proposal of this essay is such: to examine to ontological origins of global bioethics, human rights, and the reciprocal relationship shared between global bioethics and human rights with the intention of positing the argument that the development of and interest in human rights discourse is a concrete response to the development of and growing interest in global bioethics, and vice versa.

2. THE DEVELOPMENT OF POTTER’S GLOBAL BIOETHICS

2.1 Ontological Origins

As mentioned above, Potter employs the term “bioethics” to identify a discipline that meshes science and philosophy with moral wisdom – “‘knowledge of how to use knowledge’ about human survival and flourishing – as its goal.”10 For Potter as for Aristotle, wisdom is prudential – that is, oriented toward practical application. Where priorities are rendered uncertain, the biological must be matched with and weighed against judgments of value to approach a decision considered both humble and responsible. To Potter’s mind, bioethics cannot possibly exist in a vacuum. Just as in science, ideas need to be tested and reviewed in groups and through experimentation that can ultimately build upon the premises of previous investigations. Whereas for Potter such an interdisciplinary moral approach to medicine and the biological sciences is the norm, contemporarily such an approach is novel. Potter challenges the enterprise of ethics

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10. ten Have, “Potter’s Notion of Bioethics,” 61.
to expand outward, breaking and transcending boundaries in the effort to develop ideologies that might endure rigorous verification when applied to humanity’s future well-being, striving to achieve improvement in the quality of life to be experienced by generations to come. For Potter, then, the elements of various collected knowledge and the necessity of steadfast testing and assessment are reflected in his fundamental notion of bioethics as “a new discipline that combines biological knowledge with a knowledge of human value systems in an open-ended biocybernetic system of self-assessment.”

With the development of a global theory of bioethics, Potter aimed to accomplish two things. First, he contended that humanity requires an ethics that seeks after a better balance than currently exists between persons and the natural world they inhabit. In other words, an ecological component must requisitely be included in a robust understanding of bioethics. Secondly, Potter believed that if bioethics possessed as its long-term goal the future well-being of generations to come, it should take a broader view in relation to medical concerns and to sociological and ecological issues. In other words, it should overcome separations of nature and culture, science and moral values, humanity and what is natural. In the effort to express this broader methodology, Potter utilizes the concept of “global bioethics.” Here, the word “global,” as Potter intends it, suggests that a nuanced approach to bioethics should be “unified and comprehensive” as well as ‘worldwide in scope.’ The basic problems of bioethics, as conceived by Potter, thus include, for example, issues related to population growth and poverty, which in turn affect all of humanity. The goal of bioethics is also global in that it primarily aims to ensure the survival of human beings. Moreover, Potter’s bioethical methods are global in that they collect and combine all that is best in intellectual resources. In this vein, Potter’s bioethics creates “a worldwide movement.”

2.2 Status Quaestionis

By 1987, Potter was thoroughly disappointed to learn of the strict medical application of the term “bioethics” by Georgetown scholars. The original, intentionally-broad meaning Potter established had, by this time, migrated significantly, raising problems, in Potter’s view, related to the development of a moral methodology focused on individual events that neglected “macro” issues pertaining to ecology, population, and sociological issues. In stark contrast with the meaning Potter originally assigned to “bioethics,” the Georgetown approach took a short-sighted, “micro” approach that failed to focus on larger issues related to the quality of existence for generations to come. Potter’s bioethics had become an “orphan,” necessitating a global rebirth in order to reintegrate the two domains with which he originated. Furthermore, Potter was dissatisfied that bioethics had become the forum of professional philosophers. For Potter,

12. ten Have, “Potter’s Notion of Bioethics,” 75.
13. Interestingly, globalization is not included in Potter’s notion of bioethics as articulated in 1970. There is no explicit identification of existent global problems, nor the necessarily global foundation of justified solutions. However, it may be argued that the global dimension of Potter’s work is, in fact, implicit. See ten Have, “Potter’s Notion of Bioethics,” 75.
14. ten Have, “Potter’s Notion of Bioethics, 75-76; quotation from p. 76.
15. ten Have, “Potter’s Notion of Bioethics,” 76.
the bioethicist was foremost to be a biologist, since, according to his definition, bioethics is an equally scientific endeavor. However, even here Potter’s perspective is global. Not only will philosophers and biologists meet the mark of dialogical prowess; the bioethicist should also be a person well-versed in several disciples of the humanities and social sciences.16, 17

Today, Potter’s global conception of bioethics is attracting more attention than ever before. Indeed, Potter’s message that bioethics should broaden its scope and mission has gained the support of scholars worldwide. By building the bridge between those particular moral issues inherent to medicine and the biological sciences and those inherent to enterprises such as ecology, agriculture, sociology, and religion, there has been an enormous paradigm shift from one of small to large scale. Consequently, issues such as global health, population control, global justice, and the painful reality of poverty have gained the attention they so desperately require. Presently, the United Nations agencies of WHO (World Health Organization) and UNESCO (United Nations Educational, Scientific, and Cultural Organization) have based their Universal Declaration on Bioethics and Human Rights largely on Potter’s global notion of bioethics, which is concerned, at core, with “health care, the biosphere and future generations, and social justice.”18 Potter’s conception of bioethics as grand in scope and far-reaching in application continues to serve as a reminder of what is at the heart of an ethics that can be deemed reasonable and, hence, justifiable. A genuinely global conception of bioethics should, as Potter would contend, take seriously the development of persons and the rights that are appropriately theirs to claim.

3. THE EMERGENCE OF HUMAN RIGHTS

3.1 Defining Rights

According to Hunt, human rights possess three interlocking characteristics: “rights must be natural (inherent in human beings); equal (the same for everyone); and universal (applicable everywhere). For rights to be human rights, all humans everywhere in the world must possess them equally and only because of their status as human beings.”19 Human rights, then, might best be understood as rights guaranteed between persons. However, “natural,” “equal,” and “universal” qualities are not apt enough descriptors of rights. Such rights must, argues Hunt, possess political qualities if they are to be taken seriously. The natural, equal, and universal qualities of rights were first expressed in the American Declaration of Independence in 1776 and in the French Declaration of the Rights of Man and Citizen in 1789. Whereas the 1689 English Bill of Rights included reference to the “‘ancient rights and liberties’” established by the English legal system, it did not declare rights to be natural, equal, or universal. Rather, it was the Declaration of Independence that firmly maintained that “all men are created equal,” and

16. ten Have, “Potter’s Notion of Bioethics,” 76-78.
17. Potter includes that, in addition to being well-versed in others fields, the bioethicist should be a master of molecular biology in particular. See ten Have, “Potter’s Notion of Bioethics,” 78.
18. ten Have, “Potter’s Notion of Bioethics,” 78-79; quotation from p. 79.
19. Hunt, Inventing Human Rights, 20; her emphasis.
that all persons possess rights that are, by nature, inalienable. Similarly in France, the Declaration of the Rights of Man and Citizen maintained that, born and remaining free, all persons were equal in rights. Not some persons, but all persons, regardless of sex, race, creed, or culture. All persons of the world were meant to be included in this sweeping, global statement. In brief, then, between the time of 1689 and 1776, rights that had previously been seen to belong to particular persons in particular places were transformed into “human rights,” the universal rights of “man.”

Just as they were historically, human rights remain exceptionally difficult to define. Since they depend on emotion as much as on reason, human rights often elude claims of being “self-evident.” Such claims are, it can be argued, emotional appeals. In other words, it proves convincing if it strikes a particular emotional cord deep within persons. More to the point, the emotional nature of human rights becomes transparently evident when horror, or the experience of being disgusted, results from their violation. This notion is supported in the statement of Denis Diderot, who reflects that “the use of the term [“human right”] is so familiar that there is almost no one who would not be convinced that the thing is obviously known to him. This interior feeling is common both to the philosopher and to the man who has not reflected at all.” Further, Jean-Jacques Burlamaqui contends that only one’s inner emotions can prove the existence of liberty: “Such proofs of feeling are above all objection and produce the most deep seated conviction.” Hence, much like Potter’s conception of global bioethics, human rights transcend the doctrine of detailed documents; they instead rely primarily on a deep-seated disposition to justice toward other people, to convictions of what human beings are like and the way they perceive right or wrong in a complex world.

3.2 The Role of Empathy vis-à-vis Human Rights

More important than the question concerning the necessity of declaring rights is the question concerning the impetus behind its criticality. What sparks individuals to speak out on behalf of rights, whether one’s own or those of others, is, among other things, empathy. As mentioned above, rights remain elusive by virtue of their emotional nature. Hence, it seems that in order to understand rights adequately, it is necessary to understand the emotions that drive them – here, empathy. In essence, “empathy depends upon the recognition that others think and feel as we do, that our inner feelings are alike in some fundamental fashion. . . . Human rights depend both on self-possession and on the recognition that all others are equally self-possessed.” In stricter fashion, this essay understands empathy as the ability – as opposed to the “willingness” of sympathy – to enter into the chaos of another (or others). Needless to say, empathy was not a product of any particular century. Rather, it is a universal process rooted in the biology of neuroscience. That is, it relies heavily on a neurological capacity to apprehend the

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22. Hunt, Inventing Human Rights, 27; Burlamaqui’s emphasis.
24. For a fine history of the development of declaring rights, see Hunt, Inventing Human Rights, 113-45.
subjectivity of another (or others) and to be able to experience, or perhaps only to imagine, that their inner lived experience is similar to one’s own. Such empathy, therefore, can only be the product of social interaction, from transcending social boundaries and learning to process the equality that lies buried within human rights discourse. To paraphrase the Adam Smith, empathy invites individuals to enter into the existence of a person and place oneself, as it were, “‘into his body and become in some measure him.’”

Learning to empathize thus paves way, but by no means guarantees, the security of human rights. Perhaps no one understood this better, or suffered more thoroughly over its contemplation, than Thomas Jefferson. Writing to Joseph Priestly, Jefferson writes: “‘It is impossible not to be sensible that we are acting for all mankind; that circumstances denied to others but indulged to us have imposed on us the duty of proving what is the degree of freedom and self-government in which a society may venture to leave its individual members.’” Contrary to some claims, the contemporary role of empathy vis-à-vis human rights discourse has not been wrung dry. Rather, it has proven and will continue to prove a powerful force for good to counteract global violence, pain, and domination – a task Potter’s notion of global bioethics surely includes. Discourse on human rights is thus bridged by the spirit of empathy. The long history of human rights must ultimately be defended by the emotions, convictions, and actions of those individuals who, together, demand responses that reflect their outrage over social injustice. In the spirit of Potter’s notion of global bioethics, then, the undeniable place of empathy in human rights discourse reveals its circularity: “you know the meaning of human rights because you feel distressed when they are violated. The truths of human rights might be paradoxical in this sense, but they are nonetheless still self-evident.”

4. GLOBAL BIOETHICS AND HUMAN RIGHTS: PERILS AND PROMISES

4.1 The Limits of Empathy and the Shame of Medical Research

Unfortunately, empathy is not enough to secure global justice in biomedical practice. Issues of horrific nature – ranging from the “resurgence of torture and ethnic cleansing, the continuing use of rape as a weapon of war and enduring oppression of women, the growing sexual traffic in children and women, and the remaining practices of slavery” – remain parched for solutions. The question of whether human rights have finally failed humanity by proving slow to task continues to haunt the global populace. At current, humanity balances in a middle of a metaphorical tightrope between distance and closeness to realized global justice and ignored universal rights. Positively, the growing presence of literacy and the development of literature, newspapers, radio, film, television, and Internet has made the goal of empathy more realistic than those for whom distance and circumstance prevents it. Pictures of starving children are but one example of images that precede empathy and the subsequent call to action that lies at the heart of global

27. Hunt, Inventing Human Rights, 68.
bioethics. Negatively, such firsthand accounts of current events tell stories of murders over respective ethnicities and the brutality with which it is carried out. Hence, while modern forms of communication surely contribute to the global-bioethical view of Potter insofar as it expands the capacity for empathy, they have been defenseless against the human will to act on the basis of that emotion.\textsuperscript{30}

A prime example of the chasm between empathy and the will to act on it are the shameful practices that have occurred in the history of biomedical research. Unfortunately, that history continues to repeat itself. As David and Sheila Rothman point out, “until the 1990s American medical researchers performed most of their experiments on other Americans – frequently choosing subjects who were poor and vulnerable. Now . . . they are increasingly likely to conduct their investigations in third-world countries on subjects who are even poorer and more vulnerable.”\textsuperscript{31} Part of the reason is the nature of the AIDS virus, a disease that has a large stake in developing a cure. Another is the massively expensive regulatory measures imposed on biomedical research in rich nations, which in turn cause investigators to travel to poorer countries to test and refine new treatments. Nevertheless, such exploitation of the world’s most vulnerable populations has been an enormous shortcoming for biomedical research, and the result has overwhelmed ethics completely. The principles proclaimed at both Nuremberg and in the Declaration of Helsinki note that the individual subject’s well-being ought always to take precedence over the progress of science. Moreover, physicians must, according to these principles, obtain the informed consent of research subjects. However, neither these codes nor the Western groups for whom they are established have had the developing countries in mind when prescribing such medical ethics.\textsuperscript{32} The effect continues to prove impedimentary to the task of global bioethics, particularly as conceived by Potter.

4.2 \textit{Rationing Life and the Fundamental Human Right to Healthcare}

The question of whether healthcare should be rationed in order to extend fundamental medical necessities to the sickest and most vulnerable members of the global community – goods to which they possess fundamental human rights – is inevitably raised in this context. Rationing has proved helpful in the effort to expand the dialogue concerning the social values embedded in determinations over who will be permitted access to effective treatment and who will not. It is no surprise, then, that philosophers and other social professionals have been invited to the conversation over just healthcare distribution. While Potter believed that the bioethicist should in the first place be a biologist, he intended his global perspective to include political scientists, economists, and various health specialists as well. One such non-biologist interlocutor includes Daniel Callahan, who, in a global vein of thought, suggests rationing as a method by which to “maintain in good working order the political and legal system, the national defense, the pursuit of knowledge and culture, and the institutions, ranging from the family to

\textsuperscript{30} Hunt, \textit{Inventing Human Rights}, 209-10.
\textsuperscript{32} Rothman and Rothman, \textit{Trust is Not Enough}, 53-54. See also pp. 55-88.
philanthropic organizations, that hold society together.”\textsuperscript{33} Though beside his primary point, Callahan’s idea suggests that spending billions of dollars to ward off death – particularly in geriatric populations – when others barely have an opportunity to live because of the harsh conditions of poverty is a notion foreign to both reason and to the pursuit of justice in Potter’s conception of global bioethics.\textsuperscript{34}

Like the broad declaration of human rights mentioned above, the question concerning the usefulness of a specific declaration of rights to healthcare remains at the forefront of international debate. The first Universal Declaration of Human Rights, adopted by the United Nations General Assembly in 1948, indicated that all persons possess the right to “‘a standard of living adequate for health and well-being,’ which included ‘medical care’ as well as food, clothing, and housing.”\textsuperscript{35} Moreover, in 1966, the International Covenant on Economic, Social, and Cultural Rights proclaimed “‘the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.’”\textsuperscript{36} States were thus obliged to reduce mortality, promote health, treat and control epidemics, and create conditions in which all would have access to medical services necessary to combat illness. Similarly, in 1948, the WHO included in its constitution that “‘the enjoyment of the highest available standard of health is one of the fundamental rights of every human being.’”\textsuperscript{37} Reaffirming this position, the 1978 Declaration of Alma-Ata, Kazakhstan, identified the discrepancies between developed and undeveloped countries, calling upon governmental bodies to rectify the injustices between health and social benefits worldwide. By 2000, the same declaration noted that “‘all peoples of the world’ should enjoy a level of health that allows for ‘a socially and economically productive life.’”\textsuperscript{38} Regrettably, these goals remain unrealized today. Abuses persist, as do shortages of both medical facilities and the drugs necessary to ward off disease. As Rothman and Rothman state, “some major victories have been won . . . but a quarter century after the Alma-Ata statement, health is still only for some and inequities persist almost everywhere.”\textsuperscript{39} Hence, a renewed call to justice in healthcare would do well to resuscitate and implement accordingly the notion of global bioethics presented by Potter. The widening disconnect between justice and biomedicine makes “Potter’s original insights . . . more timely than ever.”\textsuperscript{40}

5. CONCLUSION

The ontological origins of global bioethics, the definition and development of human rights discourse, and the strengths and weaknesses of empathy as manifest in historical and contemporary understandings of human rights are but three issues of principal significance in the conversation over how and why the development of global

\begin{itemize}
\item 33. Rothman and Rothman, \textit{Trust is Not Enough}, 119-28; quotation from p. 28.
\item 34. For a small portion of Callahan’s argument on this point, see Rothman and Rothman, \textit{Trust is Not Enough}, 129-131.
\item 35. Rothman and Rothman, \textit{Trust is Not Enough}, 152.
\item 36. Rothman and Rothman, \textit{Trust is Not Enough}, 152.
\item 37. Rothman and Rothman, \textit{Trust is Not Enough}, 152.
\item 38. Rothman and Rothman, \textit{Trust is Not Enough}, 152.
\item 40. ten Have, “Potter’s Notion of Bioethics,” 59.
\end{itemize}
bioethics relates to the emergence of human rights discourse. Through the lens of a historical-developmental framework, the aim of this essay has been to explore (i) the broad development of Van Rensselaer Potter’s conception of global bioethics, (ii) the general emergence of human rights, and (iii) the perils and promises of the reciprocal relationship shared between global bioethics and human rights with the intention of positing the argument that the development of and interest in human rights discourse is a concrete response to the development of and growing interest in global bioethics, and vice versa. To that end, it has been successful.

The implications here are significant. To be sure, the underdeveloped nature of human rights discourse and justice in healthcare distribution is a genuine and growing fear. But rather than allow it to terminate human progress, may Potter’s invitation to rediscover a global methodology within which to situate and from which to practice bioethics instead serve to remind that an authentic ethics requires justice for all.

REFERENCES


