BOOK REVIEW

Pragmatic Bioethics

Edited by G McGee. Bradford Book, 2003, \$26.95, pp 320. ISBN 0262632721

The point of *Pragmatic Bioethics* is to view bioethics through the lens of American pragmatism. The book is in three parts. The papers in part one look at the “pragmatic method” and bioethics in general; those in part two are intended to suggest that bioethical debates can be informed by parts of the canon of classical American pragmatism; those in part three apply aspects of pragmatism to specific bioethical issues more overtly. This structure is odd in two related respects: the difference between the papers in parts two and three is unclear, and papers dealing in similar ways with similar bioethical issues (for example, death and dying) are placed in each of these parts.

My view of how philosophy does, and should, apply to bioethics is at odds with that implied by *Pragmatic Bioethics*. I think bioethics can be informed by philosophy in two ways. Firstly, specific bioethical problems can be elucidated by substantive philosophical data (including normative theoretical advances, and specific philosophical theories such as those pertaining to personal identity). Secondly, and more pervasively, bioethics would benefit from acquiring certain intellectual habits distinctive of (analytic) philosophy (notably, conceptual clarity, argumentative rigour, and accuracy of expression). The different view taken in this book is that bioethics might look to the methodology implied by American pragmatism, and specific bioethical issues might be addressed by reference to American pragmatist writings. I feel that this different view was only partially convincing. There are two main sets of problems.

The first set of problems relates most closely to part one (which discusses bioethics and the “pragmatic method”). Although the first four papers contain some eminently sensible ideas and advice about how to approach bioethical problems, I was puzzled by the insistence that these are best put in terms of American pragmatism. For one thing, some of these methodological themes resonate as loudly with positions other than pragmatism (for example, reflective equilibrium and Rawls). For another, I noted a list of ways the relation between bioethics and pragmatism is described in these first few papers. On the one hand are claims such as that bioethics already is a pragmatic discipline, that it is implicitly pragmatic, and that it can be understood as pragmatic. On the other are claims such as that pragmatism is well suited to bioethics and that pragmatism can revolutionise bioethics. Clearly, there is equivocation here between the descriptive

claim that bioethics is a pragmatic discipline, and the normative claim that it should be.

More importantly, there is a fairly obvious dilemma. Either “pragmatism” here refers to the philosophical doctrine or it does not. If it does, then far too little has been said. Firstly, “pragmatism” would have to be defined much more clearly (but, notoriously, pragmatism is philosophically heterogeneous; note what Peirce thought about Jamesian pragmatism). Secondly, the preferred version of the doctrine would need defending properly (but there are important objections, and alternatives, to pragmatism in its various guises; note what Russell thought of the Pragmatic Theory of Truth). Thirdly, one would have to show how a clearly defined and properly defended pragmatism can elucidate bioethics, when pragmatism understood philosophically is essentially an approach to questions of significance and truth that seem obviously far removed from the “real life” contemporary problems that comprise bioethics. To sum up the point, this book could not be recommended to a philosophy student studying American pragmatism *per se*. Given this, it is not really philosophical pragmatism that is in play; rather, “pragmatic bioethics” here amounts to emphasising themes that resonate with the philosophical position(s) that can be labelled “pragmatic”.

But this puts us on the second horn of the dilemma. A cursory list of these resonant themes, gleaned from part one, includes employing the hypothetico-deductive methodology, seeing moral theories as mere hypothetical guides, achieving reflective equilibrium, epistemic anti-foundationalism and pro-fallibilism, contextualising problem situations, and so on. The list is easy to endorse. Too easy: we do not need American pragmatism—nor any other heavyweight sounding philosophical “-ism”—to endorse it. Most of this grandiosely termed “pragmatic method” is simply the way we now naturally go about addressing contemporary social issues. For example, who thinks the hypothetico-deductive methodology is a bad way of going about medical ethics? And perhaps some ardent defenders of a moral theory—Singer on utilitarianism, say—really do think its application will solve bioethical problems; but most people who apply moral theory in bioethics are self-consciously putting views on the table in order to juxtapose them with others for comparison and evaluation.

What is puzzling about part one is that by the end of the fourth essay the outline of this dilemma has emerged in the reader's mind, then we get Arras's chapter (the most elegant in the book thus far) in which it is clearly and emphatically stated. So the suspicion that has naturally developed during the first four papers (that there is something fundamentally dubious about claiming a “methodology of pragmatic bioethics”) is then confirmed in

the fifth. Perhaps the editor should be applauded for having the courage to organise part one in this way. But it is a hostage to fortune.

The second main set of problems relates more closely to the papers in parts two and three. Taking them as a whole (as mentioned, the distinction between parts two and three is unclear, and papers placed in these parts seem to cover similar topics in similar ways) another disquieting thought kept occurring. Why persistently relate the substantive bioethical points of these papers to American pragmatist writings? Bluntly, we do not need to appeal to Royce to argue against an overly economic or legal construal of the doctor-patient relationship, James to notice that death is a vague concept, Peirce to advocate attending to the consequences of acting according to different definitions of “killing”, James to argue that it might be morally right to help someone end their own life and thereby die well, and so on. The bioethical claims are clearly detachable from pragmatism; and no-one thinks that, because a view in bioethics accords with something an American pragmatist said, it is true. The constant harking back to pragmatist texts is distracting (and worse: the tenth essay, which is almost risible and surely has no place in serious bioethics, is a *reductio* of this approach). Many of the bioethical points these writers want to make are interesting and important in themselves, and there is more to be said about them. So why not just get on with doing bioethics?

The most convincing papers in the book are those that apply the pragmatic method to bioethics in a more subtle, understated way. The best example is chapter 13 (Wolpe and McGee on stem cells). I cannot recall the phrase “American pragmatism” being used in this chapter. There are no heavy handed claims about how pragmatism is/should be the way to do bioethics; and no artificial seeming appeals to comments by Peirce, James, or Dewey. Rather, the authors' treatment of their theme—analysis of the way the debate about the permissibility of human embryonic stem cells research has proceeded—is subtly but consistently informed by certain pragmatist tendencies (notably, the democratisation of intellectual debate). The paper makes a substantive contribution to the literature on stem cells, and it is only later, on reflection (and in light of the context) that one realises that it is a pragmatic approach to the question. This way of doing “pragmatic bioethics” is effective precisely because it avoids grandiose claims about the “pragmatic method” and the rather intrusive use of pragmatist quotes. More papers in the book in this style would have made a more convincing case for “pragmatising” bioethics.

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