Correspondence

Defining the jargon

SIR,
What is an ethicist?

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Further comment – the role of the medical ethicist

SIR,
I would like to make some comments on the ‘aims and nature of the Journal of Medical Ethics’ as enunciated by Lord Amulree and Prebendary E F Shotter in their reply to a letter by C G Scorer and D Johnson (JME, 4, 106f).

The Journal seems to be in an unenviable dilemma. It is not (we are told) ‘a mouthpiece for any particular moral viewpoint’ and has not ‘a party line on such issues as, e.g. abortion.’ Yet Lord Amulree and E F Shotter in this same letter do exhibit a viewpoint and party line.

Four of these viewpoints are worthy of discussion:

1) The Journal accepts that ethics is ‘the study of moral theory or moral philosophy’. By not defining ethics as the study of what ought or should be, it would seem that the Journal has escaped many problems. For instance, people who are for abortion and those who are against abortion will all be equally happy to read the Journal. After all, the Journal is only concerned with the methodology of those who say abortion is right or wrong. But surely this is only one logical step away from saying what is right or wrong. Thus, if one accepts the methodology by which abortion is shown to be right, one is really saying abortion is right. The only difference is that one is hiding behind this logical step. Anyone who says (for instance) ‘You say abortion is right’ can be answered by ‘Not really, I only said that the pro-abortion argument is right’. It seems that the Journal is not willing to call a spade ‘a spade’!

2) Following on from the above, we are told that one of the functions of the Journal is to assess ‘moral theories and beliefs’. But we can never assess anything without a standard. Whenever the Journal or anyone examines something, some standard is being used, whether explicitly or implicitly. The Journal does not ‘turn to the law nor for that matter to the Church for its sole authority’ so what is its authority? Human reason cannot give us an authoritative answer since many different theories of mortality claim human reason as their authority. The Journal acknowledges this and says ‘there is no “basic standard”’.

So how does the Journal assess theories and philosophies without a standard? How can one test to see if a wall is vertical without a plumb-line?

From the tone of the letter by Lord Amulree and E F Shotter, it would seem that they ruled out one thing at the start of their assessment (without a standard). That is, that there is no absolute standard. They implicitly deny a God-given revelation (in the form of the Bible) as the ultimate rule of what ought or should be.

3) The writers of the letter then consider that a ‘sound moral judgement will only result where there is both knowledge and a freedom of choice’. This statement seems to imply that there is such a thing as a good moral judgement. Therefore there are right and wrong judgements. But how can one say this without an authority or standard? Will just pure knowledge of the philosophies behind arguments for and against abortion help one to decide whether abortion is right or wrong? To make such a judgement on right and wrong, one needs to have accepted a method of deciding right and wrong, not just to have a knowledge of that method.

Also in this statement is an acceptance of Platonic philosophy that right knowledge will always result in right behaviour if there is freedom of choice. Thus, any wrong behaviour is the result of faulty knowledge or some psychological pathology. Wrong doing is regarded as ignorance or illness and not sin. This is in direct conflict with the Bible which states that man likes to do wrong and is responsible for his wrongdoing.

4) The last point is with regard to denying the place of proselytising in the study of medical ethics. Does this Journal regard the study of ethics as some academic game? Does it care whether or not abortion is murder? Does it care whether murder is wrong or not wrong? Surely if you care, you will in proportion to that care, try to persuade others of the fact that e.g. abortion is right or wrong (whatever the case may be). If you have experienced the forgiveness of God for wrong-doing and had been shown much of the wrong-doing in yourself and the world, would you not try to win others over to your position? I do not know C G Scorer or D Johnson, but it seems that this is their position and it is certainly mine.

Finally, I would like to point out that neutrality in anything is impossible. The Christian world view is so all embracing that, as Jesus said, ‘He who is not with me, is against Me’.

To deny the authority of the Bible in one area is to deny the authority of God’s revelation and those who do so are no longer neutral.

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SIR,
In the June issue of the Journal of Medical Ethics you stimulated a discussion about the Code of Ethics by the WPA and the background paper by Dr Clarence Blomquist. I should like to comment on these papers as follows: