

Book Review Section

A review of **Globalizing Feminist Bioethics** edited by Rosemarie Tong with Gwen Anderson and Aida Santos. Boulder and Oxford: Westview Press, 2001. 368 pages.

This anthology aims to 'globalize' feminist bioethics by challenging dominant conceptualizations of the intersection between global and local. The twenty-two essays that compose the book were originally presented at the bi-annual conference of the International Network on Feminist Approaches to Bioethics (FAB), which was held in Japan in 1998. This international event gathered professionals from various disciplines, including medicine, philosophy, genetics, gender studies and bioethics, and with different socio-cultural backgrounds, coming from Asia, Europe, the United States and Latin America.

The topics are extremely varied, ranging from theoretical discussions of the role of feminist bioethics and the tensions between universalism and relativism in its approaches, to a broad array of specific bioethical concerns such as pregnancy, abortion, female genital circumcision, and HIV/AIDS examined in certain socio-cultural and geographical contexts. Interestingly, however, some common themes can be easily identified. Most authors are concerned about the suitability of Western clinical models and technologies to address people's (especially women's) health needs and take into account body experiences that are deeply integrated with people's social and existential being. If the responsible use of technology and science remains a preoccupation in the Western world, the indiscriminate export of such values and practices to developing countries seems even more worrisome, since it may disrupt the functioning of existing health care services and negatively affect people's well-being. Hence, scientific developments and applications should be carefully scrutinized by civil society and feminist groups, and if necessary opposed.

From this, it does not automatically derive that tradition and local cultures are necessarily "good." On the contrary, various authors are very well aware that many traditional practices, such as female genital mutilation, are harmful to women and should not be condoned just because of a self-proclaimed respect for cultural values. And, here lies the greatest challenge for feminist bioethicists: can universalism in upholding women's rights be combined with a sincere appreciation for local realities? Or, are calls for the understanding of different socio-cultural contexts to be immediately dismissed as soon as such contexts harbor disregard for women's rights as defined by feminist (Western?) theories? Or, on the contrary, should relativist views

be maintained at all costs, even if such desire to respect cultural diversity may prevent feminist bioethics from condemning oppressive features of Third-World communities (p. 30)?

The anthology does not resolve such fundamental questions, but makes a serious effort to deal with these (apparent?) contradictions, especially in the first part of the book, dedicated to theoretical perspectives. As Anne Donchin states in the introduction, both Susan Sherwin and Rosemarie Tong point in their essays 'to tensions between specific cultural practices and features of our common humanity that override geographical, cultural and racial difference, most conspicuously childbirth, illness, disability and death.' Still, these two authors vary in the degree in which they choose to emphasize global similarity vis-à-vis local diversity. On one side, Rosemarie Tong believes that the global 'sameness' of women's oppression and their universal right to attain freedom and well-being takes precedence over contextual diversity. On the other side, Susan Sherwin, warns that emphasis on global features can obscure alternative moral systems and power structures, and argues for the necessity to find new approaches 'if we hope to understand where moral intuitions can legitimately be shared cross-culturally, and where they founder on differences in experience and cultural values' (pp13-14). She then proposes to view alternative moral theories and positions as a set of lenses that can be switched or layered-up depending on the specific aims and needs. Diverse, or even contrasting, cultural positions should be considered as additional lenses that might highlight the same moral issue from different angles, thus expanding our moral vision, although not necessarily providing definitive solution to moral dilemma (pp. 23-25). As she states: 'the metaphor of lenses helps us appreciate that what appears to be a satisfactory resolution to a problem may well vary with the perspective we adopt. It challenges us not to settle too quickly for the most familiar and comfortable perspective...' (p.25).

One clear example of 'lenses' is the concept of *kagandahang loob* (good will/deeds), which is central to ordinary Filipino ethical thinking, and according to the author, Leonardo De Castro, may provide important clues for understanding bioethical issues in the Filipino context. Although I would have expected some critical remarks on the concept of 'feminine' bioethics as used by the author, this essay remains important in that it clearly demonstrates how diverse global bioethics would look if more practitioners would start to employ conceptual frameworks that use indigenous language and concepts 'expressive of a people's own experiences, concerns, traditions, perceived problems, dreams, hopes and aspirations' (p. 60). And it is exactly in the name of

such diverse reality that the last essay in this theoretical section, written by Debora Diniz and Ana Cristina Gonzalez Velez, strongly emphasizes the necessity of claiming the particularity of the local context (in this case, Brazil) and the urgency for bioethicists to be as attentive as possible to local particulars. The authors also argue against the transfer of bioethical theories developed in the United States to Brazil and other 'peripheral countries.' Interestingly, however, in their opposing foreign dominance, the authors call for a 'unique bioethics for Brazil' as if no diversity exists within the boundaries of a nation state.

In the second part of the book, the local-global dialogue is contextualized in a series of essays on particular reproductive, genetic and sexual health issues. Issues that emerge include the diversity of women's moral experience with regard to pregnancy, family planning and abortion, notwithstanding some transcultural similarities; the potentiality of reproductive technologies to undermine women's autonomy rather than strengthen it; men's responsibility in protecting women from unwanted pregnancy; the implication of genetic knowledge and related technological development for human and more particularly women's welfare; and the impact of moral state ideologies on marginalized groups.

One issue that reserves particular attention, in view of the emerging discourse on men's participation in reproductive health, is whether greater men's involvement is desirable from a feminist perspective since it may end up disempowering women even further. How does greater men's involvement affect women's autonomy and control of their body? And how are different, more equitable, gender roles to be attained: through legal sanctions, as proposed by Naoko Miyaji, or through an awareness raising process?

Finally, the essays in the third, and final, part of the book focus on medical research and treatment. I find this section particularly interesting for the strong emphasis on human rights as the key concept of feminist analysis. The central question can be summed-up as follows: do medical research, trials and treatment respect the rights and dignity of women? The authors seem to conclude negatively, and stress that medical science and technology is not value free, and that fragrant abuses can occur due to the dominance of patriarchal values held by health professionals and their connivance with authoritarian systems. As Jonathan Mann, quoted in the last essay, states, it is time for health professionals 'to consider their responsibility not only to respect human rights in developing policies, programs and practices, but to contribute actively from their position as health workers to improving societal realization of rights' (pp.327-328).

Similarly, this book shows that there is much work to be done by feminist bioethicists in conceptualizing and practicing a global feminist bioethics respectful of human rights and diversity. As Nancy M. Williams notes in her epilogue, the task of assimilating diverse, and oftentimes conflicting, cross-cultural perspectives is incredibly challenging (p.334).

Still, this anthology in itself proves that there is willingness from many sides to work on such a daunting task. Hopefully, future readers will feel called to make an effort to build cross-cultural understanding in an increasingly divided world.

Rosalia Sciortino, *Rocke Feller Foundation*



A review of **Health Care and the Ethics of Encounter: A Jewish Discussion of Social Justice**, by Laurie Zoloth. Chapel Hill: University of North Carolina, 1999. 323 pages, \$45.00 cloth, \$19.95 paper.

This is a beautiful book. One should read it for that reason alone, since we could all use more beauty in our lives.

It is beautiful because it is passionate. Zoloth's deep concern about the injustice wrought on millions of real people by the current system of health care allocation in the U.S. is evident from the first page. This passion provides the text with a feeling of urgency, of concreteness, of reality. The book likewise glows with Zoloth's deep love for the Jewish tradition and communal life. Immersed in that tradition, Zoloth convincingly constructs a compelling alternative discourse for considering questions of the medical common good from the texts, language, and history of Judaism.

It is beautiful because it is well-written. Not only is Zoloth's prose a delightfully refreshing change of pace from the arid, abstract, or puffed-up tone which plagues so many bioethicists; it is also clear. In Part One, she provides one of the most accessible accounts of the crisis of health care reform and the Oregon Health Care Decision Making Project that I have yet encountered. And if that were not enough, she then turns to an even more complex beast—the liberal account of justice from Locke through Veatch, complete with its critics from various communitarian camps (philosophical, sociological, feminist, and Christian). Again, her display of the various parties to the conversation is clear and understandable. This is no mean feat.

It is beautiful because it is substantive and carefully-crafted. Zoloth is clearly in command of the material on Oregon Health Decisions and the critiques of liberal political theory. As she turns to the Jewish tradition in Part Two, however, the substantive power of the work becomes even more impressive. Zoloth seeks to provide an alternative to the regnant anthropology of the moral agent, rooted, as it is in liberal theory, in an individualistic autonomy. She finds such an alternative in the Jewish tradition, elaborated within