

(Bio)ethicists and (Bio)ethical Expertise in National Ethical Advisory Bodies: Roles, Functions and Perceptions

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ABSTRACT: Over the past decades, (bio)ethical expertise has been gaining considerable influence in decision-making processes on various levels, but the nature and role of bioethical expertise and experts has only rarely been subject to empirical investigation in institutional contexts. One of the characteristics of modern (bio)ethics is its “empirical” and “policy” turn, which has led to the formation of institutions that were given the remit to provide political decision-makers with ethical advice on dealing with contentious developments in new and emerging sciences and technologies. In Europe, such national Ethical Advisory Bodies (EABs) have become a key mechanism in the legitimization of contested sociopolitical decisions. (Bio)ethicists can be seen as important experts in the workings of such institutions, but the role and function of (bio)ethical expertise and (bio)ethicists have so far not been systematically investigated in European national EABs. The present article thus tackles some of the theoretical and practical questions concerning ethicists and ethics in the context of EABs by combining theoretical reflection with empirical investigation. The first part provides a brief sketch of the development of modern (bio)ethics and its institutionalization in various expert bodies, especially EABs at the national level in Europe. The second part explores theoretical questions relating to the notion of ethical and moral expertise, as well as the attributes that ethicists should possess in order to be able to perform the role of experts in ethics within EABs. The third part compares theory to practice by examining the results of a survey conducted among European national EABs on how ethicists and ethical expertise are actually perceived by EABs and what functions they perform in such institutions.

KEYWORDS: Bioethics, ethical advisory bodies, ethical expertise, ethicists, experts, moral expertise, national ethics committees.

1. Introduction

In recent decades, the implications of novel technological developments, accompanied by numerous public and intellectual efforts, have resulted in increasing demands to incorporate ethical scrutiny into decision-making processes at various levels and in different venues. The rise and spread of (bio)ethics, together with wider societal demands for ethical oversight, eventually led to the formation of institutions that were given the remit to provide policymakers and political decision-makers with advice on the ethical aspects of contentious issues, especially those stemming from novel scientific insights and technological applications. And although many social and cultural theorists worry about the negative implications of a “technocratic” decision-making model, scientific experts and their authority will doubtless continue to play a crucial role in advising politicians regarding the ethical oversight of new and emerging technologies.

Starting in the 1980s, most European countries have by now established Ethical Advisory Bodies (EABs) at the national level. Although modern EABs nowadays examine various aspects of contentious issues, including economical opportunities, technological feasibility, societal trends and others, the core focus of their examinations is still on the ethical aspects, and given that such bodies strongly rely on expert knowledge in dealing with increasingly complex challenges, we are confronted with questions concerning ethical expertise and of experts who possess such expertise. Questions connected with the existence and nature of ethical and moral expertise are not especially new, as they have long been debated in moral philosophy. But they are nevertheless relevant in the scope of EABs, especially in determining what role ethics and ethicists¹ should and do have in comparison with experts from other fields. In this regard it is also important to identify which attributes or skills an expert in ethics should possess in order to count as one, as well as which of these might be especially important in the workings of EABs. Finally, examining the perception of the role and function of ethics and ethicists from the perspective of EABs can provide an informative insight from actual institutional practice.

The present article thus addresses some of the questions connected with the role and perceptions of ethics and ethicists in EABs, both from a theoretical and an empirical angle. The first part provides a short outline of the development of modern (bio)ethics and its institutionalization in

¹ For the purposes of this paper we consider an ethicist to be someone who possesses knowledge of ethics and is able to engage with (bio)ethical issues theoretically and in practice. This ability is also recognized by a specific authority, institution or community, e.g. such as by being invited to serve in an EAB.

various expert bodies, especially EABs at the national level in Europe. The second part explores theoretical questions relating to the notion of ethical and moral expertise, as well as attributes that ethicists should possess in order to be able to perform the role of experts in ethics within EABs. The third part compares theory to practice by examining the results of a survey conducted among European national EABs on how ethicists and ethics are actually perceived by EABs and what functions they perform in such institutions.

2. The Development and Institutionalization of (Bio)ethics

The proper and continued functioning of increasingly complex societies, not to mention the challenges facing them, require the combined efforts of a growing number of experts from increasingly diverse fields. As public policies attempt to address the needs of such complex and internally pluralistic societies, the policymaking process increasingly needs to be based on inputs from wide a range of experts. Further, it needs to ensure that the decisions made are ethically acceptable and desirable, and thus in the best interest of society as a whole, in order to maintain democratic legitimacy and public support (Owen et al. 2012; Grunwald 2012; Petersen et al. 2011). Innovations in all fields, and especially innovations in science and technology, are nowadays regarded as solutions to many grand societal challenges and as necessary prerequisites for the continuing functioning and prosperity of modern societies, although both their positive and their negative impacts might affect practically everyone (Agar 2013; Church and Regis 2012; Hildt and Franke 2013; Roco et al. 2011; Savulescu et al. 2011). Thus they also represent ethically contentious political options. In this regard, policymakers and political decision makers are on the one hand confronted with an abundance of (often conflicting) choices requiring expertise outside their domain. On the other, the extent of the impacts, both positive and negative, of new developments in science and technology, has become so profound that the ethical scrutiny of such decisions needed to be institutionalized in the political decision-making process of modern societies. At least in the EU it seems that such an approach is already improving political decision-making on ethically controversial new and emerging science and technology, forming a core element of good governance (Borras 2003; IRGC 2006) and of the new strategy of responsible research and innovation (Von Schomberg 2012) by integrating the use of ethical expertise and scrutiny at the policy level.

Attempts to properly address the (moral) complexity of issues surrounding the use and impacts of new and emerging sciences and technologies can

be traced right back to the beginnings of bioethics² in the late 1960s. At that time, new medical technologies began to attract media and public attention, and coupled with concerns about human rights and decision-making autonomy, and thus the treatment of patients and research subjects, led to growing interest in specific issues and problems in research and medicine (Sherwin 2011: 75). While the first three decades of bioethical inquiry centered on subjects like euthanasia, abortion, genetics and reproductive technologies in the scope of medical and research ethics, the range of topics addressed by bioethics has steadily expanded. Nowadays, the domain of bioethical inquiry could be said to include all ethical issues relating to the creation and maintenance of living beings, thus encompassing advances and issues in (bio)medicine and the life sciences, as well as the impacts of broader technological innovations on living systems at various levels, including plants, animals, humans, societies and ecosystems in the scope of an increasingly globally-oriented (bio)ethics (Dawson 2010: 218). Furthermore, advances in new and emerging technologies are opening up the possibility of expanding or enhancing human capabilities beyond what is considered “average” or “normal”. Thus the potential applications of various human enhancement technologies have also become a prominent topic in bioethics (Agar 2013; Buchanan 2011; Blackford 2013; Savulescu and Bostrom 2009).³

Although the epistemological and methodological roots of bioethics lie in the long tradition of moral philosophy, bioethics did not remain a solely academic discipline. Moreover, the field itself can be seen as a revival of applied ethics, with a strong tendency to engage with practical issues and problems in society. Philosophers and also other humanist scholars, as experts versed in (bio)ethical matters, were increasingly invited to serve on various bodies and committees examining the ethical aspects of the use of technological innovations and the treatment of human subjects, especially in clinical research and medicine. Bioethicists also became embedded *in situ*, in institutions where research and development, as practical applications of scientific and technological innovations, were being conducted, including medical and

² Here we do not attempt to provide an authoritative or comprehensive definition of bioethics. Generally, bioethics can be conceived as an interdisciplinary field encompassing medical ethics, animal ethics and environmental ethics. With rapid technological advances and expanding capabilities, new and complex issues are broadening the scope of bioethical inquiry, including new fields such as neuroethics, nanoethics, machine ethics, roboethics etc, especially as the boundaries between natural and artificial, living and nonliving systems are becoming increasingly blurred.

³ Of course the view of bioethics reacting to new technological developments is not necessarily a complete one. As Wilson (2014) shows in the development of bioethics in Britain, the process involves a complex interplay between sociopolitical dynamics and various stakeholders with their own goals and agendas.

healthcare decisions on a personal level. In this way, both the experts and policy decision-makers hoped to reassure the wider public that ethical issues were thoroughly scrutinized and that the ethically proper course of action was taken in the development, testing and deployment of (bio)technological innovations and the treatment of human subjects, by rigorously applying ethical guidance and ethical principles (Sherwin 2011: 76). Such developments can be seen as the beginning of the institutionalization of ethics in political decision-making and a key mechanism in the legitimization of contested sociopolitical decisions regarding the trajectories and impacts of scientific and technological developments (Bogner and Menz 2010; Braun et al. 2010).

From the 1980s onward, expert bodies charged with ensuring the ethical scrutiny and acceptability of various scientific and technological developments and their applications have been formed at different levels in most European countries. They include various institutional research and clinical ethics committees that advise on and deal with practical, individual research, medical and healthcare decisions. They also include EABs at the national level that deal with such issues on a larger, population and societal level. These, mostly comprised of national ethics committees, generally advise national executive and legislative branches of the government, and sometimes also inform the public. Their advice pertains to the ethical aspects of policy issues, especially regarding controversial (bio)ethical issues and the implication of developments in new and emerging sciences and technologies that are connected with medicine, public health and the life sciences. They analyze such issues and produce (generally non-binding) opinion documents and recommendations for public policies, as well as formulate and propose new legislation (Ahvenharyu et al. 2006; Fuchs 2005). Over the past three decades, EABs have been formed and institutionalized at the national level in most developed and many developing countries worldwide, and in practically all European countries (COMETH 2014; WHO 2014).

Following a trajectory similar to the development of bioethics, and indeed spurred by similar trends and often prompted by the same actors and institutions, the first national EABs in Europe were established in West-European countries.⁴ They were given the explicit remit to address the ethical aspects of the scrutinized issues and their membership was composed of various experts, including philosophers with expertise in moral philosophy and

⁴ The creation of EABs in West-European countries partially leaned on the model of Technology Assessment Offices (TAOs) that were established earlier. TAOs have their origins in the late 1960s in the US and developed primarily as a means of providing parliaments and other government institutions with policy advice on science and technology development options (Delvenne et al. 2011). They became established in West-European countries in the 1970s (Efremenko 2002).

ethics. Their early work mainly focused on developments and contentious issues in (bio)medicine, such as the treatment and role of patients and research subjects. It eventually expanded to include the wider implications of innovations in biomedicine and biotechnology for individuals and professional practices. In East-European countries, national EABs were mostly established only after the fall of the Soviet bloc, and there is still a noticeable developmental and thematic lag in comparison to West-European EABs (Mali et al. 2012). Thus many East-European EABs still treat bioethical issues predominantly or even exclusively as questions of medical ethics, as if bioethics and medical ethics were synonymous, even though “... bioethics is in fact much broader in scope than medical ethics” (Dawson 2010: 218).

In the latest phase, spanning approximately the last decade, some of the most developed EABs have started to further expand the thematic scope of their inquiry, as well as develop mechanisms with which to engage various stakeholders and the public.⁵ The first trend resulted from the implications of new and emerging technologies, such as nanotechnology, neurotechnology and synthetic biology, and includes the examination of their ethical and sociopolitical ramifications on several levels. These range from the individual, through affected groups and professional fields, to societies as a whole, and from specific environments to the entire biosphere. Such EABs sometimes take the lead in addressing the implications of technological developments, as for example in exploring the implications of potential human enhancement technologies, which are mostly still in the research and development phase, or, at least for now, purely theoretical. In performing such examinations they follow the broader concept of bioethics. The second trend is connected with criticisms of EABs as being dominated by expert opinion and not giving any voice or at least consideration of the viewpoints of affected groups and the wider public in their recommendations. Such calls for increased transparency and broader participation and pluralism in expert advice and policy decision-making have resulted in some EABs incorporating mechanisms for consulting interested groups and the public on some issues under scrutiny, and including such viewpoints in their official opinion documents. Still, such efforts are at a very early stage of implementation, and it is not clear in what way and to what extent outside groups and the public should be represented in the recommendations produced by EABs (Mali et al. 2012). This is connected with the wider problem of expertise and democracy. The workings of modern technological societies require the authority of expertise in numerous

⁵ Again, the developmental trend of EABs is similar to the development of TAOs, with both types of institutions attempting to integrate similar mechanisms and perform similar functions and types of examinations, although the main focus of EABs is, at least nominally, still on ethics and of TAOs on sociopolitical aspects (see Bogner and Torgersen 2014).

fields, but still need to ensure that the opinions and needs of the population are taken into account in a democratic manner. While there is a constant tension between expertise and public sentiments, between expert authority and democratic influence, there are also many recent experiments and attempts to introduce various deliberative practices as elements required for a participatory society, which might provide a better interface between the two sides (Fischer 2009).

From a general viewpoint, contemporary EABs can thus be classified as being in one of three stages of development. First stage EABs restrict their thematic scope to the examination of bioethical issues in the narrow sense, focusing on the early problems of medical and research ethics. Second stage EABs focus on bioethical issues in a broader sense, including the examination of not just ethical but wider sociopolitical implications of new and emerging technologies at different levels. Third stage EABs are, in addition to a broad thematic scope, also attempting to implement mechanisms for wider group and public consultation and participation.⁶

3. Ethical and Moral Expertise

As policy-makers are increasingly faced with uncertain choices and complex decisions regarding the management of technological innovations and their impacts, they have come to rely strongly on expert advice in order to legitimate and ground their decisions in expert knowledge (Slob and Staman 2012). This has led to a wide “ethicization” of science and technology controversies in which such political issues are reframed as ethical issues (Bogner 2010). Thus EABs and their expert advice have come to occupy an important role in political decisions on such contested issues. Through such external expert oversight, political decision-makers hope to reassure the public that such decisions on new research and development are ethically acceptable and in the best public interest, while also attempting to assure scientists and industry that novel developments and products will not be unnecessarily impeded.

In order to be able to provide expert advice, the membership of EABs, especially those from the second stage of development onward, are usually composed of experts from various problem-related fields like medicine, biology, philosophy, sociology, jurisprudence and economy. In addition, they can include representatives of churches, lay members of public lobbies, actions groups, labor unions and the like (Friele 2003: 308). The membership is thus often made up of experts and laymen, ensuring both expertise and

⁶ For more on the topic of representing, involving and consulting other stakeholders and the public in EABs, see (Kelly 2003; Mali et al. 2012).

representativeness, and the two need not be exclusive to distinct members, although outside affiliations should be openly stated and visible. And given that modern bioethical issues and S&T challenges are increasingly complex, the range of involved experts is widening together with the thematic scope of the EABs.

But since the remit of EABs primarily entails the ethical examination of various contentious subjects and issues, one would expect that there are members of such bodies with expertise specifically in (bio)ethics. This points to several questions. The first is who would count as an expert in ethics and what attributes make them an ethics expert. The second is, given that EABs examine the ethical aspects of contentious issues, could or should the judgments of ethicists have a greater weight than those of the other experts? The final question is, given the growing importance of institutionalized ethical scrutiny in policymaking and decision-making, how ethicists and their role are perceived in EABs, and what functions do (bio)ethics and ethicists actually perform in practice in such bodies?

While the role of expertise in modern policy and decision-making has become indispensable, it is also a contested one. The authority of (bio)ethical expertise has been criticized from the viewpoint of serving hidden interests and relying on dogmatic ideologies, as well as from an epistemological viewpoint.

From a more conservative political stance, bioethicists as experts in EABs are often seen as representing the interests of scientists and industry (Robert 2009). Thus Fukuyama (2002: 204), a former member of the President's Council on Bioethics under George W. Bush, although acknowledging that bioethicists have been useful in questioning certain technological innovations, nevertheless sees many of them as extremely instrumental in promoting the interests of specific stakeholders, arguing that "...many bioethicists have become nothing more than sophisticated (and sophistic) justifiers of whatever it is the scientific community wants to do". On the other hand, they can be seen as too conservative, especially when deriving their judgments from theologically-inspired backgrounds. Although Fuller (2011: 226) argues that the increasing normalization of stem cell research (especially embryonic cells), euthanasia, organ donation and similar practices and new technologies in society will make it harder to defend "conservative" bioethical position in new and emerging biomedical research and in new emerging technologies generally, it seems that recent ethical debates regarding new medical research and treatments are still very much influenced by dogmatic moralizing tendencies. In this regard, Buchanan (2011) criticizes conservative bioethicists as substituting high-sounding rhetoric for reasoning, arguing that their opposition to the application of human enhancement technologies for the improvement

of cognitive, physical and emotional capacities stems from their subordination to conservative dogmas.⁷ Finally, while many bioethicists generally do strongly, though not unconditionally, support research, scientists nevertheless often still tend to view them as impeding scientific progress (Robert 2009: 286).

Regarding the epistemological viewpoint, there have been some renewed discussions in recent years of whether there is such a thing as expertise in ethical and/or moral matters, how it might be possible to recognize it, and what implications that might have (Archard 2011; Birnbacher 2012; Cowley 2012; Dietrich 2012; Gesang 2010; Hoffmann 2012; Steinkamp et al. 2008). In the scope of this paper we focus on the implications of such questions for the function and role of ethicists in EABs. EABs often provide not only descriptive but also normative recommendations regarding specific issues. As they are charged with examining the ethical aspects of such issues, one might expect the expertise of the ethicist to be especially important in such deliberations, and the fact that professional bioethicists often serve on EABs and other regulatory bodies suggests they possess some special type of expertise. Drawing on the sources listed above, we can distinguish between ethical expertise, as theoretic, procedural and methodological expertise, and moral expertise, as morally correct and authoritative judgments.

Expertise is usually attributed on the basis of professional background and training, as well as of acquired skills and practical experience. Ethics are usually, though not exclusively, taught in the scope of philosophy, and indeed many professional philosophers are regularly appointed to EABs (Archard 2011: 119), especially philosophers with knowledge of moral theory. But professional background in moral theory need not be a necessary condition, as bioethicists can have other professional backgrounds, such as jurisprudence, social sciences or even biotechnology. As Archard (2011: 122) notes, ethicists can be further identified by various forms of generally recognized accreditation, such as having degrees, being employed in universities, having relevant publications and holding relevant positions. But as members of EABs they are usually not only qualified ethics experts, but also successful, that is active and distinguished by their work in areas connected with (bio)ethics. In this regard, they are engaged in tackling theoretical and practical (bio)ethical issues and dilemmas, both publicly and academically, through publications, debates, opinions and work in various institutions.

⁷ He lists three such tenets. The first, the "Created Essence View", assumes that human nature is a fixed essence created by God or Providence. The second, "Permanent Constraint View", assumes that human nature includes severe and permanent constraints on the possibilities for human improvements through social reforms. The third, "Back-Fire View", assumes that efforts to change human nature so as to relax these constraints are very likely to damage human life.

The key “feature” of ethical experts is thus ethical expertise (knowledge and practical experiences) even though they may not possess formal credentials or qualifications in relevant fields. While some ethical experts acquire such expertise by working in the relevant fields without acquiring the formal credentials (as for example Derek Parfit), most gain the relevant experience by pursuing particular credentials.

Such ethical expertise can be seen as “thorough knowledge of moral propositions and ethical theories, and the skills to use this knowledge in a professional way” (Steinkamp et al 2008: 174). In that sense, we can identify at least the following competences that (bio)ethicists can or should possess:

- a) *knowledge of ethics and (bio)ethical issues*, including knowledge of ethical theory, pertinent facts, moral norms and professional codes (Birnbacher 2012: 240; Dietrich 2012: 277; Gesang 2010: 155), and of bioethical issues, as well as the relevant legislation;
- b) *the ability to challenge, explain and justify arguments, positions and decisions*, including the skill of properly deploying knowledge of ethical theories in the rational justification of arguments (Cowley 2010: 338), ensuring the consistency and coherence of argumentation (Birnbacher 2012: 242; Hoffmann 2012: 308), analyzing and evaluating moral issues, arguments, claims and positions (Dietrich 2012: 277; Friele 2003: 313) and presenting options on what to do and the implications that follow from specific courses of action (Archard 2011: 120);
- c) *a feeling for framing the language and discussion* (Gesang 2010: 155), including clarifying decision procedures or sets of constraints within which to make decisions (Archard 2011: 120) and identifying the relevant contexts, beliefs and values inherent in individual bioethical problems and issues (Friele 2003: 313);
- d) *skills to help others with reasoning*, providing moral reasoning support for non-ethicists and possibly serving as moderators who facilitate bioethical deliberations (Steinkamp et al. 2008: 180), thus helping to guide other experts and laymen in the discovery of ethical conundrums (Robert 2009: 287) and the underlying premises of their own stances towards them;
- e) *engaging the public*, as the bioethical issues under inquiry usually entail normative questions with wide-ranging societal ramifications that are of public interest, bioethicists should strive to create spaces for public deliberation, as well as engage and involve interested publics (Dietrich 2012: 280; Robert 2009: 288), which would also give greater legitimacy to the positions and decisions made by EABs in the sense of at least taking into account wider public sentiments on specific issues.

While ethics expertise as described above is usually seen as unproblematic, having command of moral theory and the instruments to apply it might hint at also possessing a greater moral authority through a privileged access to truth, that is, being able to arrive at the morally right course of action or making the correct moral judgment. The key question here is whether the expertise of ethicists in EABs could or should carry greater weight and authority than expertise from other fields. In this regard, Kass criticizes bioethicists as inadequately representing a diversity of viewpoints on moral issues (Robert 2009: 285) and there are concerns that such moral authority might “endanger the democratic value of equal respect for all moral points of view that people might hold in a modern pluralistic society” (Friele 2003: 312). Most authors who have discussed the issue agree that ethicists cannot claim to be moral experts, able to decide authoritatively about normative questions, as they do not have privileged insight into moral truths (Dietrich 2012: 276), or possess knowledge to make normative judgments that others do not have (Archard 2011: 121). Thus, the judgment or expertise of ethicists in EABs should not carry superior weight in the sense of moral expertise, but they should function as “semi-experts” (Gesang 2010), as ethics experts described above, their expertise and knowledge supporting rather than overruling that of the other expert members, and thus improving the quality of the deliberations. In the scope of EABs, they are of course free to make and promote their own judgment and normative recommendations about specific issues, giving reasons and clarifications why they consider it the best course of action, but they cannot claim (nor should they be seen as possessing) morally true or superior knowledge on the basis of their expertise, as their expertise does not entail the capability to determine substantially right moral conclusions that non-ethicists could not reach.⁸ Still, in this regard they can support other members of EABs in discovering and clarifying their own ethical judgments, by serving as ethics guides or architects of the moral landscape, fostering open and constructive dialogue and discussion, debating about moral issues, and exposing and exploring the values, interests and commitments of various members (Robert 2009: 287).

Employing the ethics expertise of ethicists in the ways outlined above might serve to improve the quality of the deliberative process and consequently of the outcomes of deliberations in EABs. Further, it could also mitigate some of the criticisms leveled at bioethicists as being the servants

⁸ Although given the right sort of experiences, education and training, virtually all moral agents could become ethical experts, ethical expertise does not constitute the sum total of morality. Drawing on ethical expertise alone conflicts with the moral ethos or perspective of democracy.

of powerful interest groups and relying on dogmatic ideologies, which often seem to be related to the ethical judgments of bioethicists used or presented as authoritatively grounded in moral expertise and claiming access to moral truth. After having set out some of the roles and functions that ethicists, working as ethics experts, should or could theoretically perform in EABs, we attempt to compare theory and practice, by examining how ethicists and ethics are actually perceived by EABs.

4. Ethicists and Ethics in Ethical Advisory Bodies

Although there have been some comparative empirical studies of national EABs in Europe (COMETH 1998; Fuchs 2005; Ahvenharyu et al. 2006), they did not include the role of ethics and ethicists, and while some such investigations have been conducted in case studies of individual national EABs (Bijker et al. 2009; Halila 2003; Friele 2003), there is still a general lack of empirical data. With this issue in mind, we devoted part of our empirical study of European national EABs, which was conducted as part of the EU FP7 project Ethics in Public Policy Making: The Case of Human Enhancement (EPOCH), to questions concerning the role and perceptions of ethicists and ethics in EABs.

An extensive semi-structured questionnaire exploring the establishment, thematic orientations, internal functioning, policymaking impact, and the public relationship aspect of the individual EABs was sent to 50 EABs in 32 European countries, including all EU member states and four non-member countries (Iceland, Norway, Serbia and Switzerland). The list of national EABs was composed by consulting the membership lists of the European Conference of National Ethics Committees (COMETH 2014), the Forum of National Ethics Committees (NECF 2014) and the European segment of the WHO Global Summit of National Bioethics Advisory Bodies (WHO 2014), as well samples used in previous studies of national EABs in Europe (COMETH 1998; Fuchs 2005; Ahvenharyu et al. 2006). The questionnaire was eventually completed by the representatives⁹ of 21 EABs from 15 countries between October 2011 and July 2012. While other thematic segments of our questionnaire have been presented and elaborated elsewhere (Mali et al. 2012), the questions of primary interest for this paper pertain to the perceptions and views of EABs (as given by their representatives) regarding the role and contribution of ethicists and of ethics in the scope of the institutions. We

⁹The questionnaire was sent to the chair and/or head of the EAB secretariat, since they have the best overview of the functioning of the institution and can summarize the viewpoint of the EAB as a whole. The EABs took part in the survey voluntarily and were not compensated for their participation.

further complemented our study by examining the relevant sections of the official websites of the mentioned EABs.¹⁰

Table 1: Respondents to Survey

Country	EAB
Austria	Austrian Bioethics Commission
Cyprus	Cyprus National Bioethics Committee
Denmark	The Danish Council of Ethics
	The Danish National Committee on Biomedical Research Ethics
Finland	National Advisory Board on Social Welfare and Health Care Ethics
France	The National Consultative Ethics Committee for Health and Life Sciences
Germany	German Ethics Council
Greece	Hellenic National Bioethics Commission
Italy	Italian National Bioethics Committee
Lithuania	Lithuanian Bioethics Committee
Netherlands	The Health Council of the Netherlands
Norway	The National Committee for Medical and Health Research Ethics
	The National Committee for Research Ethics in Science and Technology
	The National Committee for Research Ethics in the Social Sciences and the Humanities
	Norwegian Biotechnology Advisory Board
Spain	Spanish Bioethics Committee
Sweden	Swedish Council on Health Technology Assessment
Switzerland	Swiss National Advisory Commission on Biomedical Ethics
United Kingdom	Nuffield Council on Bioethics
	British Medical Association Medical Ethics Committee
	National Research Ethics Service

¹⁰ As part of the project, we conducted a detailed overview of the official websites, which provide various information (remit, structure, opinion documents, recommendations, etc.) about the EABs, not only in the national language, but often also in English, German and French.

While practically all the listed EABs include some reference to the examination of the ethical or moral aspects and problems of pertinent issues in their remits, it is interesting that they rarely mention ethicists in their membership structure¹¹ and selection criteria, which points to the elusive definition of ethicists as discussed above. As Emmerich (2009) notes, the absence of a specified professional ethicist might suggest that such roles are performed by lay members with academic interest and expertise in the relevant topics. Another reason, already discussed above, might be that making the background and credentials of ethical experts more explicit might seem to undermine democratic legitimacy by implying that they possess greater moral authority. Some EABs do mention the inclusion of members with (bio)ethical expertise or knowledge of (bio)ethical matters, as for example the French EAB, where a proportion of members should be “chosen for their qualifications and interest in ethical problems”, the German EAB, which should contain “recognized persons familiar with ethical questions” and where some members should represent different ethical positions. The Lithuanian EAB mentions members representing different backgrounds, including bioethics, the Norwegian National Committee for Medical and Health Research Ethics should include members with “competence in ethics”, the Swedish EAB with “leading experts in ethics”, and the Swiss EAB including members who are “experts in ethics” and should “represent different ethical positions”. Finally, the membership criteria for the Nuffield Council on Bioethics list the ability to demonstrate an interest in bioethics and in case of being “professionally engaged in bioethics, to be nationally or internationally recognized in their field or show such potential”.¹² Several EABs mention members with a background in philosophy or theology, which are “traditional” backgrounds for (bio)ethicists, although, as we have discussed, experts in ethics could have any background.

In regard to membership, we asked the representatives which professional background their members have. Almost all EABs have members with backgrounds in philosophy (including ethics) (18), medicine (18) and law (17). A majority further listed natural sciences (15), theology or ministry (15), other social sciences (11), such as psychology and economics. Less than half also have members with backgrounds in political sciences (8), politics (8), industry (6) and public administration (5).

¹¹ Many EABs do provide lists of their members and usually their titles and professional affiliations, but it is difficult to discern when these are associated with a particular background in ethics.

¹² The council further states that its terms of reference do not require it to adopt the same ethical framework or set of principles in all reports, and is therefore not bound by particular schools of (moral) philosophy or approaches in bioethics.

Given that EABs tackle increasingly complex problems from a variety of viewpoints and aspects, we can expect that their membership will be multi-disciplinary in their professional background. Considering that the remit of EABs primarily focuses on the examination of ethical and moral aspects of the issues under investigation, the inclusion of philosophers with knowledge of ethical theory and other important skills such as logic, analytical thinking and argumentation, is not surprising.¹³ Members with a background in theology are probably included for similar reasons, though they have often been criticized for being too conservative and anti-progressive, just as more progressively oriented bioethicists are often criticized for serving scientific and industry interests (Fukuyama 2002; Robert 2009).¹⁴ As most issues examined by EABs have implications for (bio)medicine and healthcare, there are many members with a medical background, and it could be argued that this is also connected with the origin of many EABs as medical ethics advisory bodies.¹⁵ Along this line, the involvement of natural scientists in a majority of EABs is understandable given their knowledge of novel technologies and resulting possibilities. The existing legislation also presents an important background for policy recommendations regarding the regulation of new scientific and technological advancements, thus the inclusion of members with a background in law is present in most EABs, and is connected with their engagement in consultations and hearings regarding legislation. Other social science backgrounds can provide additional (empirical) data on the societal aspects and perceptions regarding the investigated issues, as well as knowledge regarding institutional and procedural matters in the policymaking process.¹⁶ Experts with various disciplinary and professional backgrounds can thus elucidate different aspects of an issue (Robert 2009: 287). They can also "...provide us with a plurality of views in which ethical problems of the new and emerging sciences and technologies can be dealt with" (Scott 2009: 30).

But ultimately specific expert knowledge is not necessarily tied to a specific disciplinary or professional background, but can be acquired through the practical experience and work of the members in specific fields. As Hermeren (2009) suggests, the best recommendations of EABs result when the

¹³ Further, as Archard (2011: 120) notes, the normative recommendations of EABs have weight precisely because of the inclusion of moral philosophers in their deliberations.

¹⁴ Fukuyama (2002: 204) asserts that in discussing new technologies, "it is usually professional bioethicists who can be relied on to take the most permissive position of anyone in the room".

¹⁵ In this regard, first stage EABs, especially in Eastern Europe, have been criticized as being dominated by the conservative views of doctors and theologians, who predominate in their membership (see for example Pribac 2014).

¹⁶ A few EABs also explicitly include political representatives in their membership.

members with backgrounds in the natural sciences familiarize themselves with the ethical problems, concepts and traditions, cultural values and societal trends, and the members with backgrounds in the social sciences and humanities familiarize themselves with the science and its problems, as well as the concepts and methods used. This is in accordance with newer transdisciplinary science and policy paradigms (Mode 2, The Triple Helix, etc.) that are transcending narrow disciplinary boundaries in scientific collaboration and communication.

After a brief look at the professional backgrounds of EABs members, we turn now to the ethicists among them. As we have noted in the previous section, there are several roles or functions that ethicists as ethical experts could perform in the scope of EABs, that is, providing theoretical knowledge of ethics and (bio)ethical issues, challenging, explaining and justifying arguments, positions and decisions, framing the language and discussion, helping others with reasoning, and engaging the public. In order to explore which of these functions ethicists perform in EABs, we asked their representatives in which ways the members of the EAB who identify themselves as ethicists¹⁷ have contributed to the functioning of the institution.

A majority of EABs answered that their ethicist members identify topics that their institution should address (15), that they challenge arguments (15), help with reasoning (15), and frame language and discussion (13), followed by informing the institution about academic work within ethics (9). Less than a quarter of the EABs answered that their ethicist members explain decisions (5), justify and defend the decisions of the institution (5), provide legal advice (5), represent “the public’s” values (5), and engage the public in debate (4).

The challenges that advances in science and technology present for society are usually first tackled in the academic debate before they are picked up as subjects for EAB scrutiny. Scholars who debate such issues are often social scientists and philosophers who could be said to engage in bioethics (see for example Agar 2004; Fukuyama 2002; Harris 1998; Hughes 2004). They are usually the ones who introduce the topics into the wider scientific and expert community and eventually the public. In this regard, it would make sense that they identify salient bioethical topics for the EABs to address, as well as inform the institution about academic work in ethics, since much of it is performed in the scope of moral philosophy and academic bioethics.

¹⁷ Since ethicists are not necessarily defined by possessing a specific disciplinary background. As an interesting exception, the French EAB stated in its response to our survey that “There are no ethicists as members of the Committee. In France we think that the bioethical questions have to be appropriated by the civil society, with lay-persons. “Specialists” in bioethics raise the problem of the kind of relationship between bioethics and democracy.” This might be connected with a strong and well-developed civil society sphere in France.

The ethicists in most EABs also perform the critical and supporting role of (bio)ethics, in challenging the arguments and framing the language and discussion, as well as supporting other members in their reasoning. Such skills are often taught in the scope of philosophy. Ethicists in a smaller number of EABs acted as expert public relations persons, defending and justifying the EABs decisions and recommendations. Further, ethicists provide legal advice only in a few EABs, and given the membership background discussed above, such advice seems to be mostly left to members with a background in law. Finally, few EABs mentioned ethicists in the function of representing or engaging the public, which is also connected with the fact that the mechanisms for engaging the public are mostly nonexistent, and present only in a handful of third stage EABs, such as the German Ethics Council, the Hellenic National Bioethics Commission and the Nuffield Council on Bioethics.¹⁸ Although engaging the public in debates and decision-making on important (bioethical) issues of public interest is being increasingly emphasized by policy initiatives, there is still much work to be done in this regard.

As criticisms of both serving the interests of science and industry and relying on (conservative) dogmatic ideologies have been put forth against (bio)ethicists, we asked the EABs whether they see the contribution of their ethicist members as constructive or as primarily representing moral boundaries and limits. A little more than half (12) of the EABs answered the question, practically all stating that they see the contribution of ethicists as constructive and positive. The Cyprus EAB further added that their contributions protect human rights and dignity while simultaneously facilitating biomedical and clinical research, the Italian EAB that they are constructive given the attention they draw to bioethical issues and the positive action they suggest, even when they express opposite positions. The Spanish EAB also added that moral boundaries come only from the representatives of catholic orthodoxy. Only the Norwegian Biotechnology Advisory Board answered that they can be both constructive and negative. Judging from the answers, the EABs as institutions generally see the contribution of their ethicist members as constructive, although the issue does seem to be at least somewhat problematic, given that only about half of the respondents answered the question.

Knowledge and expertise in the field of ethics is often perceived as different from that of other experts, being softer and more subjective, concerned with values rather than facts, as some critics of ethics expertise have pointed out. In this regard we finally asked the representatives of EABs how they feel inputs from ethics work alongside inputs from other disciplines. A majority

¹⁸ These employ various public engagement mechanisms, such as public consultations, deliberative workshops, online discourse projects and educational seminars.

(13) responded that ethics complements the inputs from other disciplines, for example, by providing different views that can be combined. A little less than half (7) responded that ethics supports the inputs from other disciplines, for example by helping to explain or justify them, and 2 responded that ethics conflicts with other views, while the Norwegian Biotechnology Advisory Board answered that the answer varies from case to case. In this regard, we can see that EABs generally see ethics as complementing or supporting other disciplines, which is consistent with the roles of ethicist members most often performed in EABs.

5. Conclusion

One of the characteristics of modern (bio)ethics is its “empirical” and “policy” turn, which, together with its rise and spread, led to the formation of institutions that were given the remit to provide political decision-makers with ethical advice. In Europe, this type of institutions is primarily represented in modern (national) Ethical Advisory Bodies, which examine various ethical, legal and societal aspects of contentious developments in the new and emerging sciences and technologies. Although some critics warn that giving too much attention to the “empirical” and “policy” side of bioethics and too little to traditional philosophical reflexivity on basic (bio)ethical tenets and principles will lead to losing sight of what is most important in (bio)ethics, there is no doubt that this practical “revolution” has already occurred. The ethical scrutiny and recommendations produced by EABs have become a key mechanism in the legitimization of contested sociopolitical decisions regarding the developmental trajectories and impacts of scientific and technological innovations.

In our article, we have attempted to provide better insights into the nature and role of ethical expertise and ethicists in EABs. Namely, in the context of the “empirical” and “policy” turn in bioethics, we are faced with such questions as what competences should an (bio)ethicist possess, is there such a thing as ethical expertise, what roles and functions do (bio)ethics and (bio)ethicists perform in EABs, how do they relate to other disciplinary perspectives, and what is their contribution in such a multi-professional and multi-disciplinary environment? In this way we identify five competences of (bio)ethicists, that is, knowledge of ethics and (bio)ethical issues, the ability to challenge, explain and justify arguments, positions and decisions, a feeling for framing the language and discussion, and skills to help others with reasoning and engaging the public. We further conclude that (bio)ethicists can be seen as being experts in ethics in this regard, but should not be seen as moral experts in the sense of possessing a greater moral authority through a

privileged access to truth in relation to other experts. Taking into account the fact that the memberships of EABs in most European countries are composed of diverse experts, we focused our empirical investigation on the relation between ethicists and experts of other disciplinary background, as well as their role and function in such environments. As we have tried to point out, there is a lot of discussion of whether there is such a thing as an (authoritative) ethical expert, what makes them one, and what their role in regard to other experts and expertise should be. Our empirical research among European national EABs showed that the criteria to include ethicists in the membership structure of EABs are often not explicitly mentioned. The professional backgrounds of members are usually dominated by philosophy, medicine and law, as well as the natural sciences and theology. Considering that the remit of EABs is primarily focused on the examination of ethical and moral aspects of the new and emerging sciences and technologies, it is not surprising that many EABs confirm the active role of their ethicist members. In most EABs, they identify topics that their institution should address, and perform the critical and supporting role of (bio)ethics, in challenging the arguments and framing the language and discussion, as well as supporting other members in their reasoning. And what may be most interesting, considering the frequent presence of ideological “trench warfare” in modern bioethical issues, the EABs that responded to the question assessed the contributions of their ethicist members as generally constructive and positive. While we have attempted to provide an overall picture of the perception of such issues in European national EABs, deeper insights into the role of ethicists members in individual EABs would demand further in-depth case studies employing especially personal interviews, which would not remain focused solely on the “large picture” or the “front stage” of EABs, but would also take a look “behind the scenes”.

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