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Bioethics: Negotiation of Fundamental Differences in Russian and US Curricula

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Abstract

The primary purpose of the research reported in this article is to propose a methodological approach to the teaching of bioethics in Russia. The American practice of teaching bioethics was chosen as a reference considering their extensive experience of teaching bioethics in medical universities. The conceptual information process model was used to perform interdisciplinary research on the problem. The conceptual information process model enabled us to adopt the American bioethics curriculum in accordance with Russian traditions of medical education. A new bioethics curriculum is proposed based on this model. The information process model not only reveals the mechanism of social self-organization, but also gives a methodological "clue" for creating a cross-disciplinary curriculum. This curriculum will permit researchers to access, negotiate and overcome fundamental differences between Russia and the USA in the teaching of bioethics.

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1. Introduction

The term "bioethics" was originally proposed by the American doctor Van Rensselaer Potter in the book "Bioethics: bridge to the future" (1971) to refer to a particular variant of environmental ethics. Potter's main idea was to unite the efforts of humanitarian and biological scientists to save human life, and to account for the long-term consequences of scientific and technical progress (especially in the area of biomedical technologies).

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The term "bioethics," however, is more often used in the sense that was suggested by the American obstetrician and embryologist Andrew Hellegers. He used the term "bioethics" to refer to the interdisciplinary research on moral problems in biomedicine, primarily associated with the need to protect the dignity and rights of patients.

Today bioethics is considered as an interdisciplinary study of ethical, philosophical and anthropological problems arising in connection with the progress of biomedical science and the introduction of new technologies in public health practice. There are at least two factors that led to the emergence of American bioethics. First, the socio-political events of the 1960s and 1970s, such as the social movement for the civil rights of African Americans, debates about the Vietnam war, the campaigns for the rights of women, Native Americans, and physically or mentally disabled people. Secondly, the growing changes in medical science and technology and their "mixed results". For example, the widespread use of artificial life support systems that can save the life of one patient, but only prolong the process of dying for another patient. These cases, as well as innovative therapies, in particular organ transplants, have created new dilemmas for doctors and patients.

The main difference between Russian and American bioethics is that, unlike America, the birth of bioethics in Russia was not due to the public exposure of ethically controversial experiments conducted by the government. Russian medical ethics and medical practice are based on a paternalistic approach, which is influenced by Orthodox tradition.

The 51st General Assembly of the World Medical Association decided that the course "medical ethics and human rights" (i.e. bioethics) should be compulsory in the curricula of medical schools worldwide. In Russia bioethics has been included in the program of obligatory medical education since 2000.

Despite a clear mandate to educators, there are differing approaches to, and in particular, how and where bioethics is positioned in training programmes, underpinning philosophies, and optimal modes of assessment. This paper explores American practice in teaching bioethics and analyzes the barriers to the introduction of new bioethical training based on international standards into the practice of medical education in Russia.

There are two reasons we should pay attention to this problem. First, Russian bioethicists should be trained in accordance with accepted principles developed by international medical organizations. Second, current methodological approaches are influenced by our historical and social background. In this paper, our research team proposes a systematic approach to the teaching of bioethics in Russia.

2. Background to Russian Higher Education

2.1. Humanities Curriculum

The traditional influences on Russian higher education can be described in four categories.

The Russian cultural tradition is to change the purpose of a particular activity but not its structural format. The educational infrastructure is explicitly stipulated. A characteristic example is the humanities curriculum of Russian higher education. During the Soviet period there was a strict order and content for teaching the humanities, even for students of different fields of education. First-year students were taught "History of the Communist Party of the Soviet Union" ("History of the CPSU"). Second-year students studied philosophy; but the name of the course was "Dialectical and Historical Materialism". Third-year students were taught "Political economy" and in their final year students received an education in "Scientific Atheism" and "Scientific Communism". When the USSR collapsed, the state ideology changed. This influenced the program of ethics education in Russian schools. Although the content of compulsory educational courses was altered, the order in which they were taught remained the same. Nowadays, the course "History of CPSU" has been replaced with "Russian History " and "Cultural Studies". The substitute courses for "Dialectical and Historical Materialism", "Political Economy" and "Scientific Communism" are, respectively,"Philosophy"; "Economic Theory", and "Sociology". It is now apparent that there are no methodological explanations for such a curriculum. The only explanation is a cultural tradition of changing the content of subjects without changing their structure.

We would like to highlight another situation which affects the humanitarian education of Russian students. Education during the Soviet era was aimed at training young people according to the "Moral Codes of Communism Constructors". Of course, we do not regret that Russian education has lost this primary aim. We do

regret, however, that modern Russian education has no clear-cut objectives, and that as a consequence, Russian students may waste their time studying irrelevant, compulsory subjects.

2.2. State Regulations

All university education in Russia is regulated by the State. There are state regulations that determine the duration of education, consistency of school subjects, the content of every discipline and evaluation format. The state also enumerates other compulsory components within a curriculum. For example, there is an additional list of subjects which must be incorporated across a variety of degree programs. It is mandatory that "Russian History ", "Philosophy", and "Foreign Language" are included in the university curriculum. In order to conform to the state standards, "Russian History" must be taught during the first year, and "Philosophy" during the second year of study. These standards give strict instructions concerning the number of lectures, seminars, or laboratory hours for every academic discipline. The content of a discipline is also determined. A university cannot choose whether to teach these lectures or not. Universities must teach these courses because state educational standards are prescribed by law.

2.3. Absence of Theoretical Constructs

Until now, bioethics has not been a part of Russian education tradition. This is a new branch of applied ethics and experiences a different set of difficulties. The essence of these difficulties is the absence of generalizable theoretical constructs. In other words, this absence underlies many of the perceived "unsolved problems" of bioethics. Scholars and society play an essential role by discussing the possible approaches to solving these problems. There are many opposing views, but none of them can be seen as providing a definitive or universal solution. Such "unsolved problems" appear to be associated with the moral values of different socio-cultural systems. Moreover, the differences in cultural values are the result of diverse and fundamental societal moral standards. The explanation for these differences can be found within the intellectual foundations of local socio-cultural systems. These cognitive foundations are so deeply ingrained that globalization has not yet influenced them. If one does not account for the intellectual and psychological foundations of social systems, it becomes impossible to find a solution to bioethical controversies. The conscious and subconscious foundations influence and determine cultural stereotypes, attitudes and responses to time, space, love, life, death, happiness, work, wealth, good, knowledge and law. In cultures where traditions are more valuable than innovations, or the past is more important than the future or present, or where societal interests are preferred over personal values and interests, then a culture relieves the individual of responsibility (and perhaps the consequences) of actions based on choice (and autonomy). Thus, if a person is ill, poor or unhappy, he blames all his troubles on somebody else. He never considers himself to be a cause of his troubles. Moreover, the person is relieved of (individual) responsibility despite his or her social role. This has significant implications for our understanding of the physician/patient relationship. So, in cultures with such moral conditioning the approach to solving basic bioethical problems will be fundamentally different from a society which emphasizes individual responsibility.

2.4. Teaching Methods

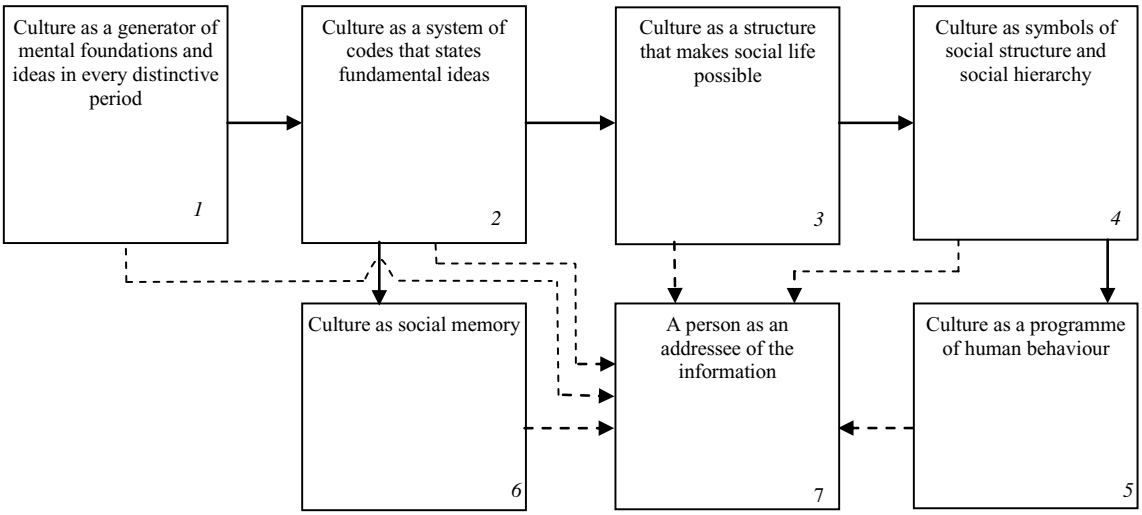
For teaching to be effective, the educator must find the most appropriate method of translating scientific content into educational knowledge. Teaching methods serve as a "bridge" between educators on the one side and the scientific world and institutions on the other side. The anchorages for these "bridges" are the scientific foundations accepted by specialists within disciplines. As was mentioned above, bioethics has not finalized its foundations. Moreover, teachers of bioethics already belong to different fields of science: medicine, ethics, philosophy, law, biology, and sociology. So, bioethics is truly a multidisciplinary field and its "bridge" should be built on piers from these different fields of science. In other words, the bioethics "bridge" should connect not only the broader institutions of science and education, but different fields within scientific disciplines. Due to the absence of good historical precedents, this is likely to be a very challenging task.

3. How to Introduce American Bioethics into Russian University Education

We have summarized the practical barriers to introducing bioethics into Russian university education as follows: (a) the mandated order of the curriculum, (b) the list of compulsory humanities disciplines where bioethics is a small part, (c) the uncertain theoretical foundations of bioethics, and (d) the inherent challenges of creating a multi-disciplinary bioethics course. Is there a way to overcome all these problems? At first sight it seems that it is easier for a camel to go through the eye of a needle than to find the answer. We argue the solution depends on the size of "the eye". University teachers in Russia are allowed to organize a third of the course content. They can modify the main curriculum with approval from special committees which control all institutional curricula. We believe that if a third of every humanities discipline (e.g.: cultural studies, history, philosophy and sociology) included bioethics, an excellent foundation for our medical students would be provided. We propose dividing bioethics into several parts and using this pilot curriculum as a methodological experiment. Such an experiment would not be successful without physician participation. Although special training will be required for departments of anatomy, physiology, and pharmacology, this proposal does not conflict with state curricula requirements. This then becomes an organizational task. The first step is to analyze where different, obligatory humanities subjects intersect and overlap.

The conceptual model created by I.V. Melik-Haikazyan provides an opportunity to solve this task. (See note 3, p.51) Although the theoretical basis of the model is beyond the scope of this article, we shall discuss the main content and perspectives of the model.

Picture 1 shows the conceptual model of information processes in socio-cultural systems. The stages of the information process are shown in blocks *(1-6)*.

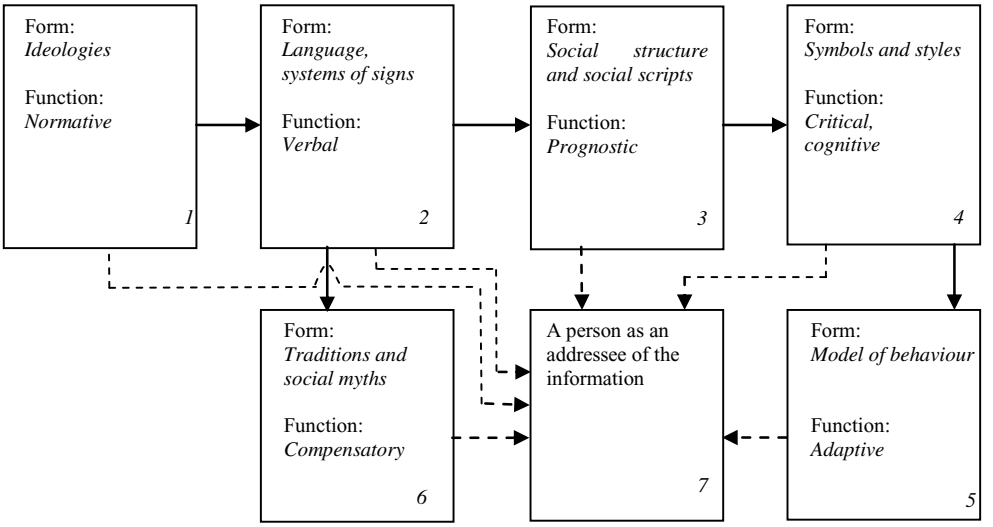


Picture 1. Stages of the information process in socio-cultural systems (dotted lines illustrate the directions of influence upon a person).

The content of the model can be demonstrated with the following example. Every religious system was created on the basis of certain ideas of good, evil, suffering and redemption. The ideals of a happy life *(block 1)* were recorded in numerous texts (*block 2*) including the Torah, Bible, and Koran. These texts determined not only ritual ethics but they also structured, organized and controlled social life *(block 3).* The new structure required symbolic embodiment. To satisfy this, symbols were created and semantic upheaval in symbolism occurred *(block 4).*

Historical and theological systems taught that one of society's main roles was not only to teach people how to live happily but also the expectations for living within the community. In other words, the main task of society was to create and define an ideal model of personal behavior *(block 5).* In reality, new paradigms penetrate social life very slowly. Cultures need time for ideas to assimilate and become a new socio-cultural reality. Additional time is needed for these social concepts to influence, and become integrated into, the stages of social functions. The flexibility of socio-cultural mechanisms influences the rate and potential embodiment of new moral behavior in daily life. (See notes 4, 5).

Thus, the normative function of culture forms its ideology *(block 1);* the verbal function results in "new



Picture 2. Impacts of system functions and forms of culture upon a person.

language"*(block 2);* the prognostic function creates social scripts and scenarios *(block 3);* and the critical function constitutes new analytical thought. *(Block 4).* A subsequent model of behavior is a result of cultural adaptation *(block 5).* Clearly, societal evolution of such complexity takes time.

We analyzed the content of humanities disciplines in Russian medical universities and contrasted it with our conceptual model. The philosophy curriculum describes the main stages of intellectual history and illustrates the basic perspectives (*block 1)* of the model. The "Cultural Studies" course reveals correlations between *blocks 2, 3 and 4*. The "Sociology" course illustrates the processes of *block 3* of the model. The "Russian History " exemplifies *blocks 1* and *6*. Moreover, all of these disciplines describe theories and conceptual approaches to different characteristics of human behavior. Picture 1 demonstrates the correlation between the monotypic name of a person and the investigator's point of view (shown by the dotted lines). For instance, a person is seen as Homo totus in *blocks 1-7,* Homo loquens (*blocks 2-7*), Homo soziologikus (*blocks 3-7*), and Homo ludens (*blocks 5-7*). Nowadays, a person is seen as Homo zwischens, i.e. a hesitating (unsteady) person (from the German word "zwischen"). This name reflects the many theoretical impacts upon a person. Rapid changes in the life of modern man make him feel disoriented and uncertain. This may cause ethical ambiguity and prevent the introduction of new technologies.

The model discussed unites all of the humanitarian disciplines of medical education in Russia. All these disciplines are oriented toward giving students knowledge about our cultural world. Although this knowledge and training is of a very high standard, it does not provide a mechanism for cross-cultural analysis and applied ethics.

Medical school education provides an efficient mechanism to transmit content. Humanities education provides a mechanism to understand context. Bioethics education is not only a potential mechanism to teach pragmatic approaches to different societal issues, but also a cognitive methodology for using a hierarchical approach to context and solutions.

Bioethics considers the individual in his or her entirety. It trains future doctors to be tolerant towards people of different social statuses and cultural environments. It also teaches us to respect people with different models of behavior. Thus, the course in bioethics is able to integrate humanitarian knowledge into medical education. This education potentially provides an opportunity to analyze the origins of problems in medical practice which might be explained by ethical restrictions, cultural justifications, and ethnic superstitions. Bioethical principles are an elegant and reproducible mechanism for solving problematic situations.

3. Conclusion

The model discussed addresses the following problems: First it helps to determine the extent and impact of socio-cultural dynamics upon a person. Most concepts and theories accentuate the definite societal influence (dotted lines, *pictures 1* and *2*). This model allows us to perform cross-disciplinary research on the problem. Second, the model can be used to analyze corresponding functions of a culture based on its cultural framework. Third, the model can be used to form new curricula about humanity and society in different disciplines. These three possibilities are very important for bioethics.

The model becomes clear if you imagine yourself in *block 7*. You may feel the influence of cultural standards and codes, social scripts, symbols and styles, and definite models of behavior. Every cultural function obligates us to do certain things in the present and future. Only our past, which is unchangeable, gives us opportunities to compensate for our failures and mistakes with the subjunctive mood. If we look at reality from the position of *block 7*, we will see all the cultural forms. Although reality can be viewed as a united system, our vision is limited to fragments. The informational process model lets us see it as a whole.

We would like to point out that the model not only reveals the mechanism of social self-organization but also gives a methodological "lead" for creating a cross-disciplinary curriculum. This curriculum will permit us to assess, negotiate and modulate fundamental differences in teaching bioethics in Russia and the USA. We clearly understand that it is only an initial overview of our academic analysis. We also understand that the success of our joint project requires further detailed methodological research.

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