

BOOK REVIEWS

Bearing Witness: Religious Meaning in Bioethics

Courtney S. Campbell, Cascade Books, 2019.
ISBN 978-1-5326-6273-7, 342 pages, Paperback, \$36.00

Where does religion fit into modern bioethical discourse? According to sociologist Max Weber, the human mind has a “metaphysical need” to seek order, coherence, and meaning, a need to understand ultimate questions about our nature, purpose, and destiny.¹ Yet modern bioethics operates with no presumptive content of the good and eschews “thick” discourse, relying instead on the procedural grammar of the market, contracts, and limited democracy. Any metaphysical language deemed necessary for moral insight and meaning, embedded in the practices and values of religious communities, is ab initio ruled out of the public sphere. It is relegated to “private life” and therefore extraneous and irrelevant to secular ethics. “Rational” ethical arguments dispense with religious viewpoints as a moral resource. Mid-level principlism has arisen from these ashes as the ruling paradigm, seeking “common morality” above the particularism of cultural, ethical, and religious differences.

Early religious ethicists may have contributed to this vacuous situation. With some exceptions, most entering the public practice of ethics left their distinctive spiritual insights at the door and talked about deontology versus consequentialism, autonomy versus paternalism, and justice versus utility, just like their secular philosophical counterparts. As Stanley Hauerwas has observed, “If what is said theologically is but a confirmation of what we can know on other grounds or can be said more clearly in non-theological language, then why bother saying it theologically at all?”²

Courtney S. Campbell enters this areligious milieu in his book *Bearing Witness: Religious Meanings in Bioethics*, in which he defends faith-based perspectives for bioethics. He argues that religious communities of moral discourse and practice are essential rather than peripheral contexts for “envisioning, interpreting, and enacting” the ideas central to a shared understanding of health and medicine (p. ix). Though he writes from his own Latter-Day Saints perspective, Campbell’s argument is broader than any particular spiritual tradition. On his view, religious traditions “bear witness” to bioethics, with constructive insights about the nature of the human person and the stories we tell in communities. The moral mission of medicine is a calling and vocation dedicated to healing. Spiritual faith informs the universal quest for meaning in life, especially in suffering and mortality.

Paul J. Hoehner, review of *Bearing Witness: Religious Meaning in Bioethics*, by Courtney S. Campbell, *Ethics & Medicine* 37, no. 1 (2021): 60–62.

Campbell's work is a welcome departure from the myopic focus of bioethics literature on quandaries, patient rights, and applied principlism. Instead, *Bearing Witness* is a bird's-eye perspective on the overall nature of medicine. It is first and foremost a healing profession, and religious views can provide meaning, witness, and presence; these are necessary complements to merely technical roles in healthcare.

Two concepts are central to Campbell's thesis. The first is to define the boundaries of human nature in terms of the image *imago Dei* (ch. 3). The second is a professional covenantal ethic, an alternative to secular social contract theory drawn from liberal political philosophy (ch. 6).

Because we experience the divine nature as relational, persons bear the divine image through their relationships (p. 61). Persons also reflect the divine in their created naturalness and inherent limitations. Bearing and integrating the divine and the natural is a moral and existential challenge, especially for healthcare. In much of the book, Campbell develops this moral anthropology as it informs many of his ethical perspectives. For example, the relational aspect of the *imago Dei* provides an alternative to rights derived from social contract theory, which itself was a reaction to perceived paternalism in the early years of bioethics. "Rights" language, according to Campbell, represents a rupture, an adversarial relationship characterizing much of medical consumerism. Furthermore, the obsession with libertarian patient autonomy excludes any concept of relational responsibility or accountability. The *imago Dei*, on the other hand, provides a context for mutuality, reciprocity, partnerships, and trust, all of which should be central to the patient-physician relationship.

The relational aspect of human nature also belies the soul of healthcare as merely transactional or contractual. Campbell describes a different model under the concept of "covenant," a frame more appropriate to the medical profession and its roots in the Hippocratic tradition, and more central to the theological and moral witness of biblical traditions. A covenant is more than a mere contract. It is a relationship-initiating gift that results in a response and mutual duties, which thereby directs moral attention to the transformation of relationships.

Narratives and stories point to the relational in ethical discourse, which Campbell weaves throughout his book, with personal vignettes and an extended examination of the parable of the Good Samaritan (ch. 4). Such stories, especially those embodied in religious communities, can awaken the moral imagination in new directions. In this sense, Campbell seems to be channeling the spirit of Stanley Hauerwas.

These are all huge and sometimes nebulous concepts, and Campbell fleshes out their implications for healthcare ethics, such as "bearing witness" to suffering, end-of-life care, and professionalism in medicine. The book's strength is how it avoids portraying religion's public role in bioethics as a mere proxy for the "culture wars" between political liberalism and conservative religion. Instead, he opens renewed vistas for the integration of the transcendent into public and professional discourse through the insights of religious communities.

The strength of this book is also one of its weaknesses. Focusing on the "big picture," it cannot examine specific moral issues in detail. Many unanswered questions remain about implementing this vision in our current polarized public discourse. In searching for common ground, Campbell seems to accommodate religious convictions to the public square more than

many faith-based voices would find acceptable. For example, while presenting a solid argument against seeing the hastening of death as a new goal for medicine, he is critical of conservative wholesale dismissals of physician-assisted dying.

In the final chapter on rights of conscience, Campbell attempts a compromise between two roles for physicians. On the one hand, some see doctors as value-free technicians, where patient autonomy always rules. On the other hand, some see physicians as absolutists who must refuse to offer legal interventions such as abortion and physician-assisted suicide and will not provide referrals that might make them morally complicit. However, his “context-dependent” (p. 306) justifiability of conscientious refusal may represent too much compromise. He does not consider actions that many consider morally illicit under any circumstances.

These reservations aside, Campbell’s vision is a welcome introduction of religious discourse (back) into the world of bioethics. *Bearing Witness* attempts to be prophetic to an areligious culture and provides a moral compass to a value-neutral profession. Whether the compass points true north or is prophetic enough must be left for the reader and individual religious communities to judge.

References

1. Steven Seidman, “Modernity, Meaning, and Cultural Pessimism in Max Weber,” *Sociological Analysis* 44, no. 4 (1983): 267–278.
2. Stanley Hauerwas, “On Keeping Theological Ethics Theological,” in *The Hauerwas Reader*, ed. John Berkman and Michael Cartwright (Durham: Duke University Press, 2001), 53.

Reviewed by Paul J. Hoehner, MD, MATS, PhD, Clinical Associate, Department of Anesthesiology and Perioperative Medicine, Dartmouth-Hitchcock Medical Center.