

# Towards A Global BioPolicy?

## The UNESCO Universal Declaration On Bioethics & Human Rights In Perspective

GLOBAL PERSPECTIVES ON BIOPOLICY SYMPOSIUM SERIES 2007

### Symposium Report

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Centre for Bioethics & Public Policy

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# Introduction

In October 2005, the General Conference of the United Nations Educational, Scientific and Cultural Organisation (UNESCO) adopted by acclamation the *Universal Declaration on Bioethics and Human Rights* (UDBHR). For the first time in the history of bioethics, Member States committed themselves and the international community to respect and apply the fundamental principles of bioethics set forth within a single text. In dealing with ethical issues raised by medicine, life sciences and associated technologies as applied to human beings, the Declaration anchors the principles it endorses in the rules that govern respect for human dignity, human rights and fundamental freedoms.

On 16<sup>th</sup> March 2007, BioCentre: Centre for Bioethics & Public Policy hosted a symposium on the UDBHR. The event was the first time the declaration had been publicly discussed in the UK and brought together experts from a broad spectrum of disciplines and views. Held at the Royal Society of Medicine, London, the presenters and audience engaged in an afternoon of stimulating dialogue on the appropriate global regulation of emerging technologies.

Professor Nigel M. de. S. Cameron, Executive Chairman of BioCentre, opened the symposium with some introductory remarks before introducing Professor Solbakk. BioCentre: The Centre for Bioethics & Public Policy has existed for more than 20 years. In the past, BioCentre has hosted a conference every year but over the next few months will be 'increasing the pace' by hosting a number of symposia. This symposium was the first in the "Global Perspectives on BioPolicy" series with particular focus on the UDBHR. Professor Cameron noted that the UDBHR is the first global instrument on bioethics and as a result provides interesting connections and contrasts with the European Convention on Human Rights and Bioethics, an issue that would be addressed by one of the speakers during the course of the afternoon.

Professor Jan Helge Solbakk, Director of the Bioethics Section at UNESCO, went on to deliver the keynote address on the UDBHR. Responding to Professor Solbakk's speech with the UK perspective on the Declaration were two leading British experts: Dr. Harald Schmidt, Assistant Director of the Nuffield Council on Bioethics and Dr. Calum MacKellar, Director of Research for the Scottish Council on Human Bioethics. An engaging and lively question and answer session followed, chaired by Professor Cameron and consisting of all three speakers, which gave the audience opportunity to dialogue further with the speakers on issues that had been covered during the course of the afternoon. Issues discussed ranged from Asian perspectives on global biopolicy to the legal effectiveness of the UDBHR. The symposium closed with a drinks reception.

# The UNESCO Universal Declaration On Bioethics & Human Rights

- Professor Jan Helge Solbakk, Director of Bioethics Section, UNESCO

Professor Solbakk commenced his presentation by outlining some of the historical background to the United Nations Educational, Scientific and Cultural Organisation (UNESCO). The UNESCO Bioethics Programme was created in 1993 and belongs to the Ethics of Science and Technology Programme, one of the five principal priorities of UNESCO.

Before looking at specific aspects of the declaration, Solbakk laid out four preambles which sought to address specific issues related to a declaration namely; what is a declaration; what characterises the UDBHR; what makes the UDBHR special and the role of UNESCO in the declaration.

The defining nature of a declaration is that it is a drafted and adopted by individuals, such as in a marriage declaration, but can also include groups of individuals such as in the case of interest groups, non governmental organisations, government organisations and inter-governmental organisations. From a legal perspective, a declaration is not binding, tending to take on the form of a set of guidelines and yet remains distinctly different from a convention. For example, the Helsinki Declaration and the Council for International Organizations of Medical Sciences' (CIOMS) International Ethical Guidelines for Biomedical Research Involving Human Subjects are - *morally* speaking - binding for members of WMA and CIOMS, while the European Council's Convention on Human Rights and Biomedicine is legally binding for those member states that have adopted it. Addressing the characteristics of the declaration, Professor Solbakk drew attention to the declaration's five chapters that cover general terms, principles, application of principles, promotion and final provisions. The fifteen articles of the declaration address morally binding principles and cover such topics as human dignity and human rights, autonomy and individual responsibility, equality, justice and equity and protection of future generations.

The defining characteristic of the UDBHR is the fact that it is the first international ethics instrument that seeks to establish a link between bioethics and human rights. Secondly, it is the first normative instrument that lays out a global bioethics standard that can be adopted by the international community. Thirdly, it is the first international ethics instrument that UN states have adopted. 192 members states adopted the Declaration in 2003, which serves as an important point for consideration when critiquing and analysing the declaration. Fourthly, the instrument is the first that UN states have committed themselves to implement in their own countries, as laid out in article (22) of the declaration.

Concerning these points, Professor Solbakk contrasted the declaration with the Declaration of Helsinki, a set of ethical principles for the medical community regarding human experimentation developed by the World Medical Association. This had a tremendous influence on normative legislative work on biomedical research worldwide. Whilst the UDBHR is not strictly speaking legally binding, it is closer to legislation than the Declaration of Helsinki. Therefore, the Declaration of Helsinki could be termed "soft law" and the UDBHR termed "harder than soft law" due to the fact that it is based more on an international binding legal framework.

Concerning the role of UNESCO in the implementation of the UDBHR, Professor Solbakk described the work and function of the three bodies which the Section for Bioethics provide secretariat support to. These bodies are the International Bioethics Committee (IBC), the Intergovernmental Bioethics Committee (IGBC) and the Interagency Committee (IAC).

There are numerous challenges that UNESCO is presented with in relation to the UDBHR. Firstly, the ethics infrastructure and how UNESCO can contribute to ethics teaching and build up the ethics expertise as well as the promotion of international and national co-operation. Furthermore, there is the challenge of creating a legal and regulatory framework for a declaration that is seeking to be global in nature whilst still recognising national distinctions. The interplay of ethics and religions also needs careful consideration. Whilst modernity spoke of the role of religion fading away, in a post-modern culture religion is an increasing force and as such needs to be incorporated and considered in any conversation concerning ethics. It is also important to differentiate methods and strategies of applying the UDBHR according to widely varying national contexts. Promoting bioethics in the UK is different to promoting bioethics in Malawi for example, due to the fact that in the UK there are existing infrastructures to draw upon. Moreover, there is the challenge of making ethicists interact with policy makers more effectively. Professor Solbakk cited the example of US President Jimmy Carter who made bioethics a policy issue, at a time when no other politician considered it a serious policy issue. In contrast, bioethics today has become a very important political issue and is one of the fundamental issues of the day.

Professor Solbakk then addressed the various ways in which UNESCO seeks to promote the Declaration:

### **A) Dissemination**

This involves the translation of the Declaration into various languages as well as the development of related publications.

### **B) Promotion**

Participating in various conferences around the world, discussing the Declaration and promoting it. Professor Solbakk noted that this was the first time the Declaration was being discussed in the UK and highlighted this as particularly important. A written declaration if not promoted or discussed is as dead as the paper it is written on.

### **C) Application**

A strong focus within the division is the promotion of capacity building. Three main conduits through which this occurs are as follows:

- Global Ethics Observatory (GEObs)
- Ethics Education Program (EEP)
- Assisting Bioethics Committees (ABC)

### **Global Ethics Observatory (GEObs)**

The GEObs is a collection of three databases and aims to collect relevant information relating to bioethics. The first database is a "Who's Who" in ethics which currently has 824 experts listed. The second database lists ethics institutions and the third details ethic

teaching programmes which are available around the world. In all three cases, specific criteria have been formulated in order to allow data to be collated which can be fairly and accurately compared.

The collection was released in December 2005 and is freely accessible. All data is translated into the official languages of UNESCO which are Arabic, Chinese, English, French, Russian and Spanish.

Plans are being developed for a fourth database which will focus on ethics related legislation and guidelines.

### ***Ethics Education Program (EEP)***

The main activities of the ethics education program are the mapping of ethics experts and the sampling of teaching programs around the world. A series of regional expert meetings are organised to help facilitate such activities. A standardised form is used in order to make comparisons between the various teaching programs in such areas as course objectives, topics covered, teaching hours etc., with the overarching aim of providing a facility which allows individuals to learn what exists in their own countries concerning ethics teaching, as well as map what is happening on an international scale.

Moreover, the EEP is responsible for the formation of ad hoc advisory ethics committees. To date, many countries have their own national bioethics committees or research ethics committees. It is a known fact that many large pharmaceutical companies are shifting their operational bases to countries that are lacking such institutions (such as in South America and Africa) in order to avoid having their operations heavily scrutinised and regulated. Therefore, the EEP seeks to fulfil an important role in helping member states to establish national bioethics committees so appropriate systems of control are established and implemented in the respective countries. The aim is to try and formulate procedures and a core curriculum that is not only based on but also promotes the UDBHR.

The issue of what precisely is ethics and how it should be taught is also addressed by the EEP. The fact that ethics can be understood from a wide spectrum of perspectives presents certain challenges. What kind of teaching is it? What kind of learning is it? Is it a case of specifying certain principles, balancing principles, learning principles or applying certain principles? This being the case is it at all possible to create a universal method of teaching ethics or does cultural diversity have an intrinsic part in the development of such a project? As a result, the EEP is also involved with developing ethics teacher training courses, the objectives of which are to learn how to teach ethics effectively and to empower a new generation of ethics teachers. Various pilot courses are being undertaken in order to test the method and approach currently being devised by UNESCO.

Furthermore, UNESCO produces various educational resources to be used for free by member states. This is due to the fact that some member states do not have the financial resources available to subscribe to journals and other academic sources in which to build up a 'pool' of educational resources.

The EEP therefore seeks to synthesis and summarise the workings of the committee with the aim of developing "more and better ethics teaching programs". This is a far more complex task than how it first sounds, as it involves stating the minimum standards for an

ethics course and in turns requires agreement on the approach and methodology that is going to be adopted. As such it requires careful diplomacy and handling.

### ***The Assisting Bioethics Committees (ABC)***

The ABC is charged with responsibility for the identification of data and data collection concerning existing committees, providing practical information and technical support.

### **D) Elaboration**

One of the major roles of the IBC is to identify further topics that should be addressed on an ongoing basis. Two working groups exist at present that are looking at the issues of informed consent and social responsibility and health. Reports from both groups will be presented at a conference in Nairobi 19-20 July 2007.

To end, Professor Solbakk outlined how the division operates. Using a framework consisting of standards, capacity and awareness, UNESCO seeks to establish ethical standards through declarations, capacity building through ethics committees, legislation, guidelines, and ethics teaching and broadening awareness through publications, GEO databases and rotating conferences. The desired results are that platforms are created for ethical action; intensive public debate is promoted resulting in informed public opinion. Furthermore, the establishment of (inter) national normative frameworks occurs, with the development of morally sensitized professionals and scientists, the sum total of which assists in effective policy-making. ■

# The Idea Of Human Dignity In The UNESCO Declaration

- Dr. Harald Schmidt, Assistant Director of the Nuffield Council on Bioethics

Dr. Schmidt commenced his presentation by outlining the two key perspectives that he would be bringing in his presentation, namely the Nuffield Council on Bioethics' involvement in the UDBHR and secondly, his personal thoughts on human dignity. The Nuffield Council on Bioethics responded to various points in the UDBHR and was part of the UK delegation to talks surrounding the Declaration. Dr. Schmidt wished to address three key issues. Firstly, the relationship to other guidelines, followed by the issue of whether or not the UDBHR offers general principles or specific guidance and finally, he would offer personal reflections regarding the importance of the plurality of values.

Regarding the issue of the relationship to other guidelines, Dr. Schmidt posed the question of whether or not the declaration should be considered as the “mother of all” declarations. Does the UDBHR help to resolve ambiguities within the text of an individual declaration or does it act to resolve ambiguities and conflicts between other declarations? Dr. Schmidt concluded that it is difficult to come to an agreed response to these questions at this time, as time alone will tell how the declaration is used and implemented. Similarly, time alone will also tell how compatibility is maintained between a declaration with a global remit and an individual declaration that may be updated and revised at a later date. This is an architectural problem that is applicable to any declaration, but is worth considering when looking at the UDBHR specifically, bearing in mind its global reach.

Concerning general principles, Schmidt covered the issue of what is expected from a declaration such as the UDBHR. Drawing upon his personal involvement on the UK delegation, he noted that in the early stages of development, there was the option of addressing very specific issues (such as stem cell research) or keeping to more general terms. He cited the example of an African delegate who called for a ban on homosexuality to be covered in the declaration. Such an example points to the problems that arise when drafting such a document. Where a vacuum exists surrounding guidance on a particular issue, there could be the tendency to use the opportunity of drafting a new declaration to include measures and regulations concerning that issue. This in turn can help shape and influence national legislation. Conversely, problems can equally arise when issues are addressed in a declaration, which in turn only seeks to contribute to the already burgeoning amounts of measures and regulations that already exist. In the end, the UDBHR only expresses what can be best termed as high-level principles. Where guidance is sought on particular issues, the Declaration provides guidance on how to formulate an approach to the issue. Regarding the address the issue of how to reconcile the “spirit of cultural pluralism” with regional differences, on the one hand, rigid guidelines clearly stating what is right and what is wrong could be provided, whilst on the other, certain activities could be stated as permissible and for all others a tacit response formulated.

Dr. Schmidt then proceeded to talk about his personal thoughts on the concept of ‘human dignity’ in the Declaration. Concerning the issue of human dignity, which is often used in discussions concerning Pre-Implantation Genetic Diagnosis (PGD), Pre-Natal Diagnosis (PND) and stem cell research, Dr. Schmidt was keen to point out that it is important to understand what is meant by the term. In the UDBHR, the term ‘dignity’ is referred to nine times, whilst ‘human dignity’ specifically is mentioned six times. The central article on



which to focus relating to this issue is article (2) c, which states that:

*...to promote respect for human dignity and protect human rights, by ensuring respect for the life of human beings, and fundamental freedoms, consistent with international human rights law;*

A similar reference can be found in article (22). There is a lack of clarity about its scope, especially when considering the question of whether prenatal human life has the same dignity and rights as born human beings. As such two types of ambiguity arise, namely the degree to which dignity should be respected and secondly, who's dignity does it specifically refer to - is it 'human beings', 'the life of human beings', 'human person', or the 'individual'? The broadest possible understanding of the term 'human being', is said to start from the newly formed zygote (which is recognised as being the first developmental stage of a human being), moving through to various stages of life, and even includes death, considering that it is a recognised fact that human finger nails still continue to grow three days after death. However, we can also understand the term 'human person' from a metaphysical, philosophical and legal perspective. Moreover, the term 'human dignity' seems to suggest the dignity of humanity but whether or not this is from a legal, philosophical or biological perspective is unclear. Therefore, at this stage Dr. Schmidt proposed that it is not immediately clear what is happening or what precisely is being referred to in the UDBHR concerning this point.

Upon further reflection and analysis, however, two examples can help bring clarification. In the first case of a rogue physician using healthy volunteers in a medical trial, which exposes them to high risk without their consent, articles (2)c , d, (3), (1), (5), (6) and (10) all come into play. The dignities of the individuals have not been respected due to the violation of the capacity of humans to consent. On the other hand, in the case of stem cell research, articles (2)c , d, (3), (1), (10) and (28) come into force. Embryos, as the earliest form of human life, are having their dignity violated because their life is being instrumentalised for a purpose that is not compatible with their dignity. Dr. Schmidt suggested that the first example could be termed a broad reading that we apply to dignity to all forms of human beings, whilst the second case is a narrow reading, which picks out a particular subset of entities of human beings.

Addressing the issue of clarifications, Dr. Schmidt compared and contrasted the Statements on the interpretation of specific provisions of the Declaration made by the USA, Canada and the Netherlands concerning article (2)c, submitted at the adoption of the UDBHR / UNESCO's 33rd General Assembly. The USA's statement clarified their line of argument, which is that respect for human life is at the basis of human rights more generally. Respect for human life, motivates human dignity, which in turns motivates human rights. In contrast, Canada clarified their reading of the article by stating that it interprets the article in light of national and international human rights law. The Netherlands stated that it would interpret the article in light of domestic law and international human rights law.

In seeking to resolve some of these ambiguities, Schmidt proceeded to look at article (1) of the *Universal Declaration on Human Rights (1948)*, which states that:

*'All human beings are born free and equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood. [emphasis added]*

During discussions on the formulation of the *Universal Declaration on Human Rights* (UDHR), it was debated as to whether human beings can claim their human rights on the basis that they are biological, human beings or whether they claim these rights because they have a transcendental, religious or other nature. It was eventually decided that that all religious, philosophical and political references would be omitted, consequently creating a thoroughly secular document. This was believed to have helped created a much “stronger” document by virtue of the level of consensus reached surrounding its contents. Moreover, the scope of human rights was discussed by virtue of what type of human beings would be covered by the UDHR. It was felt by South American delegates that the inclusion of the word “born” was not acceptable, as they believed life to start from the moment of conception. In response, the Chinese delegation proposed that the word “born” should be omitted entirely. In doing so, the advantage would be that the declaration could potentially cover both aspects. However, the delegates voted against this proposal. Dr. Schmidt suggested that this was due to the fact that all concerned wanted to make the document as strong as possible. A stronger basis for consensus could be reached over the fact that all born human beings do have human rights than any other interpretation. In its final form, using the UDHR it becomes more difficult to argue that all pre-natal forms of human life are bearers of human dignity, but it can still be argued nonetheless. Dr. Schmidt concluded that on this issue, the UDHR is much clearer than the UDBHR. As a result, a broad reading of the UDBHR concerning the human rights and dignity to prenatal life is untenable. However, the UDBHR does provide “a robust and defensible” view on the conferring of human rights and dignity to humans from the moment of birth.

From the perspective of laws and regulations, the UDHR is exactly the same as the UDBHR. It is not a convention but rather a declaration. However, Dr. Schmidt went on to say that it is commonplace in the field of law that once something is referred to as a customary document in a specific area it will be regarded as law. So it is possible that after time, the UDBHR would have a similar standing as the UDHR but perhaps in a different area.

Pausing to comment on the issue of bioethicists and who can be regarded as a bioethicist, Dr. Schmidt commented that it is important to note that ethics is an interdisciplinary field and therefore some experts may be ‘blind’ to certain aspects, in light of their own field of expertise. For example, those from a non-legal field, may not have a full understanding of the legalities of an issue and so may not be aware of the full legal implications of proposals that they may suggest.

As a final aside, Dr Schmidt reflected on articles (14), (15), and (16) which specifically address the issues of the day. Article 14 concerns social responsibility, article (15) concerns benefit sharing and article (16) future generations. Such issues you would not see covered in the Declaration of Helsinki largely because they were not major issues of the day when the declaration was written. Dr. Schmidt commented that declarations would always pick up and give expression to the zeitgeist. It was noted as a positive thing to include such provisions in order to force new perspectives to be taken seriously and considered fully.

In conclusion, Dr. Schmidt emphasized the point that once an individual is born it is agreed that the individual has human dignity and human rights. However, before and after this stage, different arguments need to be employed in order to resolve issues that arise. ■

# The UNESCO Declaration In The Light Of The European Convention On Human Rights And Biomedicine

- Dr. Calum MacKellar, Director of Research, Scottish Council on Human Bioethics

Dr. MacKellar opened his presentation by giving a brief introduction to the work of the Scottish Council on Human Bioethics, of which he is the Director of Research. Drawing upon his experience of working at the Council of Europe in Strasbourg, MacKellar proceeded to introduce the aims and background to the Council. It was proposed in 1946 by Winston Churchill and is the continent's oldest political intergovernmental organisation. Grouping together about 800 million people, the council consists of 46 countries, including 21 ex-communist countries. Furthermore, it has 5 observers consisting of Canada, the Holy See, Japan, Mexico and the USA.

MacKellar proceeded to outline the three principal bodies that make up the Council of Europe:

## **Committee of Members**

The members meet once a week, usually on a Wednesday and are responsible for legally binding conventions and other legal texts such as recommendations, which could be termed 'soft law'.

## **Parliamentary Assembly**

For one week every 3 months the MPs sit at Strasbourg. The MPs are elected by their own national Parliaments to discuss and propose various recommendations. Once again, due to the fact that in nature, they are guidance only documents, they are termed 'soft law'.

## **European Court of Human Rights**

This is a Council of Europe body, which includes the Russian Federation.

The Convention on Human Rights and Biomedicine was accepted by the Council of Ministers in 1997 and entered into force on 1 December 1999. It was ratified by 20 member states, one of the last being Norway in 2006. Another 14 member states intend to sign it.

The Additional Protocol to the Convention on Human Rights and Biomedicine, on the Prohibition of Cloning Human Beings entered into force on 1 March 2001, ratified by 16 Member States with another 15 intending to sign it. Dr. MacKellar pointed out that in order to sign or ratify a protocol, a Member State must have also signed the mother text. He also informed those present that to date, the UK's official position is that "it is still considering it" whilst not directly opposed to it.

Dr. MacKellar made brief reference to the Additional Protocol to the Convention on Human Rights and Biomedicine concerning Transplantation of Organs and Tissues of Human Origin, which entered into force on 1 May 2006 and ratified by 7 Member States. Moreover, the Additional Protocol to the Convention on Human Rights and Biomedicine, concerning Biomedical Research was adopted on 25 January 2005 but has not yet entered into force. Four Member States, with another 17 Member States indicating their intention to sign, have ratified it. Dr. MacKellar explained that 5 Member States are required in order to ratify a Convention then it automatically comes into force. It is then

legally binding in these five Member States as well as all others that sign up to it.

Following this introduction to the Council of Europe and the Convention, Dr. MacKellar proceeded to compare and contrast aspects of the Convention on Human Rights and Biomedicine with the UDBHR. The obvious difference is that the UDBHR is a global text as opposed to the Convention.

To begin with however, Dr. MacKellar sought to address issues addressed by the UDBHR but not the Council of Europe's Convention. Firstly, within the UDBHR there is substantial provision for solidarity and co-operation, as detailed in article (3). Secondly, in article (15) of the declaration, there are provisions made for the sharing of benefits. This is something that is not found in the Council of Europe's declaration. Furthermore, the protection of future generations is something that is not so explicitly regarded in the Convention, but is clearly addressed under article (16) of the Declaration. The Council of Europe's Convention was accepted in 1997, whilst the Declaration was accepted in 2005. Therefore, in the space of time between the passing of the two pieces of legislation, Dr. MacKellar commented that the world of bioethics has rapidly developed and in doing so has given rise to new issues for consideration. Whilst the Convention makes reference to the human genome, it is not as explicit as protecting future generations. Furthermore, mention of the biosphere and diversity is found in the UDBHR but not found at all in the Council of Europe's Convention. Concerning transnational practices, article (21) of the Declaration clearly addresses the issue of pharmaceutical companies shifting operations to developing countries. The 'host' state should have an appropriate review of ethical research and the research being undertaken should take into account the needs and benefits of the host state. Furthermore, the Declaration stipulates that States should take appropriate measures, both at the national and international levels, to combat issues such as bioterrorism and the illicit traffic in organs, tissues and genetic related materials among other topics.

In contrast, Dr. MacKellar then focused his attention on issues raised solely in the Convention. The Convention was started in 1992 and reflects in many ways "Old Europe" and what is meant by 'bioethics'. Most Eastern European countries were not members when the Convention was drafted and this is clearly reflected in the Convention's provisions. The concerns of the Convention revolve mainly around human medicine and biology. In places, the Convention reflects what is acceptable to most countries. Therefore, the provisions do not address issues such as donor insemination and abortion because at that time, agreement could not be established between Member States on such issues.

Furthermore, the Convention is a lot more practical in contrast to the UDBHR. Article (8) of the Convention addresses emergency situations, article (4) the non-selection of sex; Article (18) the research on embryos *in vitro*; articles (19) and (20) organ and tissue removal (an additional protocol has now been added to this), article (21) the prohibition of financial gain. Dr. MacKellar expressed the fact that in his opinion, something akin to this article (21) could have been included in the UDBHR as it is something that most countries could have agreed upon. Therefore, in the future this could be something for consideration.

With regard to issues addressed by both the UDBHR and the Council of Europe's Convention, both instruments cover the issue of Human Rights and Human Dignity. However, there are no definitions of what is a "human being" and "everyone" due to the fact that agreement could not be reached. As such, both documents are suitably vague on

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this issue. The primacy of the human being is addressed in both article (2) of the Council of Europe's Convention and article (3) 2 of the UDBHR. Restrictions on the exercise of rights are duly covered in article (26) of the Convention and article (27) of the UDBHR. Likewise, equitable access to health care, consent, protection of persons not able to consent, private life and right to information, non-discrimination, scientific research and ethics committees are all covered in both the UDBHR and the Council of Europe's Convention or its additional protocols.

Dr. MacKellar drew particular attention to one final aspect that is covered in both documents, that of the issue of public debate. In article (18) of the UDBHR and article (28) of the Convention, both documents comment on the need for appropriate consultation and public debate. Firstly, Dr. MacKellar noted that it was a sad fact that such detail was often left to the end of documents and should perhaps be given more attention earlier on in the text.

Furthermore, citing the example of the recent chimera consultation that the UK Parliament's Science and Technology Committee conducted which lasted for 12 days (8 working days), he posed the question as to whether allocating such a small space of time to quite significant topics that have far reaching consequences, was really "appropriate consultation"! He argued that time is required not only so that the public can listen, understand and comprehend the issues involved but also that other disciplines can learn about the subject, appreciate the facts surrounding them and comment appropriately. ■

## Closing Remarks

- Professor Nigel M. de S. Cameron, Executive Chairman, BioCentre

In his closing remarks, Professor Cameron made two key points. Firstly, he briefly addressed the issue of the bioethics conversation generally. The structure of the bioethics project at UNESCO raises the interesting question of how future discussion concerning emerging technologies will be conducted. From one perspective, bioethics is almost considered a separate conversation from the ethics conversation of science and technology and yet increasingly both of these conversations are running into each other. One of the implications of this fact is that as future discussions evolve, it will cause the conversation to be reframed with fresh alliances and fresh collaborations being established across the cultural spectrum. Nanotechnology, artificial intelligence, synthetic biology and other whole new sets of technologies are framing discussions in new and different ways. Professor Cameron commented that the implications concerning these emerging technologies will help to reshape engagement in the ethics and policy conversation.

Secondly, Professor Cameron spoke on the role of the multilaterals within the bioethics conversation. Various multilaterals such as the Organisation for Economic Co-operation and Development (OECD), G8, the World Health Organisation (WHO), all have bioethics related processes in place. Professor Cameron commented that governments tend to choose from amongst these to find the most suitable context for a conversation sympathetic to their particular perspective and persuasion. Therefore, a key problem with the system of multilaterals is that there is very little accountability of these groupings to any one constituency. As a result more awareness is needed of the processes as well as the need for the raising of the profile of the conversation particularly in the UK.

Professor Cameron acknowledged that the UDBHR is a modest document, but nevertheless a useful document in that it expresses a general consensus and a set of principles agreed upon by all Member States. This is in contrast to a declaration that may have sought to address specific questions, of which there would have clearly been differences of opinion amongst Member States.

In conclusion, Professor Cameron posed the question of what happens next in response to the UDBHR. Where do we go from here regarding the bioethics conversation? It is hoped that future BioCentre symposia may well help to shape, contribute to and develop such a conversation. ■

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