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#### Module No #04 Lecture No #20 Towards a Phronetic Bioethics

Hi, Welcome back to this course, Issues in Bioethics, this is the last lecture in this lecture series. Module Four, Unit Five. And this course, while concluding the lecture series, I thought, I can discuss about, what a kind of bioethics, we are talking about, or we can talk about in the contemporary world, particularly for countries like India, the third world countries. Because, when we talk about bioethics, most of the issues, which we have seen are centered around the concept of person, individual. And, we have seen that, individual autonomy is conceived as, one of the most important ethical notions, or principles in bioethics.

That is number one. Another factor is that, most of the bioethics is developed in the western world. That, it is originated in the US, and several other global initiatives, have given rise to several principles, several other theories, and other things. So, integration of theory is also, happen in between. And, most of the theoretical frameworks are also western. The primarily, the two-major ethical theoretical frameworks, Deontologyism and Utilitarianism. And again, the other ones like the, when the principlist approach was developed. Even that also, draws a lot from the western perspective. So, in one sense, we can see that, to a very great extent, this bioethical concerns are rooted in the western world, in the western philosophical tradition, in the western intellectual tradition.

But at the same time, there is one important factor, which we should not forget that, medicine, modern medicine is itself, the result of western enlightenment. And the practice of modern medicine today, is a complex science and a technological activity. So, there are several issues, which the practice of medicine today, raise in the modern societies, in our society. And, we have to tackle them. In order to effectively tackle them, we need certain bioethical insights, which we have to either develop within our culture, or we have to take it from, insights from other cultures. So, in this lecture, what I am trying to propose is, as a conclusion for this lecture series that, we

should approach bioethical issues, not as issues, which we encounter in specific cultures, but issues, which we encounter as humanity.

But at the same time, we should not forget that, when problems and issues are encountered in specific context, cultural context and situations, they need to be tackled in different ways. Not entirely different ways, but of course, certain differences should be there. So, we should approach it with a different mindset. So, that is where I thought, we can apply this method of phronesis, where the universal principle is applied in to actual context, with a lot of deliberation, interpretation, and appropriation. So, this is, what I mean by, towards a phroenetic bioethics.

So, on the one hand, what I am trying to propose is that, I am not saying that, these principle-based, or the theory-based bioethics, which we have taken, largely from the western world, is irrelevant. They are extremely relevant in today's world. Because, we are dealing with medicine, which is a modern enterprise. There are various reasons for that. One reason is that; our own society is getting increasingly modernized. Another reason is that, the social structures, which we think are sustaining our society, and distinguishing our society, from western society like, family, and caste, and many other structures.

They are also weakening to some extent. The Indian families no longer, what it was 50 years back, or even 25 years back. It has undergone tremendous changes. The concept of joint family is no longer relevant, in many Indian cities, and even in villages. So naturally, the value system will also change. So, based on such changes, we also have to make changes, into the way in which, we apply value and conceive them, that is one thing.

Second thing is that, we all know that, the European, the western bioethics is focusing more and more on, in the individual. So, the rights of the individual are highlighted. And, one of the major objectives of western bioethics, is to protect the individual from society, and other individuals, and tradition, and other people. Particularly in this context, in the context of medical ethics, it is to protect, the individual from medical institutions, and physicians, and pharmaceutical firms, and many others.

So, in that context, the modern assumptions of bioethics, which gives importance to individual is very important, even in our society. Only thing is that, when we talk about autonomy, we have to

shift our focus, from the individual, to probably groups, families, family units, or social units. But, autonomy as a principle, cannot be avoided. That is very important, even in all societies. Even Asian, African societies also, in the contemporary world. So, this is what, I am trying to propose. So, in order to understand the context, let us see certain details. (Refer Slide Time: 06:01)

#### Modern Medicine and its Global Presence

- The global acceptability of modern medicine.
- Historical changes have necessitated the use of modern medicine world-wide.
- Practice of medicine and practice of biomedical ethics.
- Science-ethics divide.

Factors that make ethical regulations necessary.

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See, when we try to understand the global presence of modern medicine, we all know that, there is a wide global acceptability of modern medicine. Most of the countries in the world, now use modern medicines, in spite of the fact that, many countries like China and India have their traditional, very strong traditional medicines. Like the Ayurveda and Siddha in India, and many other systems, that we practice in India. And then, Chinese systems of medicine are also quite well-known.

But these systems, traditional systems, for some reason are not capable of tackling, some of the issues, which modern life presents. It is not the limitation of these system, because these systems have originated, when the social order was entirely different. But today, we have a different social order. We are modernizing, every minute, we are modernizing. So, the life is very fast, and we use a lot of technology, and we use a lot of other equipment, to do things. So, naturally in this context, our world culture is different. Everything is changing rapidly.

So, in this context, we need the help of modern medicine, and the technological and other devices, which modern medicine uses. So, there is a wide global acceptability, no doubt in that.

(Refer Slide Time: 07:18) And, the historical changes, have necessitated, the use of modern medicine worldwide. We know the reasons. Colonization and globalization now, 20 years ago, you know with globalization, there is a sudden change. It is a total change, we can put it in that way that, we consume medicine and practice it. (Refer Slide Time: 07:38) And then, the practice of medicine, and practice of biomedical ethics, also have become, very relevant with this changes happening, with the rapid acceptability, global acceptability of modern medicine.

And, what worries us in this context, is the science, ethics, divide, which even the western civilization, even the western culture, itself is worried about. Because, there is a science, culture, divide, and the practice of science and the observance of ethics, have nothing to do with each other. So, this is a problem, which great scientists have pointed out, is going to lead, to a kind of crisis, in the European civilization. And particularly in today's world, the entire humanity is going to face, such a crisis.

So, we have to deal with that, and we have to think, how we can overcome it. (Refer Slide Time: 08:27) Factors that make ethical regulations necessary, also exist in our society. As I mentioned, not only the technologization of medicine, several such factors, which make regulations necessary in today's world. One important thing, which is inevitable in the practice of medicine in today's world, is a constant improvement of medical infrastructure.

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## Medical Infrastructure Improvement

- Participation of people as patients as subjects.
- Possibility of exploitation
- What ought to be the nature of relationship with people?
- · Globally the same methods are used.
- Do they use the same procedure and norms?
- Are the requirements same?
- Who benefits more?
- Is it a win-win situation?



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The hospitals and various other facilities, which are part of the medical infrastructure is improving every day, day by day. And, there is also a competition, we can say. So, in this context, particularly, when experiments are conducted, it needs the participation of patients, as subjects. Or, in other words, people have to be used as subjects, in medical experimentations. And again, patients go to the hospitals.

So, patient-hospital relationship is a kind of relationship, which is modelled, largely on the basis of, a kind of, client-organization relationship, in the business world. So, all kinds of complex situations, are emerging in today's world. This leaves a lot of possibility for exploitation. (Refer Slide Time: 09:38) So, and society has to protect individuals, from such exploitation. The question in this context is, what ought to be the nature of relationship with people. Organization or the medical infrastructure, by and large, in what way, it needs to relate itself, with people. And globally, the same methods are used. (Refer Slide Time: 09:56)

See, this is one another important factor, which most of these global firms, particularly global firms which conduct experimentations, pharmaceutical firms, and others, what they claim is that, we follow certain global norms, and everywhere, the norms and the methods are the same. So, it is not that, we have different norms for different countries. Whatever norms are followed in the developed world are also followed in the developing countries. So, the question is that, is it correct. Are they doing it. And, do they use the same procedure and norms, everywhere. (Refer Slide Time: 10:31) Are the requirements same. Who benefits more. And, is it a win-win situation.

So, a set of questions come to our mind, in this context. And of course, we all know that, it is an extremely complex situation. We cannot have a straight away answer to this, because there are many firms, who have started coming to India, after globalization. And, they are taking advantage of the situation here. We have already discussed it, in one of our previous lectures, and it raises a lot of issues.

The primary question is, is it actually giving us a win-win situation. Of course, they are gaining a lot, by coming to India, and outsourcing from this country, or to from the African countries, and many other countries, they are definitely benefiting a lot. But, are we benefiting from them. Is it

a win-win situation? Some of these issues, which we have already discussed. So, I am not going to elaborate upon them.

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#### **Necessity of Ethical Regulation**

- · Modern medicine can do harm.
- Can be used as a tool for coercion and exploitation.
- Tool for domination and hegemony.
- Three important elements of modern medicine: Institutions, technology and research.
- All the three need constant improvement: infrastructural improvements, technological enhancements and development of new ane more effective drugs.

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Then again, when we talk about the necessity of ethical regulation, the major point to be highlighted is that, modern medicine can do harm. It is not harmless. Because it uses technology in a big way. And, most of the drugs have side effects. And then again, it involves experimentation, and there is a possibility of exploitation, there is a possibility of negligence, there is a possibility of harm. So, all these are problems.

But, negligence is one problem, at the same time, that can be intentional harms done to people, in the sense of exploiting people. There is a possibility that, this highly complex medical knowledge systems, can be used as a tool, for coercion and exploitation, by organizations and even by countries. So, this possibility exists today. And, it can also be used as a tool for domination and hegemony, which is historically happened.

During colonization, we have seen that, I have mentioned it, sometime back, that one of the ways in which, the British established their hegemony and domination in its colonies, as through the medicine, the modern medicine, which they were developing, which was more effective, than some of the indigenous medical treatments, and healing practices, available in those countries, those colonies, particularly for certain kinds of diseases.

In this context, we can say that, there are three important elements of modern medicine, which we can focus on the institutions, which include hospitals, and diagnostic centers, and many other institutions, to which patients are related directly, or indirectly. Then, the technology, use of technology, this may happen inside and outside the hospitals. And then, of course research, which we have already elaborately discussed. (Refer Slide Time: 13:14)

All the three, need constant improvement. We know that. Because, science needs improvement. Every minute, there is an improvement. So, there are infrastructural improvements, technological enhancements, and development of new and more effective drugs. All these things, pre-suppose participation of people. So, people are being "used to some extent, to make this possible". So, there are possibilities of exploitation and coercion. And then, in this context, it would be relevant, to talk about the idea of a global bioethics.

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#### The Idea of a Global Bioethics

- What is a global bioethics?
- · Do we need it?
- Are the requirements same everywhere?
- Cultural relativism and global bioethics.
- The principles of biomedical ethics and their applicability in non-western cultures.
- Is bioethics a western enterprise?
- Is it necessary to have different principles in different cultures?



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There are two reasons for this. Many people think that, bioethics is largely a western exercise, which is not the case, and should not be the case, number one. Because, there is lot of importance, when you practice medicine, anywhere in the world, it should be ethically regulated. No doubt in that. Second thing is that, we all know that, in many of the developed countries in the world, they follow, the practice of medicine follow, lot of ethical regulations. Everything, whether it is at the institutional level, or the technology level, or at the research level, the ethical rules and principles, are to some extent, observed. No doubt in that.

Because, there are very strong regulations, and there will be, there will be penalized, if there are violations. So, they are observing it. But, these things are violated or compromised, even it comes to the developed countries. So, there is a need for bioethics. And, why I call it global bioethics, not in the sense that, the same principle should be applied in every context. But, the sensitive issues, the globally sensitive issues, should be considered as important, in every context. Of course, the emphasis can be different. In some context, individual freedom, autonomy, confidentiality, these things might be highlighted. In some other contexts, certain other concepts, must be highlighted.

See for instance, in countries like India, or Pakistan, or some of the African countries, the questions concerning, equity, affordability, these are important questions, ethically more relevant questions. But, that does not mean that, these questions are totally irrelevant, in United States of America, or in Sweden, or in United Kingdom. They are relevant there. Similarly, questions concerning, confidentiality, consent, these are important, in this Indian or African context as well. So, they are everywhere, these problems are, these issues are important. No doubt in that.

Only thing is that, the emphasis will shift, based on the situation and the context. (Refer Slide Time: 15:58) So, when you talk about the idea of a global bioethics, what is a global bioethics. And, we can ask questions like, do we really need it, are the requirements same everywhere. We know that, the requirements are not same, everywhere. But, still I am trying to argue that, we need some sort of a global bioethics, which is essentially phronetic in nature. That is the idea. So, cultural relativism possess a great problem. I do not want to, even consider this, as a problem. Cultural relativism or different cultures having, different views about ethics, and different views about values, and meaning of life, and other things.

Actually, they are enabling possibilities of ethics, rather than, seeing them as threats or problems. We should try to understand them, and negotiate with them, and try to apply universal principles, based on their requirements. So, the principle of autonomy can be applied, in Indian context effectively, if you really try to understand, or if you understand, the context in India. (Refer Slide Time: 17:03) Then again, the principles of biomedical ethics, and their applicability in non-western cultures. And the, is bioethics a western enterprise, these are the questions, which we need to understand, raise, and try to give answer, respond to, when we talk about the idea of global bioethics.

Is it necessary to have different principles in different cultures? One thing is that, is it necessary to have another thing is, is it actually possible. Of course, we know that, there are certain principles, which are universal. No doubt in that. For example, no harm. The principle of no harm is universal. Beneficence is universal. So, there are certain principles, which are universally valid. Justice is also universal. I would even say that; autonomy is also universal. Only thing is that, you should not consider, autonomy in the European, western sense of the term. We may have to apply it, into different context. One reason, why we think that, bioethics is a western enterprise. Or it is something, which only the developed world, can entertain. (Refer Slide Time: 18:11)

## Factors Facilitating BE in the Developed World

Ghaiath MA Hussein: Democracy: The Forgotten Challenge for Bioethics in the Developing Countries

- Health system development: characterized by complexity of structures and functions which made it more prone to ethical problems arising mainly from the conflicts arising from the patients'/ community in general and the health professionals' ability to meet these expectations, provided the limitation of resources.
- Moral development: as expressed in an individualistic approach to life; importance of autonomy as the first and foremost ethical principle.
- Political development: non-totalitarian political regimes where the political power comes from people and for the sake of people.

Is because, this is what factors facilitating bioethics in the developed world. In this article, The Forgotten Challenge for Bioethics in the Developing Countries, what Hussein rights is that, there are three factors. One is that, they have a well-developed health system, characterized by complexity of structures and functions, which made it more prone to ethical problems, arising mainly from the conflicts, arising from the patient's community in general, and health professional's ability, to meet these expectations, provided the limitation of the resources.

So, this is one problem, which they particularly face, because of the development, they have achieved, the level of development, they have achieved, in their health system level. Second one is the kind of moral development, they have achieved. (Refer Slide Time: 18:59) In terms of what, as expressed in an individualistic approach to life, importance of autonomy, as the first and

foremost ethical principle. See, when we discussed ethical theoretical frameworks, particularly when we discussed, the principlist approach, which was developed by Childress and Beauchamp.

We have seen that, though Beauchamp and Childress, do not emphasize on autonomy. They do not say that; autonomy is most important. They would consider all the four principles, are more or less, equally important. But still, we all know that, the ethics in the western world is centered around the individual. So, autonomy in some sense, acquires a little more importance than, other values or other principles. (Refer Slide Time: 19:43) And, the political development, because most of the western developed countries, which we are talking about, have non-totalitarian political regimes, which is political power, comes from people. And, they are all democracies, which is not the case in Africa and Asia.

Many of the countries in Africa and Asia are not democracies. And even, if they are democracies like India, the social structures are very strong. So, though politically, they are democracies, their society functions in a very different way. Sometimes you know, it gives more importance to the social units, community, society, and other factors, rather than the individual. So, the question is, not whether the individual rights are protected or not, what is more important is, sometimes the community and the society. Now again, returning to the question of global bioethics. (Refer Slide Time: 20:33)

#### **Global Bioethics**

- These factors are not present in the developing world.
- Are the norms the same everywhere?
- Are they applied universally?
- Are the subjects in research compensated appropriately?
- Are their rights protected?
- Who needs more protection in non-western cultures? Individuals or communities or the society as a whole?



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We can see that, these factors, which we have just mentioned, the health system development, moral development, and political development. These are not present in the developing world.

Many of the developing world, do not have them. Hence, we can ask the question, are the norms the same everywhere? We will, we are actually asking it once again. Are they applied universally? Of course, I have mentioned that, they cannot be applied. Are the subjects in research, compensated appropriately? Again, what do you mean by compensated appropriately. This again, changes from place to place, and context to context.

But, there should not be a huge disparity. This is, what I mean by global bioethics or phronetic approach to global bioethics. Are their rights protected. (Refer Slide Time: 21:21) As all of us know, the concept of right, is understood in different context, in differently. But, at the same time, we all know that, there are certain fundamental human rights, which need to be protected. That is very essential. Who needs more protection, in non-western cultures? Individuals, or communities, or society, as a whole. This is a very complex question.

Because, when you talk about individuals, the western world, we all know that, the individual is protected, from the coercive power, and exploitation of other individuals and the society, and tradition, traditional structures like religion, etcetera. But, in the Asian context, or an African context, can we actually think of such possibilities. Does there exist a problem, individual versus community? We know that, it is existing in our society. We find that, there is increasingly, there are individuals, who come into conflict with society. For example, nowadays, transgenders have come forward, and started asserting their rights. And again, gays and lesbians have come forward, and started asserting their rights, to live together.

These things were non-existent, 20 years back, or even 10 years back. This was unknown. But, our society in India, have started facing, such things now. And, we have to now take decisions. We have to now have policy decisions on them. We cannot just brush them aside, based on traditional practices, and customs, and conventions. We have to recognize that, there are certain important problems, that we need to address, and we need to resolve. So, I would say that, there are three important concerns, we need to address.

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## **Three Important Concerns**

- 1. The domain of principles and norms.
- 2. The point of emphasis: individual rights or social and global justice?
- 3. What is to be achieved?
- 1. Principles and norms have to be applied to specific contexts.
- 2. Different emphasis in different contexts, with careful balancing.
- 3. Justice and rights.



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The first one is, the domain of principles and norms, which I have already mentioned, are mostly centered around the individual in the western world. So, when you talk about a phronetic bioethics, the principles and norms have to be applied, to specific context, with suitable and appropriate interpretation and appropriation. So, we cannot just bring them directly and apply it. Here, we need to negotiate, and lot of deliberations have to be done. And, it is a collective exercise. This might take time. It might take time, where the judiciary has to be involved. Sometimes, society, community structures, everything, all these things, have to be involved, till we arrive at, some sort of a, more or less accepted consensus in the social level. (Refer Slide Time: 23:45)

Second one is the point of emphasis, as I have already mentioned. Individual rights or social and global justice. So, this is a question, whether we are going to emphasize more on individual rights, or social and global justice. And here, we all know that, there are different emphasis, in different context, with careful balancing. So, we need to do this, act of balancing. In certain context, we know that, questions of equity are more important than, questions of individual rights. But, that does not invalidate, the question of individual right, in that context.

So, we need to arrive at, some sort of an ideal balancing, which is also a complex process, which again calls for negotiations, and discussions, and consensus. And, what is to be achieved is a question. (Refer Slide Time: 24:36) Justice and rights, no doubt in that. But again, when you say

justice and rights, these are very vague abstract terms. We need to understand them contextually. So, that is a precisely, that is a challenge of the entire project. And, when you come to the realm of norms, we have already seen that, I am just coming back to this problem, again and again. (Refer Slide Time: 25:07)



Because, it is very important that, modern bioethics, when it deals with norms, the emphasis is again, individual autonomy, rights, respect, consent, confidentiality, privacy, authority, the individual is the authority, then again decision-making, individual has to make decisions, etcetera. While the developing world concerns are different, because, there as I mentioned earlier, the questions of equity, accessibility, affordability, societal and community, exploitation and violence, denial of rights to groups, like caste and gender. Women are denied, some of the fundamental rights for health. And again, children are denied. Certain people, belonging to certain caste, are denied, certain rights.

So, these are some of the immediate burning issues, which developing world have to address. And availability, due to quasinatural and artificial scarcity. There are scarcity, different levels of scarcity. If you go to a typical Adivasi village in India, the nearest hospital will be almost 100 kilometers away. So, if someone encounters, a health problem in the night, there is no way that, this patient can go to the nearest hospital. Because, there are no vehicles available. They have to walk through the forest. And, by the time, they reach the hospital, mostly the patient would have died.

So, such situations, even today, exist in our culture, our society. So, we need to tackle them. They are more burning issues, than issues like, individual autonomy, and rights. And again, public health programs, are the key to achieving health goals, in most of the developing countries, rather than policies, that address rights of patients, confidentiality, ensuring privacy, etcetera.

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#### **Developing World Concerns**

- Public health programmes are the key to achieving health goals.
- The Global Forum for Health Research: less than 10% of the world's research resources are earmarked for 90% of the health problems. [The 10/90 report on health research 2000. Geneva: Global Forum for Health Research; 2000.]
- To promote equity in health research.
- Strengthen the capacity within developing countries to undertake research that is relevant to them.
- Technology and knowledge transfer and generation within.
- Unlike the west, society, family, and religious and social structures
   are more important.



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Again, the global forum for health research has identified that, less than 10% of the worlds research resources are earmarked, for 90% of the world health problems. So, this 10/90 is extremely significant, which needs to be addressed. When we are talking about ethics, this is one of the primary concerns, which global bioethics has to deal with. Because, global bioethics is not the responsibility of one country or one nation. It is a responsibility of the entire humanity. So, the entire humanity, somehow has to come together, and think about, how this can be achieved. (Refer Slide Time: 27:29)

And to promote, equity in health research, is another major concern. I am not elaborating this. Because, I have already done it, when we have discussed this, in one of the previous lectures. And, strengthen the capacity, within the developing countries, to undertake research, that is relevant to them. Because, many of the problems are relevant, only in that context. And, developing countries, pharmaceutical firms, are not interested in those issues. So, somehow there is, there should be a mechanism, by means of which, we strengthen these developing countries to undertake research in the problems, which they encounter specifically.

And, technology and knowledge transfer, and generation within, within the country itself, there should be generation of new technologies. (Refer Slide Time: 28:06) So, these things are some of the concerns of global ethics, from a micro, sorry, macro perspective. And, unlike the west, society, family, and religious, and social structures, are more important. So, one has to be sensitive towards, such social structures as well.

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#### **Developing Bioethics**

- Bioethics need to respond to the possible threat the new technology can pose to humanity, specific human communities in the developing world and the people who are deprived of many other facilities and individuals who are vulnerable.
- We need to develop bioethics by involving such people and empower them to make decisions affecting their health.
- Protect such communities and individuals from exploitation.
- Autonomy and confidentiality are important: more important as they are more vulnerable.
- Recognize the nature of their self as manifested within social units.
   Enable them to negotiate and take decisions themselves.



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Since, we are talking about phronetic bioethics, a kind of bioethics, which can adopt at the global level. Bioethics need to respond to the possible threat, the new technology can pose to humanity, specific human communities. See, one is to the entire humanity, and in another is to, certain specific human communities, like women, or Dalits, or some other vulnerable groups, Adivasis. Some of the problems, which they face, on the one hand. And, some of the possibilities that, certain interested groups may exploit them.

So, against that, we need to be careful. So, such issues, in the developing world, and the people, who are deprived of, many other facilities. (Refer Slide Time: 29:09) And individuals, who are vulnerable. So, this is one of the major concerns, when you think of developing bioethics, in a non-western cultures, and countries. (Refer Slide Time: 29:25) We need to develop, bioethics by involving people, and empower them to make decisions, affecting their health. It is not that, you know, they should be left with their communities. Their self is a community self. Their self is so

intimately interlinked with social units. We cannot just leave them to take decisions, for them by the community units, or the social units.

We cannot permit the social units, to take all decisions, about the individuals. When, we are talking about bioethics, we need to address this problem. How to empower, communities and individuals to take decisions, about their health, themselves? This is very important. (Refer Slide Time: 30:09) And, protect such communities and individuals from exploitation. Autonomy and confidentiality are important. But, more important, as they are more vulnerable. So, what I am trying to argue is that, these notions of autonomy, and even confidentiality information about their diseases, and all these things, are very important in this context, in the context of developing countries.

Because, those people are more vulnerable, than people in the developed countries. So, in their case, it is very important that, we need to empower them, to assert, to realize, and assert their autonomy. And, also, there should be mechanism, that would protect, the confidentiality of information, about their health. So, that they will not be exploited by business interest. (Refer Slide Time: 30:52) And, recognize the nature of their self, as manifested within social units. This is also very important. Be sensitive to their culture and their requirements, which emanate from that cultural context, and enable them to negotiate and take decisions, themselves. So, this is very important.

So, that we are also making them individuals. Making them free individuals, who can take decisions, and autonomous individuals, who can be masters of themselves. This is what, developing bioethics in non-western countries, actually amount to. So, I am proposing that, some sort of a different approach, a very entirely different approach, need to be adopted, when we talk about developing bioethics, in other countries. So, that the whole idea that, bioethics is a western enterprise will vanish. So, we all know that, bioethics is important globally in all countries.

Because, most of the countries in the world today, depend on modern medicine. So, wherever modern medicine is present, we need to regulate, the practice of modern medicine, with ethical insights, which are not absolutely modern, but a mix of modern and traditional, with appropriate negotiation and interpretation. So, this is, what I mean by phronetic bioethics. I think, this is going to be the ideal model, for many of the developing countries. But of course, this is only a

very vague idea of, what I mean, what exactly this is going to be, has to be thought about, and discuss further, and negotiated, and all that.

So, I will wind up this lecture here. I hope all of you have enjoyed, this lecture series on bioethics. The purpose of this lecture series, was to introduce, some of the important concepts of bioethics, which are relevant in today's world, both at the global level, and also at the local level. I was trying to trace the routes, the historical and conceptual routes, of bioethics. So, that people will be familiar with, how this is evolved. And then, we can examine, how these things will be practical in our society. We now know that, many of these issues, which we thought are western, are going to be very important in our country, as well. Because, for example, stem cell research or gene therapy.

These are all, advanced technologies. Genetic engineering, these are technologies, which we also use in our country. So, we cannot say that, these are all western. Naturally, the ethical issues raised by the practice of these technologies are relevant in our context, as well. And, we have to negotiate them. So, we have to keep an open mind. Open mind to different ideas about ethics. And how, ethical issues emerge are tackled, and resolved. So, that is the, that was the purpose of this course. I hope you have enjoyed, the course. Right now, I will wind up here. Thank You.