

## A BIOETHICAL RADIOGRAPH OF BRAZIL

Volnei Garrafa\*

In March of 1997, the then president of the International Association of Bioethics (IAB), Alastair Campbell, visited Brazil at the invitation of the Brazilian Society of Bioethics. First, he attended the 2<sup>nd</sup> Brazilian Congress of Bioethics, held in Brasilia, “the architecturally projected capital and a representative piece of artistic design,” in his own words. Then, he visited São Paulo, where he participated in an International Seminar of Clinical Bioethics held at the Public Hospital of Heliópolis, the main slum of the largest and most industrial center of South America. On his return to Great Britain, Campbell wrote a passionate editorial in *the IAB News* relating what he had seen and felt during the trip. One of the paragraphs read as follows: “*When I left Brazil after a too short visit, it was with a sense of gratitude to my hosts, not just for their friendship and outstanding hospitality, but for the realisation of how very differently I now perceived the nature of Bioethics. I had glimpsed what it must be like to sustain a public health service with minimal resources and massive problems of poverty. I had seen something of the environmental challenges of massive urbanization without adequate infrastructure to sustain it. In the midst of this I met people determined to find a Bioethics that makes a genuine difference to*

*the health of their nation and the quality of their environment*”. The trip to Brazil strengthened even more Campbell’s conviction to fight for a return of bioethics to the paths initially outlined by Van Rensselaer Potter in 1971 and reinforced by the same author in 1988, that is, a return to the objectives of a GLOBAL BIOETHICS.

Like the contradictions mentioned in the paragraph above, the main topics on the bioethics agenda for the 21<sup>st</sup> century continue related to two points historically equidistant: those related to genetic engineering, involving situations I call *emergent* (or involving “limits”, “frontiers”, in the words of Giovanni Berlinguer); and, the others, derived from the acute social inequalities verified on the planet, along the lines of *persistent situations* (or “day-to-day”). In this manner, this paradoxical phenomenon propagates in Brazil like it does on a global scale; and with strong tones. In the case of “Global Bioethics” specifically, the topic is of singular importance for Brazil, because the country’s interests are great in the fields of environmental equilibrium and biodiversity. No less than 22% of the planet’s vegetable varieties can be found in Brazil, while one gram of humid Amazon rainforest contains hundreds of varieties of microorganisms.

For those who are not used to Brazil, it’s quite difficult to understand it! The country has approximately 8.5 million square kilometers of flat and fertile lands, 170 million inhabitants born out of an extraordinary racial miscegenation, the 9<sup>th</sup> largest GDP (Gross Domestic Product) of the world. At the same time, however, its social indicators are among the most critical of

---

\* **Volnei Garrafa** is a full professor, coordinator of the Nucleus of Studies and Researches in Bioethics and professor of the Post-Graduate Program in Health Sciences/ both for master and doctorate degrees (in the area of specialization in Bioethics) at the University of Brasilia; vice-president of the Brazilian Society of Bioethics; full member of the National Commission of Ethics in Research of the Ministry of Health/Brazil.

Latin America and its distribution of income is one of the worst of the planet (47% of the nation's wealth in the hands of the 10% richest, with only 0.8% of wealth shared by the 10% poorest of the population). While more than 100 infants die for every 1,000 live births in some destitute regions of the north and northeast, in the south and southeast this rate nears 10 in an exemplary fashion. Therefore, Brazil of the year 2000 is a country that lives, antagonistically, with one foot in the 19<sup>th</sup> century and another in the 21<sup>st</sup> century. Alongside marvels like multiple organ transplants, pioneering sequencing of the genome of malignant tumors of various kinds and of diverse anatomical areas, or intra-uterine corrective surgical interventions in the hearts of fetuses, the country has millions of families abandoned to their own fate living in rural regions or in the outskirts of great cities.

Among conquests and problems, the profound contradictions mentioned above and the numerous consequences resulting from them are an inseparable part of the mission of Brazilian scholars and researchers who decided to follow the paths of BIOETHICS. The country's contradictory reality, therefore, besides demanding very hard intellectual and practical exercises on the part of their "bioethicists", enhances even more the conflicts verified between individual and collective, autonomy and justice, participation and omission, beneficence and equity, charity and solidarity, limit and control, liberty and responsibility...

### **Brief historical references**

Brazilian bioethics is late in coming, having emerged in an organic fashion only in the 1990s. Previously, only a few isolated initiatives had occurred, without significant registers. There isn't, on the other hand, a starting point or specific moment of historical reference for its development. On the contrary, some isolated incidents were occurring and, at

the same time, leading to positive repercussions in the sense of divulging and disseminating the discipline. At the beginning of 1993, for example, the biannual journal called *Bioética* was created, with a regular Editorial Council, sponsored by the Federal Council of Medicine and with its headquarters in Brasilia. The referred publication was indexed in 1998 (LILACS) and has maintained its periodicity up to now, though the group that won recent elections in the main medical entity of Brazil is proposing changes in the publication in the direction of more specific deontological issues of interest to the medical class, the sponsor of the journal. Another indexed Brazilian periodical, which has been publishing articles on Bioethics in a regular and increasing manner, is the *O Mundo da Saúde* (The World of Health), sponsored by the *Centro Universitário São Camilo*, of the Camilian priests of São Paulo, and which has been bravely supporting itself since the 1980s.

The Brazilian Society of Bioethics (*Sociedade Brasileira de Bioética - SBB*) was founded in 1995, and nowadays it has more than 300 associate members and has sponsored three national congresses: one in 1996 (in São Paulo - 100 participants); another in 1998 (in Brasília - 200 participants); and one in July of 2000 (in Porto Alegre - 400 participants). The entity currently has regional chapters in various states. Its board of directors is elected through direct vote by all members and remains in office for a 3-year term. From 1999 onwards, it began periodically publishing an official Bulletin that permeates general information with dense scientific content, having received original articles by controversial international scholars, such as H.T. Engelhardt Jr. and John Harris, among others. It's worth noting that the SBB is affiliated to FELAIIBE (Latin American and Caribbean Association of Bioethical Institutions) and to IAB (International Association of Bioethics). In fact, it would be fitting to mention that it has been confirmed that the 4<sup>th</sup> Latin American and Caribbean

Congress of Bioethics and the Sixth World Congress of Bioethics, concurrently with the Feminist Approaches to Bioethics, will be held in Brazil's capital city, Brasilia, in November of 2002, sponsored by SBB and with the support of the international sister entities mentioned above.

In 1996, the National Council of Health, a body linked to the Brazilian Ministry of Health, instituted the National Council of Ethics in Research (CONEP), which was put in charge of regulating and controlling research and testing carried out on human beings on Brazilian territory. Before this occurred, Brazil already had a federal legislation regarding this manner that, however, was not duly enforced. After the creation of CONEP, the matter began being viewed with the severity required and, nowadays, Brazil has more than 300 Committees of Research Ethics that operate regularly in hospitals, universities, etc. In regards to the official and public aspect, I should also point out the existence of a National Technical Commission of Biosecurity (*Comissão Técnica Nacional de Biosegurança* - CTNBio), linked to the Ministry of Science and Technology, which was entrusted by the government to analyze, measure and regulate matters regarding genetically modified organisms, including the issues of patenting, transgenic crops, cloning and other correlated matters. In an isolated manner, various hospitals and universities began to establish Institutional Committees of Bioethics; with the pioneering examples being the *Hospitais de Clínicas* of Porto Alegre and São Paulo, as well as the National Cancer Institute of Rio de Janeiro. On the other hand, there is already a debate underway in the country regarding the institution of a future and broad National Commission of Bioethics. With regard to this, I should mention that the current Vice President of Brazil, Marco Maciel, has shown interest in this matter since he was a Federal Senator.

## Current panorama of bioethics in Brazil

In its first years of existence, Brazilian bioethics embraced as a conceptual reference the so-called American "principlist current". However, as research groups and study nucleuses began being implemented in universities and other institutions —with the University of Brasilia being a pioneer in this area— this panorama began to change. Though the majority of the centers dedicated to the study of Bioethics still basically follow the theory of the 4 principles, new alternative proposals to traditional bioethical currents began to emerge in 1998. Among them, the following ones could be mentioned: the "Bioethics in the perspective of liberation theology", "hard bioethics", "critical bioethics of feminist inspiration", "feminist and anti-racist bioethics" and "bioethics of autonomous reflection". Certainly, there is a long theoretical path to be constructed and traveled by the proposals mentioned above, but it's interesting to note that they all coincide concerning the respect for moral pluralism and the protection of the interests of more fragile and/or vulnerable people. This observation shows that the contextualization of the country's reality serves as the greatest source of inspiration for the "new Brazilian Bioethics".

Among the main academic centers of Bioethical reflection in Brazil, the following should be mentioned, in the geographic direction of south to north: the Interinstitutional Nucleus of Bioethics of the *Hospital de Clínicas* of the Federal University and the Catholic Pontifical University, with its University Hospital, in Porto Alegre, as well as the University of Rio dos Sinos, in the town of São Leopoldo, in the southernmost state of Rio Grande do Sul; the Bioethics Nucleus of the State University of Londrina, in the southern state of Paraná; the Oscar Freire Institute of the Medical School of the University of São Paulo, the Nucleus of Study and Research in Bioethics of the *Centro*

*Universitário São Camilo* and the *Alfonsianum* Institute of Ethics, in the state of São Paulo; the Nucleus of Studies and Researches in Bioethics of the University of Brasília and the Institute of Bioethics, Human Rights and Gender (ANIS), both in Brasília, the Federal District; the Information Network on Bioethics (Bioethics and Feminist and Anti-Racist Theory) and the Catholic University of Minas Gerais, in Belo Horizonte, capital of the state of Minas Gerais; the Nucleus of Applied Ethics and Bioethics of the Oswaldo Cruz Foundation and the State University of Rio de Janeiro, in the state of Rio de Janeiro; the Bioethics Nucleus of the State University of Feira de Santana, in the northeastern state of Bahia; the Nucleus of Bioethics of Pernambuco, in the capital city of Recife; the Medical School of the Federal University of Piauí, in the capital city of this northeastern state, Teresina.

Beyond the centers listed above, it is impossible to establish the exact number of the various disciplines related to Bioethics that are taught each semester in the hundreds of public universities (federal, state, municipal and community) and private universities (religious or secular), as well as isolated colleges, on the graduate and post-graduate levels. Likewise, there is a great number of events of the most varied disciplines and scientific entities that schedule conferences, roundtable, courses of short duration and discussion panels, focusing on Bioethics from the most diverse angles and interests. In many of these occasions, however, the attention of congress participants is directed erroneously towards areas of specific interests, and the discussion ends up centering exclusively on the fields of doctor-patient relation and of professional ethics and its deontological codes of conduct.

A positive aspect, on the other hand, is the growing number of monographs of specialization courses (360 classroom/hours in the minimum, in accordance to the country's legislation), master's degree dissertations and doctorate theses that utilize Bioethics as a

methodological tool for the development and/or verification of their hypotheses. These studies, as well as those that are naturally developed by official post-graduate programs that include Bioethics among "their areas of study", are carried out not only in sectors closer to health sciences — such as psychology, anthropology, social communication, biology or sociology —, but also in fields one would not usually associate to bioethics — such as art education, chemistry and others.

The careers most involved with Bioethics in a quantitative sense in Brazil are Medicine and Law. However, though they are the two areas that have shown most advancement, they are, contradictorily, the two areas where resistance is also greater. In Medicine, this is mainly due to the confusion that a great number of professors and professionals make between Bioethics and professional, legalistic and codified ethics. In relation to Law, the problem occurs due to the fact that some groups insist on using "biolaw" neologism instead of the customary expressions related to "Bioethics and Law". Since Bioethics did not emerge to provide full-fledged answers for conflicts, based on respect for secularization and moral pluralism, "biolaw" tries to resolve all issues through strictly legal means, which irreversibly debilitates the original proposal of bioethics by giving priority to legalism and by narrowing the discussion to the detriment of the legitimacy and amplitude that the true epistemological statute of the discipline generously provides.

To finalize, it's important to mention that, besides the qualitative and quantitative leap forward provided by articles on Bioethics published in Brazilian academic journals, the number of books produced in Brazil addressing Bioethics has increased in the last 5 years, as has their quality. Commercial publishing houses are becoming interested in the topic since it is being spread rapidly by means of scientific events and, especially, by universities and government agencies.

## Final considerations

The contradictory social reality has forced “Brazilian Bioethics” to search for alternative perspectives to traditional bioethical theories. Although principlism was the springboard of the discipline in Brazil and still exerts a certain hegemony in the national academic context, there has emerged a movement of intellectual reaction to the simple decontextualized importation of proposals or ethical “packages” imported indiscriminately from more developed nations. The Brazilian theoretical proposals to Bioethics are still under construction and should not be viewed as an “affront” or “scientific disobedience” to traditionally constituted theories, but as a heroic attempt for a contextualized search for moral answers appropriate to the specific problems verified in the nation’s reality. The true effervescence observed in this historical moment of the Bioethics under development in Brazil, which—as was said in the beginning of the article—is late in coming, though it’s occurring in a manner not yet organic, is the fertile fruit of a dynamic process that attempts to make up for lost time. In this sense, incentive and interchange with neighboring nations of the Latin American community becomes vital, aimed at the concrete construction of closer and more feasible relations in search of common or proximate solutions to problems that are many times similar.

The person who probably best interpreted the importance of Bioethics for Brazil in the year 2000 is theologian Márcio Fabri dos Anjos, who recently wrote a valuable essay on the topic based on what he called a “cultural and humanitarian context”. The author speaks of “*how Brazil, in the midst of many social inequalities, finds in reflection on bioethics an important place to develop critiques and concrete proposals for creating and securing a better future. Bioethical perspectives are important in Brazil and for Brazil*”. The generous words of humanist Alastair Campbell were prophetic. His reflections served as an impetus and

protection in order to allow the country’s Bioethics to begin to dream its own dreams (and nightmares...).

## Bibliography

- ANIS – Instituto de Bioética, Direitos Humanos e Gênero. Bioética [editorial]. *Revista de Bioética e Gênero* 1999 Oct 2; 1(1).
- Campbell, A. The president’s column. *International Association of Bioethics News* 1998; 7: 1-2.
- Diniz D, Guilhem DB, Garrafa, V. Bioethics in Brazil. *Bioethics* 1999; 13 (3-4): 244-248.
- Dos Anjos M.F. Medical ethics in the developing world: a liberation theology perspective. *The Journal of Medicine and Philosophy* 1996; 21: 629-637.
- Dos Anjos M.F. Bioética abrangência e dinamismo. *O Mundo da Saúde* 1997; 21 (1): 04-12.
- Dos Anjos, M.F. Notes on Bioethics in Brazil. *Biomedical Ethics. Newsletter of European Network for Biomedical Ethics* (Univ. Tübingen) 2000; 5 (1): 42-45.
- Garrafa V, Oselka G, Diniz D. Public health, bioethics and equity. *Bioética* 1997; 5 (1): 27-33.
- Garrafa, V. Bioethics, health and citizenship. *O Mundo da Saúde* 1999; 23 (5): 263-269.
- Garrafa, V. Bioethical reflections on science, health care and citizenship. *Bioética* 1999; 7 (1): 13-20.
- Garrafa V, Diniz D, Guilhem DB. Bioethical language and its dialects and idiolects. *Cadernos de Saúde Pública* 1999; 15 Supl. 1: 35-42.
- Garrafa V. *Bioética fuerte: una perspectiva periférica a las teorías bioéticas tradicionales*. Conferencia en el 3er Congreso de Bioética de América Latina y del Caribe; mayo 2000; Panamá.
- Pessini L. Bioética no Brasil. Iniciativas Institucionais. *O Mundo da Saúde* 1998; 22 (3): 188-190.
- Pessini L, Barchifontaine CP. Bioética: do principlismo à busca de uma perspectiva latino-americana. In: Costa SI, Garrafa V, Oselka G. (eds). *Iniciação à Bioética*. Brasil: Conselho Federal de Medicina; 1998; 81-98.
- Pessini L. Bioethics; a horizon of hope for a new time. *O Mundo da Saúde* 1999; 23 (5): 259-262.
- Segre M. Editorial. *Boletim da Sociedade Brasileira de Bioética* 1 1999 Nov; (2): 01-02.