

The Concept of Community in Bioethics

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On the 27 July 2010, the Wellcome Trust sponsored a satellite meeting of the 10th World Congress of Bioethics in Singapore focused on the concept of community in bioethics. This was a collaboration between the International Network for Public Health Ethics (InterPHEN), and the International Network for Philosophical Approaches to Bioethics (Inpab), coordinated by David Hunter, Angus Dawson and Jacob Leveridge.

In recent years, the notion of ‘community’ has assumed an increasingly important role in ethical discourse. Discussions of individual informed and community consent, and of community engagement and participation in research, have taken centre stage in international research ethics, and increasingly research ethics in general. Another arena in which the notion of ‘community’ has assumed particular significance is of course public health ethics. Two threads running through much discourse in public health ethics are the extent to which the interests of the community might justify state interventions that impose limits upon the freedom of individuals and the extent to which individuals have moral obligations to contribute to or protect the community. Clearly, different understandings of who or what constitutes a ‘community’ and the relationship between the individual and the community will be crucial to advancing these discussions.

With these discussions in mind, this meeting aimed to explore different understandings of the concept of ‘community’ and the role it might play in normative decision making from different philosophical and cultural positions, using four case studies, two from the world of research ethics—biobanking and genomics research, and emergency health-related research—and two from the world of public health ethics—vaccination and resource allocation.

The principal focus of the meeting was the different sets of assumptions that different conceptions of ‘community’ and its role carry and the implications of these assumptions. We also hoped to use ‘community’ as a

focal point for broader discussions around the plurality of different approaches to doing normative bioethics.

Dr Jane Kaye kicked off the meeting with a discussion of the frameworks that are applied to biobanks and Professor Terence Hua-Tai followed up with an exploration of the question of democratic legitimacy in large-scale biobanking in Taiwan. A panel made up of Dr Sunita Bandewar, Professor Aasim Ahmad and Professor Jerome Singh took us to lunch with a broader discussion of the concept of community in disaster-affected settings. After lunch, Dr Angus Dawson and Dr Anant Bhan talked about the relationship between community engagement and trust in the context of vaccination programs. Dr Martin Wilkinson and Professor Ellen Zhang then closed off the proceedings with a look at the utility of the concept of community and the related concept of the common good under conditions of resource constraint in public healthcare.

With the kind agreement of the editors, we invited both the speakers and the audience to submit papers analysing the concept of community in bioethics and its role in normative decision-making in greater depth for *Public Health Ethics* and four papers have thus far been published, two in the previous issue and two in this issue.

‘Western’ bioethics is often criticized for placing too great an emphasis on an ‘atomistic’ notion of the individual and paying too little attention to the relations between individuals and their wider community. Yet, the concept is often picked up and used with little reflection on its philosophical underpinnings. As Timothy Wilkinson put it in his paper in the previous issue of *Public Health Ethics*, ‘bioethics, like political theory, is prone to outbreaks of communitarianism’. Wilkinson (2010) criticized appeals to the concept of community within healthcare resource allocation, arguing that the role of the concept is at best of minimal use, perhaps in efficiently delivering services to specific groups, but it does not play a central role in the answers commonly offered to the significant challenges of debates in relation to fair resource allocation.

In the same issue, Professor Ellen Zhang drew on the Confucian tradition, often portrayed as more communitarian in its approach than ‘Western’ approaches to bioethics, to suggest a middle way. She distinguished this approach from a collectivist communist approach and by conceptualizing the individual as fundamentally part of a community, rather than the community taking precedence over the individual, argued for a middle path between individualism on the one hand and collectivism on the other (Zhang, 2010).

In this issue, two further papers explore the nature, role and uses of the concept of community in bioethics.

Sean Cordell and Heather Widdows (2011) explore in their paper the concept of community through the medium of biobanking, arguing that to capture all of the important concerns that might be raised regarding biobanking, community interests must be taken into consideration as distinct from both individual interests and aggregated individual interests. They make a very helpful distinction between collective and corporate community goods (collective goods being mere aggregations of the interests of individuals within the community, corporate goods being goods that arise out of the community such as rights to self determination as a group) which serves as the basis for suggesting more attention needs to be paid to the concept of community in bioethics.

Drawing on their experiences of community engagement in rural Kenya, Vicki Marsh, Dorcas Kamuya, Michael Parker and Catherine Molyneux address the vital topic of the role of the community in international collaborative biomedical research. They argue that the concept of ‘community’ is a contingent normative concept, and therefore the very act of defining who or what constitutes a community is a normative project replete with ethical implications (Marsh *et al.*, 2011). They focus on two aspects of the interplay between individual and community interests, arguing that to take individual informed consent seriously means addressing community influences, practices and traditions, and that individual decision making about risks and participation in research can have significant impacts on their wider community.

While these papers have touched on several important questions about how we might and whether we

ought to appeal to the concept of community when discussing issues both in public health ethics and in the broader bioethical context many questions remain unanswered. How are concepts of solidarity sometimes appealed to in resource allocation related to concepts of community? If there is a conflict between the interests of a community and a member of that community, how ought this conflict be resolved? Can the interests of the community play a justificatory role in limiting the liberty of individuals in that community or is that the wrong way to conceptualize the relationship between individuals and their community? What benefits and problems emerge from being a member of a community? How do communities shape individual lifestyle and behaviour? Is it ethical to use communities as a means to improve individual health or to seek to change individual behaviour?

It is our hope that these papers might stimulate not only further discussion but also further dialogue between different traditions and that the broader debate about this sometimes rather nebulous concept, and indeed bioethics more generally, might be the richer for it. We would welcome the submission of responses to these papers and further reflections on the role that might be played by the concept of community in bioethics.

References

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