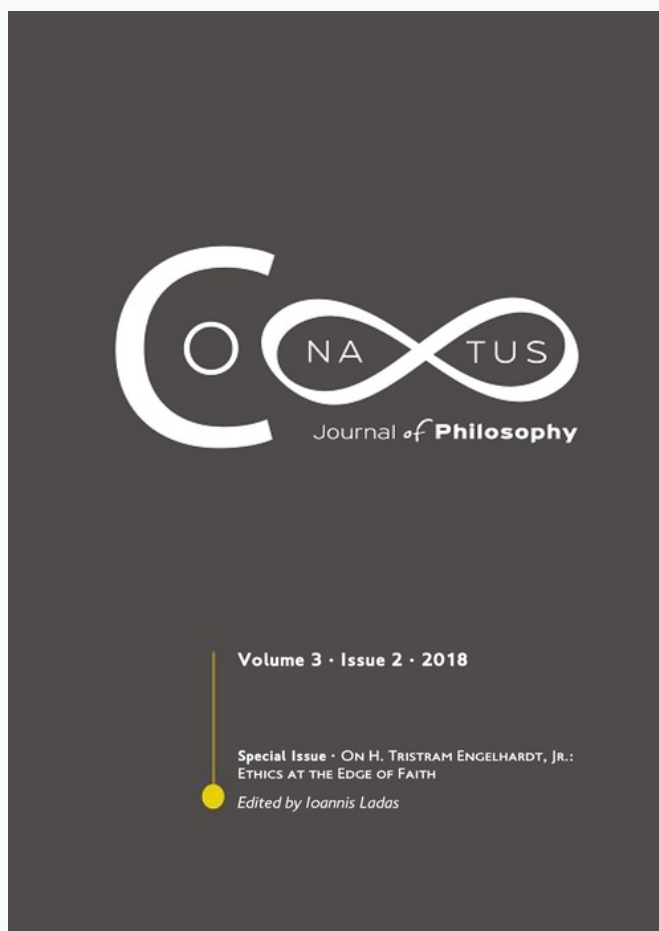


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### “We Live in the Ruins of Christendom”: Bioethics in a Post-Engelhardtian Age

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# "We Live in the Ruins of Christendom"\*: Bioethics in a Post-Engelhardtian Age

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## Abstract

*Hugo Tristram Engelhardt Jr. is a philosopher and a physician who has devoted all his life and all his creative power to developing and promoting a Christian bioethics. At the same time, the American is a personality who polarizes and has received euphoric praise on the one hand and malicious criticism on the other. This has already been the case during his lifetime and will presumably remain so even after his death, which we wish to commemorate here. In the following contribution I intend to investigate why Engelhardt provokes so different reactions in the scientific community, and I will try to bring closer together the two seemingly irreconcilable parties of Engelhardt admirers and Engelhardt critics. I will do this by focusing on the two most controversial aspects of his research, his critique of the status quo and his concept of an independent Christian bioethics.*

**Key-words:** *Engelhardt, Bioethics, Christian bioethics, common morality, post-Engelhardtian age*

## I. Developing a content-full Bioethics

To start with the first point, the question is what sort of bioethics we need today. It is, I believe, an ethics that takes people and their problems, but also their moral knowledge seriously. It is an ethics that suggests concrete answers and might therefore be called content-full. In doing so, it does not necessarily have to provide exact knowledge, but it certainly needs to identify the outlines of morality and to provide orientation for the single individual in decision-making situations. Furthermore, it is an ethics that remains critical towards everyday practice, and it is, after all, an ethics that seeks to motivate good behaviour.

To provide all this, normative theories must define, and here I fully agree with Engelhardt, what should be regarded as "good" or "desirable" and give us an idea of

\* H. Tristram Engelhardt Jr., *The Foundations of Christian Bioethics* (Lisse: Swets & Zeitlinger Publishers, 2000), xii.

what makes life a "good" life. With regard to "good" life, Engelhardt uses the term of a "content-full bioethics," which gives "reliable advice."<sup>1</sup> In the past, by developing some sort of metabiology, various philosophers, especially the so-called Aristotelian Naturalists, have attempted to elaborate what such content-full ethics might look like and which understanding of "good" could be deduced from human nature.

Using human nature as the basis of morality is, as Engelhardt rightly observes, a critical endeavor. First of all, there is a problem of selection, for it is quite doubtful whether it is possible to state clearly what the very characteristics of man are. If one does not want to content oneself with man's – little elucidating – genetic determination, it turns out that especially social behavior and reason we usually take as mankind's distinguishing marks also occur, partly at least, in higher developed animals. Conversely, there are human beings who are deficient with regard to these qualities, but we would still not deny their humanity.

And even if it were possible to ascertain such human characteristics, what would be gained? For from the existence of typically human qualities there does not follow any imperative concerning human behaviour, as Dagmar Borchers points out: "Aus der Beschreibung der menschlichen Natur folgt in moralischer Hinsicht gar nichts."<sup>2</sup>

To avoid the difficulties mentioned, a number of 20<sup>th</sup> century philosophers have chosen reconstructive approaches. Such models have existed since antiquity<sup>3</sup>, but they have been explicitly designated as such and increasingly developed in the post-war period only. Bernard Gert<sup>4</sup>, for example, is one of them: with reference to the Decalogue of Deuteronomy, he formulates ten basic laws, which he believes to be *prima facie* valid. Another approach is that of Axel Honneth<sup>5</sup>, who explicitly takes the contingency of moral rules and of ethical disputes as a starting point, but still

<sup>1</sup> Engelhardt, *Christian Bioethics*, 28.

<sup>2</sup> Dagmar Borchers, *Die neue Tugendethik. Schritt zurück im Zorn?* (Paderborn: Mentis Verlag, 2001), 225 (The description of human nature has no moral consequence). In a slightly different context see Richard M. Hare, *Essays on the Moral Concepts* (Berkeley: University of California Press, 1972), 37-38: "[...] it is one thing to say that by calling a creature a man we imply that he belongs to a species having certain capacities, and quite another thing to say that by so calling him we imply that he belongs to a species whose specific good is of a certain kind. [...] Similarly, if 'horse' is used as a functional word, meaning 'charger', a horse that throws his rider becomes eo ipso a bad one; but the horse may say to himself 'I am not trying to be a horse in that sense; I am only a solid-hoofed perissodactyl quadruped (equus caballus), having a flowing mane and tail', and proceed to throw his rider without offence to anything but the rider's standards. [...] The horse-breaker's art would be easy, if one could turn horses into chargers by definition."

<sup>3</sup> Dieter Birnbacher, *Analytische Einführung in die Ethik* (Berlin: Walter de Gruyter, 2007), 67-72, interprets inter alia Aristotle as an early representative of reconstructive ethics.

<sup>4</sup> Bernard Gert, *Morality. Its Nature and Justification* (New York: Oxford University Press, 1998). Engelhardt, *Christian Bioethics*, 64, mentions favorably that Gert has "faith in the ability to reason with a universally valid morality".

<sup>5</sup> Axel Honneth, *Das Recht auf Freiheit: Grundriss einer demokratischen Sittlichkeit* (Berlin: Suhrkamp, 2011). Honneth is not received by Engelhardt, which may be due to the fact that his writings have primarily attracted attention in the German-speaking countries.

argues in favour of a reconstructive approach. On the basis of two central concepts (recognition and social freedom), which he adopts from Hegel and rephrases in the tradition of critical theory, he reconstructs tensions that manifest themselves on the level of personal relationships, democratic decision-making or market-economy action. These tensions are responsible for people being denied recognition and having to suffer from injustice, degradation, exclusion, and so on.

The best-known reconstructive approach in the field of bioethics, however, is the so-called Principlism, in which Tom Beauchamp and James Childress roughly draft the contours of morality, that is a core stock of moral beliefs they consider to coincide with a minimum consensus between all involved.<sup>6</sup> This core stock is then specified by four principles of medium range (non-maleficence, autonomy, beneficence, and justice). These principles imply *prima facie* obligations, but in the individual case they require an act of balancing and reasoning so that one can ultimately succeed in formulating a well-founded response. As far as content is concerned, Principlism mediates between the demands of the historically established professional ethics, which can be interpreted as the realization of the principles mentioned, and the requirements of the complex biomedical challenges we face today.

This approach, by many scientists considered to be extremely deserving, is sharply criticized by Engelhardt. He states that in reality the alleged consensus of Beauchamp and Childress' secular bioethics is "hollow."<sup>7</sup> He is convinced that dissent still dominates on the level of concrete decisions and that the principles on which Beauchamp and Childress have only been able to agree on the basis of their contingently common backgrounds<sup>8</sup>, are not likely to overcome this dissent.

In fact, Engelhardt seems to be right insofar as on closer examination, the concept of principles proves to be problematic since it is based, as I will try to show in the following, on a level too high for a reconstructive ethics. What is uncontroversial is the fact that every person has moral beliefs. At the same time, however, it is obvious that these beliefs do not only express themselves differently but also develop in different ways. It cannot be assumed that all actors dispose of clearly formulated and well-reflected knowledge concerning moral rules or principles and are able to apply this knowledge autonomously. Such competence is a sign of a high level of moral proficiency and is therefore not an ideal starting point for a reconstructive approach seeking to maximize the number of moral agents involved.

Moreover, rules are already the specification of a "common morality" as adopted by Tom Beauchamp and James Childress. Rules are the result of the codification of a wider moral knowledge that tends to be wider and more open. In the process of codification, however, decisions are being taken, clarifications have to be made, etc.,

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<sup>6</sup> Tom L. Beauchamp and James F. Childress, *Principles of Biomedical Ethics*. Oxford: Oxford University Press, 2009<sup>6</sup>.

<sup>7</sup> Engelhardt, *Christian Bioethics*, 28.

<sup>8</sup> *Ibid.*, 31.

which actually increases the potential for dissent. Thus – at least for the time being –, it may not seem wise to take the step of rule-building in an approach that seeks the highest consensus possible.

The same applies to the principles. If in philosophy "principle" signifies something "first come", something from which something else evolves<sup>9</sup>, an origin, a starting point, in colloquial language "principle" has the connotation of rule-governed action. Principles are usually understood as guidelines which are to be followed. Therefore, in making rules, they fix values. In the natural sciences, "principle" is used as a synonym of "law" or in the sense of a general rule. From the above considerations, however, it arises that this closeness to rules turns out to be a problem if bioethics wishes to be oriented towards a maximal consensus. Or, as Engelhardt formulates it: "There is no common understanding of the canonical content or meaning of the principles of autonomy, beneficence, non-maleficence, or justice."<sup>10</sup>

So, is the bioethics project doomed to fail or is Engelhardt's criticism inaccurate? I think neither is the case. On closer examination, it turns out that Engelhardt – just like Beauchamp and Childress – seeks consensus on a very high level, that of a clearly defined moral knowledge articulated in the apprehension and application of rules or principles. Next to such ambitious moral knowledge, however, there also exists less reflective, often implicit moral knowledge, which finds its expression in values. Every moral subject<sup>11</sup> has such values, we need them if we want to cope with life, which would not be possible without a minimum of orientation. Values can therefore, much better than principles, be considered as a kind of minimal stock of moral knowledge.

Of course, the values themselves require a conceptual clarification: "Value" is first of all understood as goodness or the good quality of something, and this in two ways: Either this "bonitas"<sup>12</sup> can be determined quantitatively – then "value" is used in the sense of exchange value which has an equivalent, the value of an object or service which can be bought or sold, which can be traded; reconstructive ethics, however, is not interested in such kind of value. Or value stands for an immaterial meaning<sup>13</sup> that represents a norm, an orientation or a goal. But what can be understood as "immaterial meaning"?

<sup>9</sup> In *Phys.* 1: 10-3, Thomas Aquinas mentions three conditions for principles: principles must not evolve from any other source (1) nor evolve from each other (2), and everything else must evolve from them (3). See also Harald Schöndorf, 'Prinzip' in: *Philosophisches Wörterbuch*, ed. Harald Schöndorf and Walter Brugger (München: Verlag Karl Alber, 2010), 375-377.

<sup>10</sup> H. Tristram Engelhardt JR, "Beyond the Principles of Bioethics: Facing the consequences of Fundamental Moral Disagreement", *ethic@* 11, no. 1 (2012): 16.

<sup>11</sup> In contrast to moral objects - such as (non-human) animals, newborns, the mentally handicapped, coma patients, etc. - who have a moral status and the right to have their interests taken into account, moral subjects are capable of acting and therefore are responsible for their actions.

<sup>12</sup> This "bonitas" might also be negative.

<sup>13</sup> Schöndorf, "Prinzip", 571.

In Neo-Kantianism, values are said to have a sphere of their own, which means that they are understood as being valid not as merely being. Based on Scheler, Hartmann places values in the vicinity of the Platonic ideas. Apart from the criticism of these positions<sup>14</sup>, the question as to whether there is a hierarchy among values or how such a hierarchy can be established is also discussed controversially. In any case, the search for the ontological status of values is closely linked to the subjectivism-realism debate in ethics. Proponents of a value subjectivism understand reality as value-free, filled only with values through human projection. Value realism on the other hand, as seen in our everyday moral practice, assumes that there are moral facts that exist independently of our attitudes, make judgments true or false, and even have a motivating effect.<sup>15</sup> Unfortunately, I cannot devote myself to this debate in this place.

Regardless of the debate, it seems that values which moral subjects believe to be valid even before they engage in bioethical reflection are a better basis for a minimum consensus in a pluralistic world than the principles criticized by Engelhardt. Of course, the values found in different agents – doctors, nurses, administrators, patients, and relatives – need to be critically reflected as far as their importance to bioethics and their scope are concerned. They also need to be systemized by subject areas and “reduced” in number until a small set of values remains that is so uncontroversial that it can be accepted as an overlapping consensus by all involved. It is to be expected that such a minimal core stock will not only meet with consensus with the individual agents but will also be compatible with other normative approaches in bioethics.

What needs to be discussed here is the question of normativity, *id est* the question how, in a process of reconstruction, of pondering and reasoning, of generalizing and of systematizing existing values, normativity can come into play. Of course, one could advocate an internalist position as some moral realists do and argue that values themselves have normative power. It could also be argued that values are concrete, so-called thick concepts<sup>16</sup> which in addition to their prescriptive part have a distinct descriptive part and that they thereby – at least to a certain degree – have a motivating effect. For it is more desirable to be called “fair”, “generous”, or “just” than to know that your behavior was “right”. Recognition and appreciation, which resonate in the descriptive part of positive values, provide a greater incentive to behave in the manner described than the mere ok that comes from a correctly followed rule.

<sup>14</sup> Criticism comes from H. and A. among others, the latter interpreting the value problem as a misrepresented problem of reification of the bourgeois society. Axel Honneth, *Verdinglichung: Eine anerkennungstheoretische Studie* (Berlin: Suhrkamp, 2005).

<sup>15</sup> Christoph Halbig, *Praktische Gründe und die Realität der Moral* (Frankfurt am Main: Verlag Vittorio Klostermann, 2007); Derek Parfit, *On What Matters* (Oxford: Oxford University Press, 2011).

<sup>16</sup> Borchers, *Neue Tugendethik*.

At present there is a complex debate on how a (possible) normative authority of values can be conceived, and in how far thick concepts can motivate. As I cannot take up this discussion here, I will focus on the desire of moral agents to provide some kind of framework and orientation for their actions.<sup>17</sup> The values analyzed in a reconstructive ethics unfold their normative power because there are people who want to orient themselves by them, people who wish to give their actions a certain direction. Such normativity remains weak but at the same time it remains basal in the sense that it is compatible with more sophisticated concepts of normativity and can therefore form a kind of 'basis' for such concepts.<sup>18</sup>

If, however, the desire to behave in a morally good way to some seems to be insufficient, one must ask what can be rightly expected of a moral agent. Should we demand more than the wish to do the good and at the same time the will to seek how this can possibly be achieved? I do not think so. But if that is so, I ask further why we should expect more from moral philosophy than to provide reliable assistance.

But what can we further do with this small core stock of values the actors can agree on and which derive their normativity from the will of the participants to realize them? Similar to what Beauchamp and Childress do, one can, I believe, assume a *prima facie* validity, which means that these values must be taken into account in concrete actions and situations of decision-making. In a situation of decision-making, the individual or a group of agents must first of all assess what it means to realize a particular value here. However, this act of assessment and pondering does not only concern this particular value but has to be applied to all values that belong to the so-called core stock. The challenge then is to mediate between the different directives that arise in this process until it is possible to formulate a "well-reasoned response". This response will not be the (only) correct answer and it does not apply unconditionally always and everywhere. On the contrary, it is even very likely that another individual, another group of agents will give a (somewhat) different well-reasoned response to the same problem because the values concerned do not behave hierarchically to each other but are fundamentally equal. This gives the decision-maker a certain operational leeway to attach more weight to one value in a specific situation and less weight to another.

This very fact is at the same time the strength of this approach, since it provides the necessary conditions for getting people with different personal and cultural backgrounds to engage in a dialogue and for bringing together different normative positions while maintaining their specific concerns. Also, those who do not promise more than a well-reasoned response need not engage in endless debates on ultimate

<sup>17</sup> Beauchamp and Childress, among others, proceed similarly when they talk about "morally serious people". Beauchamp and Childress, *Principles of Biomedical Ethics*.

<sup>18</sup> Beauchamp and Childress, *Principles of Biomedical Ethics*, 384, come to a similar conclusion. They plead not to over-emphasize the differences in the single normative approaches: "We can say without exaggeration that the proponents of these theories all accept the principles of common morality before they devise their theory".

justification but can focus their attention on the concrete issues that need to be addressed in applied ethics such as bioethics.

However – as Engelhardt and other critics of principlism<sup>19</sup> have shown –, it is also true that the method of reconstructing values may hold the danger of gradually weakening bioethics. In fact, such weakening might lead to resignation towards the normative force of the factual. This would mean that moral philosophy would be degraded to an ethics of appeasement which, in the face of changes in social opinion, would sooner or later justify almost everything. The metaphor of ‘balancing’ values seems to be particularly problematic in this context as it gives the impression that in such a normative theory, ultimately, everything is legitimate, *id est* that each value can be nullified in favor of another.

In my opinion, though, this is not the case. It is not the case because a reconstructive ethics does not define as normative what simply ‘is’ but the ideals and values of the persons involved, which by definition exceed the ‘usual’ and allow for new visions. Thus, despite the fact that the approach proposed here is basic in the sense that it asks for the lowest common denominator, it starts with moral excellence. Beauchamp and Childress express this as follows: “The model might seem impractical, but, in fact, moral ideals are practical instruments. As our ideals, they motivate us and set out a path that we can climb in stages, with a renewable sense of progress and achievement.”<sup>20</sup>

Values thus provide orientation, they have a critical potential and therefore do not abet any ethics of appeasement. At this point one might argue – and probably Engelhardt would do so – that moral evil arises from people invoking “false” values. This problem, however, can be addressed by the fact that coherence does not remain the sole criterion (for false beliefs can of course also form a coherent system). Rather, Beauchamp and Childress have always have pleaded for “considered judgments” in the process of assessment, which represent the “mostwell-established moral beliefs.”<sup>21</sup>

Sound reasoning and reflection are likely to be the ‘silver bullet’ to prevent morally deficient behavior. For what most distracts people from doing good – apart from extra-moral interests – is not false moral beliefs but the lack of thought they give to the question of what kind of values they realize in their actions. What is problematic in the very first place are unreflected acts or actions that result from a thoughtless practice. However, once values have been reconstructed, *id est* once thinking about what we consider important and binding has begun, a process is set in motion which

<sup>19</sup> Bernard Gert, Charles M. Culver and K. Danner Clouser, *Bioethics. A Return to Fundamentals* (Oxford: Oxford University Press, 1997); Johann S. Ach and Christa Runtenberg, *Bioethik. Disziplin und Diskurs. Zur Selbstaufklärung angewandter Ethik* (Frankfurt am Main: Campus Verlag, 2003); Bert Heinrichs, *Forschung am Menschen. Elemente einer ethischen Theorie biomedizinischer Humanexperimente* (Berlin: Walter de Gruyter, 2006).

<sup>20</sup> Beauchamp and Childress, *Principles of Biomedical Ethics*, 51.

<sup>21</sup> Beauchamp and Childress, *Principles of Biomedical Ethics*, 407.



provides a critical corrective to unreflected action.

This hypothesis is supported by the findings of cognitive psychology, according to which misjudgments regarding the truth or falsity of convictions typically occur where procedures intended to lead to fast results are applied that offer no scope for reflection.<sup>22</sup> In everyday life, we repeatedly encounter situations in which it is not so much a matter of truth but a matter of arriving quickly at approximately correct or even just uniform results.<sup>23</sup>

The fact that these practices, inappropriate for moral truth, constitute a certain part of our moral thinking does not mean that one cannot gain reliable moral knowledge by applying appropriate procedures. Such appropriate procedures are processes that either start with a priori findings – such as the Thomasian formula “*bonum est faciendum et [...] malum vitandum*”<sup>24</sup> – or which are reflective procedures. Similar to the extra-moral domain the reliability of the result increases when different independent processes lead to the same or at least to similar findings.

Whether the use of reflective methods is sufficient to develop a viable and critical bioethics cannot be decided here. And, of course, the question of what weight to attach to individual values or even of dividing them into ‘right’ and ‘wrong’ remains a precarious one. For asserting that values exist in ways that cannot be reduced to subjective opinion, does not necessarily mean that we will succeed in identifying them and in bringing them into a hierarchical relationship to one another. In other words, the fact that something exists does not mean that I am able to (correctly) perceive it.

Accordingly, the search for such values that can be used as a viable basis for bioethics can only be an approximation. Engelhardt, however, is not satisfied with that because he expects more than an approximation; in fact, he expects Truth, a truth that becomes manifest in a personal vis-à-vis: “Just as ultimate Truth is not a what but a Who, the Holy Trinity, Tradition is not a what but a Who, the Holy Spirit.”<sup>25</sup> This extremely high claim leads me to the second question I will ask in this article, name-

<sup>22</sup> For a detailed evaluation of our understanding of moral knowledge, see Jan-Hendrik Heinrichs, *Moralisches Wissen. Grundriss einer reliabilistischen Moralepistemologie* (Münster: Mentis Verlag, 2013).

<sup>23</sup> Heinrichs, *Moralisches Wissen*, 194, writes: “Wahrheit ist das erste epistemische Ziel, sie ist aber nicht das einzige Ziel, dem Überzeugungsbildungsprozesse verpflichtet sind. In zahlreichen Aufgaben ist es wichtiger, innerhalb bestimmter Fristen zu ungefähr zutreffenden als zu exakten Ergebnissen zu gelangen. In einigen Fragen ist es sogar wichtiger, zu einheitlichen Ergebnissen zu kommen, als zu wahren – zuweilen gibt es nur Einheitlichkeit und keine Wahrheit, etwa in der Frage, auf welcher Straßenseite wir alle fahren sollten.” (English: Truth is the first epistemic goal, but it is not the only goal to which belief-building processes are committed. In many tasks, it is more important to arrive, within certain deadlines, to roughly appropriate results than to precise ones. On some issues it is even more important to arrive at uniform than to true results – sometimes there is only uniformity and no truth, for example, on which side of the road we should all drive).

<sup>24</sup> For the full quote and a detailed discussion, see Heinrichs, *Moralisches Wissen*, 78.

<sup>25</sup> Engelhardt, *Christian Bioethics*, 391-392.

ly the question with what sort of Christian bioethics we are confronted in Tristram Engelhardt's work.

## II. Different kinds of Christian Bioethics

The concept of a Christian bioethics, as Engelhardt develops it, does not only meet with recognition but also with massive criticism. This seems mainly due to the lack of a distinct understanding of what Christian Bioethics is and what it can provide. The discomfort with Tristram Engelhardt's position derives from the fact that unclear expectations prevail within the scientific community. In order to gain clarity here, we should first consider what different types of Christian bioethics we are dealing with.

In fact, there are at least two very different types of Christian philosophy and, consequently (if bioethics is understood as a discipline of philosophy), of Christian bioethics. Following Winfried Löffler I call these two types 'Augustinian' and 'Thomistic'<sup>26</sup>, but in contrast to Löffler I will again subdivide the Thomistic approach and therefore distinguish three different kinds of Christian bioethics. They basically differ in their methodology.

The method of a Thomistic philosopher is to argue as long as possible with 'worldview-neutral' premises, that is, with premises that are basically comprehensible to everyone, regardless of his or her religious convictions, which he or she believes to be true. Philosophers who follow the Thomistic tradition are convinced that they must not use premises that can only be known through divine revelation. But at this point of our argumentation it is important to differentiate again. Some Thomistic philosophers would say that they never use arguments other than those that can be comprehended by reason (Type I). Others try to argue by using ideologically neutral premises as long as possible and by then resorting to religious premises if important questions would remain unanswered otherwise (Type II). They are aware of the fact that they no longer act as philosophers but as theologians. They accept this change of perspective in order to be able to provide answers where reason alone would not allow to make decisions.

By contrast, Type I bioethicists would state that questions that can only be answered on religious premises must remain open. Of course, one could ask to what extent Type I philosophers may then be called Christian bioethicists at all. Let me answer as follows: Type I Christian bioethicists methodologically pretend that they are secular philosophers. Still, their faith functions as a 'guiding star' (as Franz Brentano and Jacques Maritain put it). These philosophers show a certain preference for questions in which a bridge may be built between rational reasoning and Christian convictions. Or, quoting Löffler, they tend "toward philosophical opinions which

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<sup>26</sup> Winfried Löffler, "Two Kinds of 'Christian Philosophy'", *European Journal for Philosophy of Religion* 5, no. 2 (2013): 111-127.

seem compatible with their worldview."<sup>27</sup>

While Type I and Type II Thomistic bioethicists seek to demonstrate that the Christian faith is compatible with up-to-date bioethics, Augustinian bioethicists propose a totally different methodology. In fact, they do not seek to present their arguments as externally plausible but use premises we can only know from revelation. As a next step they try to develop and defend a consistent, comprehensive and coherent Christian worldview. Tristram Engelhardt offers such kind of Christian bioethics and this is also the reason why he has often been sharply criticized. For the much greater appreciation of the scientific community for the Thomistic tradition of Christian philosophy has led this community to partially forget that the Augustinian tradition, which can pride itself of many well-known representatives in the past, *does* exist at all. What happens then is that the representatives of the Augustinian school are judged by criteria of the Thomistic school (above all with regard to their external plausibility), that is, criteria Augustinian Christian philosophers cannot fulfill.

In fact, Engelhardt does not want to be externally convincing because he is persuaded that Christian ethics in a post-Christian age must emphasize what is distinct, particular, and special. In his founding of a Christian bioethics in an orthodox tradition, he distinguishes between an Eastern (traditional) and a Western (post-traditional) theology. He starts from a theory of historical decadence, which in his opinion begins with the schism of 1054, continues during Reformation and Enlightenment and finds its negative climax in the present post-modern de-Christianization of society. He interprets the struggle for a rational justification of ethics as the doomed attempt to preserve some elements of the Christian tradition.<sup>28</sup>

In contrast, he wants to establish and justify ethics in transcendence, that is, in its direct relationship to the triune God<sup>29</sup>. With this anchoring in the noetic (knowledge mediating) experience of God he clearly distinguishes himself from most Catholic Thomistic-inspired colleagues. His approach to bioethics does not begin with defining terms and sharp logical inferences, but with prayer, asceticism, and worship. On this basis, he seeks to develop a rational perception of the revelation while at the same time remaining faithful to the ongoing experience of divine revelation. The goal of such bioethics is not primarily a concrete answer, but the purification and the sanctity of the bioethicist himself.

<sup>27</sup> Löffler, "Two Kinds of 'Christian Philosophy'", 120.

<sup>28</sup> Zimmermann-Acklin, *Bioethik*, 60-63.

<sup>29</sup> H. Tristram Engelhardt JR, *The Foundation of Bioethics* (Oxford: Oxford University Press, 1996), 210: "An approach to Christian bioethics firmly anchored in the concerns of immanence will primarily engage philosophy, historical analysis, and biblical study. Discursive rational analysis and text-critical examination of Scriptures will be central to its very understanding of the legitimacy of its theological claims. A bioethics firmly anchored in a noetic experiences of God will begin with prayer, asceticism and worship. This ascetical, liturgical core will not preclude analytic, discursive account of its undertaking. In this sense, it would never be anti-rationalistic."

Whatever one's opinion of the above-mentioned possibilities of doing Christian bioethics, Engelhardt should be given the credit of having revealed his own convictions, which is a proof of honesty and transparency. Of course, any philosopher, whether Christian or secular, is influenced by his worldview but few will make their "ideological" convictions explicit and, thus, a possible subject for discussion. And there certainly is a second positive aspect in Engelhardt's Christian bioethics, irrespective of whether you agree with regard to his methodology or not: With his content-full answers in the field of bioethics he renders intellectual service not only to the Christian community and its intellectuals, but also to people of other religious beliefs. He invites them to pursue his thought, under the assumption of the hypothetical acceptance of his premises. He who inquires what would follow for modern bioethics if Christian doctrines (as presented by Engelhardt) were true, may read his work with profit, as a source of inspiration, even if he is not a Christian himself. In this sense, Engelhardt's so-called particularism can indeed be related to other normative theories and may therefore in the long run also receive appreciation outside the Christian communities.

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