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INTERRELIGIOUS BIOETHICS: CHALLENGES AND PERSPECTIVES

Abstract: Interreligious bioethics examines the ethical issues arising from the applications of biotechnology and genetic engineering at the beginning, maintenance, and prolongation of human life through the prism of multiple religious traditions and perceptions. It also examines issues concerning the natural environment, as well as the living beings that inhabit it. Specifically, interreligious bioethics tries to identify points of convergence and possible compromises among different religious traditions on bioethical questions, such as abortions, artificial fertilization, surrogate motherhood, experiments on humans, and animals, the protection of the natural environment, and the cremation of the dead. In this context, it seeks to enhance understanding and cooperation between different religions on bioethical issues, promoting mutual respect and understanding. Its importance has grown due to globalization and the increasing interdependence between societies, as well as due to the rapid developments in medicine and biotechnology that pose new ethical questions. In this spirit, the present article refers on the one hand to the value of interreligious bioethics in contemporary multicultural societies and on the other hand examines the challenges and prospects that exist, aiming at the creation of an Interreligious Committee on Bioethics.

Keywords: Interreligious bioethics, bioethical issues, interreligious dialogue

1. INTRODUCTION

In our era, bioethics faces a plethora of challenges that arise from the rapid developments in biotechnology and genetic engineering. These advancements do not simply confront us with technical issues,

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but they pose profound ethical questions regarding the inception, maintenance, and prolongation of human life, the protection of the natural environment, and the dignity of the living beings that reside within it. Interreligious bioethics, which is the subject of this article, seeks to negotiate these ethical issues through the prism of multiple religious traditions and perceptions.

The significance of the interreligious approach to bioethics has increased in the context of globalization and the growing interdependence of societies, where religious pluralism and cultural diversity are more evident than ever. At the same time, the rapid developments in the fields of medicine and biotechnology generate new ethical questions that traditional moral guidelines struggle to answer effectively. Thus, interreligious bioethics attempts to bridge various religious traditions, seeking points of convergence and possible compromises to promote mutual respect and a deeper understanding of bioethical issues on a global scale. In this context, it aims to enhance cooperation between different religions on bioethical matters. Indeed, bioethics is perhaps the most suitable forum for the meeting of the three monotheistic religions since the way they handle the basic issues of the life of living beings is roughly the same, and the differences refer to specific issues. In this spirit, the present article refers, on the one hand, to the value of interreligious bioethics in contemporary multicultural societies and, on the other hand, examines the challenges and prospects that exist, aiming at the creation of an Interreligious Bioethics Committee.

2. THE SPECIFICITIES OF AN INTERRELIGIOUS PERSPECTIVE ON BIOETHICS

An interreligious view of bioethics is directly dependent on the religious perspective that one chooses to follow. Christianity evaluates bioethical issues differently than Islam, Judaism, Buddhism, and Hinduism do. The fact that the aforementioned religions may arrive at the same evaluative judgments does not negate that they start from different backgrounds and use different criteria and principles. The difference is comprehensive, given that there is a different theological framework. Orthodox Christian bioethics is embedded in an experiential (not sensory) or intellectual theology, which perceives the right, the good, and the virtuous in terms of the sacred. For example, the prohibition against

the destruction of a zygote or embryo in the East does not depend on any doctrine of ensoulment; therefore, the adopted bioethics is more spiritual and therapeutic than moralistic and legalistic. In the same way that the physics of Newton and Einstein are separated by fundamentally different paradigms so that basic terms such as time, space, mass, and energy have different meanings, the same occurs in relation to the various Religions. Taking into account the different theological frameworks, the “same term” can have different extensions. In any case, before we examine bioethical issues on an interreligious level, we must decide which religions we intend to choose and, more specifically, which particular perspective. We may examine an issue in Orthodox Christianity and Sunni Islam or in Roman Catholicism and Buddhism².

In the interreligious examination of bioethical issues, we must bear in mind that each religious approach to bioethics, when severed from the theology of each religion, is interpreted as a specific research area conducted within certain academic frameworks with the guidance of scientific standards. In this sense, a religious bioethics is the specific field of study around religion, within which anyone with the desire, intelligence, appropriate knowledge, and capability can advance and distinguish themselves as a religious bioethicist. Such bioethics will be religious to a limited extent, as it starts with certain doctrinal and moral presuppositions. However, religion will no longer constitute the “flavor” of God, but rather a kind of autonomous scientific inquiry³.

This fact reveals why religious bioethics was unable to provide moral guidance for the new high-technology medicine and found itself unable to meet this demand, as there was not one unified Religion. For instance, the Texan philosopher and bioethicist Herman Tristram Engelhardt (1941-2018) argued that Christianity was not in a position to provide clear guidance, as there were many perspectives and everyone could choose from these the one that endorsed their own choice. Essentially, the “division” weakened the voice of Christianity, as through this “variety” anyone could choose what satisfied them the most. If someone wished to find religious endorsement of artificial in-

2 Engelhardt, Herman Tristram, *After God: Morality and Bioethics in a Secular Age*, St Vladimir’s Seminary Press, New York 2017, p. 408-9.

3 Engelhardt, Herman Tristram, *The Foundations of Christian Bioethics*, M & M Scrivener Press, Austin 2000, p. 266.

semination by sperm donation, it sufficed to seek out the appropriate Christian theologian⁴.

The main Christian Confessions appeared to disagree among themselves even about what it means to be Christian, at the same time that they had abandoned or rejected the age-old solutions to ethical dilemmas. Even the very words used by Christian theologians did not have a common meaning. Just as Einstein (1879-1955) and Newton (1643-1727) used the same terms, e.g., space, time, mass, energy, but with entirely different meanings, so did Christian theologians use terms like baptism, Eucharist, Church, Holy Scripture, sin, and salvation. The same exactly happened with Islam, as Sunni and Shi'a Islam differ in their approach to bioethical issues. For example, Sunni Islam prohibits surrogate motherhood, while Shi'a Islam accepts it under certain conditions⁵.

Religious bioethics, in this way, lost the opportunity to offer moral guidance in modern health policy, because religions found themselves divided and unable to propose a morality – or rather, they did not know which morality to choose. A consequence of this fact was the questioning of their ability to participate in the modern world. However, the climax was the consideration of Religion as a threat to a democratic and organized state because traditional religions: 1. seek answers to ethical issues more within a hierarchical structure than in individual logic and choice, 2. emphasize differences and do not encourage the emergence of an ethical consensus, 3. offer a morality opposite to that of the secular world, and 4. are unable to guide the public policy of secular pluralistic societies⁶.

The gap between traditional and post-traditional religion and society led religious ethics to become even more pluralistic, further complicating the situation. Traditional Roman Catholics, Episcopalians, and Presbyterians found more elements dividing them from liberal moral theologians than those separating them from each other. On the other hand, every interested party was faced with the multiple approaches of the Western Churches, while Roman Catholics and Protestants did not share a common understanding, for example, about what is ethically

4 Idem, 59.

5 Engelhardt, Herman Tristram, "Why Ecumenism Fails: Taking Theological Differences Seriously," *Christian Bioethics* 13, no. 1 (2007), p. 26.

6 Engelhardt, Herman Tristram, *The Foundations of Christian Bioethics*, p. 59-60.

at stake regarding contraception, sterilization, or assisted reproduction through a third party. Theologians were divided among themselves: some distinguished the creation of the embryo from the fertilization process, thus allowing abortion at the initial stage when necessary or desired, as well as in vitro fertilization, cryopreservation, and all sorts of experiments for therapeutic or other purposes. Consequently, in an era that endorses diversity, Christian bioethics, and especially its traditional version, showed significant disagreements⁷.

In such a case, Christian bioethics offered to divide not only Christians from non-Christians but also Christians among themselves. The same exactly happened with Islamic bioethics, which also offered to divide Muslims from non-Muslims, as well as Muslims among themselves. In this way, a risk to the fabric of a peaceful society was created, at least seemingly, and thoughts about a future cultural war emerged, making religious bioethics suspect⁸.

The above resulted in the religiosity of a religious bioethics itself becoming problematic. Some theologians, as if wanting to overcome the difficulties of a religious bioethics that was, however, excessively religious, rushed to bridge the differences, claiming that there is nothing that morally separates a religious from a secular bioethics. Notable examples include theologians Joseph Fuchs (1912–2005), who argued that there is no “different morality for Christians and a different one for non-Christians,” James Walter, who emphasized that “there is nothing special or distinct about Christian bioethics on a fundamental level,” and Charles Curran (1913–1978), who concluded that “non-Christians can and indeed do arrive at the same moral conclusions and value the same attitudes, dispositions, and goals as Christians.” Through these efforts, the gap between religious and secular bioethics was healed,

7 Savvas Agouridis, “Βιοηθική. Από την πλευρά των Θρησκειών (Bioethics. From the side of Religions),” *Utopia- Bimonthly edition of theory and culture*, no. 42 (November – December 2000), p. 74. Engelhardt, Herman Tristram, *The Foundations of Christian Bioethics*, p. 57-58.

8 Engelhardt, Herman Tristram, “Morality, False Consensus, and the Culture Wars: The Social Impact of Moral Disagreements about the Use of Human Embryos, Human Reproductive Technologies, and Human Genetic Engineering,” Paper presented at the ISESCO, University College London, January 25, 2005. Engelhardt, Herman Tristram, *The Foundations of Christian Bioethics*, p. 57-58.

and the moral distance between Christian, Islamic, Jewish, Buddhist, Hindu, and secular bioethics began to disappear⁹.

3. THE PROBLEM OF ELIMINATING DIFFERENCES

While initially perceived as pluralistic, diverse, and potentially threatening, religious bioethics seemed capable of unification through reason and recognized as equivalent to secular ethics in its content, affirming the moral similarity of all people. The logical and reasonable question arising from the “elimination” of differences between religious and secular Bioethics is whether being a Christian, Muslim, Buddhist, etc., bioethicist entails the same distinctiveness as simply being a Christian, Muslim, Buddhist, etc. And if Christian, Islamic, and Jewish bioethics differ from secular bioethics, shouldn't their content also differ? Shouldn't they have different positions on abortion, medically assisted reproduction, etc., considering any violation of moral rules is seen by religion as disobedience to God and distancing from Him? Righteous Christianity, for example, as Engelhardt suggests, advocates that through a life in Christ, one is disciplined in Christian bioethics, which is not an academic field alien to everyday life, because Christian bioethics constitutes a Christian way of living, experiencing, and addressing sexuality, procreation, pain, illness, healthcare services, and death. Correct teaching of Christian bioethics can be achieved through ascetic and liturgical life, understanding its proper dimension. Otherwise, access to bioethics will be one-sided and incomplete, if not mistaken, whenever it is perceived as a set of doctrines to be taught, a set of principles to be analyzed, or a set of disagreements to be re-

9 Fuchs, Josef, “Is There a Christian Morality?” in *Readings in Moral Theology* no. 2: *The Distinctiveness of Christian Ethics*, ed. Charles E. Curran and Richard A. McCormick, Paulist Press, New York 1980, p. 1-14. Walter, James, “Christian Ethics: Distinctive and Specific?,” in *Readings in Moral Theology* no. 2, ed. Charles E. Curran and Richard A. McCormick, Paulist Press, New York 1980. Curran, Charles, *Catholic Moral Theology in Dialogue*, University of Notre Dame Press, Notre Dame 1976, p. 20. Herman Tristram Engelhardt, *The Foundations of Christian Bioethics*, 60.

solved. Christian bioethics is not merely a philosophy but lives within the indivisible tradition of theology¹⁰.

The approach of both religious and secular bioethics undoubtedly benefited the latter, leading to the weakening of the former. Secular bioethics became more attractive, either because a religious bioethics continued to have its particularities and thus remained polyphonic, making it problematic for policy-makers in contrast to the unifying function of the secular, which they preferred, or because religious ethics essentially became equivalent to secular ethics and thus could be adequately approached through a secular philosophical reflection. Consequently, religious bioethics would be either divisive and dangerous or harmless and irrelevant. In any case, a secular bioethics is preferred over a distinct religious one, given that for some, the former even constitutes a religious choice, as its claims and promises are global and universal¹¹.

A study into the roots of secular ethics reveals its failure to provide: 1. harmony between the right and the good, 2. the motivation to be moral, and 3. a normative content for ethics. This is because, in the absence of a normative standard, an ethical viewpoint is nothing more than a particular amalgam of moral perceptions. Without a foundational or normative framework to anchor its principles, secular ethics may struggle to offer a cohesive and compelling ethical system that convincingly integrates what is considered “right” with what is considered “good,” motivates individuals to act ethically beyond personal or societal benefit, and provides a substantive normative content that guides ethical decision-making¹².

Kant (1724-1804), according to Engelhardt, attempted to eliminate traditional faith, while Hegel (1770-1831) tried to place it within the logical dialectic, and Kierkegaard (1813-1855) sought to ground it in an act of will. Kant’s Christianity is devoid of internal passion to guide the ethics of all rational beings, whereas Hegel’s Christianity lacks the transcendent metaphysical depth to redefine religious passion in philosophical terms. On the other hand, Kierkegaard’s Christianity does

10 Engelhardt, Herman Tristram, “What is Christian about Christian Bioethics? Metaphysical, Epistemological, and Moral Differences,” *Christian Bioethics* 3 (2005), p. 241. Engelhardt, Herman Tristram, *The Foundations of Christian Bioethics*, p. 61-63.

11 Engelhardt, Herman Tristram, *The Foundations of Christian Bioethics*, p. 63-64.

12 Engelhardt, Herman Tristram, *After God: Morality and Bioethics in a Secular Age*, p. 86. Engelhardt, Herman Tristram, *The Foundations of Christian Bioethics*, p. 39.

not sufficiently provide Christian knowledge, born of faith, which can ground the individual in the highest ethics of an absolutely transcendent personal God. These approaches represent attempts to restore the unity of ethics and discover the normative ethical authority¹³.

The unity that secular bioethics ostensibly provides is, in reality, vacuous, because there are as many secular interpretations of ethics, justice, and integrity as there are religions. There is no common ethics and bioethics, and people have fundamental disagreements regarding their content. Secular ethics has proven to be fragmented, diverse, and incapable of providing a clear, definitive, binding, unique, and logically justified content both in ethics and in bioethics. This situation underscores the challenges of establishing a universally accepted ethical framework in a pluralistic society where varying philosophical perspectives offer different answers to fundamental ethical questions¹⁴.

The propositions one can support, depending on the ethics and bioethics chosen as a model, are dramatically different. In reality, there is no normative concept or description of justice in healthcare provision that is universally accepted or definitively justified. For example, there are profound disagreements regarding the appropriateness of assisted reproduction through a third party. Additionally, there is no agreement on how to address these difficulties and establish a comprehensive ethics along with the corresponding bioethics. This situation highlights the complexity and diversity of ethical perspectives in modern societies. It emphasizes the need for ongoing dialogue among different ethical systems to explore

13 See related: Engelhardt, Herman Tristram, "Kant, Hegel, and Habermas: Reflections on 'Glauben und Wissen'," *The Review of Metaphysics* 63, no. 4 (2010), p. 871-903. Engelhardt, Herman Tristram, *The Foundations of Christian Bioethics*. p. 39, 139 158. Engelhardt, Herman Tristram, "Moral Obligation after the Death of God: Critical Reflections on Concerns from Immanuel Kant, G. W. F. Hegel, and Elisabeth Anscombe," Paper presented at the Conference on Moral Obligation, Bowling Green State University, November 15, 2008. Engelhardt, Herman Tristram, "Reason and God: Some Critical Reflections on Kant, Hegel, Habermas, and Ratzinger," Lecture presented at the International Academy for Philosophy, Liechtenstein, May 26, 2008.

14 Engelhardt, Herman Tristram, "The Recent History of Christian Bioethics Critically Reassessed," *Christian Bioethics: Non-Ecumenical Studies in Medical Morality* 20, no. 2 (August 2014), p. 156. <https://doi.org/10.1093/cb/cbu018>. Engelhardt, Herman Tristram, *The Foundations of Christian Bioethics*, p. 83-84. Engelhardt, Herman Tristram, "A Skeptical Reassessment of Bioethics," in *Bioethics Critically Reconsidered*, ed. H. T. Engelhardt, Springer, Dordrecht 2012. https://doi.org/10.1007/978-94-007-2244-6_1.

common ground and resolve disagreements. Establishing a comprehensive ethical framework that addresses the complexities of bioethical issues requires a collaborative approach that respects the diversity of moral viewpoints while striving for a consensus that upholds the fundamental principles of human dignity, justice, and the common good¹⁵.

Bioethics seems to proceed, Engelhardt contends, as if there is a common moral background accepted by everyone. Many seem to easily dismiss the problems bioethics faces and are impressed by its apparent success. Those who act in this way always hope for a common ethics and commit to acting in accordance with this hope. It's a tragic irony that the era which celebrates cultural diversity barely recognizes ethical diversity. Engelhardt, analyzing and evaluating the situation, concludes that according to the current tactic, we either deny/ignore the significance of disagreement or marginalize those who disagree. In any case, he believes that little room is provided for a parallel search for a different ethical perspective. For instance, he implies that parallel health care systems could be established, operating based on different interpretations of morality and human well-being. Instead, Engelhardt emphasizes, we fail to acknowledge diversity and offer no social space where an alternative approach to ethics, justice, and well-being could be pursued. Engelhardt clarifies that the modern denial or inability to recognize diversity in morality should not necessarily be interpreted as hypocrisy or a conscious choice. It may be due to our intense and unconscious desire to justify a particular ethics that authorizes us to choose the public policy we wish to dominate. In this way, despite real and persistent ethical disagreement, we demand a secular ethical consensus that legitimizes public policy and the clinical role of bioethicists. When we deny the differences, the findings supported by state ethics committees seem to stem from a common morality recognized by all. However, if diversity is recognized, we must admit that secular bioethics is characterized by the same profound multiplicity encountered in every religious approach.¹⁶

15 Engelhardt, Herman Tristram, *The Foundations of Christian Bioethics*, p. 84. Engelhardt, Herman Tristram, "Sin and Bioethics: Why a Liturgical Anthropology is Foundational," *Christian Bioethics* 1 (2005), p. 222.

16 Engelhardt, Herman Tristram, "Consensus Formation: The Creation of an Ideology," *Cambridge Quarterly of Healthcare Ethics* 11 (2002), p. 7-16. Engelhardt, Herman Tristram, *The Foundations of Christian Bioethics*, p. 84-87. Engelhardt, Herman

Thus, secular bioethics is often seen as more appealing than any religious bioethics, including Orthodox Christian ethics, as the secularization of culture makes a religious bioethics less attractive as a source of moral guidance. A religious bioethics sometimes contrasts with the view that society should be open, liberal, and pluralistic. This leads to traditional religious approaches being perceived as unacceptable, bothersome, and ultimately rejected. This trend reflects a broader cultural shift towards secularism, where ethical and moral frameworks are increasingly sought in non-religious, rational, and universal principles that are supposed to accommodate a wider range of beliefs and lifestyles within a diverse society¹⁷.

4. CONCLUSION

Bioethical issues undoubtedly have the potential to bring all religions closer together, provided that each religious bioethics remains authentically religious and does not attempt to erase differences, thereby altering its principles. Believers must unitedly recognize the differences, because what they disagree on is actually what unites them. In this way, interreligious bioethics can become a distinct scientific branch, enabling a detailed and meticulous reference and analysis of bioethical issues that are now posed globally.

This approach emphasizes the importance of maintaining the integrity of each religious tradition's ethical teachings while engaging in dialogue and collaboration on common bioethical challenges. By recognizing and respecting the diversity of moral perspectives, an interreligious bioethics can offer valuable insights into the ethical considerations of modern medicine and technology, fostering a richer understanding of human dignity, justice, and the common good. This collaborative effort can help to ensure that bioethical deliberations are

Tristram, "A Skeptical Reassessment of Bioethics," in *Bioethics Critically Reconsidered*, ed. H. T. Engelhardt, Springer, Dordrecht, 2012. https://doi.org/10.1007/978-94-007-2244-6_1.

¹⁷ Engelhardt, Herman Tristram, *The Foundations of Christian Bioethics*, p. 57. In Engelhardt's work, the term "traditional" is equated with the Church of the first Seven Ecumenical Councils, which is today found in the Orthodox Christian Church.

enriched by the wisdom of various religious traditions, contributing to a more compassionate and ethical global society¹⁸.

It is indeed encouraging that religions today have the potential to offer much more than they have already provided because: 1. their beneficial impact is now historically recognized, 2. the disempowered person of the 21st century is psychologically more apt to receive their message, and 3. they feel obligated for a comprehensive and systematic engagement with bioethical problems, both for informing their own faithful, who are called to coexist with modern challenges, and for dialogue with science and contemporary secular society. Moreover, even within various religions, the differences often do not concern the essence of the issue but the method of managing the issue¹⁹.

This potential signifies a critical opportunity for religious communities to contribute positively and significantly to the global conversation on bioethics. By emphasizing the universal values shared across different faiths—such as compassion, respect for life, and the pursuit of justice—religions can enrich bioethical discussions with perspectives that ground ethical considerations in deeper philosophical and spiritual contexts. Furthermore, acknowledging that differences often lie in approach rather than fundamental ethical concerns suggests a pathway for constructive interreligious dialogue and collaboration, promoting a more inclusive and empathetic approach to addressing the complex bioethical challenges of our time.

When there are certain (apparent or real) differences in handling bioethical issues within a religion that has a unified faith, the problem becomes more pronounced concerning other religions, both towards others and among themselves. In examining the bioethical contemplation on an interreligious level, we recognize that the Churches of the West were the first to be concerned and engage with these issues. Many years later, the Orthodox East followed, albeit slowly and cautiously.

This delay in engagement could be attributed to various factors, including historical, cultural, and theological differences that influence

18 Engelhardt, Herman Tristram, "The Recent History of Christian Bioethics Critically Reassessed," *Christian Bioethics* 20, no. 2 (2014), p. 159. Nikolaidis, Apostolos, *Religions and Ethics. From the Ethics of Religion to the Ethics of Religions*—[*Θρησκείες και Ηθική Από την Ηθική της Θρησκείας στην Ηθική των Θρησκειών*], Grigoris Publications, Athens 202., p. 279.

19 Engelhardt, Herman Tristram, *The Foundations of Christian Bioethics*, p. 37.

how each religious tradition approaches bioethical dilemmas. The proactive stance of Western churches may reflect their historical engagement with the Enlightenment and the resulting challenges and questions posed to traditional religious beliefs by scientific advancements. In contrast, Orthodox and other Eastern traditions may approach these issues from different philosophical and theological starting points, which might explain their more cautious engagement with bioethical issues.

Regardless of the timing or approach, what is clear is that all religious traditions now face the imperative of addressing complex bioethical issues. The global nature of these challenges, such as genetic engineering, end-of-life care, and biotechnology, requires a collective and collaborative effort from all faith perspectives. Recognizing the valuable insights each tradition brings can enrich the bioethical discourse, fostering a deeper understanding and more holistic approaches to these pressing issues²⁰.

An interreligious perspective on bioethics appears to unify rather than divide religious contemplation, as a convergence of opinions and identities is observed in several bioethical issues. Through dialogue, religions will discover that their commonalities outweigh their differences, as the examination of bioethical issues at an interreligious level reveals both converging and diverging theories, which can be classified as follows: a. Issues that almost all religions agree on, b. Issues that almost all religions condemn, c. Issues where there is a completely different view among all religions. This fact is best demonstrated by the examples mentioned below²¹.

a. Almost all religions: 1. converge on the origin of life, 2. accept God as the unique source of life, 3. agree that God is the Lord of life, 4. refer to its sanctity, 5. emphasize the respect for human dignity. Additionally, all agree that: 6. their intervention in bioethical issues is necessary, 7. their voice is essential for preventing potential scientific arbitrariness that could cause problems to humans and society, 8. they are compelled to express their opinion, 9. they must present their positions in the media, 10. they should participate in public dialogue. Moreover, 11. they advocate for medical and biotechnological

20 Idem, p.37.

21 Nikolaidis, Apostolos, *Από τη Γένεση στη Γενετική [From Genesis to Genetics]*, Grigoris Publications, Athens 2005, p.47.

research, considering: 12. science is a gift from God to humans, 13. necessary limitations must be set to avoid deviation, 14. medical ethics must be observed in research. They also agree on specific bioethical issues such as 15. transplants, where we have (with some caveats) full acceptance. There are also issues where almost two (or more) religions or denominations agree, as they examine the bioethical contemplation through their common tradition, which is stronger than the differences that appeared over time. For example, the Orthodox and the Roman Catholic Church: 1. agree that life begins at the moment of conception, 2. accept prenatal testing, which could diagnose and rectify any problem with the fetus. Both condemn: 3. homosexuality as a choice, while its natural imposition is problematic, 4. contraception, considered as an obstruction of life, 5. active euthanasia, fighting against its legalization, considering it either murder or voluntary suicide. A more conciliatory stance is maintained on passive euthanasia²². The Roman Catholic Church accepts it when it occurs in the effort to limit pain and is for the benefit of the patient, and the Orthodox Church is moving in this direction. Regarding 6. assisted reproduction, the Orthodox Church seems to conditionally accept only homologous fertilization, while it rejects heterologous fertilization and the use of a surrogate uterus. The Roman Catholic Church appears to maintain the same stance and is opposed to the concept of extracorporeal life. Notably, the Orthodox Church stands strictly against heterologous fertilization and does not hesitate to even discuss adultery, considering the consequences it may have either against paternity or maternity, respectively. Additionally, both 7. do not accept the cremation of the dead²³.

22 See related: Van der Haak, Donovan, “Death Anxiety, Immortality Projects and Happiness: A Utilitarian Argument Against the Legalization of Euthanasia,” *Conatus – Journal of Philosophy* 6 (2021), p. 159-74. <https://doi.org/10.12681/cjp.24316>.

23 Nikolaidis, Apostolos, *Από τη Γένεση στη Γενετική [From Genesis to Genetics]*, p. 48-53. Vantsos, Miltiadis, “Θέματα Βιοηθικής – Η θέση της Ρωμαιοκαθολικής Έκκλησίας [Bioethical Issues – The position of the Roman Catholic Church]” PhD diss., University of Thessaloniki 2002, p.13-47, 48-77, 141. Hatzinikolaou, Nikolaos, Metropolitan of Mesogaia and Lavreotiki, *Αλλήλων μέλη – Οι μεταμοσχεύσεις στο φῶς τῆς Ὁρθόδοξης Θεολογίας τῆς ζωῆς [Members of One Another – Transplants in the Light of Orthodox Theology of Life]*, Center for Biomedical Ethics and Deontology, Athens 2005. Vantsos, Miltiadis, *Ἡ ἱερότητα τῆς ζωῆς – Παρουσίαση καὶ ἀξιολόγηση ἀπὸ ἄποψη Ὁρθόδοξης Ἠθικῆς τῶν θέσεων τῆς Ρωμαιοκαθολικῆς Ἐκκλησίας γιὰ τὴ Βιοηθική [The sanctity of life – Presentation and evaluation from an Orthodox Ethical*

b. Almost all religions condemn: 1. the religionization of science, 2. experiments on humans, while reservations are held regarding experiments on animals, 3. suicide, with the exception of self-sacrifice, the content of which varies, 4. abortions, which are most often characterized as murder, 5. reproductive cloning, with the common argument that in doing so, humans attempt to substitute God, 6. interventions in the embryo for the introduction of desired characteristics, 7. Experiments serving the purposes of science but cause harm to the embryo, 8. plastic surgeries for complete facial change, however, aesthetic interventions that improve and perfect the human image with always godly motives are positively valued. The issue of brain death causes problems, as scientists cannot speak with certainty about when someone is “irreversibly” dead. The Orthodox Church maintains a waiting stance and awaits the answer from science. Pope John Paul II, in a speech in 2000, accepted brain death as the death of a person, as do some Protestant denominations.²⁴

Up to this point, it was observed that there is -more or less- a convergence of opinions among almost all religions on several bioethical issues. However, as mentioned, there are issues where there is a completely different view from almost all religions. Of course, significant differences also exist within a single religion, such as between the Orthodox and the Roman Catholic Church, as well as between the Orthodox, the Roman Catholic Church, and the Protestant Denominations²⁵. For instance, the approach of the Orthodox Church is entirely different from the positions of some Protestant Churches regarding: 1. the beginning of life (when it is associated with the ensoulment of the embryo), 2. contraception (when it is considered a right and responsibility

perspective of the positions of the Roman Catholic Church on Bioethics], Kornilia Sfakianaki publications, Thessaloniki 2010, p. 147, 176, 301. Nikolaidis, Apostolos, Από τη Γένεση στη Γενετική [From Genesis to Genetics], p. 50-51.

24 Vantsos, Miltiadis, “Θέματα Βιοηθικής – Η θέση της Ρωμαιοκαθολικής Ἐκκλησίας [Bioethical Issues – The position of the Roman Catholic Church],” p. 83, 276. Nikolaidis, Apostolos, *Από τη Γένεση στη Γενετική. From Genesis to Genetics*, p. 48-53, 159.

25 See related: Ladas, Ioannis, “Expanding Engelhardt’s Cogitation: Claim for Pan-orthodox Bioethics,” *Conatus – Journal of Philosophy* 3 (2018), p. 9-15. <https://doi.org/10.12681/conatus.19397>. Wildes, Kevin, “Bioethics and Reason in a Secular Society: Reclaiming Christian Bioethics,” *Conatus – Journal of Philosophy* 3 (2018), p. 129-45. <https://doi.org/10.12681/conatus.19373>.

of the parents), 3. homosexuality (when it is not considered a sin), 4. the cremation of the dead²⁶.

In any case, the existence of different views should strengthen the desire for dialogue and understanding of the positions and principles that guide each religion. In this spirit, morally religious friends and morally religious strangers must, unconditionally, examine with honesty and zeal any possible opportunities for collaboration that exist. The so-called loose morality, which affects the morally foreign (from the ecclesiastical perspective), must be evaluated with objectivity and with friendly feelings towards those who have a different choice. Sober interreligious dialogue can significantly contribute to promoting mutual trust, peace, and reconciliation. Given that Ethics and Bioethics are in their post-God era, the establishment of an Interreligious Bioethics Committee would be very promising²⁷.

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**INTERRELIGIJSKA BIOETIKA:
IZAZOVI I PERSPEKTIVE**

Sažetak: Interreligijska bioetika istražuje etička pitanja koja se javljaju primenom biotehnologije i genetskog inženjeringa u sferama početka, održavanja i produžavanja ljudskog života kroz prizmu različiih religijskih tradicija i shvatanja. Takođe se bavi pitanjima vezanim za prirodno okruženje i živa bića koja ga nastanjuju. Konkretno, interreligijska bioetika nastoji da utvrdi tačke približavanja i mogućih kompromisa među različitim religijskim tradicijama povodom bioetičkih pitanja kao što su abortus, veštačka oplodnja, surogat-majčinstvo, eksperimenti nad ljudima i životinjama, zaštita prirodnog okruženja i kremacija preminulih. U tom kontekstu, njen cilj je unapređenje razumevanja i saradnje između različitih religija u vezi bioetičkih pitanja, promovišući međusbono poštovanje i razumevanje. Značaj interreligijske bioetike raste zahvaljujući globalizaciji i sve većoj uzajamnoj zavisnosti između društava, kao i zbog brzog razvoja medicine i biotehnologije, koji nameće nova etička pitanja. U tom duhu, ovaj rad, s jedne strane, ističe vrednost interreligijske bioetike u savremenim multikulturalnim društvima, dok s druge strane ispituje postojeće izazove i mogućnosti, usmeravajući se ka osnivanju Interreligijskog komiteta za bioetiku.

Ključne reči: interreligijska bioetika, bioetička pitanja, međureligijski dijalog

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