Comparing the results of two surveys on the views of bioethicists

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Pierson et al. (2024) conducted a survey of American bioethicists and compared their bioethical views to those of the general U.S. population. Recently, we also conducted a survey of researchers working in bioethics, medical ethics, and the philosophy of medicine (Räsänen et al. 2024). Here, we compare the results of these two surveys and highlight the similarities and differences in their findings.

Who are the bioethicists responding to these surveys? Pierson et al. received responses from 824 U.S. bioethicists who were either presenters at the 2021 or 2022 American Society for Bioethics and Humanities (ASBH) annual conference or were affiliated with a U.S. master's, Ph.D., or fellowship program in bioethics. We contacted the corresponding authors of research articles published online in 2021 in nine major bioethical journals, as well as the editors and editorial board members of the same journals, plus an additional ten journals in the fields of ethics and philosophy of health care. We received responses from 200 scholars. While we did not ask the ethnicity or nationality of our respondents, our pool likely included scholars from outside the U.S., as we included European journals (such as *Medicine, Health Care, and Philosophy*) and journals focusing on bioethical issues in the developing South (*Developing World Bioethics*).

What key bioethical issues were asked about? Pierson et al. assessed respondents' views on foundational contemporary issues in bioethics across six domains: (1) clinical ethics; (2) public health ethics; (3) research ethics; (4) reproductive ethics; (5) disability ethics; and (6) animal ethics. Their study included 29 questions about the respondents' views on bioethical issues, 19 of which were Likert-type questions. In our survey, we asked respondents to give their expert opinions on 60 central bioethical issues often discussed in bioethical journals (Bystranowski et al. 2022). We divided the questions into seven bioethical themes: (1) reproductive ethics, (2) treating of patients,

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¹The nine journals were: Journal of Medical Ethics, Bioethics, Medicine Health Care and Philosophy, Theoretical Medicine and Bioethics, The American Journal of Bioethics, Monash Bioethics Review, Journal of Bioethical Inquiry, The New Bioethics, and Developing World Bioethics. The other ten journals were: Nursing Ethics, BMC Medical Ethics, Public Health Ethics, HEC Forum, Hastings Center Report, Journal of Medicine and Philosophy, Cambridge Quarterly of Healthcare Ethics, Health Care Analysis, Kennedy Institute of Ethics Journal, and Journal of Law, Medicine, and Ethics. The contact information of the editors and board members of the journals were collected initially for the purpose of our previous study (Räsänen & Louhiala 2021).

(3) research ethics, (4) human enhancement, (5) public policy, (6) sexuality and gender, and (7) death and dying. All the answers were given on a 5-point Likert scale.

CONFIRMING SOME OF THE RESULTS OF PIERSON ET AL.

Starting with disability, the results of Pierson et al. show that while almost every bioethicist agrees that blindness is a disadvantage, they are divided on why this is so: over half (59%) of the respondents said that being unable to see would be a disadvantage even if society were justly designed, while less than half (40%) think blindness is a disadvantage only because society is unjustly designed. We asked our respondents whether they agree or disagree with the statement that disability is a mere difference, not a medical condition. 26.5% agreed (either fully or mostly) with the statement, while 61.5% disagreed (either fully or mostly). Based on both surveys, more bioethicists accept the so-called medical model of disability rather than the so-called social model of disability.

Regarding abortion, most respondents (87%) in the survey by Pierson et al. believed that abortion is ethically permissible. Similarly, most respondents in our survey agreed. Half (50%) of our respondents fully agreed, and more than a quarter (27.5%) mostly agreed with the statement that medically induced abortion is ethically permissible. One fifth (20.5%) either fully or mostly disagreed with the statement.

On animal ethics and research ethics, more than two-thirds of bioethicists (70%) in Pierson et al. study deem trade-offs between human welfare and non-human welfare permissible. When respondents were asked how many chimpanzee deaths—out of a maximum of 1,000—it is acceptable to cause in order to prevent one expected human death, the median response was 14. We also asked about the use of chimpanzees and animals in general in biomedical research. In our study, only 13.5% of respondents agreed that it is wrong to use any animals in biomedical research (78.5% disagreed). The permissibility of using chimpanzees and other great apes in biomedical research divided the scholars. While 33% of respondents agreed (fully or mostly) that such a practice is permissible, 52% disagreed.

On physician-assisted dying, 59% of the respondents in Pierson et al. agreed that it is ethically permissible for clinicians to assist patients in ending their own lives if they request this. Our results indicate not only the acceptance of physician-assisted death but active euthanasia as well. 73.5% of our respondents agreed (fully or mostly) with the claim that voluntary active euthanasia is morally permissible. However, 81% also believed that medical personnel should have the right to refuse to participate in active euthanasia or physician-assisted suicide on conscientious grounds (60.5% of our respondents thought so regarding abortion as well).

Religious beliefs are predictive of respondents' views on abortion and physician-assisted suicide/euthanasia in both studies. In Pierson et al., bioethicists who are less religious overwhelmingly think abortion is permissible, while among very religious bioethicists, less than half think so. We confirm this finding. In our survey, only 10% of those identifying as atheists disagreed with the statement that medically induced abortion is morally permissible, while 60.5% of those identifying as theists disagreed with the statement.

In Pierson et al., greater religiosity was associated with a greater likelihood of finding it impermissible for clinicians to assist patients in ending their own lives if they request this. We had similar findings. 75% of those identifying as theists disagreed with the statement that voluntary active euthanasia is morally permissible, while only 3.7% of those identifying as atheists disagreed with it.

WHAT DO BIOETHICISTS AGREE AND DISAGREE ON?

Pierson et al. found the most consensus on the claim that it is ethically impermissible for a clinician to provide life-saving care to an adult patient who has refused that care and has decision-making capacity. We also found consensus among bioethicists on several statements, including a claim nearly similar to the one above. Regarding the statement that patients should be allowed to refuse treatment that would be beneficial for them, 95% of respondents agreed either fully or mostly.

Bioethicists responding to our survey also think that the use of marijuana should be decriminalized (82% fully or mostly agree), that the United States should adopt universal healthcare (83% fully or mostly agree), and that there is a moral duty to be vaccinated (83.5% fully or mostly agree). Most of our respondents disagreed with the statement that it is ethically permissible for the state to use the death penalty as a legal punishment (85.5% mostly or fully disagree) and that female circumcision is sometimes ethically permissible (86.5% fully or mostly disagree).

A notable but perhaps not surprising finding in our survey was that the three statements regarding views on transgender issues divided the bioethicists the most. On the statement that puberty blockers should be allowed for children experiencing gender dysphoria, 33.5% of the respondents disagreed, 35% agreed, and 31.5% chose the option of "cannot say/not familiar enough with the issue." On the statement that trans women should be allowed to compete in women's sports, 44% disagreed, 28% agreed, and another 28% could not say or were not familiar enough with the issue. On the statement that trans women are real women (and trans men are real men), 31.5% disagreed, 40.5% agreed, and 28% could not say or were not familiar enough with the issue.

CONCLUSION

The survey study conducted by Pierson et al. provides systematic knowledge of the ethical views held by American bioethicists. Since replicability of results is an ongoing methodological problem in both science and social sciences, we believe it is important that the same issues are studied by other scholars in similar settings. We confirm some of the findings of Pierson et al., such as that most bioethicists believe abortion is morally permissible and that religious views correlate with many bioethical views.

We also covered additional bioethical questions, thus providing knowledge on other important issues in the fields of bioethics and medical ethics. Finding areas of disagreement in both studies is important since, as Pierson et al. state, identifying areas of strong disagreement may help bioethicists prioritize their research projects.

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