

21A.216J
Dilemmas in Bio-Medical Ethics: Playing God or Doing Good?
Short Paper #2 Topic

Papers are due on Thursday, May 5th at 4:30 pm at my office. There are no extensions for this paper. Papers will be returned with preliminary grades on Monday, May 9th at class time. Paper revisions are optional. If you choose to revise this paper, final versions are due on Friday, May 13th at 5 pm in my office mailbox.

In the second half of the course we have focused upon what Michel Foucault has described as “biopolitics”: the way in which institutions (i.e. the state, religion, the sciences, the family or kinship structures, etc.) categorize certain “populations” through the use of cultural metaphors and representations in order to define them or create them as objects in need of intervention. These institutions then intervene at the level of the body – however defined – and such interventions are often conducted in order to promote the political and economic security of the institutions that gaze upon these populations or of society as a whole.

Institutions that are in some way engaged in a biopolitical project have focused upon defining the embodied “person,” but these definitions vary across cultures and have changed over time. We have seen metaphors or representations of the “person” as an autonomous individual, as property, as an object of exchange between groups, as a commodity, as a collection of spare parts, as a mass of malleable cells, as imperfect nature, as a sacred creation of the divine, as a spiritual vessel of the continuity of the kinship group and nation, and others. We have also seen metaphors and representations of the following populations: the so-called “degenerates,” women, ethnic minorities, the embryo, the dying, and the dead, among others. In each case, and at every level from the individual to the international, power is involved in the creation of knowledge of “persons” and “populations”; these forms of knowledge can result in policies and actions that affect life and lives in both positive and negative ways.

In your final short paper, please write 6 to 7 double-spaced pages, using 12-point font, and 1-inch margins on the following questions:

To what extent does the view an institution holds of the embodied “person” shape the way that medical technologies are interpreted and applied toward that person? How do practices of exchange, market relations, and economics (between individuals, groups, or even at the level of the “capitalist” market) influence the way in which institutions apply, promote, or resist medical technologies? To what degree do individuals have agency or power to use these technologies to further their own ends, however defined? In what way do bio-medical technologies influence what it means to be human or do changing notions of humanity shape these technologies?

In your papers, write on two of the following three subjects: 1) reproductive technologies (from family planning to IVF – you must include Dorothy Roberts chapter 6); biological engineering, stem cell technology, cloning, etc. (as discussed in *Rapture*, lectures, and

supplemental reading); or organ transplantation (as discussed in *Twice Dead*). Please do not write an essay that simply answers the above questions sequentially. As always, provide a strong thesis in your introductory paragraph (space is limited so do your best to limit yourselves to no more than two introductory paragraphs) and a conclusion. Limit your discussion to materials from the second half of the course. Please limit any discussion of current events to a conclusion. As I evaluate your papers, I will be looking for a strong critique of the views presented in the readings and course materials rather than a simple summary.

Good luck and have fun!
ECJ