



National Reference Center for Bioethics Literature

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SCOPE NOTE 26

Religious Perspectives on Bioethics, Part 2

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This is Part Two of a two part Scope Note on Religious Perspectives on Bioethics. Part One was published in the June 1994 issue of the *Kennedy Institute of Ethics Journal* (KIEJ), and as a separate reprint. This Scope Note has been arranged in alphabetical order by the name of the religious tradition.

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INTRODUCTION

The many religions of the world bring diverse, and occasionally divergent attitudes to bioethical issues. These beliefs may guide patients and health care professionals as they seek or provide health care. In an attempt to facilitate understanding of and access to information about these beliefs in our pluralistic and global society, this Scope Note identifies literature by the world's major religious groups on topics relating to bioethics.

Topics covered by this Scope Note include general attitudes to health and health care, the physician-patient relationship, treatment refusal, abortion, contraception, sterilization, reproductive technologies, genetics, mental health, human experimentation, organ transplantation and donation, death, euthanasia, suicide, and prolongation of life. Material was not available on all of these topics for each religion.

The literature gathered here represents only a small portion of the available writing on religion and medicine for these faith traditions in the United States, and is limited to that which comments explicitly on bioethical issues. Some faiths have a rich tradition of writing on bioethics, for others the literature is more limited. Variation in coverage is not intended to indicate the relative importance of a faith but reflects accessibility and space constraints. Individuals interested in obtaining additional information are encouraged to contact the National Reference Center for Bioethics Literature.

It is important to remember that doctrinal and theological differences exist even within the same denomination and that views of individual patients, family members, and health care providers should be sought.

NATIVE NORTH AMERICAN RELIGIOUS TRADITIONS

Avery, Charlene. **Native American Medicine: Traditional Healing.** *Journal of the American Medical Association* 265(17): 2271, 2273, 1 May 1991.

A brief description of the general principles of Southwestern Native American religions is provided. Most tribes believe that health and religious well-being are interconnected.

Awiakta, Marilou. **Seed Corn Must Not Be Ground.** *In: CONFESSING CONSCIENCE: CHURCHED WOMEN ON ABORTION*, ed. Phyllis Tickle, pp. 89-101. Nashville, TN: Abingdon Press, 1990.

A Cherokee poet explains her attitude toward family, children and bringing children into the world. The welfare of children is paramount, for they are tied into the web of the family, and are the seed of future Cherokee generations.

Day, Thomas W. **Cross-Cultural Medicine at Home.** *Minnesota Medicine* 75(3): 15-17, March 1992.

The Ojibwe tribe's view of health incorporates spiritual health and emphasizes a holistic approach to health care that encompasses a harmonious balance between the individual, community, and nature, as well as between body, mind, and spirit.

Hirschfelder, Arlene B., and Molin, Paulette. **THE ENCYCLOPEDIA OF NATIVE AMERICAN RELIGIONS.** New York: Facts on File, 1992. 367 p.

A survey of Native American religions is provided, including tribal histories, descriptions of religious ceremonies, and biographical sketches.

Hultkrantz, Åke. **Health, Religion, and Medicine in Native North American Traditions.** *In: HEALING AND RESTORING: HEALTH AND MEDICINE IN THE WORLD'S RELIGIOUS TRADITIONS*, ed. Lawrence Sullivan, pp. 327-58. New York: Macmillan, 1989.

Hultkrantz summarizes the Native American attitude toward medicine and health care, explaining that belief in the supernatural and its powers is one of the most important tenets of life. Ailing persons are aided by those who have been trained to act as mediators between the sick individual and the supernatural powers. Attitudes toward health and disease, and the role of the medicine man are demonstrated through the use of examples taken from many

tribes.

Hultkrantz, Åke. **SHAMANIC HEALING AND RITUAL DRAMA: HEALTH AND MEDICINE IN NATIVE NORTH AMERICAN RELIGIOUS TRADITIONS**. New York: Crossroad, 1992. 197 p.

Hultkrantz surveys the varied traditions of Native North Americans and their outlook on medical care, health, and religion, and emphasizes that Native American medical beliefs cannot be understood without appreciation for their religious ideas. Organizing his book by geographic regions, Hultkrantz illuminates the cultural and religious perspectives held by many different groups, covering attitudes to health, illness, madness, suffering, ethics, care for the elderly, life, death and dying, and describing some individual healing ceremonies. An exhaustive bibliography is included.

Jarell, Robin H. **Native American Women and Forced Sterilization, 1973-1976**. *Caduceus* 8(3): 45-58, Winter 1992.

Jarell provides a history of the sterilization of Native American women with commentary on reproductive rights, physicians' attitudes, Native American women's attitudes, and the management of the Indian Health Service. The medical ethics topics of informed consent, eugenics, human experimentation, and paternalism are discussed.

Kaufert, Joseph M., and O'Neil, John D. **Biomedical Rituals and Informed Consent: Native Canadians and the Negotiation of Clinical Trust**. In: **SOCIAL SCIENCE PERSPECTIVES ON MEDICAL ETHICS**, ed. George Weisz, pp. 41- 63. Boston: Kluwer Academic, 1990.

Medical anthropologists use two case studies to demonstrate the difficulties physicians and patients face when they come from different traditions and do not share a common language. They offer their ethical, legal, ethnomedical, and sociopolitical observations of informed consent.

Morse, Janice M.; Young, David E.; and Swartz, Lise. **Cree Indian Healing Practices and West-**

ern Health Care: A Comparative Analysis. *Social Science and Medicine* 32(12): 1361-66, 1991.

Cree Indian methods of treating disease are compared with the treatment process and procedures used in the Western health care system. Of note are: the Cree's passive, rather than participatory, role in healing; the notion of silent diseases and preventive treatment; the caring, curing, and counseling roles of Cree practitioners; and the perspective of holism in health care.

PROTESTANTISM - General

Bouma, Hessel; Diekema, Douglas; Langerak, Edward; et al. **CHRISTIAN FAITH, HEALTH AND MEDICAL PRACTICE**. Grand Rapids, MI: William B. Eerdmans, 1989. 400 p.

Working from a belief in creation, original sin, and redemption through Christ, the authors stress the fundamental covenantal nature of all relationships and discuss a Christian understanding of technology, childbearing, abortion, stewardship of scarce resources, genetic technologies, death and covenantal caring, and care for those with AIDS.

Bratton, Susan Power. **SIX BILLION & MORE: HUMAN POPULATION REGULATION AND CHRISTIAN ETHICS**. Louisville, KY: Westminster/John Knox Press, 1992. 225 p.

In the context of God's blessing for all his creatures (both animal and human) and the human responsibility to care for creation, Professor Bratton develops a Christian population ethic, discussing biblical approaches to reproductive values and to coercion and abortion in population management.

Christian Medical and Dental Society. Ethics Commission. **OPINIONS ON ETHICAL AND SOCIAL ISSUES**. Richardson, TX: Christian Medical and Dental Society, 1991 [updated 1994]. 38 p.

The Society offers a biblically based clinical ethic in its consensus statements on abortion, AIDS, handicapped newborns, euthanasia, reproductive technologies, contraceptives, fetal tissue use, withdrawing nutrition and hydration,

assisted suicide, suffering, pain, disabled persons, conflicts of interest, treatment refusal, medical futility, and living wills. In addition the booklet includes codes of ethics for Christian dentists and doctors and a statement on a biblical model for medical ethics.

Frame, John M. **MEDICAL ETHICS: PRINCIPLES, PERSONS, AND PROBLEMS.** Phillipsburg, NJ: Presbyterian and Reformed Publishing Company, 1988. 132 p.

Frame's book addresses people committed to the Bible as the norm for resolving ethical problems and uses an approach that focuses on the scripture, the person, and the situation. He discusses the problem of finding God's will, patient-centered issues, and particular concerns in medical research and terminal care.

Gustafson, James M. **A Christian Perspective on Genetic Engineering.** *Human Gene Therapy* 5(6): 747-54, June 1994.

Focusing on what is distinctly human, and the moral status of the natural, Gustafson surveys the work of gene therapist W. French Anderson and concludes that there are circumstances in which genetic engineering would be morally justifiable and religiously supported.

Hauerwas, Stanley. **SUFFERING PRESENCE.** Notre Dame, IN: University of Notre Dame Press, 1986. 221 p.

Hauerwas argues that medicine and human society cannot be founded on an ethos of freedom but must derive their being from a "profound commitment to the protection and care of each person's life" (p. 14). The ethos of freedom cannot account for our obligation to care for the vulnerable, e.g., the mentally handicapped. We must be a community that is willing to be present to one another in times of suffering. Using this framework, Hauerwas studies brain death, suicide, human experimentation, in vitro fertilization and caring for the mentally handicapped.

Meilaender, Gilbert. **Against Abortion: A Protestant Proposal.** *Linacre Quarterly* 45(2): 165-78, May 1978.

Meilaender develops a Protestant position on

abortion that reflects the positive aspects of the Catholic argument against abortion and avoids some of the difficulties raised by its reliance on the principle of double effect. The Christian call to witness God's love justifies intervention in conflict cases. However, Christians must avoid the temptation to be like gods because God's plan cannot be known by earthly creatures.

National Council of the Churches of Christ in the United States of America. **GENETIC SCIENCE FOR HUMAN BENEFIT: A POLICY STATEMENT.** New York: National Council of Churches, 22 May 1986. 13 p.

The Council affirms both a belief in God's purposeful creation and in the unique responsibility of humans to care for creation. Three standards of faith should be used to evaluate the uses of genetic engineering: the sacred worth of human life; the values of fairness, justice, and love; and responsibility to God through human activity in God's creation.

Nelson, J. Robert. **The Divided Mind of Protestant Christians.** *In: NEW PERSPECTIVES ON HUMAN ABORTION*, ed. Thomas W. Hilgers, Dennis J. Horan, and David Mall, pp. 387-404. Frederick, MD: University Publications of America, 1981.

Nelson discusses the protest lodged against the Hyde amendment by the United Methodist Church and then summarizes the official positions on abortion of other major Protestant denominations, while acknowledging the difficulty in speaking with one voice about the opinion of Protestant Christians on the issue of abortion.

Nelson, J. Robert. **ON THE NEW FRONTIERS OF GENETICS AND RELIGION.** Grand Rapids, MI: William B. Eerdmans Publishing Company, 1994. 212 p.

Nelson presents the scientific facts of genetic engineering and some of the ethical and religious concerns raised by its use. Religious understandings of human nature and early responses by religion to genetic science are reviewed. The final chapter draws useful comparisons between the ecumenical statements of the World and the National Council of Churches and the denominational statements of the United

Church of Christ, the United Methodist Church, the Church of the Brethren, and the Episcopal Church.

Noonan, John T., ed. **THE MORALITY OF ABORTION: LEGAL AND HISTORICAL PERSPECTIVES**. Cambridge: Harvard University Press, 1970. 276 p.

In the introductory chapter of this highly regarded treatise, Professor Noonan reviews the history of Christian thought on abortion. Prominent scholars Paul Ramsey, James Gustafson, Bernard Häring, George Huntston Williams, John M. Finnis, and David W. Louisell contribute additional readings on philosophical, theological, regulatory, and constitutional issues related to abortion.

Smith, Harmon L., and Lewis, Paul A. **A Protestant View of New Reproductive Technologies**. *Second Opinion* 14: 94-106, July 1990.

The authors assert that justice and the Christian commitment to care for others oblige us to carefully consider pouring vast resources into reproductive technologies while others do not have access to basic health care. The community of Christians shares responsibility for children, and parenthood is viewed as a lifetime commitment, not simply a biological kinship.

Wilkinson, John. **CHRISTIAN ETHICS IN HEALTH CARE: A SOURCE BOOK FOR CHRISTIAN DOCTORS, NURSES AND OTHER HEALTH CARE PROFESSIONALS**. Edinburgh: Handsel Press, 1988. 510 p.

Physician Wilkinson discusses the sources, presuppositions, motives, and characteristics of Christian ethics and highlights some ancient and modern codes of medical ethics. Problems addressed include: human experimentation, resource allocation, the health care relationship, and AIDS, as well as ethical issues at the beginning and end of life.

World Council of Churches (WCC). Subunit on Church and Society. **BIOTECHNOLOGY: ITS CHALLENGES TO THE CHURCHES AND THE WORLD**. Geneva, Switzerland: World Council of Churches, August 1989. 34 p.

This report includes a list of WCC recommen-

dations and proposals for suitable safeguards and controls in the development of biotechnology. The statement on “Creation as God’s Gift” and discussion of specific topics in biotechnology—human genetic engineering, reproductive technology, intellectual property, environmental concerns, military applications, and impact on the third world—are included.

ANABAPTIST—Church of the Brethren, Friends Society (Quaker), Mennonite/Amish/ Hutterite

Church of the Brethren

Church of the Brethren. **A Call to Compassion: Church of the Brethren Statement on AIDS [and] 1987 Annual Conference Statement on Genetic Engineering**. In: **CHURCH OF THE BRETHREN. 1987 ANNUAL CONFERENCE MINUTES**. Elgin, IL: Church of the Brethren, 1987, pp. 450-56 and 518-19.

Brethren are called to a ministry of healing and hope offering the Christian response of compassionate care. They are encouraged to educate themselves about AIDS, prayerfully explore faith issues raised by the disease; offer direct care or provide spiritual support through visitation, counseling, and anointing; and, in other appropriate ways, promote wholeness and acceptance. The genetics recommendations include monitoring and influencing the actions of committees setting policy, encouraging prospective parents to seek counseling if indicated, and emphasizing rights of all persons to dignity, freedom, justice, love, and respect.

Church of the Brethren. Annual Conference. **CHURCH OF THE BRETHREN STATEMENT ON HEALTH CARE IN THE UNITED STATES**. Elgin, IL: Brethren Health and Welfare Association, 1989. 2 p.

Adequate health care for all is based on the belief that God’s holy purpose includes everyone. The affirmation and resolutions characterize adequate health care for everyone as a right and a “reflection of personal dignity,” and hold individuals and society jointly responsible for realizing this right by personal practice and

active advocacy.

Church of the Brethren. General Board. **RESOLUTION ON HEALTH CARE IN THE UNITED STATES**. Elgin, IL: Church of the Brethren, 1992. 2 p.

Reaffirming the 1989 statement, this resolution calls on membership to work with the Interreligious Health Care Access Campaign to educate the public about needed changes to the health care system, to protect the right of health care workers to fair compensation, to promote educational funding for the health professions, and to encourage greater use of paramedical professionals.

Friends Society (Quaker)

American Friends Service Committee. **THE AIDS CRISIS: EDUCATION AND POLICY ISSUES. A STATEMENT OF AFSC UNDERSTANDINGS AND PLANS**. Philadelphia: American Friends Service Committee, 26 September 1987. 9 p.

Based on the Friends' historical conviction that all human life is sacred and equal in the eyes of God, this statement outlines the AFSC's actions in prevention education and its position on public policy issues such as mandatory testing, sex education, quarantine, and public funding for combatting AIDS. All responses to AIDS must be compassionate, respect human dignity, and treat all individuals and groups equally.

American Friends Service Committee. Board of Directors. **WHO SHALL LIVE? MAN'S CONTROL OVER BIRTH AND DEATH**. New York: Hill and Wang, 1970. 144 p.

Two basic Quaker convictions drive the discussion: God is present in each person and this "Light Within" leads each individual to discover the truth. The issues of abortion, contraception, increased life expectancy, genetic counseling, and overpopulation are reviewed. While contraception is much preferable to abortion, abortion is preferable to the birth of an unwanted child; discretion should be granted to physicians in the use of pain medication for the dying; medical treatment can be withheld or withdrawn if an individual will never recover

consciousness.

Valentine, Steven R. **ALL SHALL LIVE: ANOTHER QUAKER RESPONSE TO THE ABORTION DILEMMA**. Richmond, IN: Friends United Press, 1980. 45 p.

Valentine characterizes his document as a "vigorous reply to *Who Shall Live?* and a spirited advocacy of the basic human right to life" (p. ix). He condemns support for legalized abortion as inconsistent with traditional Quaker pacifism and avoidance of violence.

Mennonite/Amish/Hutterite

Brenneman, George. **Abortion: Review of Mennonite Literature, 1970-1977**. *Mennonite Quarterly Review* 53(2): 160-72, April 1979.

Brenneman, a pediatrician, reviews opinions expressed in Mennonite writing on abortion before and after the 1973 Supreme Court decision legalizing abortion. He expresses concern that acceptance of liberal abortion endangers the integrity of the strong Mennonite focus on the sanctity of life and its traditional pacificism.

Mennonite Central Committee U.S. Peace Section. **AFFIRMING THE SANCTITY OF LIFE IN RELATION TO ABORTION**. Akron, PA: Mennonite Central Committee U.S. Peace Section. 16 May 1981 (reaffirmed 21 April 1990). 1 p.

Acknowledging the Mennonite and Brethren in Christ churches' historic affirmation of God's will of abundant life for all people, this statement proclaims the sanctity of all human life based on Biblical teaching and the belief that abortion is wrong. Currently this statement is under review.

Mennonite Medical Association Statement. **MENNONITE MEDICAL ASSOCIATION STATEMENT**. Laurelville, PA: Mennonite Medical Association, 4 July 1992. 2 p.

Asserting that human health means the well-being of the total person—spiritual, mental, and physical—the Association commits itself to working for a more just health care system that would provide universal access to comprehensive services.

Mennonite Mutual Aid. **LIFE CHOICES: GUIDELINES FOR CREATING YOUR ADVANCE MEDICAL DIRECTIVES**. Goshen, IN: Mennonite Mutual Aid, 1993. 18 p.

A resource pamphlet for Mennonites, this document provides information about advance directives, guidance for completing these documents, and three living will samples, one of which incorporates a personal statement of faith.

Mennonite Mutual Aid. **RESPONDING TO HIV AND AIDS: A RESOURCE GUIDE FOR CONGREGATIONS** (revised edition). Goshen, IN: Mennonite Mutual Aid, 1993. 12 p.

Responding to HIV and AIDS is a resource booklet that provides basic medical information about AIDS and discusses the Biblical perspective on AIDS and preparations for congregational ministry to those with AIDS.

Miller, Roman J., and Brubaker, Beryl H., eds. **BIOETHICS AND THE BEGINNING OF LIFE: AN ANABAPTIST PERSPECTIVE**. Scottsdale, PA: Herald Press, 1990. 227 p.

Chapters discuss the biological, biotechnical, psychological, and legal issues involved in medical decisions at the beginning of life. Other sections focus on the variety of bioethical systems, the response of other Christian communities, and theological and biblical perspectives on this issue. A Mennonite understanding emphasizes the responsibility and importance of communal discernment in decision making.

Miller, Shelly R., and Schwartz, Robert H. **Attitudes Toward Genetic Testing of Amish, Mennonite, and Hutterite Families with Cystic Fibrosis**. *American Journal of Public Health* 82(2): 236-42, February 1992.

A high incidence of cystic fibrosis occurs in Amish, Mennonite, and Hutterite families. This study investigates their attitudes about carrier testing, prenatal diagnosis, and abortion. The majority of Mennonites approved of prenatal diagnosis for CF while the majority of Amish and Hutterite families did not approve or were uncertain. All Amish and Hutterite parents were opposed to or uncertain about abortion for CF-affected fetuses while Mennonites were

evenly split. Attitudes toward carrier testing were more difficult to interpret.

Rogers, John, ed. **MEDICAL ETHICS, HUMAN CHOICES: A CHRISTIAN PERSPECTIVE**. Scottsdale, PA: Herald Press, 1988. 159 p.

The Mennonite belief that the community of Christian lay-people ought to be involved in the medical-ethical decision-making process undergirds discussions of the nature of the human person, death and dying, reproductive technologies, organ transplants, genetic engineering, preventive life-styles, and allocation of scarce medical resources. Use of this book is also encouraged by the Friends United Meeting.

ASSEMBLIES OF GOD

Assemblies of God. **A BIBLICAL PERSPECTIVE ON ABORTION**. Springfield, MO: Assemblies of God Gospel Publishing House, 1985. 14 p.

The Assemblies of God maintains that abortion is an evil that violates God's injunction against the taking of innocent human life. Christians are urged not to be misled by the language used to euphemize abortion and are encouraged to: pray, provide Biblical moral instruction and adoption counseling, actively support prolife legislation, and compassionately minister to those experiencing guilt and remorse from having had or having participated in an abortion.

BAPTIST

American Baptist Churches. General Board. **AMERICAN BAPTIST POLICY STATEMENTS AND RESOLUTIONS**. Valley Forge, PA: American Baptist Church, 1993. [looseleaf format].

Contains the official policy statements and resolutions of the American Baptist Church on abortion; AIDS; death and dying; human sexuality; health care for all; and health, healing, and wholeness.

Lasley, Donald Mart. **CRITICAL ISSUES: EUTHANASIA**. Nashville, TN: Christian Life Commission of the Southern Baptist Convention,

February 1994. 19 p.

Southern Baptists oppose active euthanasia and doctor-assisted suicide because they are direct, intentional acts of killing. Refusing or withdrawing medical treatment is morally and biblically acceptable when death is imminent, but withdrawal of food and water is not permissible because this action, rather than the underlying disease, causes death. The text of the 1992 resolution on euthanasia is included.

Mitchell, C. Ben. **GENETIC ENGINEERING: BANE OR BLESSING.** Nashville, TN: Christian Life Commission of the Southern Baptist Convention, May 1994. 23 p.

Mitchell summarizes the work of the Human Genome Project and asks whether the ability to genetically engineer human beings means that we should do so. He reviews the ethical issues raised by genetic engineering, offers guiding scriptural principles, and urges all evangelical Christians to use science, biblical studies, hermeneutics, and systematic theology in their consideration of new genetic technologies.

Mitchell, C. Ben, and Whitehead, Michael K. **THE SANCTITY OF HUMAN LIFE: A TIME TO LIVE, A TIME TO DIE: ADVANCE DIRECTIVES AND LIVING WILLS.** Nashville, TN: Christian Life Commission of the Southern Baptist Convention, January 1993. 15 p.

The authors discuss the functions and weaknesses of standard living wills and review the biblical principles that apply to advance directives—i.e., the sovereignty of God over sacred human life, the assurance of eternal life, and the biblical proscription against unjust killing, suicide, and active self-killing. They prefer the Durable Power of Attorney for Health Care and the Will to Live as pro-life, anti-euthanasia alternatives to the problematic living will.

Southern Baptist Convention. **Resolution on Euthanasia and Assisted Suicide.** *Issues in Law & Medicine* 8(4): 555-56, Spring 1993.

The biblical prohibition on taking human life through euthanasia or assisted suicide is affirmed and legal prosecution of those who participate in such acts is encouraged. Research into more effective pain management is urged

while the designation of artificial nutrition and hydration as extraordinary treatment is rejected.

CHRISTIAN CHURCH (DISCIPLES OF CHRIST)

Christian Church (Disciples of Christ). General Assembly. **YEARBOOK.** (various years) Indianapolis, IN: Christian Church (Disciples of Christ), 1971-1993.

The Disciples have adopted resolutions on: RU-486 (1993), congregational study of abortion (1973), individual freedom in abortion decisions (1975), Webster v. Reproductive Health Services (1989), population growth (1971), responsible birth control (1983), the Church's response to AIDS (1989), the current crisis in the US government's response to the AIDS crisis (1987), death with dignity (1977), and the end stages of life (1991).

CHRISTIAN SCIENTIST

Brenneman, Richard J. **DEADLY BLESSINGS: FAITH HEALING ON TRIAL.** Buffalo, NY: Prometheus Books, 1990. 390 p.

Brenneman, an investigative reporter and former Christian Scientist, examines three forms of spiritual healing: Christian Science healing, psychic surgery, and psychedelic psychotherapy. The author attempts to answer questions about why people choose to rely on spiritual healing and whether state intervention in such a practice constitutes an invasion of privacy or constriction of freedom.

First Church of Christ, Scientist (Boston). Committee on Publication. **FREEDOM AND RESPONSIBILITY: CHRISTIAN SCIENCE HEALING FOR CHILDREN.** Boston: First Church of Christ, Scientist, 1989. 127 p.

Four sections cover: (1) the health care Christian Scientists provide for their children; (2) the evidence for Christian Science healing; (3) the issue of whether Christian Science healing for children should be accommodated in law; and (4) how the restriction of Christian Science healing for children would affect society. A textual appendix discusses cases of Christian Science healing of children to provide proof of

its efficacy.

Gevitz, Norman. **Christian Science Healing and the Health Care of Children.** *Perspectives in Biology and Medicine* 34(3): 421-38, Spring 1991.

Following a brief history of the, origins and philosophy of the Christian Science approach to spiritual healing, the author (1) reviews the denomination's success in promoting religious exemptions in child neglect and abuse laws for these methods, (2) discusses the crusade of former Christian Scientist Rita Swan against Church practices and religious exemption clauses, and (3) concludes with a summary of the author's opinion as to the denomination's options in the face of improved medical technology and declining membership.

Green, Jennifer. **Death with Dignity: Christian Science.** *Nursing Times* 88(4): 32-33, 22 January 1992.

Green briefly summarizes the Christian Science belief that prayer alone for the healing of the sick mirrors the method of healing used by Jesus Christ. Organ donation or transplantation and blood transfusions are not acceptable for adults. Prayer for healing is appropriate even for terminal patients.

Massachusetts. Supreme Court. **Commonwealth v. Twitchell.** *North Eastern Reporter*, 2d Series 617: 609-621, 11 August 1993.

The Supreme Court set aside the conviction of Christian Scientists Ginger and David Twitchell on the charge of involuntary manslaughter in the death of their two-year-old son from a treatable bowel obstruction after they had depended on spiritual healing. The Court warned that while the religious exemption for spiritual healing might be sufficient to prevent a finding of neglect in this case, other parents using spiritual healing could still be prosecuted and convicted of involuntary manslaughter if they wantonly or recklessly violated their duty to seek medical attention for their child.

Peel, Robert. **HEALTH AND MEDICINE IN THE CHRISTIAN SCIENCE TRADITION: PRINCIPLE, PRACTICE, AND CHALLENGE.** New York: Crossroad Publishing Com-

pany, 1988. 154 p.

In this Project Ten book, Peel covers the topics of suffering, sexual morality, mental illness, and the philosophy of medicine and health. He discusses the genesis and metaphysics of the faith and some challenges facing the Church, but asserts that the efficacy of Christian Science healing can only be demonstrated and not proven through experimentation.

Skolnick, Andrew. **Christian Science Church Loses First Civil Suit on Wrongful Death of a Child.** *Journal of the American Medical Association* 270(5): 1781-82, 20 October 1993.

The mother and step-father of eleven-year-old Ian Lundman sought Christian Science spiritual healing for Ian's diabetes. In light of Ian's death, a Minnesota jury found for punitive and compensatory damages in a civil suit filed by the boy's father. The focus was not the defendant's religious beliefs but the "rights of a child to be protected from illness and death" (p. 1782).

Skolnick, Andrew. **Religious Exemptions to Child Neglect Laws Still Being Passed Despite Convictions of Parents.** *Journal of the American Medical Association* 264(10): 1226, 1229, 1233, 12 September 1990. [See also the Skolnick article in the next issue of JAMA.]

Skolnick summarizes recent attempts by the Christian Science Church to garner passage of state religious exemption laws and the opposing efforts of child protection advocates to block new legislation and to repeal already existing laws. The Church claims that it is fighting for the right to pray while opponents point out that there can be a marriage of prayer and medical treatment and that the Church wants the efficacy of its spiritual healing methods to be judged solely on the basis of Church-compiled records.

Swan, Rita. **Faith Healing, Christian Science, and the Medical Care of Children.** *New England Journal of Medicine* 309(26): 1639-41, 29 December 1983.

Swan, a former Christian Scientist whose child died of bacterial meningitis after treatment by a Christian Science practitioner, argues against the recognition of spiritual treatment as lawful

medical care. Swan holds that the state should recognize only secular medical care and should intervene in cases where parents deny children medical care in the name of religion.

Talbot, Nathan A. **The Position of the Christian Science Church.** *New England Journal of Medicine* 309(26): 1641-44, 29 December 1983.

Talbot summarizes the Church's philosophy of health—i.e., that disease and physical suffering are the result of alienation from God and may be overcome by prayer and spiritual intervention. Practice over generations, reports of healings, and recognition by insurance companies and federal and state legislation are cited as evidence of the efficacy of Christian Science healing. The Church permits parents to choose either spiritual or conventional methods of healing without ostracism. Christian Scientists generally comply with public health laws and vaccinate their children.

CHURCH OF JESUS CHRIST OF THE LATTER-DAY SAINTS (MORMON)

Bush, Lester E. **HEALTH AND MEDICINE AMONG THE LATTER-DAY SAINTS: SCIENCE, SENSE AND SCRIPTURE.** New York: Crossroad Publishing Company, 1993. 234 p.

As part of Project Ten, an important series of books from the Park Ridge Center covering religious aspects of medical ethics for different religious traditions, Bush discusses the topics of well-being, suffering, health and healing, death and dying, madness, sexuality, and birth as they are understood in the Church of the Latter-day Saints. He provides insight into the denominations's governing structure and a history of the development of its authoritative guidance on dietary and lifestyle practices, including: wearing of a sacred undergarment, anointing with oil and baptism for healing, and beliefs about illness.

Church of Jesus Christ of Latter-day Saints. **FIRST PRESIDENCY STATEMENT ON AIDS.** Salt Lake City, UT: Church of Jesus Christ of Latter-day Saints, 27 May 1988. 2 p.

The AIDS epidemic can be diminished by

observing God's commandments of chastity, fidelity in marriage, abstinence from homosexual behavior, avoidance of illegal drugs, and respect for the body as the temple of God. Mormons are encouraged to extend compassion and sympathy to all with AIDS, especially those "innocently" infected by blood transfusion, birth, or a spouse.

Church of Jesus Christ of Latter-day Saints. Public Communications Department. Special Affairs. **ABORTION STATEMENT.** 11 January 1991. 1 p.

Abortion fundamentally contradicts the Lord's injunction against killing and is never appropriate for personal or social convenience. Even in the rare instances when the Church recognizes that abortion may be justified, the choice to abort should be made by the couple only after personal reflection, consultation with their bishop, and divine confirmation through prayer.

Divett, Robert T. **MEDICINE AND THE MORMONS: AN INTRODUCTION TO THE HISTORY OF LATTER-DAY SAINT HEALTH CARE.** Bountiful, UT: Horizon Publishers, 1981. 222 p.

Divett offers a tool for Mormons seeking to understand their heritage and for health care professionals caring for LDS patients. He provides a church history and an overview of its various health-related beliefs in the context of general medical knowledge and practice.

Ludlow, Daniel H., ed. **ENCYCLOPEDIA OF MORMONISM: THE HISTORY, SCRIPTURE, DOCTRINE, AND PROCEDURE OF THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS.** New York: Macmillan Publishing Company, 1992. 1848 p.

Entries in this four volume work include: abortion, AIDS, artificial insemination, attitudes toward health, autopsy, birth control, blood transfusions, circumcision, hospitals, medical practices, prolonging life, sterilization, and word of wisdom [the common title for health revelations].

Nelson, Russell M. **Reverence for Life.** *The Ensign* 15(5): 11-14, May 1985.

The Church's consistent opposition to abortion is developed as Elder Nelson, reviews the common reasons cited for abortion—the health of mother, rape or incest, malformations of the fetus, the woman's control of her body, philosophical arguments about when life begins, and population control. A person who truly repents may be forgiven for the sin of abortion.

Simmerman, Steven R. **The Mormon Health Traditions: An Evolving View of Modern Medicine.** *Journal of Religion and Health* 32(3): 189-96, Fall 1993.

Open to ongoing prophetic guidance, most Mormon health traditions, including dietary and lifestyle edicts and belief in the unity of the spirit and body, originated in decrees from the Church's first two prophets, Joseph Smith and Brigham Young. Sickness and suffering sometimes are perceived to be linked to sin, but often serve a redemptive function or as evidence of a personal God. Healing and blessing by laying on of hands and/or anointing with oil is common in conjunction with secular medicine. Simmerman outlines Church positions on topics including: autopsies, birth control, abortion, sexuality, in vitro fertilization and artificial insemination, and genetic engineering.

EPISCOPAL/ANGLICAN

Episcopal Church. **Bioethics Issues 1986-1988.** *In: THE BLUE BOOK*, pp. 157-61. New York: General Convention of the Episcopal Church, 1988.

The 1986-1988 report of the Commission on Human Affairs and Health covers infertility, genetic experimentation, advance directives, and organ transplantation.

Episcopal Church. **CONSTITUTION AND CANONS.** New York: General Convention of the Episcopal Church, 1991. 202 p.

General Convention resolutions on care of the terminally ill (living wills) (1982 and 1991); life sustaining treatment (1991); ministry to the mentally ill (1991); in vitro fertilization and prenatal gender selection (1982); genetic engineering research (1985 and 1991); organ, blood, and tissue donation (1982); genetic engineering

and fetal tissue research (1991) are collected.

Habgood, John. **An Anglican View of the Four Principles.** *In: PRINCIPLES OF HEALTH CARE ETHICS*, ed. Raanon Gillon, pp. 55-64. New York: John Wiley & Sons, 1993.

Archbishop of York Habgood discusses respect for autonomy, beneficence and non-maleficence, maleficence, and justice from the Anglican perspective which appeals to Scripture, tradition, and reason for guidance. These principles are applied to specific topics in bioethics (abortion, euthanasia, allocation of resources).

Smith, David H. **HEALTH AND MEDICINE IN THE ANGLICAN TRADITION: CONSCIENCE, COMMUNITY, AND COMPROMISE.** New York: Crossroad Publishing Company, 1986. 103 p.

Smith develops the Anglican position on decisions at the end of life; sexuality and issues at the beginning of life; mortality; and the sharing of power, knowledge, and resources.

EVANGELICAL

Davis, John Jefferson. **EVANGELICAL ETHICS: ISSUES FACING THE CHURCH TODAY.** Phillipsburg, NJ: Presbyterian and Reformed Publishing Company, 1985. 299 p.

Davis approaches the issues of contraception, reproductive technologies, abortion, infanticide, and euthanasia from the evangelical Christian perspective wherein the Bible, viewed as the literal Word of God, serves as an infallible and final authority on all matters of moral behavior.

Feinberg, John S., and Feinberg, Paul D. **ETHICS FOR A BRAVE NEW WORLD.** Wheaton, IL: Crossway Books, 1993. 479 p.

Two theologians discuss moral decision making and the Christian, abortion, euthanasia, sexual morality, birth control, genetic engineering, and reproductive technologies.

Payne, Franklin E. **BIBLICAL/MEDICAL ETHICS: THE CHRISTIAN AND THE PRACTICE OF MEDICINE.** Milford, MI: Mott Media, 1985. 267 p.

Physician Payne identifies foundational princi-

ples of a distinctive Christian Biblical/medical ethics, discusses the role of the Church in health care, and develops a theology of medicine based on the biblical notion of “pneumosomatic” or holistic health. Biblical references to health and healing are applied to abortion; psychotherapy; death, dying and grief; and euthanasia and the definition of death. Biblical priorities for the physician and medical student are discussed.

Payne, Franklin E. **MAKING BIBLICAL DECISIONS**. Escondido, CA: Hosanna House Publishing Company, 1989. 178 p.

Payne covers topics in population and birth control, the reproductive technologies, genetic engineering, and ethics at the end of life.

Sweet, Leonard I. **HEALTH AND MEDICINE IN THE EVANGELICAL TRADITION: NOT BY MIGHT NOR POWER**. Valley Forge, PA: Trinity Press International, 1994. 242 p.

Sweet identifies several dozen churches that fall under the evangelical umbrella. They share: (1) a belief in the binding authority of the Bible; (2) a personal relationship with God; (3) a strong emphasis on conversion; and (4) a belief in moral absolutes. As part of the Project Ten series, Sweet’s work explores the ways the evangelical faiths view health, mental illness, pain, suffering, sexuality and abortion, personal hygiene, healing, aging, and death.

JEHOVAH’S WITNESS

Ackerman, Terrence F. **The Limits of Beneficence: Jehovah’s Witnesses and Childhood Cancer**. *Hastings Center Report* 10(4): 13-18, August 1980.

Ackerman analyzes the duties of beneficence toward children and the limits of parental authority; he concludes that we should override a parents’ decision to refuse life-sustaining treatment for the child only if the intervention is likely to prevent a degree of substantial harm to the child.

Davis, Dena S. **Does “No” Mean “Yes”? The Continuing Problem of Jehovah’s Witnesses and Refusal of Blood Products**. *Second Opinion* 19(3): 35-43, January 1994.

Davis addresses Jehovah’s Witnesses’ refusal of blood products; she maintains that there is a dangerous trend by some health care providers to assume (wrongly) that Witnesses really do not mean it when they refuse treatment and that they hope their provider will seek a court order forcing them to accept blood products. She notes, however, that there are some cases when this intervention is precisely what the patient wants.

Green, Jennifer. **Death with Dignity: Jehovah’s Witnesses**. *Nursing Times* 88(5): 36-37, 29 January 1992.

Green provides a brief summary of the issues that are important to Jehovah’s Witnesses when facing death. She discusses the refusal of blood, dietary issues, care of the dying, and attitudes toward autopsies and funerals.

Jonsen, Albert R. **Blood Transfusions and Jehovah’s Witnesses: The Impact of the Patient’s Unusual Beliefs in Critical Care**. *Critical Care Clinics* 2(1): 91-100, January 1986.

Jonsen focuses on the legal duties of the physician and the dilemma of how to provide competent care while supporting a patient’s religious beliefs.

Macklin, Ruth. **The Inner Workings of an Ethics Committee: Latest Battle Over Jehovah’s Witnesses**. *Hastings Center Report* 18(1): 15-20, February/March 1988.

Macklin presents the case of a hospital ethics committee struggling with the problem of a pregnant Jehovah’s Witness who needs a blood transfusion, highlighting the complex interdependence of maternal and fetal rights.

Massachusetts. Supreme Judicial Court, Suffolk. **In re McCauley**. *North Eastern Reporter*, 2d Series 565: 411-14, 15 January 1991.

The Children’s Hospital of Boston was granted permission by a lower court to administer blood transfusions to eight-year-old Elisha McCauley in order to confirm a diagnosis of and as part of treatment for leukemia. Her Jehovah’s Witness parents had objected to the transfusions on religious grounds. On appeal, the Court held that the trial court had properly authorized the

transfusions. While the privacy of family life must be protected from unwarranted state interference, the Court found that when a child's life is at stake, the child's welfare, and not the parents' rights, is the paramount consideration.

New York. Court of Appeals. **Fosmire v. Nicoleau**. *North Eastern Reporter*, 2d Series 551: 77-89, 18 January 1990.

Denise Nicoleau, a Jehovah's Witness, refused to consent to blood transfusions following a cesarean section. Despite her objection, the Supreme Court of Suffolk County authorized the hospital to administer the transfusions. The New York Court of Appeals held that the lower court should not have ordered the transfusions, reasoning that because the state rarely acts to protect individuals from themselves, its interest is less substantial. Furthermore, a patient's right to self determination has never been conditional on being without minor children.

Singelenberg, Richard. **The Blood Transfusion Taboo of Jehovah's Witnesses: Origin, Development, and Function of a Controversial Doctrine**. *Social Science and Medicine* 31(4): 515-23, 1990.

Singelenberg outlines the history and justification for Jehovah's Witnesses' refusal to accept blood transfusions. For believers, proof of the wisdom of their doctrine is abundant these days—AIDS is a powerful justification to abstain from blood.

Watchtower Bible and Tract Society. **JEHOVAH'S WITNESSES: RELIGIOUS AND ETHICAL POSITION ON MEDICAL THERAPY, CHILD CARE AND RELATED MATTERS**. Brooklyn, NY: Watchtower Bible and Tract Society, December 1992. 3 p.

Perspectives on abortion, advance directives, circumcision, medical decision making, birth defects, vaccines, living wills, organ donation and transplantation, prolongation of life, right to die, faith healing, and the use of blood and blood products are briefly outlined.

Watchtower Bible and Tract Society of Pennsylvania. **JEHOVAH'S WITNESSES AND THE QUESTION OF BLOOD**. Brooklyn, NY:

Watchtower Bible and Tract Society of New York, 1977. 64 p.

A series of questions and answers for health care personnel explain the basis for Witnesses' refusal of blood, the physician's role, children's involvement, alternative therapies, and bloodless surgery.

Watson, Stanley B. **Jehovah's Witnesses and Blood Transfusion**. *Clinical Ethics Report* 5(1): 1-16, 1991.

Watson provides a thorough look at the ethical issues surrounding Jehovah's Witnesses and blood. The medical treatment of competent and incompetent adults, pregnant adults, and children and adolescents is addressed. A number of court cases are described, and an extensive bibliography is provided.

LUTHERAN

Evangelical Lutheran Church in America. Church Council. **AIDS AND THE CHURCH'S MINISTRY OF CARING**. Chicago, IL: Evangelical Lutheran Church in America, 13 November 1988. 2 p.

In recognition of the gift of God's undeserved love for all, Lutherans are encouraged to care for and accept persons with AIDS in the manner of Christ's nonjudgmental and compassionate ministry to the sick.

Evangelical Lutheran Church in America. Church Council. **A MESSAGE ON END-OF-LIFE DECISIONS**. Chicago, IL: Evangelical Lutheran Church in America, 1992. 5 p.

This message affirms that living and dying are equally part of a process created by God, share meaning in the promise of the resurrection, and should be supported by a caring community. The wishes of the patient (expressed directly or through advance directives or surrogates) carry final authority. Artificially-administered nutrition and hydration are recognized as medical treatments that may be refused, but physician-assisted death is opposed.

Evangelical Lutheran Church in America. Churchwide Assembly. **A SOCIAL STATEMENT ON ABORTION**. Chicago, IL: Evangelical Lutheran

Church in America, 1991. 11 p.

Acknowledging the differences within the denomination, this statement sets forth relevant theological and ethical teachings about abortion. The Assembly affirmed life as a gift, sexual intercourse as appropriate only within marriage, and abortion only as a morally responsible option of last resort in cases of maternal danger, lethal fetal abnormalities, and pregnancy resulting from rape or incest.

Evangelical Lutheran Church in America. Division for Church in Society. **HUMAN SEXUALITY AND THE CHRISTIAN FAITH**. Minneapolis, MN: Evangelical Lutheran Church in America, November 1991. 55 p.

Representing the first stage in the development of a social statement on human sexuality, this study encourages discussion on the topic. It includes chapters on human sexuality, sexuality in the Bible and in Lutheranism, stewardship of sexuality, and specific issues of concern for today.

Kelm, Paul. **I WOULD LIKE TO KNOW**. Milwaukee, WI: Northwestern Publishing House, 1991. 171 p.

A collection of Pastor Kelm's "question and answer" columns from the official magazine of the Wisconsin Evangelical Lutheran Synod includes the topics of: abortion, birth control, blood transfusions, depression, funerals, healing, infanticide, organ transplants, sexual sins, suicide, and vasectomy.

Lutheran Church in America. **RESOLUTION ON ORGAN DONATION**. New York: Division for Mission in North America, 1984. 2 p.

Accepted by the Evangelical Lutheran Church in America, this statement by a predecessor body encourages the donation of cadaver organs and renewable tissue or live organs as an expression of sacrificial love and calls for the fair distribution of scarce organs and prohibition of their sale or purchase.

Lutheran Church-Missouri Synod. Commission on Theology and Church Relations. **CHRISTIAN CARE AT LIFE'S END**. St. Louis, MO: Commission on Theology and Church Relations,

February 1993. 64 p.

A Christian call "always to care and never to kill" (p. 3) is acknowledged, and opposition to euthanasia and assisted suicide is reaffirmed. Case-based discussions of 12 guiding principles counsel the need to seek God's will and to respect differences in conscience.

Lutheran Church-Missouri Synod. 1981 Convention Proceedings. **RESOLUTION TO ENCOURAGE DONATION OF KIDNEYS AND OTHER ORGANS**. St. Louis, MO: Lutheran Church-Missouri Synod, 1981. 1 p.

Living kidney donation to relatives and use of donor cards to allow transplantation of organs after death are encouraged.

Marty, Martin E. **HEALTH AND MEDICINE IN THE LUTHERAN TRADITION: BEING WELL**. New York: Crossroad Publishing Company, 1983. 178 p.

Marty, a Lutheran religious historian and co-editor of the Project Ten series, covers topics of suffering, illness and madness, caring, healing, morality, sexuality, and the meaning of dying in this first volume of the series. For Lutherans, illness and madness are evidence of the brokenness and partiality of this world caused by human beings' fall from grace.

Mueller, Wayne D. **MODERN MORAL DILEMMAS: SCRIPTURE ADDRESSES TODAY'S ISSUES**. Milwaukee, WI: Northwestern Publishing House, 1991. 65 p.

Demonstrating the relevancy of scripture to human sexuality, premarital relationships, homosexuality, and family planning, Pastor Mueller asserts that the Bible teaches morality but is not moralistic. The Scripture is not a rule book; its central message is Christ and the guidance it offers does not work separated from personal knowledge of the power of Christ.

Schneider, Edward D., ed. **QUESTIONS ABOUT THE BEGINNING OF LIFE: CHRISTIAN APPRAISALS OF SEVEN BIOETHICAL ISSUES**. Minneapolis, MN: Augsburg Publishing House, 1985. 189 p.

Prepared by representatives of the American Lutheran Church and the Lutheran Church in

America, the two larger predecessor bodies of the Evangelical Lutheran Church in America, this collection of resource paper covers: artificial insemination, in vitro fertilization, surrogate motherhood, genetic manipulation, genetic screening and counseling, prenatal diagnosis, and handicapped newborns.

Sherman, Franklin. **The Lutheran Ethos and Biomedical Ethics Today.** *Currents in Theology and Mission* 15(6): 565-73, December 1988.

Sherman delineates the unique contribution the Lutheran theological tradition might make to biomedical ethics. He concludes that the Lutheran tradition, often characterized as “evangelical Catholicism,” honors tradition yet accepts modernity, with an “open, affirming and yet critical” attitude toward medical technology and its interventions into the life process.

Wisconsin Evangelical Lutheran Synod (WELS). **ABORTION.** Milwaukee, WI: Wisconsin Evangelical Lutheran Synod, 1979. 1 p.

Continuing its historic testimony against abortion based on the Scriptural teaching that the unborn are persons in the sight of God and therefore protected by the commandment against murder, this statement prohibits abortion except when medically necessary to save the life of the mother.

METHODIST/WESLEYAN

Holifield, E. Brooks. **HEALTH AND MEDICINE IN THE METHODIST TRADITION: JOURNEY TOWARD WHOLENESS.** New York: Crossroad Publishing Company, 1986. 198 p.

Holifield develops Wesleyan/Methodist thought on healing and health, suffering, dying and death, morality and dignity, sexuality, caring, and well-being in this Project Ten book. He notes the profound interest of Methodist founder John Wesley in physical, as well as spiritual, well-being and his notion that achievement of health in these two realms was an interconnected journey toward wholeness.

Stallworth, Paul T., ed. **THE CHURCH AND ABORTION: IN SEARCH OF A NEW**

GROUND FOR RESPONSE. Nashville, TN: Abingdon Press, 1993. 152 p.

Motivated by the 1990 “Durham Declaration” on abortion (text included), these papers assert that the current “compromise” position of the Methodist Church on abortion—which recognizes both the sanctity of life and the tragic conflicts of life with life that may justify legal abortion—is out of step with historic and ecumenical Christianity.

United Methodist Church. **THE BOOK OF RESOLUTIONS.** Nashville, TN: United Methodist Publishing House, 1992. 682 p.

A compilation of all resolutions approved by the quadrennial General Conference of the United Methodist Church since 1968, this book includes the denominations’ “Social Principles” and resolutions on genetic technology, organ and tissue donation, abortion, health and wholeness, medical experimentation, medical ethics, medical and pastoral care for individuals with AIDS and AIDS education, understanding living and dying as faithful Christians, substance abuse, suicide, sterilization, medical rights, and mental illness.

United Methodist Church. General Board of Church and Society. **FAITHFUL WITNESS ON TODAY’S ISSUES.** Washington, DC: United Methodist Church, 1993-1994.

This series of study guides considers health and wholeness, human sexuality, and drug and alcohol concerns based on denominational resolutions. Guides on genetic science and AIDS are expected in January 1995.

Wesleyan Church. **STANDING FIRM: THE WESLEYAN CHURCH SPEAKS ON CONTEMPORARY ISSUES.** Indianapolis, IN: Wesley Press, 1993. 41 p.

Asking for the courage to stand for biblical principles and against prejudice and discrimination, this document offers brief statements of belief from the Wesleyan Church on such topics as: human rights, sanctity of life, substance abuse, homosexuality, and AIDS.

Wesleyan Church. Task Force on Public Morals and Social Concerns. **POSITION PAPER ON**

AIDS [and] RESOURCE/GUIDELINE PAPER ON AIDS. Indianapolis, IN: Wesleyan Church, August 1989. 2 p. and 4 p.

The Wesleyan Church stands for chastity before marriage and fidelity in marriage, and members are encouraged to oppose the legitimization of deviant sexual practices. At the same time, however, they are called to educate themselves about AIDS and to offer a compassionate and nonjudgmental response to those with AIDS as Christ's redemption and grace are available to all. The resource paper provides medical facts; guidelines for individual churches; recommendations for program, personnel, facilities, and equipment; and a procedure for handling blood and other body fluids.

Wesleyan Church. Task Force on Public Morals and Social Concerns. **POSITION PAPER ON ISSUES RELATED TO DEATH AND DYING.** Indianapolis, IN: Wesleyan Church, August 1989. 4 p.

Now under revision, this paper discusses a definition of death, "brain death" and persistent vegetative state, medical decision making and treatment refusal, euthanasia, pain treatment, the elderly and terminally ill, donation of body parts, and the marriage covenant and illness.

NAZARENE

Church of the Nazarene. **MANUAL/1993-1997: HISTORY, CONSTITUTION, GOVERNMENT, RITUAL.** Kansas City, MO: Nazarene Publishing House, 1993. 350 p.

All official statements and doctrinal beliefs of the Church of the Nazarene are contained in this manual. Of particular interest are special rules on human sexuality and abortion, and the appendices on genetic engineering and gene therapy, euthanasia, and organ donation.

PRESBYTERIAN/REFORMED

Gilchrist, Paul R., ed. **PCA DIGEST: PART V, POSITION PAPERS 1973-1993.** Atlanta, Georgia: Presbyterian Church in America, 1993. 568 p.

Since its founding in 1973, the General Assembly of the Presbyterian Church in America has received or adopted as actions position papers

covering: abortion, AIDS, medical heroic measures, and homosexuality.

Presbyterian Church (U.S.A.). Committee on Social Witness Policy. **SOCIAL POLICY COMPILATION.** Louisville: Presbyterian Church U.S.A., 1991. [looseleaf format].

A topical compilation of excerpts from motions and resolutions passed by this denomination and its former branches since 1966 addresses human sexuality, homosexuality, birth control, abortion, health care, AIDS, biomedical ethics, and genetic technologies.

Presbyterian Church (U.S.A.). Office of the General Assembly. **LIFE ABUNDANT: VALUES, CHOICES AND HEALTH CARE. THE RESPONSIBILITY AND ROLE OF THE PRESBYTERIAN CHURCH (U.S.A.).** Louisville, KY: The Presbyterian Church (U.S.A.), 1988. 83 p.

Claiming Jesus' promise of abundant life—i.e., health, healing, and restoration to physical, mental and spiritual wholeness—this statement urges personal, church, and societal responsibility for resolving the problems with health care in the United States. Text, background commentary, and a study guide are provided.

Presbyterian Church (U.S.A.) 204th General Assembly (1992). **Problem Pregnancies and Abortion.** *Church & Society* 82(6): 19-29, July/August 1992.

The Church "encourages an atmosphere of open debate and mutual respect for a variety of opinions" (p. 20) on the issue of abortion due to diverse interpretations of scripture and acknowledges that in a sinful world abortion may be the least objectionable of difficult options. Common viewpoints of Presbyterians on abortion are summarized.

Presbyterian Church (U.S.A.) 205th General Assembly (1993). **Freedom and Substance Abuse.** *Church & Society* 83(6): 37-54, July/August 1993.

These excerpts from reports adopted by the 1993 General Assembly contain recommendations and policy statements on: the universal health care plan, freedom of choice, access to

clinics, and family planning and population.

United Presbyterian Church in the United States of America. 195th General Assembly. **THE COVENANT OF LIFE AND THE CARING COMMUNITY [and] COVENANT AND CREATION: THEOLOGICAL REFLECTIONS ON CONTRACEPTION AND ABORTION.** New York and Atlanta: United Presbyterian Church in the United States of America, 1983. 182 p.

These companion reports were adopted in 1983. The first discusses contraception, abortion, genetic research and human engineering, just provision of health care, and decision making at the end of life. The text of the Christian Affirmation of Life and other advance directives are included. The second provides a more detailed analysis of the issues of contraception and abortion. Both provide policy statements, recommendations, and study guides.

Vaux, Kenneth L. **HEALTH AND MEDICINE IN THE REFORMED TRADITION: PROMISE, PROVIDENCE, AND CARE.** New York: Crossroad Publishing Company, 1984. 149 p.

Vaux, the director of Project Ten, examines how Reformed beliefs influence being human (well-being, dignity, suffering, and madness); becoming human (passages and sexuality); and acting human (morality, healing, caring, and dying).

Wiest, Walter E., ed. **HEALTH CARE AND ITS COSTS: A CHALLENGE FOR THE CHURCH: ESSAYS COMMISSIONED BY THE TASK FORCE ON HEALTH COSTS AND POLICIES OF THE PRESBYTERIAN CHURCH (U.S.A.).** New York: University Press of America, 1988. 340 p.

Essays address medical ethics and Christian ethics; what the Church can offer to biomedical ethics; the biblical and theological basis for health care ministries; and the Reformed tradition's view of health and healing.

SEVENTH-DAY ADVENTIST

Numbers, Ronald L. **PROPHETESS OF HEALTH: ELLEN G. WHITE AND THE**

ORIGINS OF SEVENTH-DAY ADVENTIST HEALTH REFORM. Knoxville: University of Tennessee Press, 1992. 335 p.

In his discussion of the origins of Seventh-day Adventist health reform, this former Seventh-day Adventist includes chapters on the health reformers, dietary directives, the Western Health Reform Institute, and the denomination's philosophy of health. Numbers' treatment of Church founder White resulted in a great deal of controversy within the Adventist Church. The lengthy introduction by Jonathan M. Butler provides details of this debate.

Pearson, Michael. **MILLENNIAL DREAMS AND MORAL DILEMMAS: SEVENTH-DAY ADVENTISM AND CONTEMPORARY ETHICS.** Cambridge: Cambridge University Press, 1990. 328 p.

In light of the Seventh-day Adventist expectation of the imminent advent of Christ's second coming and the belief in the Church as a gathering of the faithful awaiting Christ's return, Pearson examines both official and unofficial denominational positions on contraception, abortion, and other topics. A bibliography is provided.

Seventh-day Adventist. Administrative Committee. **GENERAL CONFERENCE. ASSISTED HUMAN REPRODUCTION — CONSIDERATION [and] USE OF MIFEPRISTONE (RU-486) — RECOMMENDATIONS.** Silver Spring, MD: General Conference, Seventh-day Adventist Administrative Committee, 1994 July 26. 2 p. and 1 p.

The Committee states that childlessness bears no social or moral stigma. If assisted reproduction is used, consideration of the impact on family heritage, the need to respect human life at all stages, and Christian stewardship is necessary. The use of RU-486 for medical therapy and for contraceptive use to prevent fertilization is ethically permissible.

Seventh-day Adventist. General Conference. **Care for the Dying.** *Adventist Review* 169: 1390-91, 31 December 1992.

Affirming the gift of life on earth, but relying on the promise of eternal life, this consensus state-

ment holds that Seventh-day Adventists may use medicine to minimize suffering, but are not required to use means that will merely prolong the process of dying. After truthful disclosure of prognosis, treatment decisions should be left to the patient or family members, at all times ensuring that the dignity of the patient is respected. Seventh-day Adventists do not condone mercy-killing, assisted suicide, or euthanasia.

Seventh-day Adventist. General Conference. **Guidelines on Abortion.** *Adventist Review* 169: 1388, 31 December 1992.

Intended to provide pastoral guidance to individuals facing the issue of abortion, this is a consensus statement and does not reflect official Church policy. The statement affirms that life is a sacred and magnificent gift from God and states that the decision to seek abortion is one of grave moral consequence appropriate only for most serious reasons. Ultimately the decision rests with the pregnant woman, supported by the Church community, and aided by “accurate information, biblical principles and the guidance of the Holy Spirit” (p. 3). A footnote includes Adventist “Principles for a Christian View of Human Life.”

Seventh-day Adventist. General Conference. **Special Issue on Abortion.** *Update* 9(3): 1-8, 3 September 1993.

Abortion guidelines adopted by the Conference in October 1992 are presented along with commentaries on the guidelines and Adventist views of abortion.

UNITARIAN UNIVERSALIST

Unitarian Universalist Association. Department for Social Justice. **RESOLUTIONS AND RESOURCES: A SOCIAL RESPONSIBILITY HANDBOOK.** Boston, MA: Unitarian Universalist Association. Department for Social Justice, 1994. [looseleaf format].

All general resolutions and resolutions of immediate witness passed by each General Assembly since 1961 are collected here. Resolution topics include: nursing home reform, home health care, mental health, development of hospices, legality of living wills, a national health plan,

opposing AIDS discrimination, the right to die with dignity, AIDS/HIV crisis, travel rights of HIV-infected people, universal health care, and resolutions (the first dated 1963) on abortion and the right to choose.

UNITED CHURCH OF CHRIST

United Church of Christ. Office for Church in Society. **THE PROPHETIC VISION: SOCIAL POLICY STATEMENTS, UNITED CHURCH OF CHRIST GENERAL SYNODS 1957-1992.** Cleveland, OH: United Church of Christ, 1992. 158 p.

Textual excerpts of all social policy statements passed by the biennial general assemblies since the denomination’s founding in 1957 cover: abortion, AIDS, genetic engineering, health, population and family planning, reproductive technologies, and the right to die.

United Church of Christ. The UCC Council for Health and Human Services Ministries and the UCC Chaplains in Health Care. **MAKING END OF LIFE DECISIONS: UNITED CHURCH OF CHRIST PERSPECTIVES.** Cleveland, OH: United Church of Christ, 1993. 28 p.

The Church has prepared a resource guide for its membership that discusses decision making at the end of life, including making decisions for oneself and for others, ethical approaches, UCC perspectives, and challenges to the Church. A glossary and study questions are also included.

ROMAN CATHOLICISM

Ashley, Benedict, and O’Rourke, Kevin D. **ETHICS OF HEALTH CARE: AN INTRODUCTORY TEXTBOOK,** 2d ed. Washington, DC: Georgetown University Press, 1994. 285 p.

Prepared as an undergraduate text, this work covers fundamental questions about health and responsibility, the ethical principles of health care, and norms of Christian decision. These principles are applied to such issues as: human research and the allocation of resources, sexuality and reproduction, surgical and genetic reconstruction of the human body, psychotherapy, death and dying, and pastoral and religious

responsibilities in healing.

Cahill, Lisa Sowle. **Abortion, Sex and Gender: The Church's Public Voice.** *America* 168(18): 6-11, 22 May 1993.

Professor Cahill discusses the Catholic Church's views on abortion and her own, noting the Church's ambivalence about both sex and women. Cahill argues that reduced focus on isolated sex acts and their relationship to the procreative process, greater respect for women, and shared responsibility of men and women for the family will enhance the Church's ability to garner respect for the unborn.

Cassidy, Joseph D., and Pellegrino, Edmund D. **A Catholic Perspective on Human Gene Therapy.** *International Journal of Bioethics* 4(1): 11-18, March 1993.

The authors identify six Catholic Christian norms, that, in conjunction with the principle of Christian charity, guide their moral assessment of several types of genetic manipulation. These norms are: accountable stewardship, preservation and protection of the nature and destiny of humankind, respect for life, respect for persons, equality of value of each person, and charitable justice in the distribution of resources.

Catholic Bishops of Pennsylvania. **Nutrition and Hydration: Moral Considerations.** *Linacre Quarterly* 59(1): 8-30, February 1992.

The Catholic Bishops of Pennsylvania offer their religious perspective on withholding or withdrawing nutrition and hydration. They provide a clear discussion of states of unconsciousness, methods of providing nourishment, and criteria to determine whether treatment is ordinary or extraordinary. In almost every instance a moral obligation exists to provide nourishment to an unconscious person. (See also commentaries on following pages.)

Catholic Health Association. **CARE OF THE DYING: A CATHOLIC PERSPECTIVE.** St. Louis: Catholic Health Association, 1993. 67 p.

The Catholic tradition affirms the sanctity of life, God's dominion and human stewardship of the gift of life, and prohibition of killing; these principles inform its goal to help dying patients

live well until they die. While euthanasia and assisted suicide seem to be receiving increasing support, Catholic institutions are challenged to work against the tide to create a community supportive of the values of life; to advocate balancing patient autonomy and state interests in life; to work to achieve holistic and palliative care for the dying; and to strive to relieve all forms of pain.

Catholic Health Association. Special Task Force on Pain Management. **Pain Management: Theological and Ethical Principles Governing the Use of Pain Relief for Dying Patients.** *Health Progress* 74(1): 30-39, 65, January-February 1993.

The task force attempts to define pain and suffering and addresses societal and clinical concerns regarding pain and its control. While it notes that some individuals may choose to endure pain as a redemptive participation in Christ's passion, the Vatican *Declaration on Euthanasia* allows the use of high levels of painkillers even if life foreseeably will be shortened.

Catholic Health Association of the United States. **HUMAN GENETICS: ETHICAL ISSUES IN GENETIC TESTING, COUNSELING, AND THERAPY.** St. Louis, MO: The Association; 1990. 43 p.

Issued by CHA as a "resource for ethical consultation and decision making in medical genetics," this work reviews the current scientific techniques in genetics; relates ethical problems and considerations in genetic testing and gene therapy; and makes recommendations for genetic services in Catholic health care institutions. Respect for non-directive counseling is urged, and somatic cell or parental gonadal cell therapy is cited as effective treatment for genetic diseases, that avoids morally negative alternatives.

Catholic Health Association of the United States. **MANUAL OF GUIDELINES ON CLINICAL-ETHICAL ISSUES.** St. Louis, MO: The Association, 1990. 97 p.

Practical guidance on the development and formation of policies on clinical ethics is of-

ferred. Sample policies, information about the teaching of the Catholic Church, and suggestions for further reading on institutional ethics committees, informed consent/collaborative decision making, life-sustaining treatment, surgical sterilization, and rape are provided.

Catholic Health Association of the United States; and Conference of Major Religious Superiors of Men's Institutes of the United States. **THE GOSPEL ALIVE: CARING FOR PERSONS WITH AIDS AND RELATED ILLNESSES—A PASTORAL DOCUMENT.** St. Louis, MO: The Association and the Conference, 1988. 128 p.

Portraying the AIDS epidemic as a moment in time when God draws near demanding recognition and response, this document asserts that the Gospel requires a compassionate and open response to those with AIDS; the provision of medical care; and efforts to ensure that justice, love, and mercy are taught and reflected in public policy. Chapters on AIDS in the Church, ethical and legal considerations for health care providers, and an appendix with sample policies on a variety of issues for medical and corporate settings are included.

Curran, Charles E. **CONTRACEPTION: AUTHORITY AND DISSENT.** New York: Herder and Herder, 1969. 239 p.

Sparked by *Humanae Vitae*, the papers in this volume examine whether dissent from such authentic, noninfallible papal teaching is legitimate. Contributions discuss the function of the magisterium and historical cases of accepted dissent before turning to an analysis of the encyclical itself.

Ford, John C.; Grisez, Germain; Boyle, Joseph; Finnis, John; May, William E. **THE TEACHING OF HUMANAЕ VITAE: A DEFENSE.** San Francisco: Ignatius Press, 1988. 219 p.

In his general introduction to the debate regarding *Humanae Vitae*, Grisez identifies two common forms of dissent: (1) questions of consistency in the Church's teaching because the Church accepts birth regulation by abstinence but not by contraception, and (2) questions of the infallibility or authority of the Church's teaching. The two essays in this book attempt to

respond to these objections.

Griese, Orville N. **CATHOLIC IDENTITY IN HEALTH CARE: PRINCIPLES AND PRACTICE.** Braintree, MA: The Pope John Center, 1987. 537 p.

Prepared especially for health professionals and pastoral personnel, this volume offers discussion of: lawful and unlawful means of dealing with fertility issues, contraception, abortion, euthanasia, application of the principle of double effect to problems in pregnancy, organ transplantation, treatment for rape victims, and issues of confidentiality and AIDS. It also provides a multi-page, quick reference commentary on the "Ethical and Religious Directives for Catholic Health Facilities" and a detailed index.

Heaney, Stephen J., ed. **ABORTION: A NEW GENERATION OF CATHOLIC RESPONSES.** Braintree, MA: Pope John Center, 1992. 359 p.

Heaney compiled this book for individuals searching for an understanding of "why the Church's position (on abortion) makes sense" (p. xiv), those looking for well-reasoned arguments on either side of the abortion debate, and those influenced by non-Church teaching but uncertain in their hearts. Interdisciplinary contributions cover: personhood; moral methodology and applications; feminist issues; pluralism, dissent, and the magisterium; and Church, public policy and the law.

McCormick, Richard A. **THE CRITICAL CALLING: REFLECTIONS ON MORAL DILEMMAS SINCE VATICAN II.** Washington, DC: Georgetown University Press, 1989. 414 p.

McCormick discusses the way moral theology in the Catholic Church has evolved during the twentieth century. He considers changes in Catholic positions on specific issues—e.g., genetic technology, sterilization, nutrition and hydration, and AIDS.

McCormick, Richard A. **HEALTH AND MEDICINE IN THE CATHOLIC TRADITION: TRADITION IN TRANSITION.** New York: Crossroad Publishing Company, 1984. 173 p.

Basing his discussion on the 1975 United States Catholic Conference "Ethical Guidelines for Catholic Health Care Institutions," McCormick provides the reader with a thematic understanding of the Catholic Church's approach to "being well," an appreciation of the complexity of the denomination's living tradition (the Popes and the magisterium), and its defined pattern of authority in this book from the Project Ten series.

McCormick, Richard A. **'Humanae Vitae' 25 Years Later.** *America* 169(2): 6-12, 17 July 1993. McCormick summarizes the historical and more recent response to *Humanae Vitae*, the Papal encyclical addressing contraception. He reviews the proposals for moving beyond the current impasse on the issue.

McCormick, Richard A. **"Moral Considerations" Ill Considered.** *America* 166(9): 210-14: 14 March 1992.

McCormick offers a comment critical of the Pennsylvania Bishops' position on the withdrawal of artificial nutrition and hydration. He calls their moral reasoning questionable and states that their position that such withdrawal from a patient in PVS is "murder by omission" focuses on the effect, not the benefit, of such treatment.

Moraczewski, Albert S. **The Human Genome Project and the Catholic Church.** *International Journal of Bioethics* 2(4): 229-34, December 1991.

Based on Pope John Paul II's brief comments on genetic manipulation, Moraczewski maintains that experimental genetic interventions may be morally acceptable if their aim is the improvement of the human biological status, the normal biological nature of the human person is respected, no harm is inflicted on the process of human generation or on human embryos, and new classes of marginalized people are not created.

National Conference of Catholic Bishops. **Call to Compassion and Responsibility: A Response to the HIV/AIDS Crisis.** *Origins* 19(26): 421, 423-434, 30 November 1989.

In a revised version of the 1987 statement, *The Many Faces of AIDS: A Gospel Response*, the United States Catholic Conference asserts the dignity and worth of all persons and attempts to address the ethical and spiritual dimensions of the HIV/AIDS crisis. The Church is called to provide pastoral care and medical and social services to AIDS patients and their families and friends in the compassionate and understanding manner of Christ. The Conference encourages AIDS education and urges those with AIDS to live in a manner that does not put others at risk. The Church affirms its position that the gift of sexuality should only be expressed in a monogamous, heterosexual and married relationship.

National Conference of Catholic Bishops. **Resolution on Health Care Reform.** *Origins* 23(7): 97, 99-102, 1 July 1993.

The resolution states that health care is a right because of the sanctity and dignity of human life and that persons are made in the image of God. Eight criteria for reform and four key policy priorities are identified.

National Conference of Catholic Bishops. Administrative Committee. **Statement on Euthanasia.** *Origins* 21(16): 257-58, 26 September 1991.

The distinction between suicide or active euthanasia and the refusal of disproportionately burdensome medical treatment are emphasized. Catholics and all persons of good will are exhorted to reject proposals to legalize euthanasia because such measures capitalize on confusion, ambivalence, and fear about the use of life-sustaining technology rather than seek loving solutions that respect the dignity and gift of human life.

National Conference of Catholic Bishops. Committee for Pro-Life Activities. **Nutrition and Hydration: Moral and Pastoral Reflections.** *Origins* 21(44): 705-12, 9 April 1992.

The Bishops' statement provides basic moral principles based on respect for the dignity of the human person and God's gift of life and uses these principles in a series of questions and responses to clarify the Church's position on nutrition and hydration. In some limited instances medically assisted nutrition and hydra-

tion represent an unreasonable burden, but the Conference argues for a general presumption in favor of medically assisted nutrition and hydration and against routine classification of PVS patients as terminal; however, it states that this teaching is only preliminary.

O'Rourke, Kevin D., and Boyle, Philip, **MEDICAL ETHICS: SOURCES OF CATHOLIC TEACHING**. 2nd ed. Washington, DC: Georgetown University Press, 1993. 347 p.

In an effort to help people understand the theological foundations for Catholic teachings on issues in medical ethics, Dominicans O'Rourke and Boyle review values informing Church positions and the meaning of the formation of conscience. They provide topically arranged excerpts from official statements of the Church, including *Humanae Vitae*, *Donum Vitae*, *On the Christian Meaning of Human Suffering*, *Declaration on Euthanasia*, and *Prolongation of Life*, and provide references to the full documents.

O'Rourke, Kevin D., and DeBlois, Jean. **Removing Life Support: Motivations, Obligations—An Opinion on NCCB Committee for Pro-Life Activities' Statement on Artificial Hydration and Nutrition**. *Health Progress* 73(6): 20-27, 38, July-August 1992.

The authors note that the document represents pastoral teaching and is not intended to be regarded as authentic or infallible. They argue that the Bishops' thesis in favor of artificial nutrition and hydration in almost all cases is: (1) contrary to Catholic theological tradition because it overemphasizes the value of mere physiological function; (2) contrary to goal of medicine; and (3) contrary to the common belief of the faithful on the issue.

Pellegrino, Edmund D.; Harvey, John Collins; and Langan, John P., eds. **GIVE OF LIFE: CATHOLIC SCHOLARS RESPOND TO THE VATICAN INSTRUCTION**. Washington, DC: Georgetown University Press, 1990. 198 p.

Three aspects of the encyclical, *Donum Vitae* are discussed: clinical and technical aspects, moral- theological foundations, and the impact on legislation and public policy.

Pellegrino, Edmund D.; Langan, John P.; and Harvey, John Collins, eds. **CATHOLIC PERSPECTIVES ON MEDICAL MORALS: FOUNDATIONAL ISSUES**. Boston: Kluwer Academic, 1989. 307 p.

In the face of increasing pluralism in U.S. society and the Catholic denomination, this volume attempts to clarify the philosophical and theological foundations for Catholic medical ethics. The tradition of Catholic teaching on medical morality and its sources of moral insight are examined in the belief that the Church's charity-based "agapeistic" ethic is a viable and rich alternative to secular medical ethics.

Smith, Janet B. **HUMANAE VITAE: A GENERATION LATER**. Washington, DC: Catholic University of America Press, 1991. 425 p.

Smith holds the papal prohibition of artificial contraception to be "true, wise, and authentically Christian" (p. xv), and attempts to provide a philosophical defense for the encyclical. She examines documents from the papal advisory commission, reviews Pope John Paul II's defense and the Church's understanding of Christian marriage, counters the major opposing arguments, and provides a new translation of the text from the Latin version.

Teo, B. **Organ Donation and Transplantation: A Christian Viewpoint**. *Transplantation Proceedings* 24(5): 2114-15, October 1992.

Theologian Teo notes that the Catholic tradition believes that good health care for the sick and dying builds communal bonds and reveals God's love and care for the world. Organ transplantation has the potential to build global bonds, but its ethical defensibility depends on absolute respect for the human person, before and after death, and the noncommercial and fair distribution of organs.

Wildes, Kevin Wm. **In the Light of the Splendor: Veritatis Splendor and Moral Theology**. *Kennedy Institute of Ethics Journal* 4(1): 13-25, March 1994.

Veritatis Splendor's (text and Vatican summary in *Origins* 23(18): 297, 299-336, 14 October 1993) discussion of fundamental questions

regarding moral theology has ramifications for thinking about birth control, artificial reproduction, sterilization, and abortion. Wildes reviews issues in Roman Catholic moral theology relevant to *Veritatis Splendor*, summarizes major themes of the encyclical, and outlines three tensions unresolved by the encyclical: the nature of the moral act, the role of moral theologians, and the relationship of faith and reason in moral theology.

Wildes, Kevin Wm.; Abel, Francesc; and Harvey, John C., eds. **BIRTH, SUFFERING, AND DEATH: CATHOLIC PERSPECTIVES AT THE EDGES OF LIFE**. Boston: Kluwer Academic, 1992. 234 p.

Catholic moral theology focuses on issues raised by the varieties of medical treatment available for the dying of all ages, from preivable embryos to the frail elderly. Essays treat: pain control; HIV infection; artificial nutrition and hydration; theological reflections on dignity, solidarity and the sanctity of life; and responsibility and obligation.

This Scope Note was prepared by Laura Jane Bishop, M.A., a Georgetown University doctoral candidate, and Research Assistant at the National Reference Center for Bioethics Literature (NRC) and Mary Carrington Coutts, M.L.S., a Reference Librarian at the NRC. Literature available through September 1994 is represented in this Scope Note.

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