## Why the United Kingdom needs a National Bioethics Commission

Professor Lord Alton of Liverpool

The Chief Medical Officer, Sir Liam Donaldson, has remarked that "We have had, generally, in this country a deficit of medical ethics". The truth of that comment has been borne out in the debates on the Human Fertilisation and Embryology (HFE) Bill.

Along with colleagues from all parts of the House of Lords, notably Lord Brennan and Baroness Williams of Crosby, I moved amendments to the Bill to redress this "gap" and to provide for a free-standing National Bioethics Commission to provide a balanced and credible permanent forum capable of adequately informing debate.

This is not to take the place of Parliamentary Select Committees but it would be a way of redressing a debate too frequently dominated by vested interests or by small elites who for two decades have enjoyed free rein in shaping the bioethics agenda. Too frequently they have become narrowly ideological in trying to justify their earlier decisions and in dismissing alternative, more ethical, approaches. The net effect has been to undermine public confidence in science.

Our proposal is that a National Bioethics Commission would be given statutory foundation. It would have a diverse membership on terms laid down in statute, would be supported by public money, and would be separate and independent from particular government departments and agencies, having no regulatory, administrative or quasi-legislative functions. Its purpose would be to enhance the democratic process by providing the material to support better informed public debate. Decisions subsequently take on contentious matters in the life sciences would be supported by an informed public view and could be taken in a more democratic and inclusive fashion than they are at present.

The idea of a United Kingdom National Bioethics Commission has been proposed in the past. Dr Brian Iddon MP rightly reminded me of recommendation 85 of the 2005 Science and Technology Committee Report, to "recommend the formation of a single commission to develop policy issues relating to the assisted reproduction, embryo research and human genetics".

Beyond Parliament distinguished commentators and spiritual leaders, such as the Archbishop of Westminster and the Chief Rabbi, Dr Sir Jonathan Sacks, have supported this proposal.

Professor Roger Brownsword of King's College said in his evidence to the HFE Joint Scrutiny Committee that he thought the UK was less utilitarian than it had been and that changes need to be made to the current regulatory regime to reflect "a political culture which is more committed to the human rights agenda". Professor Sir Ian Kennedy, Chairman of the Healthcare Commission, remarked that he had concerns about the Human Fertilisation and Embryology Authority's (HFEA) dual role in inspection and "thinking about really deep issues of bioethics".



It is impossible for the HFEA to reconcile these conflicting roles: the watchdog and the burglar being too closely identified with one another.

Our recent debates have underlined the fast-moving and complex nature of the daunting issues that face us: everything from whether it is right to add to the 2.2 million human embryos destroyed or experimented upon since 1990; the absence of a single cure anywhere in the world using embryonic stem cells; the contrasting exciting advances (80 cures and 350 clinical trials), in the use of ethically acceptable adults cells; and whether it is right to create animal-human hybrid embryos or to use a dead person's tissue to create a human embryo.

In response to the growing number of these challenging questions we need a greater urgency and definition. In part this is a matter of prudence, effectiveness and efficiency, but there is also an important and ineliminable ethical aspect. Ethics comprise the identification of values and principles, but also surely the determination of their appropriate application. That is no easy matter, particularly given the diversity of moral, social and religious perspectives that characterise contemporary society. At the same time, however, there is widespread agreement on the importance of ethics. Among those who reflect on such matters, there is general agreement

about the centrality of such values as welfare, autonomy and respect, and growing recognition that they cannot be reduced to a single value but must be maintained in some kind of balance.

International experience is also relevant. Governments or Ministers have established national bioethics committees in Austria, Belgium, Denmark, France, Germany, Italy, the Netherlands, Portugal, Sweden, Switzerland and in other countries. It is the worst kind of national chauvinism to dismiss overseas best practice as inferior and irrelevant to the British model.

Their constitutions, remits, operation and achievements can teach us a great deal. The Danish and German models are widely admired, but several others also have good features. The Commission would have the authority and standing of an independent statutory body. Its membership should encompass relevant professional expertise, patients and other user-group interests, as well as major religious and ethical groupings. Membership would reflect the diversity of positions held within society and appointment procedures must be public and transparent. Although independent, such a committee would be responsible to Parliament through a Minister to whom it should deliver an annual report, including recommendations for policy, and additional reports could be commissioned when required. Its remit would be the entire range of bioethical issues, including, but not confined to, those concerning reproduction.

Some have argued for a new in-house Westminster committee.

Parliament is perfectly free, at any time, to establish such a body and it might well enhance the work of the existing Select Committees. These two ideas are not mutually exclusive; indeed, they could complement one another very well. Establishing a Parliamentary Committee is not a legislative issue; a National Bioethics Commission is. This is an ideal moment to implement the 2005 recommendation of the Science and Technology Committee and to use the Human Fertilisation and Embryology Bill to put a Commission onto a statutory basis. If we fail to do this, we will have missed a great opportunity.

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