Special Section: First Voices

From Metaethicist to Bioethicist

ROBERT BAKER

> *A graduate student studying philosophy during the 1960s would have been unlikely to choose moral philosophy as an especially exciting specialty. Epistemology was the center of the interest, in particular, the epistemological questions raised by science and mathematics . . . philosophy of science . . . became modish.*
>
> —Albert R. Jonsen, *The Birth of Bioethics*[1]

I was the graduate student that Albert Jonsen so aptly describes. Bronx born and educated at the City College of New York, I emigrated to the Midwest to study at the Minnesota Center for the Philosophy of Science, where May Brodbeck, Herbert Feigl and other "logical positivists" were engaging in an ongoing dialogue with postpositivists like Paul Feyerabend and Karl Popper. In this environment, I studied philosophy of science, epistemology, and metaethics—the epistemology and logic of ethical concepts and language. I even wrote my thesis on the ur-text of the metaethical turn, G. E. Moore's *Principia Ethica*. Then, like other epistemologists and metaethicists, "a public disaster, the American military involvement in Southeast Asia,"[2] as well as the burgeoning civil rights movement, drew me into the sphere of public debate.

When Jonsen and his fellow theologians entered the public debate, they brought with them expertise in moral theology and normative ethics. The philosophers of my generation, however, were trained in metaethics—an academic discipline preoccupied with recondite epistemological and logical technicalities to the exclusion of content. Initially, therefore, we could add little that was philosophical to the public discussion of racism, sexism, civil disobedience, war, and social justice. Yet, as we debated these issues in public fora, we rediscovered our philosophical heritage. For many of us, the story of how we became bioethicists is thus inextricably linked to public protests, teach-ins, and to civil rights, antiwar, and pro-feminist activities.

Our protester past is more than mere autobiographical prologue. We imprinted our values on the field we helped to found. Intrigued by ideals of participatory democracy, when philosophers like me became engaged in clinical contexts we instinctively encouraged nurses and other allied health professionals to participate in ethical decisionmaking as the moral peers of physicians. We immediately envisioned the clinical world as divided between empowered vertical staff and powerless horizontal patients. We may have walked vertically with the staff, but our natural affinity lay with the patients. I once asked Robert Veatch (a fellow antiwar activist and civil-rights worker and a former Peace Corps volunteer[3]) why he became a bioethicist. He asked whether I was familiar with the pamphlet "The Student as Nigger"—a 1960s tract comparing the lot of students with that of Blacks in the segregated South. "Substitute 'patient' for 'student,' and you will understand my motive," he remarked. For us, patients' rights simply were an extension of civil rights.

Cambridge Quarterly of Healthcare Ethics (2002), **11**, 369–379. Printed in the USA.
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https://doi.org/10.1017/S0963180102114101 Published online by Cambridge University Press

We also created applied ethics and bioethics as the antithesis of metaethics. Metaethics disdains substantive ethics; its "real" problems are epistemological; its discourse is the technical jargon of philosophy. Applied ethics focuses on the substantive. Bioethics, in particular, offers a public discourse in which ordinary people can join with experts to philosophize, not only about patients' rights but about the very meaning of medicine, life, and death in a biotechnologically sophisticated society.

My own tale of the transformation from metaethicist to bioethicist is thus emblematic of a generational transformation. In my case, the transformation has three identifiable phases and occurred during the long decade between 1968 and 1978. In the first phase, civil rights and antiwar activities led me to philosophize in public fora. In the second phase, I begin to challenge the conventions that dismissed acts of public philosophizing as "unprofessional." In phase three, my acts of public philosophy came to be legitimated as the professional activity of "applied ethics" and, more to the point, of "bioethics."

Before sketching these phases, let me offer an impression of what I was like during the decade in question. I was not then the gray presence I am today. I was in my thirties, tall, thin, with dark eyes and jet-black hair. I wore the uniform of the radical intelligentsia of the day: blue jeans, blue work shirt, work boots, horn-rimmed spectacles, and an intellectual's goatee. A fellow antiwar protestor, the boxer Mohammed Ali,[4] aptly characterized me as the "string bean"—a dark, slouching, bespectacled, goateed string bean, searching for a more decent society.

Phase One: The Philosopher as Protester

The struggle over civil rights drew me out of academe. Minneapolis was the birthplace of the Freedom Riders—Whites who challenged Jim Crow laws that segregated "Negroes" to the back seats of buses. In those days, the simple act of sitting in a racially incorrect spot could land one in jail. The Freedom Riders were members of the "Dinky Town Intelligentsia"—folk singers, graduate students, labor and political activists, and poets who lived in an area near the University of Minnesota. Today this set is remembered for its folk singer laureate, Bob Dylan. As a "Dinky Towner," I had intended to participate in the first Freedom Ride, but, mindful of the need to support my newborn son, I stayed back to organize support. This decision set a pattern. I protested, but I remained in the academy. I was sometimes on the front lines—the sound that a human head makes when laid open by a policeman's truncheon is forever imprinted on my memory—more often, however, I stayed behind to write and organize.

My first tenure-track position was at the University of Iowa. The Iowa philosophy department had a faculty commons room, and I vividly remember sitting in that room discussing Noam Chomsky and Reverend William Sloan Coffin's "Call to Resist Illegitimate Authority" with fellow philosophers Ed Allaire, John Burdick, and Bill Robinson. Almost offhandedly, we made a decision that would forever change all of our lives: we would set up an Iowa branch of the antiwar organization Resist. Recruiting students and other faculty, including novelists and poets from the Iowa Writers' Workshop (Marvin Bell, Robert Coover, and George Starbuck), we began to organize first in Iowa City and then statewide. Ultimately, Iowa Resist became a mass movement,

https://doi.org/10.1017/S0963180102114101 Published online by Cambridge University Press

which took over the Iowa Democratic Party, elected an antiwar governor (Hughes), and organized rallies and teach-ins around the state.

As a teach-in organizer, I began to write about the war and civil disobedience, but I thought of my writing as a manifestation of citizenship, not the work of a philosopher or an ethicist. Today, of course, analyses of civil disobedience can be approached philosophically. Yet, in the 1960s, one popular ethics textbook closed with the observation that philosophers could not properly address the question "What shall I do?"

> No general answer can be given to this type of question . . . [for] the sort of life that will in fact be satisfactory to a man will depend on the sort of man that he is. . . . The questions "What shall I do?" and "What moral principles should I adopt?" must be answered by each man for himself; that at least is part of the connotation of the word "moral."[5]

In arguing against serving in the Vietnam War, I was clearly addressing the question "What shall one do?" and I was thus violating the boundaries of philosophy, as the subject was then understood. So I thought of my work in this area as "unprofessional." Thus my writing, like my life, split schizophrenically. I became a nine-to-five philosopher who taught and published respectable "meta" material (in professional journals, like *Nous*); after hours, however, I was a protester who published substantive antiwar essays in less respectable venues, like *Middle Earth*, an "underground" newspaper.

As the war intensified, the tension between my academic and protester persona exacerbated. One day I discovered that students from my political philosophy course had been arrested for picketing recruiters from the Dow Chemical Company (manufacturer of napalm, an inflammatory material often used against civilian populations in Vietnam). The university administration circulated a memo, requiring faculty to take attendance for the rest of the week. Rumor had it that students absent for nonmedical reasons would be suspended. So I went to the Iowa City jail and persuaded those in charge to allow me to teach my students. Quite appropriately, our subject was Thoreau's *On Civil Disobedience*. Because my students had attended class, therefore, none were vulnerable to the retaliatory measures that the university contemplated.

The nontenured philosophers leading Iowa City Resist, however, were vulnerable to retaliation. None of us had our contracts renewed. John Burdick left for Washington, where he became a lobbyist for the environmental movement (today he is a dealer in Inuit art). Bill Robinson took a position at the Iowa State University (where he teaches epistemology). Ed Allaire, who had tenure, left for the University of Texas at Austin. I was hired to teach metaethics and political philosophy at Wayne State University.

Phase Two: "Professionalizing" Public Philosophy

Wayne State was the public university for the city of Detroit. Before the 1968 "riots," it had one of the finest philosophy departments in the country. After "the riots," most of the philosophers joined the White exodus. Hector Casteneda and Alvin Plantinga stayed behind to recruit a new generation of Wayne philosophers. I felt lucky to have been chosen. I also hoped that I could use my skills as a teacher to build bridges across the racial divide and to help rebuild the city.

https://doi.org/10.1017/S0963180102114101 Published online by Cambridge University Press

Wayne State's response to "the riots" was to found a community college that would serve the inner city. Seeking a quick start, the university initially lacked resources to pay faculty. Yet, together with my colleague, the logician Robert Titiev, and an African-American graduate student, Nadine Philips, I volunteered to teach a course. It convened at night, in the empty classrooms of a high school in an intimidating area of inner city Detroit. I loved it. Philosophizing with inner-city students was one of the most rewarding experiences of my academic career. Unfortunately, once the community college was chartered and began to pay salaries, we were asked to move our philosophy course to a suburban, predominantly White, location. The administration believed that philosophy was "inappropriate" for inner-city Blacks. Protesting racial stereotyping, we resigned our positions.

In those days, there was a Motown intelligentsia—artists, automobile designers, free lancers, labor organizers, professors, recording artists, and reporters from the *Detroit Free Press*—who brunched at Alvin's Deli (just down the street from Motown Records) or at the Detroit Institute of Art or at some of the large houses in Indian Village (where I lived). Paul Lowinger, a psychiatrist at the Lafayette Clinic, was a charter member of this set. Fascinated by my experiences teaching philosophy in the inner city, Paul recruited me, first for New Detroit (whose aim was to rebuild the inner city), then for the Michigan Governor's Taskforce on Victimless Crime, and eventually as a "bioethics" consultant for the Detroit Psychosurgery Case. What drew us together—and thus what actually drew me into bioethics—was our mutual interest in social reform.

Our first collaboration was as members of the Michigan Governor's Taskforce on Victimless Crime. The Taskforce was charged with developing a plan to control the spread of heroin addiction, particularly in inner-city Detroit. In our 1972 report,[6] we recommended reconceptualizing addiction as "medical" rather than "criminal." We predicted that criminalization would fail and, in failing, would plunge the city of Detroit into a major crime wave, exacerbating middle-class flight, Black and White. In contrast, by medicalizing addiction we could undercut the market for illicit drugs, channel addicts away from the criminal subculture, and rehabilitate at least some addicts. Unfortunately, "getting tough on crime" was the better sound bite, and criminalization remained official policy. Alas for Detroit, our predictions about waves of crime, and the concomitant middle-class and business exodus, proved all too accurate.

My first bioethics consult was initiated as a response to Egyptian students who were picketing the Lafayette clinic to protest mummy autopsies. Because I had extensive experience with protesters, I was asked to act as an intermediary. There were no precedents. So, when I arranged a meeting of administrators, archeologists, pathologists, and picketers, I set one basic guideline: each party was to listen respectfully to the other. The picketers argued that because their ancestors had taken elaborate precautions against disinterment, they would not have agreed to be autopsied. The scientists replied that the autopsies would yield significant information about the history of disease and about life in ancient Egypt. After everyone had spoken, I asked whether the mummies could be investigated without violating their implicit wishes. One archaeologist observed that the sand had mummified many of the corpses without human intervention. A compromise evolved. Autopsies would be restricted to natural mummies; intentional mummies would be investigated by X ray and other minimally invasive procedures.

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The clinical-ethics technique that I began to develop after this incident amalgamated my civil-rights training, which taught me to respect the dignity of all parties to a controversy, with my analytic philosophical background, which trained me to draw clarifying distinctions. For the next three decades I would work in clinics, hospitals, and medical centers, asking people to listen respectfully and allowing the most aggrieved to speak first, after which I would offer carefully crafted distinctions in search of a resolution that would respect the moral claims of all those affected.[7]

Paul Lowinger soon invited my graduate students and me to assist in the plaintiff's brief in the Detroit Psychosurgery Case.[8] This invitation—which launched my career in bioethics—might appear to have been happenstance, but deeper forces were in play. The 1970s were a decade of reform. Collaborations between reform-minded psychiatrists and reform-minded philosophers were thus natural and, quite naturally, evolved into early forays into "bioethics," not only for me and for Al Jonsen[9] but, most notably, for the Callahan-Gaylin collaboration that culminated in the founding of the Hastings Center. In a deep historical sense, bioethics was an artifact of an era that rediscovered the Jeffersonian-Jacksonian democratizing anti-elitist tradition in American culture—and extended it into the clinic. Philosophers like me merely had the privilege of participating.

The protagonist in the Detroit Psychosurgery case was Louis Smith. Louis had been incarcerated under Michigan's criminal sexual psychopath laws. As he told the tale, he was walking along a picket fence when he noticed that a woman on the other side was sunbathing topless. Fixating on this image, he leapt the fence and raped her. He was arrested shortly thereafter and placed under observation in a mental hospital. While in the hospital, Louis fixated on the panty line of a nurse climbing some steps in front of him. He jumped on her. The fall proved fatal, but Louis nonetheless raped her dying and dead body. He was incarcerated indefinitely. Years later, he was offered parole, provided that he accepted either chemical castration or experimental psychosurgery. Making a crude remark to the effect that he needed his testicles, Louis opted for psychosurgery. The Michigan Civil Liberties Union (MCLU) learned of the experimental treatment and filed a suit alleging that mental patients, precisely because they were *mental* patients, lacked the capacity to consent to experimental procedures. The MCLU also claimed that, even were Louis capacitated, because he was incarcerated his consent was not voluntary, and, if it was voluntary, it was not properly informed.

The lawsuit, which was jaundiced by the unsavory history of prefrontal lobotomies and other efforts at psychosurgery, invoked the Nuremberg Code and raised issues about the appropriate standards for research on mental patients and prisoners. It also posed intriguing conceptual questions about the conditions for voluntary consent, and philosophical questions about the difference between being "mad" and being "bad."

As the case progressed, I began to sense a tension between my inclinations and those of the lawyers. I was rebelling against an esoteric, overly technical philosophy, and, as a protester, I believed in public discourse. I was thus inclined to transform the technical jargon of medicine and law into public philosophical discourse about the meaning of mental illness and sexual deviancy in a biotechnologically sophisticated society. I wanted to discuss the rights of mental patients generally, including their right to access experimental med-

https://doi.org/10.1017/S0963180102114101 Published online by Cambridge University Press

icine. Yet the lawyers insistently framed the issues narrowly, in terms of information, volition, and consent. (In fact, Louis Smith was first released and later reincarcerated on legal technicalities.) I did not realize it at the time, but I was seeking the yet-to-be-invented form of public philosophical discourse that became bioethics.

As we became more deeply involved in the case, my students and I were drawn into the early scholarship of bioethics. I discovered the Hastings Center, I became a subscriber to the first volume of its *Report*, I taught a seminar on Jay Katz's *Experimentation with Human Beings*,[10] and I co-organized a conference on the ethics of human-subjects research. We tried to publish a volume about the case but, at the time, academic publishers dismissed as unmarketable our "technical" discussions about the rights of vulnerable populations and such "arcane" documents, as the Nuremberg Code.

Had I stayed at Wayne, I might have evolved into a bioethicist, following a path similar to that taken by fellow Michigan philosopher Howard Brody (who ratified the transition by earning an M.D.). Any hope that I had of remaining at Wayne vanished, however, when President Richard Nixon ordered U.S. troops to invade Cambodia. Student protests erupted around the country, the National Guard killed several students, and the killings at Kent State drew national attention. Students around the country went on strike, and when Wayne joined, I was elected to the strike steering committee. The faculty on the committee negotiated with the University to keep the National Guard off the campus, even as we worked with the students to keep the protest nonviolent—a difficult task, because nonviolence had become unfashionable after the assassinations of Martin Luther King, Jr., and John and Robert Kennedy. Yet we managed to turn the strike into a massive teach-in, while preserving the University grounds from the Guard. My worst moment was actually not with guardsmen but with the Weathermen—a violence-prone offshoot of the Students for a Democratic Society (SDS)—whom I dissuaded from destroying the university computer center.

After the strike ended, non-tenure-track faculty associated with the steering committee (like my wife, who worked in the Art Department) found that their contracts were not renewed. Steering-committee members reviewed for tenure were universally denied. In my case, the nominal reason was my lack of "professionalism." The charge is relevant because the "unprofessional" conduct cited was not my work for the steering committee but my work as a "public philosopher."

Applied ethics is now so eminently respectable that it is difficult to appreciate that it was once treated, to quote a fellow bioethical pioneer, if not with "derision," at least with "disdain."[11] My work on the Governor's Taskforce, my writings on addiction, my collaboration with psychiatrists, and the conference that I co-organized on research ethics were all dismissed as "unprofessional." Even before my tenure review, I had been brought up on charges before a dean because I reported participation as a panelist at an American Psychiatric Association meeting as a "professional" activity. Paul Lowinger had organized a panel to discuss the Detroit Psychosurgery Case. He presented the psychiatric issues. I believe that Robert Burt and Gabe Kaimowitz discussed legal questions. Louis Smith, himself, presented the patient's perspective, and I discussed ethical and philosophical issues. Yet, when I reported my panel participation for my annual faculty review, my Department Chair chastised me for portraying my "hobby" as "philosophy." Acting on principle, I refused to change the report. The dispute landed on a dean's desk. To resolve it, the dean surveyed

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the chairs of several philosophy departments. They responded unanimously that "a panel on the ethics of psychosurgery at a medical meeting was *not* a professional philosophical activity"; however, because my "error" was "inadvertent" they recommended leniency.

Chastened by this official finding that "bioethics" was not "philosophy," I did not submit my publications in "public philosophy" to my tenure committee. I was "outed." Someone sent the committee copies of "'Pricks' and 'Chicks': A Plea for 'Persons.'" The essay was an outgrowth of an effort to teach linguistic analysis to inner-city African-American students. To demonstrate the ways in which language mirrors conceptual frameworks, I analyzed the language that Blacks and Whites use to characterize each other—for example, the White characterization of adult Black males as "boys." My students challenged me to find other examples, so we delved into the multiple meanings of the terms used to characterize male and female roles in sexual intercourse, probing why "being screwed" means both assuming the female role in intercourse and "being taken advantage of." The results were so intriguing that I later explored them with feminists. The poet Judy McCombs published one of the conversations in *Moving Out*, a Detroit feminist magazine, without using my underground-press pseudonym.

Having been informed that philosophizing for physicians was not "professional," I presumed that philosophizing for feminists would be deemed highly "unprofessional," and I did not submit the essay to my tenure committee. Not surprisingly, the committee viewed it as evidence of my continuing "unprofessionalism," and I was denied tenure. I became a minor *cause célèbre*. Leading women philosophers, including Elizabeth Anscombe and Ruth Barcan Marcus, wrote eloquent letters on my behalf, as did linguists like James McCawley—but to no avail.

Several members of the strike steering committee took Wayne to court and won tenure. I was so disappointed in Wayne, however, that I sought a position elsewhere. Fortunately, I had a reputation as an exciting teacher. A number of teaching institutions made me offers, including Union College, a small, private liberal arts college in Schenectady, New York. It was there that I became a bioethicist.

Phase Three: Becoming a Bioethicist

When I arrived at Union College, in September, 1973, only a handful of people used the term "bioethics." I certainly did not consider myself a "bioethicist," or any sort of "ethicist." My interests lay in social and political philosophy. My immediate concern was adjusting to teaching at a small, private liberal arts college. As the child of a welfare widow, raised in the New York City "projects" and educated at city and state universities, I knew how to teach upwardly mobile first-generation public-university students. I knew nothing about private colleges or their students. Yet Union's Provost, Bill Enteman, assured that I would flourish at Union, provided that I wore a tweed jacket, taught well—and published well.

This brings me to one of the great myths about the origins of bioethics. It is often claimed that philosophers turned to bioethics as a lucrative way to enhance their careers, even as they invigorated the field of professional philosophical ethics.[12] Nothing could be further from the truth. Initially, bioethics was a career-wrecker. In my first year at Union, I circulated prospectuses for

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two readers: one on philosophy and sex, and another on philosophy and psychosurgery. Publishers were not interested. Professional philosophy disdained "public philosophy" (today's "applied ethics" and "bioethics"). It was the philosophy of the protest movements, and, as my experience at Wayne illustrates, the academy refused to recognize it.

My first indication of changing attitudes was Richard Wasserstrom's invitation to publish "'Pricks' and 'Chicks': A Plea for 'Persons'" in his Macmillan anthology, *Today's Moral Problems*. Before Wasserstrom's anthology, philosophical debates about race, sex, and violence were sustained through the circulation of manuscripts decked out in the motley hues of the pre-photocopy era—carbon-copy gray, ditto-blue, mimeograph black. These "samizdat" manuscripts were unpublishable and were not even mentioned in formal philosophical fora. Yet they were widely circulated and hotly debated at professional conventions—albeit always in the corridors and coffee shops, never from the podium. Now, a major publishing house had anthologized them to mark a "change . . . in Anglo-American academic philosophy, a turn away from metaethics . . . [to] ways in which philosophy can make an important contribution to and adequate and informed understanding of serious, live moral issues."[13] Wasserstrom's anthology took "public philosophy" off the picket lines and into the halls of academe. Times were changing.

In the spring of 1974, my work in the philosophy of psychiatry also received a measure of recognition. I was awarded a National Endowment for the Humanities (NEH) Selected Fields Fellowship to study concepts of mental illness. I was also invited to contribute to Warren Reich's NEH-funded *Encyclopedia of Bioethics* (also being published by Macmillan). And, I was selected to attend the Council for Philosophical Studies' Summer Institute on Moral Problems in Medicine.

"Camp Sam," as the Summer Institute came to be called—out of affection for its director, Sam Gorovitz—was a transforming experience. Sam worked us day and night, immersing us in lectures, films, and workshops. We began to jell into a community, not only by virtue of our newly acquired knowledge of substantive ethics and moral dilemmas in medicine but also because we began to realize that there were others like ourselves. Before arriving at Camp Sam, I had spent almost 3 years working with Paul Lowinger in Detroit and 1 year working with Alan Kraft, a psychiatrist at the Albany Medical College. In these 4 years I met only one other philosopher who worked with physicians (Howard Brody). At Camp Sam, I met almost a dozen philosophers working in clinical contexts: Natalie Abrams, Martin Benjamin, Ron Carson, Arlene and Chip Dallery, Tris Engelhardt (who was also a physician), John Ladd, Bill Ruddick, Stuart Spicker, and, of course, Sam Gorovitz. I also met philosophers advising government bodies—most notably, Tom Beauchamp, and the Hastings Center philosophers Dan Callahan and Bob Veatch. Among the Institute faculty were such distinguished philosophers as William Frankena, Robert Nozick, Judith Jarvis Thomson, and Bernard Williams. For the first time it struck me that my work with clinicians might not be a personal idiosyncrasy. I began to envision myself as part of a philosophical movement that could change the treatment of patients, wholesale, by reforming the moral norms of clinicians.

I had been overjoyed to receive Warren Reich's invitation to write on "Concepts of Mental Illness" and "Violence and Therapy" for the *Encyclopedia of Bioethics*, but I hesitated before accepting. The tools that today's bioethicists

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depend on—Bioethicsline, the *Encyclopedia*, and so forth—did not yet exist. Contributors to the first edition were creating a canonical literature for a field that existed only in our imagination; moreover, we did so without a research apparatus. Accepting Warren's invitation thus meant spending my NEH-supported leave writing *Encyclopedia* entries. I knew that, even if my tenure committee accepted the legitimacy of "public philosophy," they would not consider encyclopedia entries significant research. Union College was my third chance to remain in the academy; if I struck out again, I would be out of the academy altogether. Prudence dictated a return to conventional philosophy. Yet, buoyed by the spirit of Camp Sam and fascinated by the medicalization of madness, I put prudence aside and accepted Warren's invitation to contribute to the *Encyclopedia*—becoming a member of the pioneering generation of bioethicists.

I spent my NEH fellowship year working on the *Encyclopedia* articles in London, at the Wellcome Institute for the History of Medicine. Why there? The 1970s were the era of antipsychiatry. Adopting a technique developed by Nietzsche in the *Genealogy of Morals*, Foucault and Szasz were writing "genealogies." They were using the history of an institution and its ideology to delegitimate it, deconstructing the concept of mental illness (e.g., characterizing it as a "myth"). To address their work, I needed a good psychiatric library and an excellent library on the history of medicine. London had the best facilities in the world; because I had the funding, I went. (Although I choose London for its libraries, the choice serendipitously laid the foundation for future collaborations with historians of medicine—especially Bill Bynum and Dorothy and Roy Porter—and with European bioethicists. Much of my later work, especially in the history of biomedical ethics and in international bioethics, grew out of these collaborations).

When I returned to Union, in the fall of 1975, I was assigned to teach "Ethics and the Life Sciences." Even though I had been working with clinicians for 5 years, I felt unqualified to teach the clinical dimension of biomedical ethics. So I wrote a short grant proposal. It did not even fill a page. It opened with two sentences: "I am a fraud. I am applying to the Mellon Foundation for assistance in becoming an honest academic." Philosophers, I argued, were unqualified to teach biomedical ethics without some form of clinical training. There were no training programs in bioethics, so I asked the foundation to fund a postdoctoral year. They did. I received an additional year of support from the Institute for Health and Human Values. In 1976, I began a 2-year postdoctoral program at the Albany Medical College, specializing in intensive care and psychiatry. In 1978—the year that the *Belmont Report*, the *Encyclopedia of Bioethics*, and *Principles of Biomedical Ethics* found their way into print—physicians began to refer to me as a "bioethicist." At first I resisted. The "-ist" suffix, seemed to falsely imply ethical expertise. After a year of ethics consults, however, I grudgingly accepted the designation.[14]

And thus I became a "bioethicist"—at least in the eyes of my medical colleagues.

Bioethics Professionalizes

In the decades that have passed, both bioethics and philosophy have changed remarkably. My "unprofessional" acts of "public philosophy" are now profes-

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sionally recognized as "applied ethics"; my once controversial essay, "'Pricks' and 'Chicks' A Plea for 'Persons,' " has won prizes, and my once unpublishable manuscript, *Philosophy and Sex*,[15] is now a standard textbook that has sold over 40,000 copies. Instead of organizing teach-ins, I co-direct an online teaching program that offers a masters in bioethics to healthcare professionals.[16] Where once I published schizophrenically in the underground press, I now organize national and international conferences with the American Medical Association, the Brookings Institution, and the Wellcome Institute for the History of Medicine—which are published by such presses as Brookings, Johns Hopkins, and Kluwer. (One volume was even characterized as "one of the outstanding academic books published in 2000," by *Choice*, the journal of academic libraries—I savored the word "academic.") I once had to plead to be allowed to collaborate with clinicians without being penalized; today, with the support of the Greenwall Foundation, the Milbank Fund, and NEH, I have support to collaborate with colleagues in history and medicine from around the globe. (We are working on two massive Cambridge University Press volumes: *A History of Medical Ethics*, and the *Cambridge Dictionary of Bioethics*.) "Public philosophy" has been legitimated as bioethics.

"Bioethics" itself has become a household word. The *Encyclopedia of Bioethics* is in its second edition. The Hastings Center has just celebrated its thirtieth birthday. The American Society of Bioethics and Humanities has about 2,000 members, who work in over 200 bioethics centers and who produce roughly 3,200 articles and books per year. These are published by major presses and journals and are indexed by the National Library of Medicine. What was once the scraggly effort of a few odd individuals has now blossomed into a major field.

Despite my pride in what has been achieved, I am somewhat apprehensive about the future of the field. My generation's rejection of metaethics and its protester orientation informed our conception of bioethics. Within the clinic we embraced egalitarianism, urging clinicians to accept the validity of the patient's voice. We transformed the practical problem-solving orientation of clinics and courts into a public discourse about the meaning of life and death for a biotechnologically sophisticated society. As a consequence of our success, however, bioethicists today are educated not in protest movements but in academic departments and, increasingly, in centers for bioethics. Bioethics is not an extension of the politics of protest; for them it is a career choice. Will they preserve our values? Will they continue to articulate the interests of powerless horizontal patients, or will they identify with the empowered vertical medical staff with whom they walk? We transformed the private world of medical ethics into a public philosophical discourse. In professionalizing, will the next generation of bioethicists reprivatize bioethical discourse? Will they transform it into a technical jargon, returning it to the pragmatic problem-solving domain of the clinic and the courts? We will, of course, continue to transmit our values to the field, but the next generation of bioethicists is likely to seek its own way—and the future belongs to them.

Notes

1. Jonsen AR. *The Birth of Bioethics*. New York: Oxford University Press, 1998:74–5.
2. For Jonsen's personal experiences in the protest movement, see: note 1, Jonsen 1998:viii–xi.
3. See note 1, Jonsen 1998:58–9.

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4. I met Ali briefly when he toured Iowa City. He had been stripped of his title and was touring college campuses to talk about his case and to raise money for the antiwar movement. He bestowed apt nicknames on the people around him liberally.
5. Nowell-Smith P. *Ethics*. Baltimore, Md.: Penguin Books, 1964:319–20.
6. Wilson TGG, Baker R, Fisher C, Nicholson WN, Lowinger P, et al. *Medico-Behavioral Report of the Governor's Taskforce on Victimless Crime*. East Lansing: Office of Drug Abuse, State of Michigan, 1972.
7. For comparable techniques, see: Moreno J. *Deciding Together*. New York: Oxford University Press, 1995.
8. *Kaimowitz and Doe vs. Michigan Department of Mental Health*; Mich. Cir. Ct., Wayne County, July 10, 1973.
9. See note 1, Jonsen 1998:ix–x.
10. Katz J, Capron AM. *Experimentation with Human Beings*. New York: Russell Sage Foundation, 1972.
11. Kopelman LM. Building the new field of bioethics. In: Kopelman LM, ed. *Building Bioethics: Conversations with Clouser and Friends on Medical Ethics*. Dordrecht: Kluwer, 1999:1.
12. See: Wolpe PR. The triumph of autonomy in American bioethics: a sociological view. In: Devries R, Subedi J, eds. *Bioethics and Society: Constructing the Enterprise*. Englewood Cliffs, N.J.: Prentice Hall, 1998:40.
13. Wasserstrom R, ed. *Today's Moral Problems*. New York: Macmillan, 1975:v–vi.
14. I articulate my views on the role of clinical ethicists in a debate with Bob Veatch. See: Veatch RM. Clinical ethics, applied ethics, and theory, and Baker R. The skeptical critique of clinical ethics. In: Hoffmaster B, Freedman B, Fraser G, eds. *Clinical Ethics: Theory and Practice*. Clifton N.J.: Humana Press, 1989:7–26; 27–58.
15. Baker R, Elliston F, Wininger K, eds. *Philosophy and Sex*. Buffalo, N.Y.: Prometheus Books, 1975, 1984, 1998.
16. See: http://www.bioethics.union.edu.

https://doi.org/10.1017/S0963180102114101 Published online by Cambridge University Press