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Savic, Lovro; Ivankovic, Viktor

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Against the integrative turn in bioethics: burdens of understanding

Lovro Savić¹ · Viktor Ivanković²

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Abstract The advocates of Integrative Bioethics have insisted that this recently emerging project aspires to become a new stage of bioethical development, surpassing both biomedically oriented bioethics and global bioethics. We claim in this paper that if the project wants to successfully replace the two existing paradigms, it at least needs to properly address and surmount the lack of common moral vocabulary problem. This problem points to a semantic incommensurability due to cross-language communication in moral terms. This paper proceeds as follows. In the first part, we provide an overview of Integrative Bioethics and its conceptual building blocks: mutlidisciplinarity, interdisciplinarity, and transdisciplinarity. In the second part, we disclose the problem of semantic incommensurability. The third part gives an overview of various positions on the understanding of interdisciplinarity and integration in interdisciplinary communication, and corresponding attempts at solving the lack of common moral vocabulary problem. Here we lean mostly on Holbrook's three theses regarding the character of interdisciplinary communication. Finally, in the fourth part, we discuss a particular bioethical case—that of euthanasia—to demonstrate the challenge semantic incommensurability poses to dialogues in Integrative Bioethics. We conclude that Integrative Bioethics does not offer a methodological toolset

that would warrant optimism in its advocates' predictions of surpassing current modes of doing bioethics. Since Integrative Bioethics leaves controversial methodological questions unresolved on almost all counts and shows no attempts at overcoming the critical stumbling points, we argue for its rejection.

Keywords Integrative bioethics · Integrativity · Pluriperspectivism · Semantic incommensurability · Interdisciplinarity · Moral vocabulary

Introduction

If one is convinced by the claims of Croatian philosopher and bioethicist Ante Čović, bioethics¹ has entered a new “stage of development” (Čović 2011, pp. 20–21) marked by an “innovative concept of integrative bioethics” (Ibid. 2011, p. 12). Integrative Bioethics (hereinafter referred to as IB) is usually defined as a *pluriperspectivist*, *multidisciplinary*, *interdisciplinary* and *transdisciplinary* form of the bioethical enterprise which aims at the *integration* of different perspectives concerned with moral questions about life in all its forms and instantiations (Jurić 2007, p. 83). This ‘integrative turn’ in bioethics has been objected to on many fronts, most notably for conceptual confusion, a pseudoscientific nature, a lack of normative guidance, and double standards (Bracanović 2012), as well as for a number of conceptual inconsistencies, incoherence, and its lack of tenability as a

✉ Lovro Savić
l.savic@student.rug.nl; lovrosavic@gmail.com
Viktor Ivanković
viktor.ivankovic@gmail.com; ivankovic_viktor@phd.ceu.edu

¹ Faculty of Philosophy, University of Groningen, Oude Boteringestraat 52, 9712 GL Groningen, The Netherlands

² Doctoral School of Political Science, Public Policy and International Relations, Central European University, Nador 9, Budapest 1051, Hungary

¹ These developmental stages are categorized in the following manner: (1) New Medical ethics, (2) Global bioethics and (3) Integrative Bioethics. See: Čović (2011), pp. 19–21.

philosophical and bioethical project (Ivanković and Savić 2016).

In our recent paper, we have developed a critical evaluation of IB with a particular focus on its central principles—pluriperspectivism, integrativity, and its perspectivist theory of moral truth—where the principle of pluriperspectivism is deemed to be the cornerstone of the project, with which the project “stands or falls” (Eterović 2015, p. 498). We exposed these principles as lacking in substance and as underdeveloped for underpinning a bioethical project which is supposed to surpass our current and known paradigms and methodologies. In this paper, we extend our criticism by providing further objections to the concept of IB, and turn our attention to its remaining principles—multidisciplinarity, interdisciplinarity, and transdisciplinarity—yet keeping the other already scrutinized terms in sight. We show that Čović’s depiction of IB as *the latest stage of development* in bioethics is unjustified, due to the failures of the project to overcome the methodological difficulties encountered by its supposed predecessor—global bioethics. We claim that if IB is to successfully replace global bioethics, it at least needs to properly address and surmount the *lack of common moral vocabulary problem*. This problem points to a *semantic incommensurability* due to cross-language communication (Wang 2007) in moral terms.² We will demonstrate that, given the over-inclusive nature of *pluriperspectivism*, a multi/inter/trans-disciplinary IB runs the risk of miscommunication, due to a lack of comprehension of different moral concepts and languages employed by different perspective holders.³ It then remains to be seen how different and conflicting perspectives could be integrated, if integrativity denotes establishing a discourse (Schaeffer-Rolffs 2012,

p. 113), *permanent communication* and *dialogical mediation* between different perspectives (Pavić 2010, p. 79).

This paper tackles a problem that is posed to proponents of IB, prior to the looming problems of resolving moral disagreement and value incommensurability that we extensively elaborate on in our previous paper. The issue of semantic incommensurability precedes value incommensurability. Before we are faced with the problem of settling disagreement, we must first confront the hazards of moral miscommunication and confusion. If confirmed, these hazards may reveal that a supposed disagreement was non-existent or ill-conceived, or that disagreements exist where we thought there were none. Semantic incommensurability is thus a threat that an inclusive project like IB needs to tackle first, though that takes nothing from the force of our objections concerning pluriperspectivism and value incommensurability in the previous paper.

This paper will proceed as follows. In the first part, we provide an overview of IB and its conceptual building blocks: multidisciplinarity, interdisciplinarity, and transdisciplinarity. In the second part, we disclose the problem of semantic incommensurability. The third part gives an overview of various positions on the understanding of interdisciplinarity and integration in interdisciplinary communication. Finally, in the fourth part, we discuss a particular bioethical case to demonstrate the challenge semantic incommensurability poses to dialogues in IB. We conclude that IB does not offer a methodological toolset that would warrant optimism in its advocates’ predictions of surpassing current modes of doing bioethics. Since IB leaves controversial methodological questions unresolved on almost all counts, we once again argue for its rejection.

What is integrative bioethics?

According to Marcus Düwell, bioethics denotes “the discourse on moral, legal, social and political issues concerning fundamental questions of life and the life sciences” (Düwell 2014, p. 21). Onora O’Neill views bioethics as a “meeting ground for a number of disciplines, discourses and organizations concerned with ethical, legal and social questions raised by advances in medicine, science and technology” (O’Neill 2002, p. 1).

The definition of Integrative Bioethics, put forward by Croatian philosopher and bioethicist Hrvoje Jurić, aims at pushing against the mainstream, with biomedical ethics in its center. According to Jurić, bioethics represents:

an open area for the encounter and dialogue between different sciences and activities, as well as for the different approaches and worldviews, which is meant to articulate, discuss and resolve ethical questions related

² We hinted at the issue of semantic incommensurability in the previous paper, as suggested by the quote from the “*Semantic incommensurability*” section, but there we mostly left the issue aside. The incommensurability that we discuss in that paper concerns failures to escape substantive bioethical stalemates in values between different perspective-holders, while semantic incommensurability between bioethical paradigms is left unexplored. Once again, we thank Neven Petrović, who pointed us to the latter problem.

³ As moral languages and conceptual moral frameworks, we understand systematically organized networks of concepts within academic and non-academic communities designed or spontaneously emerging with the aim of resolving moral controversies. Oftentimes, especially when moral languages arise in similar cultural contexts or a single plural one, there will be a single word (e.g. autonomy) capturing different semantic scopes, or different words capturing the same or overlapping ones. One synonymous notion that can be borrowed in part from philosophy of science is that of *paradigm*. We will say more about this concept when we discuss the analogy between moral languages and natural languages, and why this is a limited analogy, later in the paper.

to life, to life as a whole and to all parts of that whole, to life in all its stages, phases and appearances (2007, p. 83).

As an academic project, IB has become firmly rooted in the philosophical life of Croatia and Southeastern Europe, to the extent that its prominence in academic and social circles of the region often surpasses that of more internationally established bioethical paradigms. The inception of IB can be traced back to the late '90 s, when several bioethical projects were merged and the advocates of what was considered a new school of bioethical thought established whose work they look to for theoretical background (most notably Fritz Jahr and Van Rensselaer Potter) and what concepts are at the project's core.

Yet, the aspiration of IB's advocates is to transcend its regional roots and establish it as a recognized international paradigm. Zagorac and Jurić have already suggested that IB is affirmed and well-established in the international bioethical arena (2009, p. 609). This claim is often supported by several international publications directly or indirectly supporting the project (Kukoč 2012; Fatić and Zagorac 2016; Rinčić et al. 2016; Muzur and Sass 2012), a myriad of publications in regional journals, both in English and the regional languages (Čović 2006, 2011; Eterović 2015; Jurić 2007; Kos 2014; Schaefer-Rolffs 2012; Zagorac 2011), many conferences organized for an international audience (the annual Lošinj Days of Bioethics, founded by Ante Čović), and two master programs in German and English (at Katolische Universität Eichstätt-Ingolstadt and at Sofia University St. Kliment Ohridski). As we will show, the advocates of IB attempt to challenge the established ways of doing bioethics in the philosophical world. This paper aims to address this challenge.

Jurić characterizes IB through the notions of multidisciplinary, interdisciplinarity, transdisciplinarity, pluriperspectivity, and integrativity:

Multidisciplinarity means—to gather all human sciences and activities that are relevant for bioethical questions; *interdisciplinarity*—to encourage dialogue and to find a mode of cooperation between all these disciplines; and *transdisciplinarity*—to overcome mutual differences, that is, to unify differences into a unique, bioethical view focused on questions that cannot be unraveled from the perspective of one science or one area (Jurić 2007, p. 84).

Pluriperspectivity is defined as a “unification and dialogical mediation of not only scientific, but also of non-scientific, i.e. a-scientific contributions”, which includes “diverse ways of reflection, diverse traditions of thought and cultural traditions, that is, diverse views that rest on cultural, religious, political and other particularities” (Ibid, p. 84; *emphasis*

added). Other proponents of IB are more explicit about which perspectives are included in the “dialogical mediation”, for instance, intercultural, interreligious, transnational, international, interconfessional perspectives and an interaction thereof (Schaefer-Rolffs 2012, p. 114; Zagorac and Jurić 2009, p. 606). Following the above mentioned tendency of including non-scientific contributions and perspectives, Čović further adds to the expansion by incorporating lay and artistic perspectives into the integrative blend (2004, p. 12; 2007, p. 73; See also: Jurić 2007, p. 84). In short, the main “assumption of *integrative bioethics* is the integration of different (*and all*) topics and problems related to the *bios*, as well as integration of different (*and all*) approaches to these topics and problems” (Jurić 2007, p. 85; *second and fourth emphases added*). These claims reveal where Integrative Bioethicists are attempting to achieve novelty and distinction. First, regarding the scope of our moral concern, IB aims to encompass ethical problems related to life in the broadest possible sense, evidently looking to push the envelope of more traditional *biomedical* ethics. Jurić's definitions characterize IB as an all-encompassing all-inclusive enterprise stretching, we are to suppose, beyond not only ‘anthropocentric’, ‘bio-centric’ (Johnson 2010), or ‘ratio-centric’ ethics (Cottingham 1998, pp. 29–60), but also ‘green bioethics’ (Düwell 2014, pp. 247–266), ‘land ethics’ and ‘earth ethics’ (Callicot 2014), as well as ‘biotic ethics’, ‘panbiotic ethics’ (Mautner 2009), and even ‘cryoethics’ (Shaw 2009). Finally, some authors believe in the potential of IB for becoming “an appropriate model for new ethics of globalization” (Kukoč 2012, p. 459) and evaluate its capacity for becoming a “future” and “new global bioethics” (Kos 2014, p. 232). It is, then, meant to be designed as the ultimate bioethical method to appropriately tackle and provide answers and solutions for all bioethical problems we could possibly conceive. It is in this aspirational light that we observe IB and the methodological demands that it needs to meet if it is to accomplish its ideals. In many of its aspects, however, a lack of any conceptual and substantive sophistication in IB means that it hardly gets off the ground with regard to its lofty goals.

The definition of pluriperspectivism suggests quite a lengthy list of perspective-holders. Aside from different scientific perspectives, IB is meant to incorporate a range of perspectives from academic, social, and ethno-cultural life, for instance.⁴ This “maximum interdisciplinarity and

⁴ The notion of ethno-cultural perspective should not here be mistaken with language as the mode of communication within that ethnic and cultural community, though they certainly may be expected to affect one another. There are important differences between miscommunication arising from linguistic differences and from different conceptual nomenclatures within disciplines. We will come back to this later in the paper.

pluriperspectivity” (Kos 2014, p. 236) of IB is argued to reflect its true *proprium*—its exceptional and innovative nature (Čović 2006, pp. 356–357).

The be-all and end-all principle of IB—the pluriperspective dialogue—is methodological. Jurić notes this by saying that when it comes to principles, bioethics should strive towards methodological principles of dialogue, as opposed to a set of strictly substantive principles such as those characteristic of principlism (Jurić 2007, p. 83).⁵ These methodological principles, as mentioned earlier, are integrativity, transdisciplinarity, interdisciplinarity, mutlidisciplinarity and pluriperspectivism.

As hinted by the definitions of its core conceptual building blocks, IB also strives for ‘gathering’ and ‘encouraging the dialogue’ between different perspectives on a particular bioethical problem. Especially suggestive of this is the concept of *integrativity*, which should enable us “to integrate all approaches of different cultural perspectives not into a disciplined and disciplinary scientific framework, but rather in a unique bioethical view” (Ibid, p. 85). At other places, proponents of IB are only slightly more explicit about how the process of integration should transpire. One account on this matter has been given by Jos Schaefer-Rolffs, according to whom integrativity denotes establishing a discourse of different perspectives and points of view (Schaefer-Rolffs 2012, p. 113). One of the foremost defenders of IB, Željko Pavić, sees integrativity as the “attempt to *dialogically mediate* between attained differences and to keep them in permanent communication” (Pavić 2010, p. 79; *emphasis added*).

⁵ This may be a point of contention. A numbers of authors (See for example: Kukoč 2012; Zagorac 2011) within the IB camp have paid homage to German philosopher Fritz Jahr and his bioethical imperative, according to which it applies to all forms of life that they should, when possible, be treated as ends rather than means (See: Jahr 1927, p. 4). Insofar, the IB project is viewed by these authors as an extension of Kantian ethics, but one which resolutely rejects anthropocentrism. However, if that were the case, the bioethical imperative would act as a *principled* constraint on the pluriperspective dialogue, and many positions would be exempt from it. IB could not then merely be a project about a dialogue-enabling method, with a substantive principled constraint looming over it. Now, it may be possible that different authors within the IB camp have different aims for the project in mind, since the project should be able to overcome both the problems of semantic as well as value incommensurability, as we later claim. Still, this is yet another instance where the aims and features of the project are poorly articulated and need at least some elaboration. We thank Nino Kadić for this point. For an account of independent reasons for why the bioethical imperative might be too severe to act as a constraint on the pluriperspective dialogue and value incommensurability, see Ivanković and Savić (2016).

Semantic incommensurability

One problem of IB seems to be that of semantic incommensurability.⁶

[It means] that competing theories or overarching scientific paradigms are unable to *communicate* with each other, being equipped with distinctive methodological and metaphysical toolboxes. Even if such incommensurate theories make use of the same *concepts*, their semantic scopes cannot possibly *correspond to each other*, conditioned by utterly differing backgrounds. Proponents of IB do not and could not inherit such a thesis, for then there would be no point if advocates of different theories engaged in discussion in the first place, since such debate would lack even the basic mutual understanding of participants (Ivanković and Savić 2016, p. 328).

Similarly, in his critical examination of culturally sensitive bioethics, Bracanović expresses the same worry by stating that there is something deeply pessimistic about the rapid emergence of bioethical schools such as IB. This very occurrence implies, he claims, that a number of people are in fact complete moral strangers and are unable to communicate or reach a consensus on moral problems, since they do not use the same moral concepts and, therefore, do not speak the same moral language (Bracanović 2013, p. 648). By using the notion of moral strangers, Bracanović echoes Tristram Engelhardt, who stated this problem in similar terms:

Traditions or moral visions, by binding people over time in a common understanding, separate them from others—Christians from non-Christians, Catholics from non-Catholics, Democrats from Republicans, Marxists from Social Democrats, Social Democrats from Christian Democrats, deontologists from utilitarians, deists from atheists, and egalitarians from defenders of social difference—so they come to speak different moral languages making communication difficult (perhaps in some areas impossible) (Engelhardt 2012, p. 15).

Obviously, not all conflicting moral positions suffer from semantic incommensurability, nor are we compelled to accept the cleavages Engelhardt suggests. All we need to acknowledge is that the occurrence of semantic incommensurability can be identified in at least some semantic

⁶ We will not be able to discuss the very concept of semantic incommensurability and its competing variants at length here. The way in which we use the concept is roughly adopted from a Kuhnian understanding, according to which semantic incommensurability entails the problem of translatability between semantic sets in which meanings of terms are interdependent (Kuhn 2000).

settings. In what follows, we show how exactly the above mentioned assumptions and criticisms affect IB. To this end, we first explain what semantic incommensurability, moral miscommunication, and misunderstanding amount to, how their relation to interdisciplinary communication might be conceived ([Semantic incommensurability](#)). Finally, we support our claims with the example of passive euthanasia ([How does interdisciplinary integration work?](#)). Semantic incommensurability is traditionally seen as a problem of cross-language communication, emanating from conceptual and linguistic disparities and differences between languages and their underlying conceptual schemes, which results in a semantic obstruction between perspective-holders (Wang 2007, pp. 12–13). That is, “[b]ecause of the lack of a certain desirable semantic contact, proponents of incommensurable theories inevitably talk past one another when attempting to resolve their disagreements” (Ibid, p. 9). This ‘lack of a certain desirable semantic contact’ can be seen as a lack of common vocabulary. In other words, different perspective holders are unable to engage in communication since their respective languages are not sufficiently similar.

Will Kymlicka noted that globalized ethical discussions need to tackle the problem of common vocabulary breakdowns, since these debates gather activists, academics and government officials who must first find a common set of terms to discuss global ethical concerns. Namely, Western liberal societies must find a communicative means to discuss different ethical issues with people from other societies, such as those in Southeast Asia or from communities in Latin America (Kymlicka 2007, p. 1). A shared moral vocabulary is a necessary (although insufficient) condition for reaching agreements between perspective-holders. This vocabulary is required not only to resolve moral disagreements, but also in order to provide the means for communication and dialogue in the first place. In that sense, semantic incommensurability is a ‘first-order problem’, as the breaking of stalemates and reaching moral agreements (a second-order problem) can only be reached once the conditions for communication and dialogue have been laid out. An inevitable requisite for a common (moral) language should be an apparent concern for IB, which relies on the notions of integrativity and interdisciplinarity. It should effectively argue for ways in which a dialogue is to be established between radically different perspective-holders and their respective moral languages.

An objection might arise here that the analogy between moral languages and natural languages overstates the semantic breach between perspective-holders in pluriperspective dialogue. When people speak fundamentally different natural languages, and do not possess any knowledge of some system of signs that would facilitate communication beyond pointing and grunting, complex information

sharing is thrown out of the window.⁷ But differences in moral languages are not of this kind, especially in certain cases, where different language users borrow terms from each other and with them capture roughly similar semantic scopes. But more importantly, speakers of different moral languages usually have at their disposal a common linguistic device that allows elaboration and clarification of one’s moral tradition or individual perspectives to those belonging to other moral traditions or holding fundamentally different perspectives. In ethical discussions, for instance, we find that philosophers of the analytic and continental traditions are often able to overcome breakdowns in communication. This is allowed by the usage of a shared linguistic device coupled with extensive philosophical training. This objection has some force, and instructs us to take the problem of semantic incommensurability with a pinch of salt. But we should also not lose sight of the fact that a methodological challenge to endorsers of an inclusive dialogue (let alone an all-inclusive one) still persists. The problem in more inclusive dialogues that aim at interdisciplinarity is that they gather radically different perspective-holders from different academic fields (or non-academic worldviews). The clarification of a concept (or a set of concepts) will, more often than not, fail to offer comprehension of a field’s rationale (or a worldview’s aim) at mutually coherent principles. A pluriperspective dialogue in IB is all-inclusive to boot. If its proponents wish to substantiate its methodological superiority, then methodological proposals need to be offered for how perspective-holders are to orientate within a vast network of specialized conceptual frameworks. This is not to say that inclusiveness in dialogue (and, for that matter, interdisciplinarity) is undesirable. It does show, however, that methodological obstacles are to be overcome if effective interdisciplinary communication is to be achieved. Proponents of IB fail to identify these obstacles, let alone attempt to transcend them.

⁷ Even this claim might be brought into question, or at least softened. Wittgenstein’s language games, which infer that alternate modes of symbols and understanding may enable communication complex enough for, say, a group of construction workers speaking different languages to build a small structure, show that certain overlaps in conceptual networks may facilitate communication when there are no overlaps in natural languages. This also seems correct. However, the breakdowns in communication between construction workers may occur when reasons ought to be provided for why one method of building at a particular stage of construction is to be preferred to another. Bioethics, as a normative and discursive discipline, is primarily a domain of providing reasons for action, and deals with (what for basic communication would certainly be) a difficulty of reference. The bioethical *lingua franca* alone then hardly takes communication far off the ground.

How does interdisciplinary integration work?

Examples of miscommunication and conceptual confusion may even happen within the moral frameworks of a single discipline, either when there is a number of scholars tampering with a conceptual notion, or when there is a lack of conceptual rigor within the discipline. Rather than being a methodologically superior exception to this rule, IB employs several terms which capture different semantic scopes and are not obviously tied to specific methodological functions within bioethical discussion. One such concept is *integrativity*.

The quotes from “[What is integrative bioethics?](#)” section suggest certain authors take integrativity⁸ to be a principle which does not merely gather differences “into a disciplinary and disciplined scientific framework” (Jurić 2007, p. 85), but as noted above, gathers different perspectives into a unique bioethical view. For others, such as Pavić, integrativity is a methodological principle that keeps different perspective-holders in permanent communication. It is quite clear that the first understanding has to do with the *integration of bioethical positions*, while the latter deals with the *integration of frameworks and disciplines*, and in the case of this paper, of *moral languages*. We tackle this latter understanding now, in order to show that a bioethical project should clarify how it understands interdisciplinary integration, and how it responds to objections that would be posed to it.

What does integration within interdisciplinary communication entail? Does it *merge* different academic disciplines into a single disciplinary language, i.e. framework? Or does it *provide new platforms* on which communication may proceed? First, let us discuss the notion of interdisciplinary integration *as a merger*. There are two historical arguments for why the merger of scientific disciplines is unfeasible and to a large extent undesirable. The first argument is that scientific history has never offered us an example of a clean discipline merger. Certain new disciplines, such as cognitive science or public policy, have drawn from their several disciplinary predecessors, but they have not subsumed those predecessors in the process into larger unitary disciplines. The second argument is that the historical tendency is quite the opposite—new disciplines may sometimes arise from interdisciplinary communication and methodological accommodation, but they most commonly arise in the face of further *specialization* within given scientific disciplines. This is true even in academic disciplines which do not belong to hard science. Philosophy, for instance, has undergone a major proliferation of subdisciplines arranged around a common set of problems (or other academic and scientific

disciplines). The onset of this historical tendency in fact lies with philosophy, which was once equated with science. With the rise of new methodologies came the inception of new scientific branches that became increasingly complex and detracted us from the tendency toward a unitary discipline. There appears to be value in the specialized branching that ensured a more efficient division of scientific labor (though the character of this division may be somewhat contingent).⁹ The historical trend now brings about a rise of interdisciplinary platforms for communication to proceed, but that does not seem to involve disciplinary mergers. Integrative Bioethics, which would effectively subsume the now broader discipline of philosophical ethics, as ethical problems are merely extended to the entire *bios*, would in that sense be running against this historical current.

Another methodological issue that needs glossing over is what is minimally required for some academic exchange to be interdisciplinary, and how those minimal conditions are justified. Helga Kuhse and Peter Singer define bioethics both as “a branch of ethics” and thus disciplinary, and an “interdisciplinary area of study” (2006, p. 1), to which Jurić objects. Jurić argues against allowing for something to be regarded disciplinary and interdisciplinary at the same time (Jurić 2007, p. 81).¹⁰ An easy way out of Jurić’s complaint is that this is merely a language problem. The notion of ‘disciplinary’ is drawn by Jurić from the word ‘branch’, and is then placed into a contradiction with the latter part of the definition. But Kuhse and Singer could say they need not have gone for the word ‘interdisciplinary’, and could have instead gone for ‘informed’. Now it is indeed true that certain disciplines, especially those within the humanities and social sciences draw an abundance of empirical data from other disciplines, which are then utilized to extract further conclusions, without those disciplines becoming interdisciplinary. Conversely, other exchanges are at their very heart organized around the idea of bringing different disciplinary methodologies to the fore simultaneously and are rightfully regarded to be at least *more interdisciplinary* than those earlier mentioned. Disciplinary exchanges often put data arrived at in other disciplines to good use while still retaining their conventional way of communication and a specific set of methodological assumptions, certainly without being as interdisciplinary. But if we take Jurić’s criticism for granted, and acknowledge that an exchange cannot be disciplinary and interdisciplinary at the same time, while

⁸ We discuss this understanding of integrativity at length in the aforementioned paper (Ivanković and Savić 2016).

⁹ One objection might be that there are sociological reasons for why scholarly disciplines resist extinction apart from purely scientific ones. Although that may be the case, we are satisfied with the soft claim that there is at least some connection between the efficient attainment of scientific knowledge and the way in which scholarly disciplines are organized, and leave the sociological objection aside.

¹⁰ See also Bracanović (2012).

allowing that there is sometimes great value in disciplines *merely being informed* by other disciplines in their disciplinary exchanges, a further question needs to be answered—what is valuable about interdisciplinary communication that informed disciplines cannot account for? Wim J. van der Steen warns:

I think that science and philosophy alike often exaggerate the importance of interdisciplinary integration (apparently a remnant of the old unified science ideal), and that we need to redress the balance. Unmasking pseudo-integrations is an important way of doing this. For the rest, unmasking sets the stage for alternative research strategies, so it is not *merely* a negative process (van der Steen 1990, p. 25).

Even if we put aside pseudo-integrative projects van der Steen alarms us about, we are still left with various understandings of interdisciplinary communication and appeals to interdisciplinary strategies which may significantly vary in underlying content. Here, we discuss three of the most prominent theses about understanding interdisciplinary communication and integration propelled by J. Britt Holbrook. IB would need to justify its endorsement of one of these understandings (or some other not specified here) and face objections posed to it, keeping in mind other conceptual stipulations it holds onto.

The Habermas-Klein thesis (named after philosophers Jürgen Habermas and Julie Thompson Klein) is claimed by Holbrook to be the default position in discussions about interdisciplinarity (2013, p. 1868). The thesis recognizes interdisciplinary integration as a communicative act, and involves “the integration of two or more disciplinary languages with the aim of generating common understanding” (Ibid p. 1869). The platform of common understanding is designed above and beyond the communicative strategies of individual disciplines, but it is recognized by Klein that “interdisciplinarity conceived as communicative action rejects the naïve faith that everything will work out if everyone just sits down and talks to each other” (Klein 2005, p. 44; Holbrook 2013, p. 1870). In order to overcome burdens of understanding, the thesis incorporates a set of stages meant to ensure interdisciplinary communication:

- a. Uttering something *intelligibly*,
- b. Giving (the hearer) *something* to understand,
- c. Making *herself* thereby understandable, and
- d. Coming to an understanding with *another person* (Habermas 1998 [1976], p. 22; Holbrook 2013, p. 1869).

The Habermas-Klein thesis suggests a fairly undemanding account of interdisciplinarity and its functionality, but the four points appear more as goals than methods of communication designed to reach these goals. Admittedly, the

multi-stage process can undergo further improvement in detail based on a sample of successful and unsuccessful interdisciplinary projects. But stage models of interdisciplinarity should also lend an eye to the particularities of different disciplines, and their relationships with other disciplines, when they are brought onto an interdisciplinarity platform. Difficulties may arise from vastly conflicting assumptions in different disciplines, great distances between their ‘languages’, or a lack of understanding by perspective-holders about why certain questions asked by other disciplines should be considered relevant to begin with. If so, how should stage models of interdisciplinarity respond to the criticism of particular interdisciplinary circumstances? Integrative Bioethicists have not paid much attention to what kind of stages pluriperspective dialogue should have, nor have they discussed the problems of integrating particular combinations of disciplines, but those appear to be valid questions with their principle of pluriperspectivism in place. The problem of overcoming interdisciplinary communication cannot be solved purely in abstraction and needs a practical account, which up to this point has not been introduced in IB.

If the Habermas-Klein thesis was overly optimistic, Holbrook’s Kuhn-MacIntyre thesis (named after philosophers Thomas Kuhn and Alisdair MacIntyre) seems overly pessimistic. The thesis compares academic disciplines both to incommensurable scientific paradigms and to natural languages. MacIntyre claims that translating a proposition into another language does not suggest understanding and being able to use that language as a conceptual scheme, as that would require the ability of innovation and improvisation within that language. But although different moral languages are semantically incommensurable, as this thesis would claim, MacIntyre suggests they are not irresolvable, as perspective-holders may acquaint themselves with the conceptual schemes of other perspectives as *second first languages* (MacIntyre 1988; Holbrook 2013, p. 1872). In academic terms, this would mean, for example, learning a different philosophical paradigm, or getting an extra PhD in some other discipline (Holbrook 2013, pp. 1873).

But this thesis seems both unintuitive and too demanding. We already mentioned that a perfect analogy between natural languages and moral (or scientific) languages does not hold, and that there is more elbow room for establishing understanding between different perspective-holders when they share a natural language, regardless of the vast differences in their disciplinary languages. For instance, for philosophers to establish minimal understanding with anthropologists, demands of the MacIntyrean extent seem to be unnecessary. The extent of semantic incommensurability under the Kuhn-MacIntyre thesis also seems to raise the bar for individual disciplines to be properly informed as we earlier described them. If other disciplines are truly

as impenetrable to other disciplines as the thesis suggests, then it would be almost impossible for disciplines to show that they are properly using items of information produced in other disciplines. Surely, such a view of completely isolated and hermetically sealed disciplines and their languages is untenable. Integrative Bioethicists would also seemingly have a hard time accommodating the Kuhn-MacIntyre thesis, as that would reduce pluriperspective dialogue to a myriad of perspective-holders who speak fundamentally different languages and who can hope to attain understanding of only one or two other perspectives (as second first languages) within the dialogue. That certainly does not amount to a *unique bioethical view*, as Jurić suggests.

The Bataille-Lyotard thesis (named after philosophers Georges Bataille and Jean-François Lyotard), also the final thesis on interdisciplinary communication proposed by Holbrook, lowers the minimal conditions for interdisciplinary understanding (Ibid, p. 1874). The thesis aims to show that although perspective-holders from different disciplines occasionally find themselves at impasses of semantic incommensurability, it is wrong to suppose communication is doomed to fail. Being part of a particular disciplinary mode of communication, according to this position, is only relevant when communication fails, not when it succeeds. Successes in interdisciplinary communication may be as frequent as failures, though these successes transpire in the domain Bataille calls weak communication. This kind of communication can help different perspective-holders reach a consensus about what is at stake and produce simple action-guiding principles—in short, it points to the overlaps of disciplinary modes of communication. Strong communication is the occurrence of “not being able to find the words”, that is, the moment when perspective-holders’ communication is hindered by a ‘differend’ (in Lyotard’s terms), as parties cannot decide on a rule that would settle the dispute, or in this case, establish understanding (Ibid, pp. 1874–1875). The distinction between weak and strong communication looks quite convincing, since it seems that understanding between representatives of different disciplines is not always beyond reach, and thus, opens a back door to the endorsement of at least weak types of interdisciplinary projects. But IB charges itself with solving substantive normative problems, and should therefore gear itself with means of overcoming impasses of ‘not being able to find the words’. Occurrences of strong communication are more likely to occur among fields with significantly different moral languages, which is certainly the case with the assembly of all conceivable scientific, cultural, religious, political, artistic, and other kinds of positions and views.

Holbrook in fact suggests a possible guiding principle for overcoming strong disagreement which consists in the commitment of perspective holders to abandon their respective genres of discourse, and succumb to mediation by a third

party or developing a new language for integration. These guidelines are attractive in principle, but may be difficult to achieve. First, perspective-holders may find it difficult, in communication breakdowns, to endorse mediation coming from third parties, as they might be satisfied with nothing less than a third party speaking both disciplinary languages in the Kuhn-MacIntyre sense. Settling issues of semantic incommensurability, perspective-holders would insist, requires that the mediating party holds semantic authority over their disciplinary languages, possibly one that surpasses their own. Second, the occurrence of semantic incommensurability may also be followed by open methodological disagreements. For instance, my conviction as a perspective-holder might be that the breakdown of communication is due to the other perspective-holder’s mode of communication, and not my own. If that is the case, then I might not find it fitting that we make equal efforts of abandoning our modes of discourse, as I consider my mode of communication superior. Even when this is actually the case, for it is indeed true that one mode of discourse may be more efficient and better structured than another, the other perspective-holder may find it difficult to take this fact as properly substantiated, as people are expectedly biased towards their discipline’s mode of communication. This need not arise from a strong sense of self-preservation, but may simply be rooted in the perspective-holder’s identity.

How would Integrative Bioethicists resolve the issues concerning strong communication? Although it helps their case, endorsing weak communication would not be sufficient for overcoming burdens of understanding in an all-inclusive dialogue, with many instances of strong communication burdening understanding. Schaefer-Rolffs, a proponent of IB, holds that we may “exclude positions that cannot contribute to the idea of Integrative Bioethics. Reasons might be that they violate against the elementary principles of Integrative Bioethics, for example if the representatives of these positions do not accept other positions as legitimate” (Schaefer-Rolffs 2012, pp. 113–114). The question is whether accepting other positions as legitimate also entails accepting the methodologies from which they arose as equally sophisticated and worked out. That seems an unavailable course of reasoning for IB, if their next stage of bioethical inquiry does not amount to an ‘anything goes’ principle in terms of methodology. Such a methodological stance would effectively block perspective-holders from proposing methodological tools in interdisciplinary dialogue for the purpose of overcoming communication breakdowns and solving moral disagreements.

In the following section, we provide an example of how burdens of understanding might arise in dialogues of IB.

An example of pluriperspective dialogue—the case of euthanasia

Consider the following fictional scenario. IB establishes dialogue over the common problem of euthanasia. Due to serious physical injuries following a car accident, a person has been in a persistent vegetative state for 3 years, and installed with a feeding tube ever since she was admitted to the intensive care unit. Prognosis is very bleak, since the appointed team of physicians has deemed the patient's condition to be without any prospect of improvement; they are certain that the patient will remain in a coma. Following a long deliberation, the patient's mother expresses her wish to withdraw the nourishment which has been artificially administered to the patient by standard medical means. This action would result in the death of the patient. The rest of the family, together with the appointed medical team, remains firmly opposed to this option. Faced with the disagreement about what *ought* to be done, family members seek out the opinion of a law expert and a priest. The law expert passes his opinion that euthanasia can be legally put in effect. The priest, on the other hand, follows his religious teachings and resolutely condemns taking the patient's life.

There are several ways in which we might try to respond to this bioethical problem. We might take a consequentialist route and argue, for example, that supply of nutrition should be terminated, and provide reasons for such an action by appealing to utility calculation, or argue that the patient's quality of life is so low that life in this state is not worth living at all. On the other hand, one might endorse deontological, Kantian, or other philosophical and religious principles (e.g. the sanctity of life principle) that would, *ex hypothesi*, advise keeping the patient alive by maintaining nourishment.

What might an Integrative Bioethicist *do* in such a situation? According to Bracanović, he cannot do much, as the principles the Integrative Bioethicist adopts are mere reminders that we should be well-informed about diverse opinions, but are not providers of any meaningful and morally relevant action guidance (Bracanović 2012, p. 152). Bracanović's statement does, however, leave open the possibility that IB could at least provide a platform for communication and dialogue between different perspective-holders. Integrative Bioethicists might be more optimistic by saying that the dialogue might eventually result in the integration and unification of perspectives, and provide us with answers for what ought to be done.

However, the 'gathering' and integration of different perspectives might not be so easily achieved. After mustering different perspective-holders, Integrative Bioethicists might say something of the following: "We are confronted with a pressing bioethical problem of passive euthanasia. We propose that we engage in an open dialogue. Not only will we take the positions of all the members of the patient's family,

but other different perspectives will be included in the dialogue as well. Despite the deep moral disagreement which we face at the moment, we are sure that we will eventually come to agreement about what ought to be done. We will ensure this through *integration* of different perspectives we have at our disposal."¹¹

This kind of reasoning is overly optimistic for a number of substantive reasons obvious to seasoned scholars in bioethics, but one problem at the outset seems to be at the level of communication. Wang hints at an emergence of a disruption in communication yielded by a lack of common and shared vocabulary (Wang 2007). This might happen when different perspective-holders lack a particular concept *X* in their vocabulary, or when they share the word *X*, but the meaning they ascribe to it differs. Finally, they might differ in using different words—say, *X*, *Y*, and *W*—which are meant to denote the same value or principle. Conceivably, occurrences of disruption in communication could be more frequent with greater numbers of perspective-holders in the dialogue. In the context of our example, one can imagine the following proposition uttered by one of the perspective-holders: "We should pay special attention to the fact that human life is intrinsically valuable and that our acts should always be carried out in such a way that they benefit the patient. After all, we should respect the autonomy and dignity of our patient. In fact, we should respect all the innate qualities which she has as a human being. We need to respect her right to self-determination and her individual rights as well. The patient in question is, after all, our fellow human being".

One problem immediately emerges. As Matti Häyry notes, there are different underlying meanings behind concepts frequently employed in bioethical discussion, such as 'dignity', 'precaution', and 'solidarity' (Häyry 2003). Similarly, Matteo Mameli and Patrick Bateson recorded more than twenty different notions of 'innateness' (2006),¹² which may produce communication breakdowns in disciplinary, let alone interdisciplinary communication. Furthermore, Fan points to the fact that while concepts such as 'individual rights', 'liberty', 'autonomy', 'self-determination', 'justice', and 'fairness' represent an unavoidable part of moral vocabulary in Western societies, the central moral concepts in Japanese and Chinese culture are certainly not as pertinent—*Wa* (harmony), *Amae* (dependence), and *Taijisokuin* (great mercy), *Li* (propriety), *Ci* (benevolence) and *Xin* (fidelity)

¹¹ An intermediary objection here might be that if the method of IB boils down to mediation, as this passage suggests, then this methodological proposal is not philosophical to begin with. Endorsers of IB would need to show how this understanding of integrativity represents a *philosophical* contribution to bioethics. We thank Nino Kadić for this point.

¹² In their article, authors examine different conceptions which are supposed to succeed the 'folk' concept of 'innateness'.

(Fan 1997b, pp. 192–193). Yet, the most explicit example of different and semantically incommensurable moral concepts refers to the Western principle of *autonomy* which is based on self-determination, a subjective conception of the good, and individual independence. On the other hand, the East Asian principle of *autonomy* is based on family-determination, an objective conception of the good, and the value of harmonious dependence (Fan 1997a, p. 309).

Schaefer-Rolffs anticipates the issue of semantic incommensurability:

There are several concepts of Human Dignity in Germany and very different positioning towards those concepts as well. The major approaches of those concepts are (a) based on a philosophy of reason inspired by Kant, (b) a radical-secular position and (c) religious understanding based on the Christian tradition [...]. But within that concept of the term there is a large variety of definitions what Human Dignity means and how strong and far the concept could be used. (Schaefer-Rolffs 2012, pp. 116–117).

Kos further confirms that it is “[e]xactly the broadening of the concept of bioethics towards maximum interdisciplinarity and pluriperspectivism that requires deep reflection about, among other things, the objections that arise, such as that of ‘ethical relativism’ and the ‘lasting disagreements’, that is, the ‘inability to subsume’ different discourses” (Kos 2014, p. 236; *emphasis added*).

Although Schaefer-Rolffs admits that semantic incommensurability is not only a problem of communication, but also of manipulating the exchange to gain leverage, as “it is at the will of the person using [dignity] what it does mean in a certain situation and is adapted to those situations and used as a rhetorical stunt to end a discussion” (2012, p. 116), no effort is made on the level of theory in IB to immunize pluriperspective discussion from these effects. Schaefer-Rolffs only expresses optimism that common understandings can be found upon a gathering within an equal and open discourse (Ibid, p. 117), while Kos says the weight of the problem requires further discussion (Kos 2014, p. 236).

The above mentioned examples show that some people indeed do not share the same moral concepts required for dialogue and communication to take place. It seems plausible that given the lack of common vocabulary, different perspective-holders would sometimes talk past each other, which would result in misunderstanding and miscommunication. As noted, given the definition of pluriperspectivism and integrativity, it is conceivable that the dialogue envisioned by Integrative Bioethicists would include a widest range of different moral concepts utilized by the various perspective-holders. This is a fundamental problem that proponents of IB need to address before getting any further in their appeal for the replacement of global bioethics.

An advocate of IB and an optimist about semantic incommensurability might offer a response here. We have already established that, with careful scrutiny, as we have attempted in this paper, communication breakdowns arising from semantic incommensurability may not be insurmountable, since people come to attain the required knowledge for communication. Certainly, we would say that the breakdown between a utilitarian and a Kantian is miniscule compared to that between Western and Far Eastern bioethicists. But, the optimist continues, just like utilitarians and Kantians learned to understand each other more acutely, so can the Westerner and the Far Easterner. Semantic incommensurability is a practical issue, the response proceeds, which can be overcome through laborious and patient dialogue, such as the one promoted by IB. Now, the optimist is right that communication breakdowns can be overcome, but fails to realize that they are not periodic instances of stumbling over a concept that is not shared, and then dealt with through patient dialogue. We face deep semantic incommensurability due to systematic clashes in entire conceptual frameworks and networks with inherent rationales that we often come to understand only after being fully immersed in them. Some schools of thought have made moves to ensure their contents are comprehensible to wider audiences and conventional conceptualizations, but some certainly have not, and this is where we face breakdown. Also, an emphasis on semantic incommensurability is not an argument *against* broader dialogue. It just shows that positions and projects that advocate for an all-inclusive dialogical platform, with abundant opportunities for breakdown, without as much as glancing over the problem of semantic incommensurability and ways of overcoming it, demonstrate a deep methodological naivety.

Conclusion

In this article, we have shown that semantic incommensurability, moral miscommunication and misunderstanding heavily burden the idea of IB. Due to its over-inclusive nature and a ‘lack of common moral vocabulary’, the dialogue of IB would include perspective-holders who would often not be able to understand each other’s moral statements and would talk past each other.

The problem of communicative breakdowns and burdens of understanding is common to all bioethical traditions, though IB carries the further weight of incorporating a broader scope of perspective-holders without setting up a communicative paradigm. One fairly intuitive guideline in a communicative paradigm seems to be that we aim for as much clarity in theorizing about bioethical problems as possible, that we operate with clear-cut definitions, and that we are not taken seriously if we employ a multiplicity of

meanings that only carry rhetorical, and not substantive weight. But these guidelines are, for the most part, present in our ‘current stages’ of doing bioethics, and there is nothing that IB brings to the table that implores us to take pause with regard to our supposed methodological shortcomings. In fact, IB falls short of offering serious solutions for deep methodological issues, to which other traditions have sought answers, if only provisional ones.

What, then, does Integrative Bioethics bring to the table? First, it aims to subsume biomedical and global ethics within a single integrated paradigm. However, this reorganization of bioethical work does not bring about any new dilemmas that are not already being dealt with by these disciplines separately, and it does not bring about substantive changes in how we discuss and attempt to solve bioethical controversies. It is merely a cosmetic change that appeals to those who fancy the ideal of a unitary discipline. Second, it acknowledges that multiple perspective-holders need to be incorporated into a bioethical discussion to provide for informed bioethical decisions. This is true, but it is not a point that was not already obvious to all bioethical scholars, those operating within the ‘preceding paradigms’. Also, proponents of IB do not offer any reasons for why interdisciplinary communication, with its many methodological challenges, is to be favored to what we have here described as *informed disciplinary communication*. It is perfectly clear that bioethics needs to be informed by what science and the variety of worldviews bring to the table. But once again, while bioethical ‘precedents’ meet methodological problems of communication head on, proponents of IB, ever the optimists, are satisfied with the hope that discussion will work out, if only we bring all relevant positions together. This paper has shown that proponents of IB have only come to acknowledge certain problems, but have not made the efforts to solve them.

We have found nothing, then, in the fundamental notions of IB that would convince us that it represents a final stage in the way of doing bioethics, and on no counts have we found evidence that it surpasses its supposed predecessors.

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