



This is a repository copy of *Bioethics in Africa: Theories and Praxis* Yaw A. Frimpong-Mansoh and Caesar A. Atuire, Editors Vernon Press, Delaware, United States, 2019, vii + 165, £21.00 (paperback), ISBN 978-1-62273-459-7.

White Rose Research Online URL for this paper:

<https://eprints.whiterose.ac.uk/172935/>

Version: Accepted Version

Article:

Wolemonwu, V.C. (2021) *Bioethics in Africa: Theories and Praxis* Yaw A. Frimpong-Mansoh and Caesar A. Atuire, Editors Vernon Press, Delaware, United States, 2019, vii + 165, £21.00 (paperback), ISBN 978-1-62273-459-7. *Developing World Bioethics*, 21 (3). pp. 147-148. ISSN 1471-8731

<https://doi.org/10.1111/dewb.12313>

This is the accepted version of the following book review: Chidi Wolemonwu, V. (2021), *Bioethics in Africa: Theories and Praxis* Frimpong-Mansoh, Yaw A. and Atuire, Caesar A., Editors Vernon Press, Delaware, United States, 2019, vii + 165, £21.00 (paperback), ISBN 978-1-62273-459-7 . *Developing World Bioeth.*, which has been published in final form at <https://doi.org/10.1111/dewb.12313>. This article may be used for non-commercial purposes in accordance with Wiley Terms and Conditions for Use of Self-Archived Versions.

Reuse

Items deposited in White Rose Research Online are protected by copyright, with all rights reserved unless indicated otherwise. They may be downloaded and/or printed for private study, or other acts as permitted by national copyright laws. The publisher or other rights holders may allow further reproduction and re-use of the full text version. This is indicated by the licence information on the White Rose Research Online record for the item.

Takedown

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.



eprints@whiterose.ac.uk
<https://eprints.whiterose.ac.uk/>

Book Review – Accepted Manuscript

- Manuscript Published Online : 23 March 2021
- Manuscript accepted: 09 March 2021
- Manuscript received: 07 March 2021

[N.B.: For a citable version, visit <https://onlinelibrary.wiley.com/doi/10.1111/dewb.12313?af=R>]

Bioethics in Africa: Theories and Praxis

Yaw A. Frimpong-Mansoh and Caesar A. Atuire, Editors

**Vernon Press, Delaware, United States, 2019, vii + 165, £21.00
(paperback), ISBN 978-1-62273-459-7**

Bioethics in Africa: Theories and Praxis is a collection of ethically germane and epistemologically engaging essays that explore a wide range of bioethical issues based on African indigenous perspectives, lived experiences and value systems. Africa possesses rich and potent indigenous beliefs and cultural values that could be utilized to address a wide range of bioethical issues in health and the environment that affect the people of Sub-Saharan Africa (SSA). The main goal of *Bioethics in Africa*, thus, is “to stimulate scholarly works grounded in indigenous African conception of health and moral values as a guide to inform health policy and education in African society” (p. x).

It consists of nine chapters on a wide range of bioethics topics. The topics reflect multidisciplinary, lived experiences and ethical concerns of the people of Sub-Saharan Africa (SSA), which makes the book an invaluable contribution to global bioethics discourse. In chapter one, Caesar A. Atuire examines some key bioethical issues. One of the issues is the ethics of informed consent. Atuire contends that so much emphasis on patient autonomy creates distrust in medical care. This leads to medical practitioners abdicating their ethical role as *paters* to patients or caregivers who are often incompetent to make informed ethical decisions concerning their health (p.8). He rightly advocates for a trust-based paternalism as a solution to the contestation between paternalism and patient autonomy in medical practice. In line with African traditional ethico-medical orientation, trust is essential for patient-doctor relations (p. 7).

Further, Atuire raises some concerns against some communo-cultural practices like female genital mutilation, discrimination, and persecution against people living with albinism, which seems antithetical to this cooperation. He suggests that addressing these ethical challenges requires effective legislation backed up by some acts of retributive justice to deter future occurrence (p. 14). This recommendation of retributive justice is important but transformative justice (TJ) seems more appropriate. With TJ, victims of discrimination or oppressions are offered opportunities and support to develop therapeutic capacities while the culprits are held accountable for their wrongdoing.

In Chapter Two, Yaw A. Frimpong-Mansoh discusses two significant ways bioethics could be done from an Africa perspective. First, he highlights the fundamental value of supernaturalism in African traditional medicine (ATM). Whereas conventional western medicine treats ailments simply from their physical causation, according to him, ATM takes a holistic therapeutic approach by recognising that treating an ailing person involves both their physical and spiritual well-being (pp. 39-41). Secondly, Frimpong-Mansoh contends that caregiving ought to be based on African communitarian ethics as against the Western isolationist-individualised caregiving. Based on this African communitarian ethical orientation, anyone making an ethical decision in healthcare (either for themselves or for others as in the case of surrogate consent) ought to appeal to the understanding that all human beings are interconnected within a frame of social identity (p. 52).

In the Third Chapter, Thaddeus Metz discusses ancillary care obligations in the light of African bioethics. Against the view that self-governance is fundamental to the ethics of ancillary care obligations, he argues that an account of ancillary care obligation that may fit the African bioethical framework should be based on Afro-communal ethics. Afro-communal ethics involves a sense of mutual concern for the welfare of others. So, a participant's consent to medical research exudes a sense of *we-ness*. This tie imposes special obligations on both the participant and the researcher to care for one another's quality of life beyond the consent requirement (p. 64). Metz, however, justifiably notes that the obligation of researchers to honour their communion with participants does not imply an imposition of great costs on them. There is a limit to a researcher's responsibility towards participants (p. 65).

In Chapter Four, Martin Ajei and Nancy O. Myles explore the ideas of personhood, autonomy and informed consent based on the principle of communality. They note that one of the key issues of individualistic or autonomy-based informed consent is that in some cases, it conflicts with other ethical principles like beneficence and non-maleficence. This is evident in cases where a patient refuses the recommendation of a professional healthcare provider on what is the patient's best interest (p. 81). So, informed consent based on the principle of *communality* appeals to the idea that a person is a right-bearing moral agent but constrained because of their *situatedness* within the ontological frame of natural communality (p. 90).

In Chapter Five, Camillia Kong discusses cultural translation, human meaning, and Genes: Why interpretation matters in psychiatric genomics. She proposes two ways to achieve a robust and objective interpretation and understanding of psychiatric genomics. Firstly, Africa possesses extraordinarily rich and diverse cultural and linguistic structures. As such, there is a need to accommodate different meaning in the process of translating disordered human behaviours to avert any possible superimpositions of Western translational categories on Africa's way of thinking (p. 107).

Secondly, there should be a need to pay close attention to normative claims about values during the psychiatric genomics translational processes (p. 108).

In Chapter Six, Rose Mary Amenga-Etego explores the bioethical challenges that arise from the practice of traditional medicine, especially, as they relate to ethical issues of abortion, euthanasia, and family planning. On the issue of abortion, many traditional medical practitioners believe that if the lives of a woman and her baby are in danger, in the case of ectopic pregnancy, nothing needs to be done except seeking spiritual guidance from the gods or allowing nature to take its course. As Amenga-Etego notes, this lack of urgency or over-dependence on the supernatural raises profoundly serious bioethical concerns (p. 127). If there is a chance of saving the mother instead of the child, is it morally reasonable to allow both the mother and the child to die? Is it morally appropriate to allow a terminally ill person to suffer uncontrollable pains, even though euthanasia is what might be for their best interest? These issues among others require deeper bioethical appraisals among African bioethicists.

In Chapter Seven, Augustina Naami discusses ethical concerns regarding the rights of people living with disability in Ghana. In Ghana just like in most African countries, disability is associated with evil or a curse. A disabled child is believed to be a result of a curse due to an abomination committed by their parents (pp. 132-33). This kind of inhumane treatment raises pertinent ethical questions – Is it morally permissible to kill children if they pose as a potential burden to society because of their quality of life? More so, is it morally appropriate for parents to hide their disabled children from the public view to avoid stigmatization? Naami raises these pertinent questions among others to draw the attention of bioethicists and policymakers in Africa to create more awareness on disability-related ethical issues and to promote inclusive legislation that effectively addresses the needs of people living with disability.

Is it morally permissible for doctors to override a patient's right to end-of-life even though the doctor intends to offer a 'heroic treatment' to save the life of the patient? In Chapter Eight, Akis Afoko addresses this question in addition to other bioethical issues like informed consent, financial conflict of interests and the ethics of genetic testing. He contends that heroic treatment is morally acceptable, especially, in cases where some life-threatening ailments like cancer are poorly diagnosed. Aside from this exception, it is ethically essential to respect the right of patients who are terminally ill to make an end-of-life decision.

Godfrey B. Tangwa wraps up the book with his discussion on how bioethicists in Africa ought to approach the issues of the natural environment and climate change. Tangwa's main argument is that all creatures are interdependent. However, because of their rationality, human beings share more responsibility by always maintaining balance in nature to ensure the survival of all creatures

(pp. 156-158). By this view, Tangwa dislodges and replaces anthropocentric narratives of environmental ethics with a more integrative, eco-bio-communitarian ethics that promotes mutual survival and flourishing of human beings, non-human animals, and plants.

The profundity and clarity with which each of the authors addressed their various topics are worth acknowledging. However, there are still many bioethical issues that the book does not seem to address but which are also very necessary for bioethical discourse. Some of the issues concern prioritization of duty of care, evaluation of the nature and meaning of moral distress and moral injury and how they can be managed, understanding the ethics of competing obligations in terms of scarce allocations from an African communitarian standpoint. These issues, among others, will enrich the debates on the various bioethical concerns we are currently facing in Africa and the world. Notwithstanding the foregoing, *Bioethics in Africa* is a book of the moment. It is an essential book of instruction for anyone interested in bioethics because it offers rich and authoritative insights into diverse moral issues in biomedicine, research ethics, environment and other crucial aspects of health and medical systems that are deep-rooted in the traditional religious beliefs, cultural practices and lived experiences of the African people. With *Bioethics in Africa*, thus, a critical bioethical debate in Africa is launched.

Victor Chidi Wolemonwu

PhD Candidate

**Department of Philosophy,
University of Sheffield, United Kingdom**