Nils Fischer*

National Bioethics Committees in selected States of North Africa and the Middle East**

Introduction

It didn't take the decision of the Islamic states at the 59th session of the General Assembly of the United Nations in 2004 to follow Iran's proposal to adjourn the consideration of the "International convention on cloning" to the 6oth General Assembly to make clear that Islamic states have their own approach to bioethical questions - an Islamic approach. That became obvious when the "Cairo declaration on human rights in Islam" was adopted in 1990. This is also underlined by the "First regional meeting of national bioethics committees" in Cairo in 2007. As Islamic states established national bioethics committees for the purpose of communicating bioethical issues and ethical perspectives, these committees are the main liaison agencies for bioethical issues on the international level. This paper discusses Islamic states' national bioethics committees and their work. It poses the question how and where Islamic values are reflected.

The choice of countries taken into account represents a geographical focus instead of a political or religious one. For the latter would not be adequate, being either too narrow or too wide, and misleading in some cases.

To point out my case, not all states of the region are, for example, members of the League of Arab States (e. g. Pakistan, Iran, and Turkey), or the African Union (AU, just Algeria, Libya, Egypt, and Sudan), or members of the World Health Organiza-

tion Regional Office for the Eastern Mediterranean (EMRO), as Algeria is a member of the World Health Organization Regional Office for Africa (AFRO). Furthermore, the states of the Organization of the Islamic Conference (OIC) would include all Muslim countries. Therefore, the criterion is a geographical one the region of North Africa and the Middle East. Though it would be preferable to discuss all states of the region, completeness could not be achieved. The selection has to be pragmatic for it depends on information available. For this reason no information on national bioethics committees on the Comoros, in Djibouti, Iraq, Kuwait, Mauretania, Palestine, and Somalia can be presented. For a number of reasons Israel has not been included in this study either. This lack of information also determines and constrains the critical discussion of the national bioethics committees presented in this paper.

Although this study is not the first of its kind because papers with a similar regional focus¹ and with a global focus² have already been published, until now a comprehensive discussion of national bioethics committees in North Africa and the Middle East has not been undertaken.

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¹ Cf. Hattab, Abdulla Saeed: "Bioethics in the Arab world. The experience of Aden School of Medicine", in: Revista latinoamericana de bioètica 6 (2004): 7-9; UNESCO Cairo Office, EMRO/WHO (ed.): First regional meeting on national bioethics committees. 5-7 May 2007. Cairo. UNESCO Cairo Office; EMRO/WHO, 2007; Ainuddin, Nageen; Abbasi, Ikram: "Islamic bioethics. Activities in OIC countries, resources in print and the web", in: COMSTECH; NASIC (ed.): Islamic biomedical ethics: issues and resources. Islamabad: COMSTECH, NASIC: 105-125; Atighetchi, Dariusch: Islamic bioethics: problems and perspectives. Springer, 2007: 6-18.

² Cf. Fuchs, Michael: National ethics councils. Their backgrounds, functions and modes of operation compared. Berlin: Nationaler Ethikrat, 2005; WHO: Ethics and health. The Global Summit of National Bioethics Advisory Bodies. http://www.who.int/ethics/global-summit/en/ (2008-03-14); UNESCO: Establishing bioethics committees. Paris: UNESCO, 2005 (Guide No. 1); UNESCO: Global Ethics Observatory (GEObs). http://databases.unesco.org/bioethics/wwwi32.exe/[in=interro.in]/ (2008-03-14).

States with a national bioethics committee *Algeria*

The first national ethics committee in the region of North Africa and the Middle East was established, or rather announced, in Algeria in the extensive Law on the protection and promotion of health in 1990.3 Which considerably amended the Law on the protection and promotion of health of 1985.4 The committee was named National Council of Ethics in the Health Sciences (CNESS, Conseil national de l'éthique des sciences de la santé). Although the law of 1990 lays down the council's mission (e.g. to consult and give recommendations on biomedical questions) it does not lay down its composition, organisation, and function. These had to be established by order later on.5 This order was not issued until 1996.6 It states that the council shall consist of 20 members, amongst them a large number of representatives from different Algerian ministries: the Ministry of National Defence, the Ministry of Justice, the Ministry of Health and Population, the Ministry of Labour, Social Protec-tion and Professional Education, and two representatives of the Ministry of Higher Education and Scientific Research. The other members shall be from the medical field, with the exception of one representative of the Islamic High Council and one of the National Council of Medical Deontology (Conseil national de déontologie médicale). The members are nominated by the ministries and appointed by order of the Minister of Health and Population for a renewable term of four years. The CNESS is endowed with a secretary's office and an own budget granted by the Ministry of Health and Population. The council is free to establish special sub-committees and to give itself its terms of reference. It shall meet twice a year. Everyone has the right to consult the CNESS. The CNESS renders account of its activities to the Minister of Health and Population.7

At the initial meeting of the Conseil national de l'éthique des sciences de la santé on October 13 1996 the Minister of Health and Population entrusted the council with the ethical evaluation of organ

3 Law 90-17 (1990).

transplantation. In its report on organ transplantation the council points out that the Algerian population is not against organ transplantation, that the Islamic High Council has already issued a favourable religious opinion (fatwa) on this question in 1985, that the deontology is not opposed to it, and that from the legal side a medical commission for the removal and transplantation of human tissues and organs should be created. The council recommends to give special consideration to the protection of children and to favour the removal of organs after death.⁸

The CNESS states that it has examined a number of biomedical questions and published its recommendations thereon. Furthermore, it has made proposals on bioethics legislation. Finally, the CNESS recommends that it should be enlarged and replaced by a national bioethics committee that would widen the scope of the issues treated.⁹

The Conseil national de l'éthique des sciences de la santé has been strongly criticised since its foundation. ¹⁰ The first major point of critique regards the composition of the CNESS. The list of members clearly shows the dominance of physicians and professors of medicine on the one hand, and of representatives of ministries on the other. ¹¹ This does not necessarily challenge the bioethical expertise of the committee members. But it raises the question why the selection of professions represented in the committee is not balanced, why lawyers, philosophers, nurses or lay persons are not allowed to participate, and whether the committee is independent enough to give sound ethical advice. In his discussion of the CNESS Abdelhafid Ossoukine speaks

⁴ Law 85-05 (1985).

⁵ Law 90-17 § 168/1 (1990).

⁶ Executive decree 96-122 (1996).

⁷ Executive decree 96-122 (1996).

^{8 &}quot;Rapport final du Conseil national de l'éthique des sciences de la santé sur les transplantations et greffes d'organes (1997)", in: Journal international de bioéthique 9 (1998) 1/2: 137-138.

⁹ CNESS: Bioethics database. (2008-03-14).

¹⁰ Ossoukine, Abdelhafid: "Un conseil d'éthique ou de déontologie (bis). Commentaires sur le Conseil national algérien de l'éthique des sciences de la santé", in: Journal international de bioéthique 9 (1998) 1/2: 133-135; Ossoukine, Abdelhafid: "Le Comité d'éthique algérien face à la concurrence bureaucratique et religieuse", in: Journal international de bioéthique 18 (2007) 1/2: 167-176.

¹¹ Ministère de la santé et de la population: Conseil national de l'éthique des sciences de la santé. Liste des membres du conseil et leurs coordonnées.

of "scientism", "medico-centrism", and "bureaucratism".12 Another point of critique targets the committee's mission. Ossoukine argues that while on the one hand everyone is granted the right of enquiry within the frame of the committee's mission according to the executive order of 1996, 13 the mission is not specified on the other hand. Thus, the committee has no clear orientation.14 Although the law of 1990, while addressing the mission of the committee, mentions consultation, giving recommendations in biomedical issues and having in mind the respect for human life, bodily integrity and human dignity,15 it reflects the medical or scientific point of view without reflecting upon moral aspects, not to mention legal, social, and religious ones. It seems also to reflect a strong confidence in the physicians bioethical expertise. As they are primarily involved in biomedical research they seem to be considerd as competend to judge even its ethical and legal aspects. 16 Finally, the doubling of ethics committees in Algeria is bemoaned, 17 as the order of 1996 demands a representative of the National Council for Medical Deontology (Conseil national de déontologie médicale).18 The National Council for Medical Deontology is affiliated with the Ministry of Higher Education and is charged with preparing ethical rules and university deontology. 19 But this council has not been formed until 2004 although it has been established by law in 1990.20 So the seat of the representative of the National Council for Medical Deontology in the CNESS would have been vacant for eight years.

Despite of his sharp critique Ossoukine emphasises the importance of a national bioethics committee like the CNESS, e. g. for Algeria's participation in the international bioethical debate and to encourage Algeria's parliament to issue a bioethics legislation. ²¹ In fact the activities of the CNESS in 1997 seem to have been considerable with regard to preparing the legal regulation of organ transplanta-

tion in Algeria.²² More than ten years after its foundation the situation does not seem to have changed.²³ Activities in the bioethical field seem to be limited, generally speaking, to the publications of Abdelhafid Ossoukine and the Islamic High Council. Also, the fact that Algeria did not participate in the "First regional meeting of national bioethics committees" in Cairo in 2007 may be regarded as an indicator for the committee's lack of ambition to participate in international bioethical discourse.

Considering the fact that Algerian Constitution formulates a fundamental right of the protection of health for its citizens, 24, this situation is rather surprising. Even more so as the Algerian Ministry of Health and Population in its report on the development of the national health system (Développement du système national de santé) points out that in the last ten years a situation arose that contradicts ethical and deontological principles and causes a weakening of public authority. The problems occur on two levels: first, on the level of the organisation of the public health system in the form of the distribution of narrow resources and the organisation of care; second, on the level of the patient in form of patients rights, respect of human dignity, autonomy, etc.²⁵ Against the background of these developments, the Ministry of Health and Population clearly regarded the establishment of the CNESS and the Conseil national de déontologie médicale as instruments to improve the situation.

Tunisia

A far more active role on the national, regional and international level is played by the National Committee of Medical Ethics (CNEM, Comité national d'éthique médicale) of Tunisia that was established in 1991. 26 Like other institutions, the CNEM was founded in order to consult the Ministry of Public Health. Its tasks, composition, and modes of function should be laid down in a separate order by the Minister of Public Health, which finally hap-

¹² Ossoukine 1998: 133.

¹³ Executive decree 96-122 ∫ 10 (1996).

¹⁴ Ossoukine 1998: 134-135.

¹⁵ Law 90-17 § 168/1 (1990).

¹⁶ Cf. Ossoukine 1998: 133-134.

¹⁷ Cf. Ossoukine 1998: 133.

¹⁸ Executive decree 96-122 ∫ 3 (1996).

¹⁹ Executive decree 04-180 (2004).

²⁰ Law 90-17 § 267/2 (1990).

²¹ Cf. Ossoukine 1998: 134-135.

²² Cf. Ossoukine 1998: 75-80; CNESS: Compte rendu des travaux de la deuxième session.

²³ Cf. Ossoukine 2007: 167-176.

²⁴ Alg. Const. art. 4 § 54 1963 (amended 1996).

²⁵ Ministère de la santé et de la population: Développement du système national de santé, III. La situation actuelle (1990-2001), V. Actions à entreprendre, 10. Éthique et déontologie. http://www.ands.dz/systemedesante.htm#3 (2005-03-08).

²⁶ Law 91-63 art. 1 § 8 (1991).

pened in 1994. The order stated that the task of the CNEM should be to develop such principles that could bring the technological progress in accordance with human values, human rights, and the social, economic, and cultural situation. Also, it demands for holding an annual public conference. The right of enquiry is entitled to the parliament, the president, the president of the Economic and Social Council, by members of the government, and by institutions dedicated to scientific research and associations of health sciences. The CNEM is free to form a technical section, which shall consist of seven members. The committee is responsible to the Minister of Public Health - it is obligated to submit an annual report to him. Furthermore, it is granted a secretary's office by the Ministry of Public Health.²⁷ In fact the CNEM has its address at the Pasteur Institute in Tunis, where it has a small library with bioethical literature.²⁸

The committee is composed of a president and 20 members that come from different scientific fields (e. g. medicine, dentistry, pharmacology, philosophy, sociology, and law) and are representatives of ministries (e. g. Ministry of Public Health and Ministry of Social Affairs) and of official bodies (e. g. Islamic High Council, Court of Appeal and Constitutional Council). The members are nominated by the corresponding ministers and appointed by order of the Minister of Public Health. The term of membership is renewable for three years.²⁹ In 1998 the Minister of Public Health appointed Béchir Hamza as president of the CNEM and 13 members among them professor of sociology Abdelwaheb Bouhdiba and the physician Abdelaziz Ghachem.30 Surprisingly, one month before the rearrangement of the CNEM in 2001 its members were reappointed or newly appointed.³¹ The following changes allowed the committee to organise seminars and workshops on medical ethics and to take up their own enquiries. Also, the number of members rose to 24.32 Right now the CNEM consists of 28 members.33

Since its establishment the CNEM has published seven opinions: on medical assisted reproduction (1996), the establishment of local ethics committees (1997), on cloning (1997), technological progress and health expenses (1999), therapeutic cloning (2002), handling of embryonic tissues (2007), and on organ removal (2007). Furthermore, it organised annual public conferences which were dedicated to different bioethical questions. The first conference on education in bioethics was held in Tunis on April 25 1996.³⁴ The following conferences dealt, for example, with ethics and communication in the health sector (1999), with the relationship between physician and patient (2000), with medical trials on human subjects (2005), and with e-medicine (2007).

Apparently, the establishment of the CNEM must be seen within the context of the bioethical and biomedical decisions in Tunisia in the 1990s. The continuous work and the manifold activities of the CNEM show that it successfully manages its role in Tunisian bioethics. The selection of topics for the annual conferences shows that the committee does not restrict itself to standard themes in bioethics but also chooses current topics. It seems that the CNEM has played an important role in the establishment of local ethics committees in Tunisia. Since 2007 the CNEM has its own (relatively comprehensive) homepage where it makes available its opinions, reports of the annual conferences, and relevant material related to the CNEM.35 The president of the CNEM, Béchir Hamza, who died in 2006, was a member of the IBC of the UNESCO. He was followed in the presidency of the CNEM by Jalloul Daghfous. The impressive work of the CNEM has widely been acknowledged.36

Egypt

The Egyptian National Bioethics Committee (NBC) was created by order of the Ministry of Higher Education in 1996.³⁷ The NCB regards ethics in Egypt to be in a continuous development from the

²⁷ Decree 94-1939 (1994).

²⁸ CNEM: Bioethics database.(2008-03-14).

²⁹ Decree 94-1939 (1994).

³⁰ Order of the Minister of Public Health (1998).

³¹ Order of the Minister of Public Health (2001).

³² Decree 2001-2133 (2001).

³³ CNEM: Composition.http://www.comiteethique.rns.tn/ethique/Membres.html (2008-03-14).

³⁴ CNEM: "Première conférence annuelle du Comité national d'éthique médicale. Thèmes: la formation en bioéthique. Bioéthique: recherches et applications", in: Journal international de bioéthique 9 (1998) 1/2: 149.

³⁵ CNEM. http://www.comiteethique.rns.tn/ (2008-03-14).

³⁶ E. g. cf. Shaheen, Suheil: "Jordan", in: UNESCO Cairo Office; EMRO/WHO (ed.): First regional meeting on national bioethics committees. 5-7 May 2007. Cairo. UNESCO Cairo Office, EMRO/WHO, 2007: 30.

³⁷ Order 1791 (1996).

times of the Pharaohs, over Abraham, Judaism, Christianity, Islam to the present. The mission of the committee is to serve as the international contact organisation for bioethics, especially with regard to the communication with the UNESCO. It shall give advice to and cooperate with the other Egyptian committees that deal with bioethical issues (e. g. the National Bio-Safety Committee) and rise awareness for bioethical questions in Egypt. The committee has established three working groups, one for medical and pharmaceutical applications, another for food and agricultural applications, and a third for information. It sees itself as counterpart of the International Bioethics Committee (IBC) of the UNESCO. The NBC has issued reports on conducting biological and medical research, on human organ transplantation, surrogate motherhood, and scientific research on gene therapy. It holds meetings every month.³⁸

The NBC has 23 members with different educational backgrounds, e. g. professors of medicine, agriculture, biology, and social sciences. However, law and Islam are represented as well, just as there are official representatives.³⁹ The members are appointed by the Minister of Higher Education for a renewable term of three years. The NBC has organised a number of conferences. It is affiliated to the Egyptian National Commission for the UNESCO and has established a documentation centre.⁴⁰ In its first session in 1997 the NBC elected Ibrahim Gamil Badran as president, who has been presiding the committee since then.⁴¹

Amongst other publications, the NBC distributes a printed ethics newsletter. Its first issue was published in 2002. This newsletter provides information on national and international conferences and deals with bioethical questions from different perspectives. It focuses, for instance, on Islamic values, which are discussed by important figures like the Grand Mufti of Egypt, Ali Guma, and the Grand Sheikh of the Azhar University, Nasr Farid Wasil.

The aim of the newsletter to be generally understandable and didactic is mirrored, for instance, in sections of the contributions which explain medical or bioethical terminology. The newsletter also includes shorter contributions by the members of the NBC. Finally, even major bioethical events like the projects of the Raelians and Brigitte Boisselier's interviews on human cloning are reflected.

The NBC sees itself in a leading role in the region⁴². This cannot easily be dismissed: Since the 1980s Egypt has hosted a number of regional and international conferences, dealing with bioethical questions like female circumcision or female genital mutilation.⁴³ Prominent Egyptian Muslim Scholars have engaged in bioethical issues for long. Also, the legal opinion (fatwa) on in vitro fertilisation of the former Grand Mufti of Egypt, Gad al-Haqq Ali Gad al-Haqq (1917-1996), is still being referred to and reprinted.44 Furthermore, the Azhar University itself as well as its institutes like the International Islamic Center for Population Studies and Research (IICPSR) - participate actively in the regional bioethical debate. This becomes clear through the fact that Egypt's first research ethics committee was established at the Azhar University.45 And besides the president of the NCB, Ibrahim Badran, the director of the IICPSR, Gamal Serour, is one of those scholars who deal with Islamic bioethics for years.

Lebanon

It was already in November 1995 when participants of the seminar "Bioethics and Human Rights" proposed to constitute a Lebanese Ethics Advisory Committee (Comité consultatif d'éthique libanais), which should be interdisciplinary, pluralist, and interethnic and publish recommendations on bioethical and biomedical issues. The participants even made suggestions for its future members. The absence of a national ethics council (comité national d'ethique) was clearly regarded as a deficit.

³⁸ NBC: "The Egyptian National Committee for Bioethics", in: IBC (ed.): Towards a declaration on universal norms on bioethics. Extraordinary session of IBC. Paris, 27-29 April 2004. Written contributions. Paris: UNESCO, 2004: 83.

³⁹ NBC 2004: 83.

⁴⁰ NBC: Bioethics database. (2008-03-14).

^{41 &}quot;Égypte", in: Journal international de bioéthique 9 (1998) 1/2: 138.

⁴² NBC 2004: 83.

⁴³ Cf. Fischer, Nils: "Frauenbeschneidung im Islam: Das zähe Ringen um ein Verbot in Ägypten", in: INAMO 54 (2008) [forthcoming].

⁴⁴ Cf. Krawietz, Birgit: Die Hurma. Schariatrechtlicher Schutz vor Eingriffen in die körperliche Unversehrtheit nach arabischen Fatwas des 20. Jahrhunderts. Berlin: Duncker & Humblot, 1991 (Schriften zur Rechtstheorie, 145): 211.

⁴⁵ Ainuddin, Nageen; Abbasi, Ikram: "Islamic bioethics. Activities in OIC countries, resources in print and the web", in: COMSTECH; NASIC (ed.): Islamic biomedical ethics: issues and resources. Islamabad: COMSTECH, NASIC: 109.

Therefore, the main task of the Comité consultatif d'éthique libanais should be the establishment of a National Ethics Council. 46 Furthermore, the foundation of a national ethics committee was claimed again on a similar symposium in 1997. 47 However, the Lebanese National Ethics Advisory Committee for Health and Life Sciences (CCNLE, Comité consultatif national libanais d'éthique pour les sciences de la santé et de la vie) was established no earlier than 2001 by order of the Prime Minister Rafic Hariri. 48

The CCNLE consists of a president, a secretary general, and 18 members, mainly from the academic field. Lebanese ministries (e. g. the Ministry of Health and the Ministry of Social Affairs) are well represented in the CCNLE, just as biomedical scientists, ethicists, and jurists are.⁴⁹ Marwan Hamade and Fouad Boustany are the only members of the CCNLE that were initially suggested at the seminar "Bioethics and Human Rights".⁵⁰ Although the CCNLE is directly responsible to the Prime Minister it does not have its own secretary's office, but has its postal address at the Chronic Care Center (in Hazmieh near Beirut) instead.

The first paragraph of the internal rules of the CCNLE emphasises the committee's devotion to the respect of human rights, and its awareness of the particularities and religious beliefs of the different denominations that characterise Lebanese society.⁵¹ Since its establishment the CCNLE has published several recommendations, e. g. on the principles for research on human subjects, on extraordinary treatment, and on the establishment of

local ethics committees. It has consulted the Prime Minister and the Minister of Health, e. g. regarding the issue of reproductive and therapeutic cloning. The CCNLE has participated in a number of legislative projects. It has taken a stand regarding patients rights and informed consent, medical assisted reproduction techniques, genetic tests, and the establishment of local ethics committees.

The CCNLE members are partly high ranking officials. Also, several members (like Fouad Boustany and Jean Ducruet) are particularly active in the field of bioethics, publishing articles, attending national, regional, and international conferences on bioethical issues, organising workshops etc. This is also reflected in the members' contributions to the annual reports of the committee.⁵² Due to the dedication of its members, the committee is represented in national and international bioethics committees. Marwan Hamade, for instance, represents the CCNLE at the IBC, Salwa Saniora Bassiri is a member of the Arab Committee of Ethics of Science and Technology.

Jordan

The Jordan National Bioethics Committee (JNBC) was established in 1998. It is located at the Jordan National Commission for Education, Culture and Science, i. e. the Jordan National Commission for the UNESCO, where it also used to have a short internet presentation. It consisted of 11 members that were appointed by the Minister for Education. Among the members were representatives of the Ministry of Health, the Foreign Ministry, the Ministry of Religious Endowments as well as representatives of the universities. The JNBC's mission was ambitious: it included formulating national guidelines as well as a national position regarding bioethical issues, bringing together the parties involved in the national bioethical debate, participating in conferences and preparing an own homepage.53 However, the JNBC faced considerable problems in starting its work, e. g. the fact that its members did not meet within four years. For this reason, the committee was re-established in 2003. From then on, it has been named Jordan National Committee for Science and Technology (JNC). The members of the present committee comprise repre-

⁴⁶ El Daher, Samir Michel: "Recommendations. Séminaire 'Bioéthique & droits de l'homme'. Beyrouth - Liban, 16-17-18 novembre 1995", in: Journal international de bioéthique 7 (1996) 3: 216.

⁴⁷ Association pour les Nations Unies du Liban; Union internationale pour la paix et les droits de l'homme (ed.): "Résolution adptée à l'issue du Symposium international "Bioéthique et droits de l'homme". Beyrouth, 28-31 janvier 1997", in: Journal international de bioéthique 9 (1998) 1/2: 142.

⁴⁸ Order 63 (2001); cf. Ducruet, Jean: "La bioéthique institutionnalisée", in: Travaux et jours 68 (2001): 95-96.

^{49 &}quot;Liban. Membres du Comité consultatif national libanais d'éthique pour les sciences de la vie et de la santé (CCNLE)", in: Journal international de bioéthique 13 (2002) 2: 109-110.

⁵⁰ El Daher 1996: 216; "Liban. Membres du Comité consultatif national libanais d'éthique pour les sciences de la vie et de la santé (CCNLE)", in: Journal international de bioéthique 13 (2002) 2: 109-110.

⁵¹ Ducruet 2001: 95-96.

⁵² Cf. CCNLE (ed.): Rapport général annuel 2001-2002. CCNLE, 2003.

⁵³ JNBC. http://jounesco.gov.jo/takaneh.htm (2007-09-28).

sentatives of the Ministry of Health, the Ministry of Education, the Ministry of Mass Communication and Religious Endowments. The main task of the committee is to promote ethical issues, increase public awareness, to organise workshops, cooperate with national and international bioethics organisations, and to promote the Arab point of view on bioethics. The members themselves argue for the support of scientific research, e. g. stem cell research and research on genetic data, and of the training and education in bioethics. However, the JNC seems to face severe financial and organisational problems and its host institution seems to be rather impedimental than helpful.⁵⁴

The members of the committee participate in regional and international bioethics activities. The current president of the JNC, Mohammed Hamdan, used to be a member of the International Bioethics Committee (IBC) of the UNESCO.

Saudi Arabia

With royal decree the National Committee of Bioand Medical Ethics (NCBE) was established in 2001.⁵⁵ It is affiliated to the King Abdulaziz City for Science and Technology (KACST)⁵⁶ in Riyadh, which also provides the NCBE's homepage. The mission of the committee is broadly phrased: e. g. proposing a monitoring system for biomedical research, supervising biomedical research, formulating bioethical guidelines, coordinating international and regional bioethical activities.⁵⁷

The NCBE consists of 11 members, two secretaries and a president. Among the members are representatives of the KACST, the National Guard, the Ministry of Defence, the Ministry of Interior, the Ministry of Higher Education, the Ministry of Health, the Ministry of Information, the Bureau of Scientific Research, and the Dar al-Ifta. The NCBE has formed four sub-committees for Islamic and secular law, for research on human subjects, for

54 Shaheen, Suheil: "Jordan", in: UNESCO Cairo Office; EMRO/WHO (ed.): First regional meeting on national bioethics committees. 5-7 May 2007. Cairo. UNESCO Cairo Office, EMRO/WHO, 2007: 30.

research on animals and plants, and for education and information. It makes available national, regional, and international bioethical documents (like the Nuremberg Code) on its homepage. The NCBE has published documents on bioethics and medical ethics in Islam.⁵⁸ It organises workshops and seminars on ethics.⁵⁹

Libya

In 2004 the General People's Committee formed the National Committee for Bioethics and Bio-Safety. 60 The establishment of the Libyan national bioethics committee is closely related to the "Convention on the Prohibition of the Development, Production and Stockpiling of Bacteriological (Biological) and Toxin Weapons and on Their Destruction" and to the recommendations made by the Review Conferences. 61 Accordingly, its task is to control scientific research and the equipment used in biotechnological research. 62 Another reason for the establishment of the committee is the controversy about the issue of human cloning in connection with the "United Nations declaration on human cloning". This becomes clear through the emphasis which the decree puts on the issue of cloning: it calls on the committee, for example, to report about the research on cloning in the field of bioethics, to propose legislation and to set principles to control it. 63 The National Committee for Bioethics and Bio-Safety consisted of 10 members (including a president), who have a scientific background for the most part (e. g. veterinary, medicine and agriculture). And a representative of the Committee of International Affairs of the General People's Committee and one of the Committee for Legislation of the General People's Committee were members.

⁵⁵ Royal Decree 7/B/9512 (1422 AH).

⁵⁶ NCBE. http://bioethics.kacst.edu.sa/intro.aspx (2008-03-14).

⁵⁷ Ainuddin, Nageen; Abbasi, Ikram: "Islamic bioethics. Activities in OIC countries, resources in print and the web", in: COMSTECH; NASIC (ed.): Islamic biomedical ethics: issues and resources. Islamabad: COMSTECH, NASIC: 117-118.

⁵⁸ NCBE. http://bioethics.kacst.edu.sa/intro.aspx (2008-02-14)

⁵⁹ Abu-Duheir, Faisel Mohamed: "Saudi Arabia", in: UNESCO Cairo Office; EMRO/WHO (ed.): First regional meeting on national bioethics committees. 5-7 May 2007. Cairo. UNESCO Cairo Office, EMRO/WHO, 2007: 35.

⁶⁰ Decree 36 (2004).

⁶¹ E. g. Fifth Review Conference of the states parties to the Convention on the prohibition of the development, production and stockpiling of bacteriological (Biological) and toxin weapons and on their destruction: Final document. BWC/CONF.V/17. Geneva: 2002: § 18 a V.

⁶² Decree number 36 ∫ 3 sect. 1-2 and sect. 6-9 (2004).

⁶³ Decree 36 ∫ 3 sect. 3-5 (2004). Cf. El Maleh, Abdul Qader: "Libyan Arab Jamahariya", in: UNESCO Cairo Office; EMRO/WHO (ed.): First regional meeting on national bioethics committees. 5-7 May 2007. Cairo. UNESCO Cairo Office, EMRO/WHO, 2007: 32.

In 2006 the Secretariat of the General People's Committee decided to grant the committee a permanent status.64 The decree states that the National Committee for Bioethics and Bio-Safety is subordinated to the National Bureau for Research and Development, which nominates the members of the committee, while the Secretariat of the General People's Committee appoints the members by decree. The committee has its own budget, which it receives from the National Bureau for Research and Development. The decree allows the committee an adequate number of administrative personnel. In the following decree on the composition of the committee twelve members and the president were appointed.65 The number of the members as well as the composition was changed, and some members were reappointed. The presidency, for instance, is held by the director of the National Research Institute. The members of the committee include one representative of the Committee for Customs and Trade, one of the National Centre for Infectious Diseases, and one of the Committee of Defence.

Syria

The Syrian National Bioethics Committee was established in connection with an initiative of the UNESCO in 2003. It consists of seven members: physicians, religious scholars, lawyers, and natural scientists. It is affiliated to the Syrian Ministry of Higher Education. The committee arranged meetings, held workshops, and organised international conferences on the issues of bioethics and stem cell research in cooperation with the UNESCO and the Islamic Organization for Medical Sciences (IOMS). In 2005 the University of Damascus founded an ethics committee. Furthermore, in 2003 the Syrian Ministry of Health created a national bioethics committee – however, it does not seem to have taken up work yet. 66

Iran

The bioethical landscape of Iran is very diversified, and the Iranian government has developed a complete system of institutionalised bioethical counselling. Although it legally regulated a number of

64 Decree 79 (2006).

biomedical issues, Iran's biomedical regulation has been criticised for not being extensive enough. 67 Biomedical questions are lively discussed by the Shiite clergy, at the universities and in the Iranian public. They are also subject of international conferences. Not only research projects dealing with innovative medical technologies (like stem cell research) are conducted in Iranian research centres, but sophisticated medical treatment (e. g. organ transplantation and assisted reproduction technologies) is common routine in Iranian hospitals as well.

In 1993 the Iranian Ministry of Health and Medical Education (MOHME) established the Medical Ethics Research Centre. In the same year it organised the first international conference on medical ethics in Iran in Tehran.⁶⁸

In 1997/1998 the National Ethics Committee for Medical Research was created by the MOHME. Its mission is to monitor the application of Islamic, legal, and moral principles in biomedical research, the compliance with human rights, and to promote the ethical monitoring of research projects at universities, private research foundations, and industries. 69 The establishment of the National Ethics Committee for Medical Research paved the way for the foundation of local ethics committees at medical schools and research centres in Iran.70 The approval for research projects requires that they are in accordance with the "Code for the Protection of Human Participants in Medical Research", which was issued by the MOHME in 2000. The National Code of Ethics is in accordance with international standards (CIOMS declarations and Helsinki Declaration) and it reflects the Islamic religious laws and specific cultural issues in Iran. 71 Finally, the "Specific National Ethical Guidelines for Biomedical Research" were compiled and ratified in

⁶⁵ Decree 80 (2006).

⁶⁶ El Saleh, Fawaz: "Syria", in: UNESCO Cairo Office; EMRO/WHO (ed.): First regional meeting on national bioethics committees. 5-7 May 2007. Cairo. UNESCO Cairo Office, EMRO/WHO, 2007: 37.

⁶⁷ Cf. Zali, Mohammad Reza; Shahraz, Saeed; Borzabadi, Shokoufeh: "Bioethics in Iran: legislation as the main problem", in: Archive of Iranian medicine 5 (2002) 3:

⁶⁸ Larijani, B.; Zahedi, F.; Malek-Afzali, H.: "Medical ethics in the Islamic Republic of Iran", in: Eastern Mediterranean health journal 11 (2005) 5/6: 1064.

⁶⁹ Larijani; Zahedi; Malek-Afzali 2005: 1064.

⁷⁰ Larijani; Zahedi; Malek-Afzali 2005: 1065.

⁷¹ Larijani; Zahedi; Malek-Afzali 2005: 1065-1067; Malek Afzali, Hussein: "Islamic Republic of Iran", in: UNESCO Cairo Office; EMRO/WHO (ed.): First regional meeting on national bioethics committees. 5-7 May 2007. Cairo. UNESCO Cairo Office, EMRO/WHO, 2007: 29.

2005. These guidelines consist of a bundle of ethical guidelines which comprises guidelines for research on minors, gamete and embryo research, transplantation research, and research on animals.⁷²

Finally, in 2006 the Iranian National Commission for the UNESCO established a National Bioethics Committee. It serves as liaison body for governments and civil organisations and as reference body for the bioethics activities at the UNESCO. The committee's aim is to promote and teach bioethics. It consists of 17 members.

Currently the MOHME is planning to constitute a nationwide bioethics network and a national medical ethics information centre, which shall also include a specialised library.⁷³

Pakistan

The Pakistani National Bioethics Committee (NBC) was founded in 2004. The initiative for its establishment was taken by the Pakistan Medical Research Council (PMRC) and by the Standing Committee on Scientific and Technological Cooperation (COMSTECH) of the Organization of Islamic Conference (OIC).74 Parallel to the foundation a workshop on research bioethics was held in Islamabad, which pursued the goal of informing the members of the NBC about bioethics. In the course of this workshop the members submitted proposals for the terms of reference and the workings of the committee.75 The NBC is affiliated to the PMRC in Islamabad. It has its secretary's office in the building of the PMRC and a matter-of-fact internet presentation on the homepage of the PMRC.⁷⁶ According to the information given on the internet the NBC consists of 21 members, e.g. different university related scientists, a lawyer, a religious scholar, and a nurse. The committee advices the Government of Pakistan as well as any other institution which demands ethical advice. It also prepares and revises national guidelines on health research in Pakistan and reviews research proposals. The NBC also grants accreditation to other research ethics committees and monitors and coordinates their activities.⁷⁷ The NBC is an independent committee and has two sub-committees: a research ethics committee and the medical ethics committee. It has issued several guidelines, e. g. for research ethics committees and for stem cell research, and has published the Bioethics Act. Furthermore, it has organised workshops on ethics, amongst others in cooperation with WHO/EMRO.⁷⁸

Turkey

Against the background of the world wide establishment of national bioethics committees the UNESCO Turkey National Commission Bioethics Specialization Committee (UNESCO Türkiye Milli Komisyonu Biyoetik htisas Komitesi) was established at the Turkish National Commission for the UNESCO in 2000. It is hosted by the National Commission in Ankara. The Bioethics Specialization Committee has an internet presentation on the pages of the National Commission, where it provides basic information and several documents. It consists of 7 members which are from different Turkish universities, and which are specialised in medicine, philosophy, architecture, and biology. Currently Berna Arda chairs the Commit-tee, who has been involved in bioethical issues and ethics committees in Turkey since the 1990s.⁷⁹ The committee's task is to consult the Executive Committee of the National Commission with regard to bioethics, to prepare and evaluate bioethical documents, to implement the UNESCO declarations in Turkey, to rise public awareness, and to assist health professionals with regard to bioethical questions. It aims to improve bioethics education in Turkey through meetings and workshops. The committee has prepared the Turkish translations of the three UNESCO Declarations and has formulated principles on biobanks, genetic tests, genetic information, and cloning, which it makes available on its homepage. It has also supported the organisation of two meetings of the UNESCO in Turkey.80

⁷² Larijani, Bagher; Zahedi, Farzande: "Contemporary medical ethics: an overview from Iran", in: Developing world bioethics (published online: 5-Jan-2007): 5.

⁷³ Malek Afzali 2007: 29.

⁷⁴ Ainuddin, Nageen; Abbasi, Ikram: "Islamic bioethics. Activities in OIC countries, resources in print and the web", in: COMSTECH; NASIC (ed.): Islamic biomedical ethics: issues and resources. Islamabad: COMSTECH, NASIC: 116.

⁷⁵ PMRC. http://www.pmrc.org.pk> (2008-03-14).

⁷⁶ NBC. http://www.pmrc.org.pk> (2008-03-14).

⁷⁷ NBC. http://www.pmrc.org.pk> (2008-03-14).

⁷⁸ Qureshi, Huma: "Pakistan", in: UNESCO Cairo Office; EMRO/WHO (Hg.): First regional meeting on national bioethics committees. 5-7 May 2007, Cairo. Cairo: UNESCO Cairo Office, EMRO/WHO: 34.

⁷⁹ UNESCO Türkiye Milli Komisyonu Biyoetik htisas Komitesi. http://www.unesco.org.tr/komiteler.php?gitid=2&menuid=2 (2008-03-14).

⁸⁰ UNESCO Türkiye Milli Komisyonu Biyoetik htisas Komitesi. http://www.unesco.org.tr/komiteler.php?gitid=2&menuid=1 (2008-03-14).

States without a national bioethics committee *Morocco*

Morocco neither has a national ethics council nor a comparable committee nor a bioethics legislation, although a "Comité national d'éthique pour la recherche biomédicale" has been at the planning stage since 1999.81 This also applies to the bioethics legislation (lois d'éthique):82 in 1999, only organ donation and organ removal have been regulated by law. 83 Due to the lack of uniform and binding standards in view of the increasing number of clinical studies and the progress in the field of biomedicine, the absence of a bioethics legislation is often being criticized.⁸⁴ The reasons for the hesitant behaviour of the legislator are seen in the absence of politicaladministrative authority (pouvoir politico-administratif) and in the necessity to deal with urgent economical problems (préoccupations économiques).85

As there are no official regulations and standards, ethical decisions are left to the judgement of the medical team in each individual case.86 Furthermore, it is not obligatory to submit clinical trials to ethical evaluation by research ethics committees and the decisions of the ethics committees are not legally binding.⁸⁷ Nevertheless, local ethics committees have been established at the faculties of medicine of the Universities of Casablanca, Rabat, and Fes, which evaluate clinical trials. Under these local ethics committees the Ethics Committee for Biomedical Research (CERB, Comité d'éthique pour la recherche biomédical) at the faculty of medicine and pharmacy at the University of Casablanca is the oldest. It was already created in the 1980s by members of the faculty of medicine and pharmacy, and it was approved by the dean in 1989.88

81 Hakkou, Farid: "L'éthique biomédicale dans les pays en développement: l'expérience du Maroc", in: IBC; IGBC (ed.): Proceedings. International Bioethics Committee of UNESCO (IBC) sixth session. Intergovernmental Bioethics Committee (IGBC) first session. October 1999. Volume 2. Paris: UNESCO, 2000: 28.

This is the reason why the bioethical debate in Morocco highly depends on the activities of a few persons and organisations: e. g. Farid Hakkou, who is a member of the CERB, Nouzha Guessous Idrissi, who represents Morocco in the International Bioethics Committee (IBC), and the CERB, the publications, workshops, and conferences of which do not only address medical professionals but the public, too.⁸⁹ The persons involved in bioethics in Morocco are, for the most part, those confronted with bioethical issues in their daily work. It is not surprising that primarily medical professionals are active in Moroccan ethics committees. 90 In 2005 the Moroccan Association for Bioethics (AMB, Association marocaine pour la bioéthique) was established.91

Sudan

Although Sudan has established the National Ethics Review Committee (NERC) and the Sudan Medical Council it does not have a national bioethics committee. The NERC was founded in November 2002 by the Federal Ministry of Health (FMOH) and represents the centres where medical research is conducted. It has nine members who are for the most part university professors.⁹²

Yemen

Although ethics is taught at Yemeni universities, Yemen has not established a national bioethics committee up till now, but created a National Committee for Health and Medical Research in 2002.⁹³

Oman

Oman is planning to establish a National Ethical Review committee. However, it does not seem to have done so yet. A bioethics unit will be established at the College of Medicine and Health Sciences of the Sultan Qaboos University though.⁹⁴

⁸² Hakkou 2000: 23; cf. Guessous Idrissi, Nouzha: "Morocco", in: UNESCO Cairo Office; EMRO/WHO (ed.): First regional meeting on national bioethics committees. 5-7 May 2007. Cairo. UNESCO Cairo Office, EMRO/WHO, 2007: 33.

⁸³ Guessous Idrissi 2007: 33.

⁸⁴ Guessous Idrissi 2007: 33; Hakkou 2000: 25.

⁸⁵ Hakkou 2000: 28.

⁸⁶ Guesouss Idrissi 2007: 32-33.

⁸⁷ Guessous Idrissi 2007: 33.

⁸⁸ Hakkou 2000: 25.

⁸⁹ Guessous Idrissi 2007: 33.

⁹⁰ Guessous Idrissi 2007: 33.

⁹¹ Guesouss Idrissi 2007: 33.

⁹² Mustafa, Iman Abdalla: "Sudan", in: UNESCO Cairo Office; EMRO/WHO (ed.): First regional meeting on national bioethics committees. 5-7 May 2007. Cairo. UNESCO Cairo Office, EMRO/WHO, 2007: 36-37.

⁹³ Hattab, Abdullah: "Yemen", in: UNESCO Cairo Office; EMRO/WHO (ed.): First regional meeting on national bioethics committees. 5-7 May 2007. Cairo. UNESCO Cairo Office, EMRO/WHO, 2007: 38-39.

⁹⁴ Ghassany, Harith: "Ethics teaching in Oman", in: UNESCO (ed.): Report of regional expert meeting on ethics teaching. Muscat, Sultanate of Oman. Muscat, 27-28 November 2006. http://portal.unesco.org/shs/

Qatar

Currently Qatar does not have a national bioethics committee either, but the foundation is intended with support of the UNESCO within the next years. Nevertheless, ethics committees are established at the hospitals in Qatar in order to review research protocols, while for advice in bioethical issues at the national level ad hoc committees are convened. 95

Bahrain

So far, Bahrain does not have a national ethics committee, and there don't seem to be any plans to establish one either.

Afghanistan

Up until now Afghanistan does not have a national bioethics committee. However, in October 2004 the Ministry of Public Health established the Institutional Review Board (IRB) in Kabul. It meets monthly to review research proposals, but it also prepares national guidelines for research. Furthermore, it organises ethics workshops for local governments and non-governmental organisations (NGO). Although it seems to be the first institutional review board of Afghanistan that actually works, and although it has evaluated a number of research proposals since its foundation, it has to meet several challenges. One is, for example, that only four of its ten members are Afghan nationals, and that neither women nor lay persons nor lawyers are represented in the committee. Furthermore, no member of the committee is an Islamic scholar. Other problems seem to be the lack of resources and the limited sphere of activity, which is confined to the region of Kabul.96

Bioethics committees in international organisations in the region

COMSTECH

In 2002 the Standing Committee on Scientific and Technological Cooperation (COMSTECH) of the

Organization of Islamic Conference (OIC) constituted the COMSTECH International Committee on Bioethics (CICB). Although the OIC has its seat in Jeddah (Saudi Arabia), the COMSTECH and with it the CICB have their seat in Islamabad (Pakistan). The aim of the CICB is to formulate guidelines on bioethical issues. Correspondingly, it has identified a wide field of activities which comprises, for instance, abortion, questions related to the status of the embryo, and gene technology. The CICB consists of 12 Muslim members from different countries who are for the most part well known in the Islamic bioethical debate, e. g. Gamal Abou Al Serour (Egypt), Abdulaziz Al-Swailem (Saudi Arabia), Abdul Aziz Sachedina (USA), Marwan Hamade (Lebanon), Ebrahim Moosa (USA), and Munwar A. Anees (USA). The first meeting of the CICB was held in March 2003 in Beirut. It dealt with a number of bioethical issues, for example the establishment of national bioethics committees and gene technology.97

ISESCO

The Islamic Educational, Scientific and Cultural Organization (ISESCO) of the Organization of Islamic Conference (OIC) established the Islamic Body on Ethics of Science and Technology (IBEST) in 2003. Its mission is to analyse scientific developments and research in the context of Islam, as well as to form an Islamic position regarding bioethical issues. The IBEST consists of a general assembly where all member states of the ISESCO are represented, an executive committee of 12 member states, and specialized committees.⁹⁸

ALECSO

The Arab League Educational, Cultural and Scientific Organization (ALECSO) is an organisation of the League of Arab States. It founded a bioethics committee in Beirut in 2003 which is called the Arab Committee for Science and Biotechnology Ethics of ALECSO. The committee consists of eight members who are appointed by the Director General of the ALECSO. In its first meeting the com-

en/files/11243/11879462221final_report_Muscat_meeting.pdf/final%2Breport%2BMuscat%2Bmeeting.pdf>(2008-03-14): 4-5.

⁹⁵ Alali, Khalid: "Qatar", in: UNESCO Cairo Office; EMRO/WHO (ed.): First regional meeting on national bioethics committees. 5-7 May 2007. Cairo. UNESCO Cairo Office, EMRO/WHO, 2007: 34-35.

⁹⁶ Mustafa, Mir Lais: "Afghanistan", in: UNESCO Cairo Office; EMRO/WHO (ed.): First regional meeting on national bioethics committees. 5-7 May 2007. Cairo. UNESCO Cairo Office, EMRO/WHO, 2007: 27.

⁹⁷ Ainuddin, Nageen; Abbasi, Ikram: "Islamic bioethics. Activities in OIC countries, resources in print and the web", in: COMSTECH; NASIC (ed.): Islamic biomedical ethics: issues and resources. Islamabad: COMSTECH, NASIC: 138.

⁹⁸ IBEST: Basic document for the establishment of the Islamic Body on Ethics of Science and Technology (IBEST). ISESCO: 5-8. http://www.isesco.org.ma/English/Sciences/Ethics/index_menu.htm#Establishment_of_IBEST_ (2008-03-14).

mittee adopted its terms of reference. It meets annually and holds workshops. The aim of the committee is, for instance, to assist those Arabic states that have difficulties to establish national bioethics committees, and to encourage Arab bioethics committees in their activities. 99 After its initial conference it held conferences on gene banks (2004), on the issue fetal abnormalities (2005) and on new technologies (2005).

Discussion

National bioethics committees in North Africa and the Middle Fast

The first national bioethics committees in North Africa and the Middle East were established in Algeria and Tunisia. National bioethics committees are established by law (like the CNESS and the CNEM), by ministerial decree (like the Syrian national bioethics committee), by ministerial decision (like the Jordan JNC), or by decree of the prime minister (like the Lebanese CCNLE).

The affiliation of the national bioethics committees differs; a number of committees are affiliated to the national commissions of the UNESCO (like Turkey and Jordan). This might reflect the assumption that bioethics and the establishment of national bioethics committees are primarily a UNESCO matter. However, this does not necessarily imply that the activity of the committee is constricted: while this seems to be true in the case of Jordan's JNC, in the case of the Egyptian NBC, for instance, it is not true. Some committees are affiliated to ministries, like the Syrian to the Ministry of Higher Education and the Algerian CNESS to the Ministry of Health. The CNEM and the Saudi NCBE are affiliated to national research institutes and the Lebanese CCNLE has its seat at a hospital.

The size and composition of the committees differ considerably. Also, they do not always show a multidisciplinary orientation (e. g. in Algeria), lay persons are not involved, and the number of female members is low. Members are nominated for a renewable term of four or three years. They are appointed by the ministries and the bodies they

represent; members are not elected in any committee. A peculiarity in some national bioethics committees in the region is the membership of a representative of the Ministry of Defence (like in Algeria and Saudi Arabia). All committees include a religious representative. The majority of members in all committees have an university background, especially one from the medical faculties.

Most committees' sphere of competence embraces the consultation of the parliament and government in bioethical questions and the popularisation of bioethics among the population and scientists. The issues addressed differ; they reach from the bioethics standards like cloning, abortion, and organ transplantation to rather specific topics like the distribution of resources in the public health system and e-medicine. Most committees show a strong focus on research ethics (like the Pakistani and the Saudi committee). The Jordan JNC emphasises an Arab focus and the Libyan committee an Islamic focus on bioethics. The dedication of the Libyan national bioethics committee to the issue of cloning and bacteriological and toxin weapons is unique under the committees of the region. 100

Some of the national bioethics committees of the region participated in the legislative process (like the Lebanese CCNLE, the Tunisian CNEM and the Algerian CNESS).

Some committees directly address the public, e. g. by means of specific publications (like the Egyptian NBC's newsletter), of annual conferences (like the CNEM), or with the help of public lectures (like most of the committees). A number of committees organise seminars and workshops, mostly for the purpose of the bioethical education of scientists. Some of the national bioethics committees have homepages (like the Pakistani and the Turkish committee); the Saudi NCBE and the Tunisian CNEM have even established complex online presentations and provide a broad selection of materials.

Not every committee seems to have a budget (like the Libyan committee), and not every committee seems to be supported by the ministry of Health (like Algeria and Tunisia). Most committees do not only seem to lack a secretary's office, but also assis-

⁹⁹ Bassiri, Salwa: "The Arab Committee for Science and Biotechnology Ethics of ALECSO", in: UNESCO Cairo Office; EMRO/WHO (ed.): First regional meeting on national bioethics committees. 5-7 May 2007. Cairo. UNESCO Cairo Office, EMRO/WHO, 2007: 16.

¹⁰⁰ Cf. Fuchs, Michael: National ethics councils. Their backgrounds, functions and modes of operation compared. Berlin: Nationaler Ethikrat, 2005.

tance in general. Tunisia and Egypt dispose of documentation centres for bioethical literature.

The paradigm of the French National Consultative Committee for Ethics (CCNE, Comité consultative national d'éthique pour les sciences de la vie et de la santé) cannot be ignored, e. g. in the cases of the Algerian CNESS, the Tunisian CNEM, and the Lebanese CCNLE. As the CCNE was the first national bioethics committee worldwide this does not surprise. Especially the CNEM appears to be inspired by the CCNE, e. g. with regard to the huge number of members representing official or governmental bodies, to the annual public conference, and to its independence. And just like the CCNE it has gained momentum.

Although a number of states in the region have established centres for biomedical and biotechnological research (like Saudi Arabia with its programme Jeddah BioCity and Dubai with Du-Biotech), most countries of the region cannot participate in the state-of-the-art research. They are also facing severe problems in their public health sector that attract their attention, e.g. combating diseases and providing health care for the population (which, for the most part, has no health insurance at all). The national bioethics committees of the region could address these immediate problems and develop solutions. The great interest in research ethics and the organisation of seminars and workshops on research ethics for physicians can be regarded as the committees' response to those basic needs.

Background for the establishment of national bioethics committees

On the one hand, the bioethics initiatives of the UNESCO and the UNESCO bioethics declarations have possibly formed the background for the establishment of national bioethics committees in North Africa and the Middle East. Jordan's JNBC, Lebanon's CCNLE, and Tunisia's CNEM, for example, were created with the assistance of UNESCO.¹⁰¹

Furthermore, Saudi Arabia has participated in the UNESCO's programme "Assisting Bioethics Committees" (ABC) and is participating in the "Ethics Education Programme" (EEP). On the other hand, the "Global Summit of National Bioethics Advisory Bodies" (an initiative of the World Health Organization (WHO)) can be considered as a reason for the establishment of national bioethics committees, too. However, the decision of the Islamic states at the 59th session of the General Assembly in 2004 to follow Iran's proposal to adjourn the consideration of the "International convention on cloning" to the 6oth General Assembly seems to mark a turning point. Apparently, the Islamic states realised the necessity to express and formulate their own bioethical principles given that they would not want to be dominated and their position should not be ignored. To give an example: For a number of reasons, Islam does not reject therapeutic cloning but argues strongly against reproductive cloning. This is reflected in the decision of the Islamic states not to vote in favour of a total ban against human cloning but to support a declaration banning reproductive cloning. 102

Bioethical debate

It is astonishing that the Islamic states, and in particular the states of North Africa and the Middle East, did not coordinate their bioethics policy earlier - for issues with bioethical implications have been discussed long before the international debate on cloning, e. g. family planning, abortion, and human rights. Up till now initiatives aimed at the formulation of a joint Islamic position on certain bioethical questions have not been taken up by the governments of Islamic states, but by non-governmental organisations instead. The Islamic Organization for Medical Sciences (IOMS) in Kuwait, for instance, has organised a number of international conferences on medical issues in the 1980s, e.g. on the inception and end of human life, on organ transplantation, globalization, and healthcare services. 103 On these conferences, topics were discussed by physicians and Islamic scholars

¹⁰¹ Cf. Crawley, Francis P.: "Culture and community in bioethics: the case for an international education programme", in: Fujiki, Norio; Macer, Darryl R. J. (ed.): Bioethics in Asia. The proceedings of the UNESCO Asian Bioethics Conference (ABC '97) and the WHO-assisted Satellite Symposium on Medical Genetics Services, 3-8 Nov, 1997 in Kobe/Fukui, Japan 1998. Christchurch: Eubios Ethics Institute, 1998: 137.

¹⁰² Cf. Kuppuswamy, Chamundeeswari: "The role of international institutions in the formation of international bioethical law: UNESCO and the United Nations General Assembly attempt to govern human cloning", in: Journal international de bioéthique 18 (2007) 1/2.

¹⁰³ IOMS, http://www.islamset.com/ioms/index.ht ml (2008-03-14).

jointly, and it was argued for an Islamic position. The discussions resulted in recommendations and guidelines (as for example the "Islamic Code of Medical Ethics"), which found approval and are frequently being referred to.

This leads to the question whether Islamic scholars had to discover bioethics as a field of action just as Islamic governments had to. As the Islamic law (sharia) claims to cover all aspects of human life, the fundamental questions regarding the beginning of human life, its end and the relation of man to his body are extensively discussed by Islamic scholars. And the usual way for an Islamic scholar to deal with these questions is to issue a legal opinion (fatwa). In most cases, the fatwa is the legal answer to a specific question raised by a Muslim. When a fatwa is issued by a prominent Islamic scholar it naturally receives attention. As the Islamic law can quickly develop legal positions regarding new problems, it does not surprise that the Islamic law gives answers faster than the legislator does. This is one of the reasons why the debate of bioethical issues is very vivid among Islamic scholars, and why the publications on such issues are numerous. The fatwa on in vitro fertilisation of the former Grand Mufti of Egypt, Gad al-Haqq Ali Gad al-Haqq (1917-1996), 104, for instance, as well as the Tunisian Islamic High Council's opinion on organ removal, donation, and transplantation were published decades before the parliaments discussed these questions. 105

The Azhar University in Egypt, which claims for itself a leading role in the Islamic world, has organised several congresses on bioethical topics, partly in cooperation with the International Islamic Center for Population Studies and Research (IICPSR). But the International Islamic Figh Academy in Jeddah, which was founded by the Organization of the

Islamic Conference (OIC), and the Islamic Fiqh Academy in Mekka, which was created by the Muslim World League (MWL), have discussed medical and biotechnological questions, too. As the legal councils of both organisations consist of representatives of Islamic scholars from the member states, their legal decisions claim to express a universal Islamic standpoint, too.

Recently several international (UNESCO and WHO) and regional (ALECSO, COMSTECH, ISESCO) organisations began to deal with the question of bioethics in Islam and in the Islamic countries. The establishment of regional bioethics committees can be seen in the light of this development, which applies to the COMSTECH International Committee on Bioethics (CICB), the Islamic Body on Ethics of Science and Technology (IBEST) of the ISESCO, and the Arab Committee for Science and Biotechnology Ethics of the ALECSO. But it also applies to the EMRO and UNESCO's "Regional meeting of national bioethics committees", which clearly reminds of the European Conference of National Ethics Committees (COMETH).

The diversity of the bioethical landscape in North Africa and the Middle East is characterised by a huge religious bioethical debate and a small but growing secular one, which is represented by governments, medical professionals, lawyers, sociologists, and philosophers. The secular bioethical debate in the region depends on the commitment of a number of active persons, most of which have studied medicine at Western universities. Although chairs for ethics at the faculties for humanities do exist, it seems that a chair for bioethics has not been founded at a university in the region so far although the Egyptian NBC is applying for a UNESCO chair for bioethics.¹⁰⁶

¹⁰⁴ Cf. Krawietz, Birgit: Die Hurma. Schariatrechtlicher Schutz vor Eingriffen in die körperliche Unversehrtheit nach arabischen Fatwas des 20. Jahrhunderts. Berlin: Duncker & Humblot, 1991 (Schriften zur Rechtstheorie, 145): 211.

¹⁰⁵ Cf. Ossoukine, Abdelhafid: "Le Comité d'éthique algérien face à la concurrence bureaucratique et religieuse", in: Journal international de bioéthique 18 (2007) 1/2: 167-176.

¹⁰⁶ NBC: Bioethics database. (2008-03-14); NBC: "The Egyptian National Committee for Bioethics", in: IBC (ed.): Towards a declaration on universal norms on bioethics. Extraordinary session of IBC. Paris, 27-29 April 2004. Written contributions. Paris: UNESCO, 2004: 85.