The Bioethics Debate: Which Lessons for Ghana?

Public Lecture delivered on Thursday 26th June 2008 at the Teachers’ Hall, Accra as part of the 50th Anniversary celebrations of the National Commission for UNESCO

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Ghana launches National Bioethics Committee with UNESCO’s Assistance

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The developments in the Sciences, Information Technology, Culture and Agriculture, in recent times, have called for the need to manage data and information on issues in Bioethics.

UNESCO, in the light of the above, enjoined its Member States during the 33rd General Conference in 2005, to set up National Bioethics Committees to discuss, inform and offer useful suggestions to opinion leaders, the general public and other practitioners in the area of Bioethics.

In response to the General Conference decision, the Ghana National Commission for UNESCO brought together people from selected institutions, civil society and research institutions to form the core membership of the Ghana National Bioethics Committee (GNBC). UNESCO instituted the “Assisted Bioethics Committees” (ABC) project in its effort to assist developing Member States to develop guidelines for their respective Committees, which would be in tune with existing ones. This project targeted 12 developing countries (six Anglophone and six Francophone Countries), including Ghana.

Introduction

Bioethics as a concept is not new to the Ghanaian public because of the inherent ethical and moral nature of the society where in the past, public opinion held sway in the general behaviour of the people. However, bioethics as a discipline is only known within the circle of academic and research institutions where aspects of it are taught as an examinable subject and also used in skills training in medical research. Within the last few decades, things have changed in our society, partly blameable to globalisation and partly to urbanisation, and consequently the inherent discipline and public spirit-edness that characterised the Ghanaian as a person and Ghana as a law abiding and disciplined society has gone.

As a result of new advances in research in biology, bio-chemistry, genetics and medicine in which heritable nature of living organisms are known and can be tampered with and even changed to create novel organisms and their products including new cells, tissues and organs, ethical and moral decisions in research
Mr. Henk ten Have, Director of Ethics of Science and Technology of UNESCO, led a panel of experts who visited Ghana to hold discussions with the core Bioethics Committee in Accra on 22nd – 23rd March, 2007. At the end of the meeting Ghana was advised, among others, to:

• Develop Statutes that would guide the Committee;
• Develop an MOU together with UNESCO to commit herself in fully participating in the Assisting Bioethics Committees (ABC) Project;
• Prepare for a training programme for members of the Committee.

The first activity in the ABC project was held in January 2009 after the National Bioethics Committee has been inaugurated. The activity was in the form of a Workshop on developing working methods for the Committee. The objectives of the Workshop were to:

• Clarify the role and mission of the Committee;
• Develop clear working methods;
• Draft rules of procedures;
• Develop policy for record management;
• Develop policy for public information;
• Develop policies for networking.

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have come under the international spotlight and scrutiny and have become very critical. The good intentions in many of the new research break-throughs are at risk of misapplication, if proper controls are not put in place and the technologies get into the hands of charlatans, terrorists and even bio-pirates to create things that will harm people and make the world unsafe.

UNESCO, through its International Bioethical Committee (IBC) and the Inter-governmental Bioethical Committee (IGBC) who have engaged and completely plunged themselves into general public debates, has invoked the Universal Declaration of Human Rights (1948) and the Universal Declaration on the Human Genome and Human Rights (1997 and 1998), to provide inspiration to Parties, in their efforts to embrace the essential principles of bioethics, human dignity, freedom, justice, equity, solidarity, to draft legislation and or regulations.

This is the kind of lessons our country Ghana needs to undergo.

Definition

Bioethics addresses the moral and ethical issues arising from clinical practice, medical and biological research, resource allocation, and access to biomedical technology.

It is a field that covers both the ethical and legal and the social and cultural dimensions of the life sciences and the technologies which are associated with them. It plays a role in ensuring respect for human dignity and the protection of human rights and fundamental freedom.

Origin of the term

Van Rensselaer Potter at the University of Wisconsin and Andre Hellegers at the Kennedy Institute of Ethics independently coined the term “bioethics” in the early 1970s to describe different concepts, and its exact definition remains contested today. However, it is nonetheless possible to discern the growth of a professional bioethics industry and discipline intimately tied to cultural mores and new advances in biomedical technology and techniques.

Historical

The history of medical ethics dates to antiquity, and the Hippocratic Oath to “do no harm” remains at the core of modern medical ethics. The American Medical Association (AMA) established a code of ethics in 1846 to regulate medical practice; a hundred years later, revelations about Nazi medical experimentation led to the Nuremberg Code (1947), requiring “informed consent” from human subjects involved in research.

However it is on the pedestal of the values enshrined in the Universal Declaration of Human Rights (1948) that bioethics is, indisputably founded.

Now there are other texts like the Declaration of Helsinki (1964) of the World Medical Association (WMA) – some of whose features are spelled out in greater detail in the Declarations of Tokyo (1975), Venice (1983) and Hong Kong (1989) – and the International Ethical Guidelines for Biomedical research Involving Human Subjects (1992 revised in 2002) prepared by the
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Council for International Organizations of Medical Sciences (CIOMS), which have established rules for the protection of persons taking part in biomedical research, and defined the principles that should govern clinical tests involving human beings.

Following from this, a number of countries have established national legal frameworks to deal with such moral and ethical issues arising from the biomedical researches, practice and the technologies they develop.

The basic principles

The basic principles include the tenets of the Universal Declaration of Human Rights and those that were established through the Universal Declaration on the Human Genome and Human Rights (adopted unanimously and by acclamation by the UNESCO General Conference in 1997 and endorsed by the UN General Assembly in 1998. The principles are:

- Respect for human dignity.
- Respect for autonomy and freedom of choice – in particular with the need for free, express and informed consent.
- The primacy of individual well-being and integrity of the person.
- The principle of equality and non-discrimination.
- The principle of justice and equity.
- The principle of solidarity (involving what mechanisms to use to ensure that researches cover all diseases).
- The principle of precaution and responsibility.
- The principle of right to privacy.
- The principle of right to ownership.
- The principle of non-commercialization of the human body.

The current debate

The current debate at the international level and to some extent at some national levels, is about issues and challenges in bioethics. This is because bioethics now has a global appeal and has thus attracted a global dimension to itself.

In her welcome statement, the Secretary-General of the Ghana National Commission for UNESCO, Mrs. Charity Amamoo expressed her joy for the coming into fruition efforts the Commission, UNESCO and other stakeholders had made towards ensuring that Ghana establishes a Bioethics Committee. She gave a background of the preliminary work the Committee in Ghana had gone through and thanked UNESCO for her continuous assistance to the Africa Region.

The leader of the delegation, Prof. Henk ten Have threw more light on the memorandum of understanding, stating that, it provided several opportunities to offer assistance in many forms to Ghana. He congratulated Ghana for working assiduously at establishing her Bioethics Committee.

In a speech read on his behalf by the Ag. Human Resource Director of the Ministry of Education, Hon. Ato Essuman, the Chief Director and Vice Chairman of the Ghana National Commission for UNESCO admonished the Committee to be aware that human beings are an integral part of life and hence Ghanaians deserve to benefit from the same ethical standards in medicine and life science research as in the advanced countries.

He congratulated UNESCO for reinforcing its activities in the Africa region as part of its programme for bio-ethics and the ethics of science and technology for 2006 through to 2010 and for providing the technical support.
to assist us set up our national Bioethics committee, as well as providing the needed capacity - building in terms of training, for the members.

The Chief Director and vice Chairman of the Commission and the Secretary - General appended their signatures on the MOU on behalf of Ghana while Prof. Henk ten Have signed for UNESCO. The exercise was witnessed by Prof. Oteng -Yeboah, Chairman of the Bioethics Committee. In his closing remarks, the Chairman thanked the Chief-Director’s representative, and the team of experts for coming to Ghana to share and guide the Committee on how to execute its duties.

The formal launch of the National Bioethics Committee and the signing of the MOU with UNESCO paved the way for Ghana to fully benefit from the ABC Project.

This training was the first activity of the ABC project for the first Anglophone country benefiting from the ABC Project. With the development of the Statutes to Guide the National Bioethics Committee, the training in Working Methods aimed at helping the Committee to develop its working methods and procedures, which will imply further specifications and applications of its mandate as formulated in its terms of reference in the Statutes. The development of the Working Methods also aimed at the following:

- Fine – tuning the Statutes already developed of other Committees;
- Clarifying the role and mission of the Committee;
- Drafting rules of procedures;
- Developing policy for record management;
- Developing policy for public information;
- Developing policies for networking.

The UNESCO team of experts who visited Ghana to train members of the Committee were as follows:

- Prof. Henk ten Have, Director, Division of Ethics of Science and Technology, UNESCO (Leader);

What are the issues?

The issues are both general and specific. The very general issues relate to the beginnings and the end of human life, human behaviour from greed and avarice in the scramble for resources, general resource allocations, depletion of wild stocks of animals and plants, pollution and contamination of air, water and food sources to all living organisms including man, biopiracy, refusal to give people their rights and their fair share of what is due to them.

The very specific issues come in the wake of researches in medicine, science, agriculture and the environment. Medical researches and practice involve organ donations and reactions in the donor and recipient body; tissue and cells including gametes research in embryology for procreation; the selection and participation of human beings in experimental research projects and treatments; equitable access to health services; the scientific, epidemiological, diagnostic and therapeutic use of genetics such as in stem cell researches and cloning; organ transplant and trafficking: human genome sequencing and use for commercial purposes; surrogacy; placebo; transexuality; eugenics and euthanasia. Biological and biochemical researches at the cellular, tissue and organ physiology and genetics level bring up new knowledge about fluid and matter dynamics within the human body and that of other organisms, allowing for understanding of new approaches in drug action and application.

Agricultural research that employs transgenic technology and comes up with novel products generally referred to as the genetically modified organisms (GMOs) is a current issue in human and environmental safety.

Some environmental researches and activities that create a change in land use, for example in wetland drainage and filling, mass spraying of insecticides to control insects, bush burning for farming and game hunting are also being hotly debated.

What are the Challenges?

There is no international legal instrument to govern bioethicals issues especially those that are transboundary in nature; though some countries including the Gambia, Denmark, the UK, Egypt, the USA etc. have national laws and guidelines to give legal backing to their national institutional bioethics authorities and committees.

There is a lack and/or complete absence of awareness/consciousness-raising, information dissemination, education of the public and opportunities for public debate on almost all the issues raised above on bioethics in many countries including Ghana.

There are enormous challenges for countries that have not established any legal cover on issues of bioethics and the earlier this was addressed the better for human well-being and environmental health.

Which lessons for Ghana?

The lessons for Ghana are mainly in the challenges that the absence of any legal national entity regulating issues of bioethics entail. We may not be currently confronted with very complicated
bioethical issues in biomedical research such as in organ transplants, organ trafficking, embryonic stem cell research and applications, cloning, transexuality, surrogacy etc., or biochemical, cytological and genetic research in gene transfers and genetic manipulation of cells to alter tissues, organs or organisms for specific products in plants and microorganisms, but we need to consider carefully the applicability of the various principles enshrined in the two respective universal declarations of human rights and on the human genome and human rights in the conduct of research and development in specific areas of agriculture, biology, biochemistry, genetics, medicine and the environment, so that we do not herald undue harm and pain into our Ghanaian society. It is like or akin to a re-introduction of the precautionary principle in Agenda 21 into our national psyche.

It is true that some of the health research institutions in Ghana have semblances of bioethical committees, as is the case in the Noguchi Memorial Institute for Medical Research (NMIMR), the University of Ghana Medical School (UGMS) and quite recently one for the Centre for Scientific Research into Plant Medicine (CSRPM) at Mampong-Akwam, which govern their researches. But because the functions of these committees are limited only to the researchers and the researches of these institutions even though they may be national in character, the committees’ oversight do not apply to or have any legal authority over individuals or their institutions from the private or public that are not directly under their purview, it is considered necessary to have one with a perspective on national character. Until that is in operation we can consider the general bioethics principles referred to previously and match them with the many daily occurrences of bioethics issues in Ghana and determine the moral and ethical connotations around them to the general public.

The following are being mentioned not in any order of prime importance to the public.

• There are many early and also sudden unexpected deaths (SUDs) among adults which some people attribute to large and indiscriminate consumption of herbal preparations because they are cheap. Some of these herbal preparations are tinctures and marketed as alcoholic beverages, with claims as aphrodisiac preparations to attract the public. If this is true and can be verified, it calls for a new look at the aspects of herbal medicine practice and medical preparations to the public that are seen to promote disease proliferation. This is urgent especially where there is no information on ingredients used to stabilise the herbal preparation for longer shelf life and there is no proof or evidence of cure/claim in a previous dosage administration.

• There is also a need to look again at the control of mar-
marketing and peddling of traditional herbal medicines in public places and also through the electronic and print media. A previous attempt to control this was discontinued because of several reasons including revenue considerations on the part of the media houses.

- Many effective drugs lose their potency with the disease pathogens becoming resistant or acquiring resistance as a result of many reasons including non-compliance of patients to go through full course of the prescribed dosage and the easy opportunity to purchase and use these drugs from off the counter without prescriptions. There is need to consider enforcing dosage compliance and purchase of drugs based on prescriptions to reduce drug sales from off the counter and the strict control of drug dispensing in the spate of proliferation of pharmacies.

- Traditional knowledge holders are reluctant to give information because they do not derive any benefits once their knowledge is gone. Access and benefit-sharing concepts must be seen in the search for and use of traditional knowledge. Any scientific research based on Traditional Knowledge must always conform to Prior Informed Consent, with the knowledge being acknowledged when used and adequately compensated for.

- Genetic manipulations of local/indigenous species must conform to the country’s Biosafety in biotechnology guidelines and where this is not explicit, the manipulations must be done under very strict contained situations to prevent accidental gene pool contamination. This will preserve the sanctity of the natural genetic heritage.

- Likewise introduction of genetically modified organisms (GMOs) and their products must be done under the country’s Biosafety in biotechnology guidelines for effective control of their development and utilization. This reinforces the urgent need to promulgate the bill on the moral obligation to do so before they leave office.

- Alien species that have the propensity to become invasive species must also be treated in like manner to prevent any future negative impacts to the environment in the areas of natural economic capital and social well being of the people. The efforts of the Environmental Protection Agency (EPA) and the Plant Quarantine and Regulatory and Monitoring division of the Ministry of Food and Agriculture must be enhanced to educate the public on the handling of invasive alien species (IAS). Wherever there is doubt, the application of the Bonn guidelines on IAS must be consulted to provide the solution.

- There is a proliferation of various kinds of food supplements under different labels by unknown and/or unacquainted manufacturers on the market which are available to the public. No public enquiry has been made or suggested before, but it is necessary that these imports and their introductions and use as food supplements are properly subjected to intense study and controlled by the Food and Drugs Board (FDB) in conjunction with the health institutions.

- There is also the concern about expiry dates of certain food and cosmetic items. Such items become unwholesome when the expiry dates are due and whoever offers such items for sale and/or for consumption and use is deliberately causing harm to the unsuspecting public. Public vigilance supported by the administration of the FDB is very necessary.
• The use of certain packaging materials for food have been found to be harmful to human life. Reference has been made of the use of certain sizes of cellophane plastic sheets for cold water and hot food packaging. The public must continuously be reminded about the risks.

• The use of certain kinds of roofing materials, particularly asbestos, have been found to be carcinogenic. There is need to conduct studies on the newer and decorative roofing sheets currently adorning many new buildings in the country.

• Certain types of foods and their component substances offered for consumption are known to be carcinogenic. Others are known to contain substances that are considered as promoters of obesity because of the contribution of their food value to the internal human body physiology and biochemistry. Many of these are known to people but they use them to prepare food for the public. Such people must be prosecuted.

• The craze for lighter skins has provided impetus to some foreign and local manufacturers to produce soaps and lotions which the public is using. All of these products must be vigorously tested and passed by the Standard Board before they are used by the public. With the rising surge in skin cancer cases it is important that these products are properly scrutinized.

• Despite the efforts of some institutions to educate the public about the harm caused by certain chemical applications on human and environmental health, there is still uncontrolled introduction of chemicals into the environment for different reasons. There must be a closer scrutiny of the sources of these chemicals and a proper means adopted to prevent their use on the environment. There are uncontrolled pesticide and fertilizer applications which are currently known to create more problems to the environment and the soil than they are to solve. Additionally many mosquito coils on the market are suspected to contain certain chemicals that cause harm to human health than they do to the target insects. The institutional conflict between the EPA and the FDB in the administration of chemical regulations must be resolved quickly for effective control of chemicals including mosquito coils in the country.

• Several cases of accidental infection of patients by the negligence of health workers through blood contamination resulting in disease transfers are known. Many AIDS and other infectious and communicable disease cases are traced to this source. The patient must at all times be protected and insulated from such situations to make our health care delivery system reliable and secure.

• As a result of greed, certain individuals in our society, perhaps unaware of the effects of their actions, deliberately introduce certain substances into the waters of the seas, lakes, rivers and ponds to kill and harvest fish and in the process poison humans on contact through the use of the water or the eating of the fish. Others inadvertently contaminate food, water and air supplies through negligence and ignorance and consequently create harm to other people and the environment.

• There are some aspects of orthodox medical practice which may not or do not cause harm but create anxiety in patients. The use of placebos and some trial or experimental drugs come under this category. Patients are never always informed about the medication.

There are other aspects of the orthodox medical practice which cause harm, and in many cases lead to death. This happens in many gerritric, cardiac, stroke and/or terminal cancer cases where the patient is given drugs with various contra-indications to manage pain and other medical situations and neither the patient nor the next-of-kin is informed about them. Sometimes the patient or the next-of-kin may be aware and condone it to end the patient’s life. Some of these actions could be considered as assisted suicide cases or active and/or passive euthanasia.

• As a result of urbanization and the breakdown of certain basic societal and cultural aspirations, a number of biocultural or sacred sites are destroyed and used for other purposes. This deprives a certain category of the society of a cultural landscape for their religious inspiration and satisfaction. There are evidences of very high extinction rates of many sacred organisms as a result of these land-use conversions. This situation assumes ethical proportion where certain members of the population are deprived of the expression of their religious and cultural aspirations.
We have been witnessing fatal cases of drug smuggling in which people acting as couriers, swallow pellets of hard drugs like cocaine which burst in their stomachs and other parts of the alimentary canal. Apart from the homicide nature of these cases involving the law enforcement agencies of the country and the drug agents/barons in which proper legal arrangements are available for redress, there is also a worrying trend of drug abuse, curtailment and waste of youthful and promising human life which is lost to a nation.

There is also several cases of indiscriminate and deliberate taking of other peoples lives through arson, poisoning, vehicular accidents, armed robbery and murder (by lynching, gun shots, strangulation, mob action, cutlass or knife wounds, suicide bombings etc.) and other accidental homicide situations in the administration or lacing of poisonous materials in other peoples drink, food or medicines which must be reflected in bioethics undertakings because they cause harm to others and deprive them of their lives through unexpected deaths. Sometimes some of these situations happen as a result of mental instability. It should be understood that the mental stability of all individuals of a nation is the responsibility of the nation and no one must be allowed to get to the level of insanity to be a risk to the general public.

There is no harm in converting green material sources into biofuel, but there is a lot of disquiet when the converted material is food for human consumption. The current debate on Biofuels is strictly on such ethical issues as conversion of food items meant for human consumption for Biofuel production and the use and or conversion of fertile lands normally reserved for food crop cultivation for biofuel feedstock cultivation and production.

What solutions are available?

A national legally constituted bioethical entity with the appropriate framework and guidelines must be established in the country without delay.

A traditional herbal medicine practitioners’ field schools for training in hygiene, efficacy, toxicity and dosage standardisation must be established. The full cycle of both local and imported products, especially food and drugs, and their impacts on the Ghanaian public.

The country’s Regulatory agencies, viz.: EPA (Chemicals), Food and Drug Board (Food, Nutrition and Drugs) and Standard Board (General standards of consumer items) should consider instituting a programme to examine or cause to be examined the full cycle of both local and imported products, especially food and drugs, and their impacts on the Ghanaian public.

The health institutions, both public and private, should, as a matter of routine, use the media and the Government Information Services Department to educate, inform and create awareness on many bioethical issues related to their occupation, among the public and in particular to the religious bodies and their followers, the traditional authorities and their subjects, the district/municipal/metropolitan assemblies and the civilian populations, educational and research institutions, the service organiza-
tions including CEPS, Immigration, Police, Fire Service and the Military.

The research institutions, also likewise, should use the same communication, education and public awareness methods to create awareness, educate and inform the public on the bioethical issues of their discoveries and inventions.

Every research organization should have a local bioethical committee to screen all researches that have social, economic and environmental health implications before relating with the national bioethical entity or authority for clearance.

Elements of a legally constituted bioethical entity

This entity must have the following goals:

• To improve the public benefits of science and technology through a morally sensitive implementation of science policies at national level;
• To improve patient-centred care in all health care institutions;
• To protect those who participate in biological/biomedical, behavioural and epidemiological research trials; and
• To facilitate the acquisition and use of biological, behavioural and epidemiological knowledge.

This entity must be seen to be multi-disciplinary, broad-based in outlook, composition and thinking to overcome the incidence of uncertainty which in itself offers enormous significant challenges; normally with expertise representing different viewpoints concerning ethical issues raised in biology, medicine and the life sciences; and with the following characteristics and capacities:

• Appreciation of complexity of problems where the bioethical dilemma is indistinct, complicated and hard to understand;
• Appreciation of the range of options, through offer of multiple perspectives;
• The protection of research and health care institutions, by insulating them from lawsuit risks, loss of integrity and reliability;
• The emergence and prominence of patient autonomy fully mediated to avoid conflicts;
• The emergence of economic considerations ensuring equitable and fair distribution of resources to all experts involved in health care deliveries;
• Religious convictions of some groups being expressly accommodated and properly handled; and
• Individual decisions, as affected by the plurality of publics, reviewed and replaced within appropriate policy decisions.

Conclusion

Having considered all of the above issues and looking at the precarious position of Ghana and its publics, I think it is proper that the necessary action is pursued now. It is therefore pleasing for me to inform the general public through this public lecture that the Ghana National Commission for UNESCO intends to lead the way in establishing a national entity called Bioethics Committee. This initiative will need the support of every stakeholder and this is vigorously solicited. The appropriate legal authorities of the land are therefore put on notice for their advice, direction and concurrence.

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