

Background to establishment of ethics commissions

DENMARK

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I. Establishment

- The “reproduction revolution” introducing new forms of assisted reproduction - IVF etc - prompted the establishment of The Danish Council of Ethics. in 1989
- Parliament initiated the establishment
- Alternatives were not discussed at length back in 1989

II Links with existing institutions

- The Danish Council of Ethics advises the Danish Minister of Health. The Council is linked to a special Danish Parliamentary Committee on The Council of Ethics - consisting of 9 members - but also arranges hearing etc involving Parliamentary Committees on for example research and on health.
- As the task of The Danish Council of Ethics a.o is to advise the Minister and the Parliament, the work of the Commission is closely linked to politically legitimized decisionmaking processes. In the debate in Parliament the opinions from the Council of Ethics are often quoted.

II Composition

- 8 members are chosen by the Minister of Health and 9 by the Parliamentary Committee on The Council of Ethics
- There are no politicians - they are expressly excluded from being members- but there are experts and lay people.
- There are no provisions saying the Council should be socially and ideologically representative, but it is said in the Act that publicly documented insight in ethical, cultural and societal questions of importance for the work of the Council should be

taken into account, when choosing members.

- Equal representation of men and women is ensured. Half of the members chosen by the Minister are according to the Act to be men and half women, and the Parliamentary Committee is only allowed to appoint one more of one sex than of the other. Members are appointed for 3 years and may be re-appointed once, which means that there is a maximum of 6 years.

III Tasks

- The Council submits recommendations to the Minister of Health, regarding certain topics, including developments in research, evaluation of the ethical problems this development may have as a consequence, and evaluation of legal regulation. Moreover, the Council may according to the legislation discuss research on humans in cooperation with the Scientific Ethics Review Committees and advice the Health Authorities on general ethical questions in relation to certain biomedical practises. The second important task of the Council is to inform the public about the development in biomedicine and to initiate public debate on the ethical questions raised by the new biotechnological developments.
- The Council is according to the legislation obliged to examine and make recommendations about protection of embryos, and regarding genetic research, cryopreservation, diagnosis and treatment of gametes used for fertilization. Apart from this the Council decides which subjects to make debate and recommendations about. The authorities from time to time ask for a specific topic to be taken up, but mostly the initiative is within the Council.

IV Working methods

- The legislation does not specify the aim of the discussions. In practise the Council sometimes presents reports, where consensus has been obtained, but very often the reports consist of different opinions which are then specified (also by name of the Council members) and argued. The dialogue and the presentation of the underlying ethical argumentation and its balancing of different ethical principles - which often conflict - are seen as essential. Based on this the politicians hopefully have a better basis for making their decision.
- The Council decides how much time is needed. Material for debate arrangements may be produced within a shorter period, whereas reports normally take longer.
- There is cooperation both with the other Nordic Councils and with others. The chairman of the Danish Council of Ethics has for some years been a member of a Standing Bureau established by the Council of Europe arranging meetings for different ethics Councils throughout Europe. Also in EU meetings of the Councils provide forum for international exchange of information and debate.
- The Council was at the beginning participating in CAHBI, Council of Europe, making the first drafts of the Convention of Biomedicine and Human Rights, but they were not participating in CDBI
- As mentioned above there is cooperation with the the Scientific Ethical Review

System in Denmark, approving specific biomedical research projects. Meetings of the two Councils take place regularly. Moreover, there is cooperation between these two bodies in a broader context, where the Ethical Council of Animals, the body approving specific research on animals and the Danish Technology Board also participate in meetings (BIOSAM). The aim is to try to foresee, which ethical questions may arise from research currently being performed or likely to be performed in the near future, and to evaluate the ethical questions from a broader perspective - trying to secure "ethics in time".

VI Influence on legislative procedures and other political decision-making

- Reports and opinions are presented to the Minister of Health and to the public, including the press.
- The results normally take the form of recommendations. Sometimes the result is debate-creating, without specific recommendations. After the debate a report with recommendations will often be made. The work of the Council has no binding force. (In the Scientific Ethical Review system, on the contrary, binding decisions approving or turning down applications for specific biomedical research projects are being made).

VII Participation

- Public debate is secured by creating material aiming at public debate and securing that the public has a chance to present opinions on the different topics. To involve the public is seen as very essential.
- The deliberations are closed - in order to ensure free discussion- but after the publishing of reports etc. many interviews, press conferences etc are being made.
- Hearings, public conferences, local seminars, videos, internet (www.etiskraad.dk) participation in debate on the radio, television etc.
- In some hearings representatives of political parties are asked to participate - and sometimes they participate in hearings as persons questioning experts and ethicist, including members of the Ethics Council.

VIII Financing and internal Structure

- The Council is funded by public means - via the Minister of Health's annual budget. No private sources
- There are restrictions as to the proportion used for salaries etc. Being funded by the public means the the Council is embraced by the same rules as other similar kinds of public authorities. But it is still independant regarding the choice of topics, the content of reports, a number of financial decisions etc.