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## **Impact of religious literature on bioethical decisions**

### **Abstract**

This paper examines how sacred writings from major world religions shape bioethical decision-making and moral behavior in health-care. It argues that the core principles of bioethics—beneficence, non-maleficence, autonomy, and justice—are deeply rooted in religious teachings found in texts such as the Bible, the Qur'an, the Vedas, and the Dhammapada. Through examples including the beginning of life, blood transfusions, human dignity, and end-of-life attitudes, the study demonstrates how scriptural values inform ethical reasoning. It also addresses the challenges of pluralism and diverse interpretations in applying religious teachings to modern healthcare. Despite these complexities, the paper concludes that sacred texts continue to offer a moral compass for ethical practice, emphasizing compassion, respect, and justice in pluralistic health-care settings.

**Keywords:** Bioethics, justice, moral values, interreligious dialogue

### **Introduction**

Bioethics is a discipline which focuses on human conduct and behaviour in the light of moral values. In a society, it is essential to trace the aspects of society and life which result in sound ethical behaviour. In the domain of health, the discipline of bioethics has grown exponentially due to the immense need. Traditionally, health and healthcare have been considered an area of noble discipline, and those who were involved were considered so great and noble since they exemplified the divine. We will agree that the health-related issues are so important since these issues decide life and death.

Being ethical is so important. The discipline of ethics highlights what are the qualities of a decision which is taken ethically. Benefi-

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cence, non-maleficence, respect for autonomy, and justice are some important aspects of ethics. We may ask a question: what are the things that influence ethical conduct? One's upbringing, family values, societal norms, religion or faith traditions, and culture in general would have an influence on ethical thinking and decision-making. In this paper, we will search for the links and influences between religious literature and bioethical decisions.

### **Values and ethics**

There are so many values which are respected well in society, and every culture has salient values to its credit. Many values are religious in nature. Values lead to a particular behaviour. Values are often caught rather than taught. Each one may hold different values so highly which guide him/her towards a particular action.

A conversation about ethics comes into the picture when a specific situation involves various values to be considered. Sometimes the values can even be conflicting. An ethical decision is made in consideration of the context, the factors in front of us and beyond us. There are different stakeholders involved in making a sound ethical decision. In bioethical discussions, we hold Beneficence, Non-maleficence, Autonomy/Respect, and Justice as core values, and the possible impact the decision taken will have on the persons concerned.

In this paper, I would like to concentrate on the role of religious literature in bioethical decision-making. When we say religious literature, we are not referring to any spiritual/religious writing of a religion. Rather, we refer to the official or canonized writings of a religion, which are used for public reading, memorizing, meditating, teaching, etc. We are also aware that some religions have oral traditions stronger than written traditions. In such situations, it will be difficult to pursue this search, yet not impossible.

### **Major religions and their significant scriptures / religious texts**

We are enlisting the following twelve religions and their scriptures. This is not a comprehensive list, yet we start our enquiry

with this list. In these religions, there may be other religious texts which are in use. However, we have listed out only the important and primary ones here.

**1. Christianity**

Bible – Old Testament and New Testament

**2. Hinduism**

Vedas (Rigveda, Yajurveda, Samaveda, Atharvaveda)

Upanishads (philosophical texts expanding on the Vedas)

**3. Islam**

Qur'an

**2. Buddhism**

Tripitaka (Pali Canon) – includes Vinaya, Sutta, and Abhidhamma Pitaka

Mahayana Sutras (e.g., *Lotus Sutra*, *Heart Sutra*)

**3. Jainism**

Agamas (canonical teachings of Mahavira)

**4. Sikhism**

Guru Granth Sahib

**5. Judaism**

Tanakh (Hebrew Bible) – includes Torah, Prophets, and Writings

Talmud (rabbinical commentaries on the Torah)

**8. Bahá'í Faith**

Kitáb-i-Aqdas (The Most Holy Book)

Kitáb-i-Íqán (The Book of Certitude)

**9. Zoroastrianism**

Avesta

**10. Confucianism**

Four Books (Analects, Mencius, The Great Learning, and The Doctrine of the Mean)

Five Classics (Book of Odes, Book of Documents, I Ching (Book of Changes), Book of Rites, and the Spring and Autumn Annals)

**11. Taoism (Daoism)**

Tao Te Ching

Zhuangzi

**12. Shinto**

**Kojiki (Records of Ancient Matters)**  
**Nihon Shoki (Chronicles of Japan)**

These religious texts/Scriptures are so valuable to their adherents. Some consider them as dictated by the divine, some as inspired by the divine and others as written/spoken by their religious leader/the representative of the divine. All of them consider their scriptures to have a clear defining impact on the life and conduct of the followers of that religion.

**Role of religion in the making of ethical values in society**

How ethical values are formed in any society is a great matter of interest. Different factors play an influential role in value formation. In a traditional society, elders function as guides to the younger generation. As people grow in numbers, different mechanisms are needed to keep the society in a particular conduct or behaviour.

Elsayed, K. G., Lestari, A. A., and Brougham, F. A. (2023), in their study, found “that young people who are actively involved in religious communities are more likely to exhibit prosocial behaviour, such as volunteerism, empathy, and moral reasoning, than those who are not involved in religious communities”. In most religious communities, the sacred texts play a pivotal role in determining the religious customs, norms and duties. Rewards and punishments are also determined by the religious texts.

Ethical thinking and considerations are handled with the scrutiny of different domains in life. From the beginning of human history, we see clear attempts to include ethical aspects in the general life situation. We see the Code of Hammurabi (c. 1754 B.C) indicating the way a physician should behave. The ethical codes prescribed in the Old Testament guide the modern healthcare professional to respect life, uphold human dignity, and care for the vulnerable. The guidance given in Bhagavad Gita has helped its adherents to fulfil his/her responsibilities with the sense of duty.

Language is a special privilege of human race. People from one geographical area share a language. Communicating through language has its own advantages. Yet, it is not without difficulties. We

are aware of the limitations of languages. Language can communicate only some parts of whatever is to be communicated.

### **Challenges regarding religious literature**

We are not unaware of the issues with regard to the sacred scriptures themselves. We want to highlight few challenges which a religious person faces in applying the scripture in different contexts of lives. I would like to divide this into five sections of the scripture: formation, transmission, exegesis, interpretation, and application.

**Formation:** In any human society, religion emerges as a way of life. It brings out acceptable ways of behaviour and conduct in private and public. Many societies formulate written texts to stabilise the teachings and guidelines in a religious setting. Even in those days when printing had not been invented, we see the formation of written religious texts in different civilisations in various formats. We need to point out that there is an interplay of power in finalising whether a particular text can be included as an official religious text or not (canon). In some traditions, written texts are not given much importance. Religious rules are passed on in oral traditions. Being aware of these dynamics will help us determine the meaning and implications of religious texts in a specific culture.

**Transmission:** When we want to determine the authority of a religious text in the life of a society, we need to understand how these texts are passed on from one generation to another. Before printing, copying of the texts was done with whatever means available, with utmost care and respect. In most societies, religious texts are given more respect than other texts in general.

When it has to be translated into various languages, the translators are assigned to accomplish the task religiously. We do recognize the possibility of changes from the original writing at this level. It could be intentional or inadvertent.

**Exegesis:** When a religious text is brought to a community or individual, there is a process of exegesis. This is an attempt to determine and bring out the meaning of the text. It might involve grammatical, literary and textual discussions. At this stage, there is no interpretation as such, only establishing who said what, etc.

There is a possibility that the meaning of the text is taken differently from the original context.

**Interpretation:** Interpretation of the scriptures or hermeneutics is an organised discipline which pays attention to the accuracy and originality of the religious writing, the cultural and intellectual background of the writers and readers. The interplay of the text and the context, along with the sender and recipient, brings the best meaning and the impact.

When an established religious text is used in a particular context, the user may adopt different methods of interpretation. Literal, allegorical, moral, and anagogical interpretations are some of them. It is possible that the user comes to significantly varied conclusions and applications based on the type of interpretation he or she uses. Therefore, it is even more important to discern which type of interpretation is appropriate, essential and the best in the context. A certain amount of consensus from the religious community in this aspect is essential. Because deviant interpretations can cause a lot of damage to the community and its well-being and harmony. We, human beings, have an extraordinary capacity to justify our ethical stand from the religious point of view. We use our arguments to justify our stance. This actually helps in some situations and is detrimental in others.

**Application:** In any religious context, the sacred text is interpreted by the believers or adherents and then applied in life. Application is a consequential part after interpretation. This results in specific conduct and behaviour. Some devout people take the rescue of compartmentalization between their lives and their faith/religion, thereby disallowing the scripture to influence their life and behaviour.

It is sobering to note that the sacred scriptures need to cross over various challenges to become influential in the human ethical conduct. In spite of this fact, the sacred scripture has a deep impact on the ethical conduct of human beings.

### **Religious underpinnings of the pillars of bioethics**

Normally, it is agreed that Beneficence, Non-maleficence, Auton-

omy/Respect and Justice are the four pillars of bioethics. If one looks at these closely, it is unavoidable to miss the links with the religious texts of those days. For example, the Golden Rule, “Do unto others as you would have them do to you” (Matthew 7.12) has been central to the thinking of the people when it came to help others. Various religious texts on respecting others and human dignity, justice and fairness can be quoted in the Christian faith traditions.

Tirukkural and Naaladiyaar are two important writings from the early second and third centuries which have significant sections on the ethical life of society (Naaladiyaar, Trans. G. U. Pope, 1963). These writings of sages have shaped the ethical conduct of society significantly, particularly in South India.

Sometimes, there is a tendency to think of the four pillars of bioethics as some secular entities, as if they had no link with the religious life of the community. Here, I would like to look at the four pillars of bioethics to see the link they have with the religious scriptures.

**1. Non-maleficence (“Do No Harm”).** The burden of the Christian scripture passages like Exodus 20:13 “You shall not murder” or Romans 13:10 “Love does no wrong to a neighbor” are underneath the principle ‘Non-maleficence’. The Hindu scripture Mahabharata 13.117.37 reads as “Non-violence is the highest virtue”. The Buddhist Dhammapada (v.129) mentions “All tremble at violence; all fear death”. These scriptures from different religions emphasise the point of non-maleficence. Once a Buddhist physician, quoting the religious principle of ahimsa, refused to participate in euthanasia. Instead, she used palliative care to reduce pain without intentionally ending life.

**2. Beneficence (“Do Good”).** For Christian healthcare professionals, the parable of the Good Samaritan (Luke 10:25-37) functions as a solid model for their daily professional context to do good beyond boundaries. *Surah al-Mā'idah* 5:32 of the Quran says, “Whoever saves one life—it is as if he had saved all mankind”. The *Tirukkural* states, “The life of those who help the helpless is the true life” (Kural, 212). During the recent COVID 19 pandemic, many religious persons went out of the way, even risking their lives, to do good to others in pain and suffering.

**3. Autonomy (“Respect for the Person”).** In the Jewish scriptures, there are many instances where God is explaining to human beings the positive and negative effects of following the instructions. However, the freedom is given to them to choose. In the Bhagavad Gita, Krishna told Arjuna “Reflect upon this fully, and then act as you wish” (BG 18:63). Surah al-Baqarah 2:256 from Quran states “There is no compulsion in religion”. On religious grounds, there have been many patients who refused to receive blood transfusions. However, knowing the need to uphold the principle of autonomy, the healthcare team, in many occasions, has accepted their denial, respecting the informed choice of the patient.

**4. Justice (“Fairness and Equity”).** Jewish Scripture Micah 6:8 makes ‘doing justice’ as one definite requirement from God. Surah an-Nisa 4:135 reads “stand out firmly for justice, even against yourselves”. Confucian ethics value righteousness and fairness in social relationships highly. Many hospitals have adopted a well-articulated triage policy to ensure justice is offered in healthcare delivery.

### **Specific situations in bioethical settings**

In the clinical setting in India, we have people coming from Hindu, Islamic, Jain, Sikh, Buddhist, Christian and Baha’i traditions. Occasionally, we do have patients from African religions and Chinese religions. Some of the religions have smaller sects which have distinct faith positions which may vary from the dominant groups. At this point, we should also remember that all religions may not have equal importance for the written traditions. Some of the religions may have stronger components of oral traditions.

We would like to look at some specific healthcare situations where ethical principles are followed based on the scriptural inspirations.

**1. Decisions pertaining to the beginning of life:** Healthcare is related to aspects from birth to death and beyond. With regard to the beginning of life, a question is often raised about the time when life begins. Abortion is a major issue which is determined by the religious values people hold. According to the Bible, the existence of a being starts from the time of conception (Psalm 139:13-16).

According to Islamic faith, the soul enters the fetus at about 120 days (4 months) (Rabbi Allan S Maller, 2019).

According to the Garbha Upanishad, the soul enters the embryo at the time of conception, the embryo gets jiva in the seventh month, and it becomes complete in the eighth month. In many religious traditions, the time of the soul entering the body is a matter of dispute. When should an embryo be considered a person? These decisions are indicated in some religions clearly and adhered to while taking ethical decisions pertaining to the beginning of life.

The stance of both the patients, relatives, and healthcare personnel is shaped by their religious texts, which they hold very highly. For example, abortion is strongly discouraged in the Baha'i faith (which was founded in the late 19<sup>th</sup> century and early 20<sup>th</sup> century), since the soul is present from conception. The embryo/fetus should be treated with respect, regardless how young it is. Their main religious text is The Book of Certitude, composed by Baha'u'llah in 1861.

**2. Use of blood in medical/surgical indications:** Bible references used by Jehovah's Witnesses are the following:

- **Acts 15:28-29:** "You abstain from what has been sacrificed to idols and from blood and from what is strangled and from fornication. If you keep yourselves from these, you will be well".
- **Leviticus 17:10:** "If anyone of the house of Israel or of the aliens who reside among them eats any blood, I will set my face against that person who eats blood, and will cut that person off from the people".
- **Deuteronomy 12:23:** "Only be sure that you do not eat the blood; for the blood is the life and you shall not eat the life with the meat."

Jehovah's Witnesses reject blood transfusions on religious grounds (D. Costanzo, 2020). The healthcare professionals honour their wish even though they don't feel it is in the best interest of the patient.

**3. Human Dignity:** According to Judaism and Christianity, human beings are created in the image of God (Genesis 1:26). When this religious literature is interpreted and applied in the context of

different health situations, there is a high value given to human beings. This value does not change because of health conditions, socio-economic conditions, or even moral conditions. Therefore, in the healthcare setting, irrespective of gender, class, caste, etc, a human being is given high dignity because a human being is understood to be created in God's image.

The Deuteronomic Code describes in detail how people should be respected in society (7<sup>th</sup> century BCE) (Deuteronomy 16:18-20). This has influenced those from Abrahamic religions to have basic human respect in bioethical decisions.

**4. Attitude towards death:** Scriptural references regarding death play a major role in different religions when making decisions regarding death. In Christianity, for example, it is clearly indicated that no one has 'power over the day of death' (Ecclesiastes 8:8); at the same time, there is a clear hope of resurrection (1 Corinthians 15:54). Therefore, we see polarised views on death-related decisions in Christianity.

In Buddhism, death is understood as something natural. This understanding helps one to turn away from suffering and towards the path of purification.

According to Buddhism death should not be seen as an enemy, rather as a natural process (S. Rinpoche, 2002). Therefore, the dynamic balance about death is maintained by many religious persons with the help of their religious texts.

**5. Sacrificial service:** During the COVID – 19 period, 2 Timothy 1:7 is one verse from the Bible which inspired many Christian healthcare personnel to care for the people courageously. "God did not give a spirit of cowardice, but rather a spirit of power and of love and of self-discipline". We saw so many Muslim volunteers (from Tamil Nadu Muslim Munnetra Kazhagam TMMK) come forward to give a dignified burial to those who died of COVID 19. We noticed that Islamic scriptures asking them to help those in need have inspired them (Surah Al-Insan 76:8–9). "They performed the last rites as per the wishes and customs of the families of the dead" (Times of India, 2021).

**6. Healthcare Research:** Stem cell research has a powerful ex-

ample for our discussion. Usage of embryonic stem cells is prohibited for research for faith reasons. It is a powerful example for the influence of religious literature on bioethical decisions. In so many countries, we are able to see this influence.

### **Challenges in application of religious texts**

**1. Religious pluralism:** There are many challenges in applying religious literature as a determinant of ethical decision making. One context which has to be kept in mind is the aspect of religious pluralism. We practice healthcare ethics in the midst of multiple religions. Various stakeholders in the healthcare may be adherents/followers of different religions. In such a context, how to be respectful to each other is an important consideration.

**2. Multiple stakeholders:** When a bioethical decision has to be taken, whose religious faith takes precedence? Patient's faith or Caregiver's faith?

**3. Multiple interpretations:** It is possible that people hold opposing views on bioethical matters even if they are from the same religion. The possibility of variations in the interpretation of the religious texts is definitely a challenge in this aspect.

### **Conclusion**

Religious literatures play a significant role in shaping the conduct of the society. Even though they are varied, there are many common threads of ethical stand emerging. Irrespective of the religion, each text goes through different stages like formation, transmission, exegesis, interpretation and application. They also have the challenges of misinterpretation, interpretation with biases and the lack of standardisation in interpretation. We have highlighted the link between religious texts and some bioethical contexts like beginning of life, use of blood in medical/surgical indications, human dignity, attitude towards death, sacrificial service and healthcare research.

When we see the powerful impact of religious texts in the bioethical standpoints, the need for awareness, sensitivity and respectful conduct becomes very clear. All the stakeholders of healthcare

need to be aware of the prevalent religious backgrounds and learn to be sensitive and respectful towards others' religious standpoints.

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