

The Power of Silence

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Résumé de l'article

En conversation avec le récent essai d'Hortense Gallois sur l'importance de la participation des bioéthicien(ne)s dans la sphère publique, je suggère que prendre la parole est aussi risqué qu'important. En me concentrant sur le détournement de l'expertise par les mouvements anti-trans, je souligne la frontière délicate entre contrer la désinformation et causer du tort par cause de paroles inopportunes. À l'aide des travaux d'Eva Feder Kittay, je suggère que savoir quand s'exprimer et quand garder le silence nécessite une compréhension des communautés dont nous parlons et des conséquences que nos paroles peuvent avoir sur elles.

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RÉPONSE À – TÉMOIGNAGE / RESPONSE TO - PERSPECTIVE

The Power of Silence

Florence Ashley^a

Texte discuté/Text discussed: H Gallois. [Discourse, narrative, and voice: the power of communicating bioethics through the media](#). *Can J Bioeth/Rev Can Bioeth*. 2024;7(1):23-25.

Résumé

En conversation avec le récent essai d'Hortense Gallois sur l'importance de la participation des bioéthicien(ne)s dans la sphère publique, je suggère que prendre la parole est aussi risqué qu'important. En me concentrant sur le détournement de l'expertise par les mouvements anti-trans, je souligne la frontière délicate entre contrer la désinformation et causer du tort par cause de paroles inopportunes. À l'aide des travaux d'Eva Feder Kittay, je suggère que savoir quand s'exprimer et quand garder le silence nécessite une compréhension des communautés dont nous parlons et des conséquences que nos paroles peuvent avoir sur elles.

Mots-clés

éducation populaire, obligations professionnelles, désinformation, groupes marginalisés, personnes transgenres

Abstract

In conversation with Hortense Gallois' recent essay on the importance of bioethicists participating in public discourse, I suggest that speaking up is as fraught as it is important. Focusing on the anti-trans movement's misuse of expertise, I highlight the fine line between correcting misinformation and inadvertently causing harm through ill-timed speech. Drawing on the work of Eva Feder Kittay, I suggest that knowing when to speak up and when to stay silent starts with understanding the communities we speak about and the consequences that our words can have on them.

Keywords

public education, professional obligations, misinformation, marginalized groups, transgender people

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Bioethics sits in a seat of authority at the table of public discourse. It is not always heard or listened to, to be sure. Yet it has nonetheless contributed if not shaped some of the most pressing conversations of our time. In her text "Discourse, narrative, and the voice" (1), Hortense Gallois argues that bioethicists should deploy their expertise to the benefit of the public by participating in public discourse, but rightly points to the risks of speaking hastily. The voices of the marginalized are frequently discounted and too easily sidestepped by experts who comment on matters of public interest. Less scrupulous bioethicists can also contribute to rather than counter misinformation, as the ongoing pandemic has taught us. I want to take the author's points about the importance yet dangers of contributing to public discourse as a place for further reflection. Speaking up is critical to the task of the bioethicist; even more so is knowing when and when not to speak. Can silence be a professional duty?

I come to this topic as one of few trans bioethicists. In recent years, a moral panic has erupted around access to gender-affirming care. Criminal bans on offering gender-affirming care to adolescents and, increasingly, adults are proliferating across the United States. These bans are not crafted in a void of scientific and bioethical expertise; rather, they are based in a manufactured expertise that strives to engineer scientific and bioethical arguments that align with the desired goal of ending gender-affirming care (2). The anti-trans movement is replete with expert authority. Some have proposed new theoretical constructs that give longstanding tropes of "social contagion" a pseudoscientific veneer (3). Others point to institutional reviews from Sweden, Finland, Norway, and England – countries with a long history of eugenics and who are known for their conservative approach to trans medicine – as supporting bans (4,5). Yet others appeal to evidence-based medicine to reproach trans care for not having randomized-controlled trials, their practical impossibility be damned (6). Canadian scholars have been instrumental to this latter argument, with two researchers from the Department of Health Research Methods, Evidence, and Impact at McMaster University being retained by the Florida Agency for Health Care Administration to provide an evidence review in support of its ban on gender-affirming care (7). Parallel arguments against lockdowns and mask mandates have also been made by Trump advisor Paul Alexander, who was trained at the same McMaster University department (8). Although these arguments are not predominantly made by bioethicists, they draw heavily from principlism and bioethical reasoning.

Bioethicists' engagement in public discourse can correct misinformation and give voice to the voiceless. Or it can spread misinformation and deprive entire communities of a voice, causing immense harm and injustice. Even when the speech strives to empower marginalized groups, it may do more harm than good. More public discourse is not always better, especially in times of moral panic. As we reap a hostility borne out of the trans tipping point, I am reminded of trans scholars' observation that visibility is not always a good (9,10). By intervening in public discourse, bioethicists can fan its flames. This is all-the-truer at a time when some journalists seem primed for prejudicial, sensationalistic coverage (11). If we are to recognize a professional duty to speak up, I suggest we also recognize a parallel duty to shut up. Bioethicists must know when not to speak, whether to prevent harm or to stay a while and listen.

A much longer essay would be needed to sort out how the duty to shut up should be applied, but a few thoughts may be warranted. My contemplations on scholarly ethics always bring me back to Eva Feder Kittay's maxims of ethical thinking (12). These maxims include: (a) know the people you use to make a point, (b) know what you don't know, (c) resist arrogantly imposing your own values, (d) attend to the consequences of your thinking.

Each of these points is of critical importance, but the first and last one bear emphasizing. Rarely do bioethicists take the time to sit down and listen to the communities they write on, be it disabled people, trans people, people of colour, or other groups. Failing to sit down and listen not only risks a disconnect between these communities' lived experiences and the public engagement of bioethicists, but in so doing, bioethicists fail to recognize that these communities are sites of knowledge and expertise. Philosophizing at a distance also shields bioethicists from the consequences of their work. As an ethical guide, Kanien'kehá:ka anthropologist Audra Simpson (13, p.198) asks herself: "Can this knowledge be used to hurt anyone? Can I go home after this?" In community with those I wrote on, I cannot forget the impact of my words and the dangers that besiege them. Those I've lost are tattooed on my back. Far easier to be a bioethicist when you do not see the despair in the eyes of those whose ability to live out their identity you've thwarted. Far easier, when you have never needed to comfort the crying mother of a trans child who took their life in Texas, assailed with blame that is rightly yours. Far easier, but far worse.

Bioethicists need to speak up, as Gallois (1) cogently sets out. They need to fight misinformation and empower the voiceless. But sometimes fighting misinformation and empowering the voiceless is best done in silence. Bioethicists must sometimes speak up and sometimes shut up. The greatest professional virtue is knowing when each is needed.

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