


Getting started in EMPIRICAL BIOETHICS


WHO IS THIS RESOURCE FOR?


- Researchers in philosophy, bioethics and related fields who are unfamiliar with empirical research
- HDRs or ECRs, from a variety of fields and disciplines, who are interested in or want to know more about empirical bioethics. These other disciplines might include legal scholars; sociologists; clinicians; health and medical researchers; philosophers; policy specialists; and many others.
- Researchers who want a useful reference bibliography for literature about empirical bioethics


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 **Version and date:** V1.2, December 2025

 **Citation:** Bowman-Smart H, Roxburgh N, Subramani S, Aquino YSJ, Dunn M (2025). "Getting Started in Empirical Bioethics". Version 1.2. Adelaide, Australia. [Access date]. URL: https://hilarybowmansmart.com/?page_id=390


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TABLE OF CONTENTS

- What is empirical bioethics? **3**
- Why do empirical research? **4**
- What topics do empirical bioethicists look at? **5**
- What makes empirical bioethics different from other fields? **6**
- Where's the philosophy? **7**
- Another way of thinking about it: drawing a map **8**
- Frequently Asked Questions **11**
- Articles and books to start with **14**
- Reference bibliography **15**



WHAT IS EMPIRICAL BIOETHICS?

Empirical bioethics involves exploring what *is* the case to help us think about what *should* be the case.

Empirical bioethicists think that practical ethical claims are advanced, in some way, by conducting empirical inquiry (e.g., interview studies) as part of the process of developing or analysing these claims.

Empirical bioethicists are a varied group of scholars, often with opposing views on ethical theory and with radically different disciplinary backgrounds and philosophies. But, like all bioethicists, we share the aims of thinking about ethical issues, trying to solve ethical problems, and making practical ethical claims about how healthcare, policy, research, or other related practical activities should be done.

As part of this, we do empirical research of various kinds (quantitative, qualitative, or mixed-methods).

► Methods we might use

We might talk to people one-on-one, lead focus groups, conduct online surveys, do statistical analysis of datasets, read stories, run citizen's juries, examine documents or forms, observe what people are doing, work alongside clinicians and researchers, make art, think about our own experiences - among many other approaches.

All the research we do is - one way or another - oriented around the questions of:

What should we do?

What should happen?

How should the world be?



WHY DO EMPIRICAL RESEARCH?

You can, of course, think about how the world should be without using empirical research. Some ethical or philosophical work might only look to empirical research to make sure that an argument is not just valid (makes sense), but is also sound (each premise is true).

However, empirical research can help us ensure our ethical work is relevant, useful and applicable to what is happening in the day-to-day of the world. By understanding what is actually happening in clinical practice, we can make practical suggestions for an ethical challenge healthcare professionals are facing.

Empirical research can also help us direct our inquiry - in the course of learning about patient views, we might identify new ethical issues that we had not yet thought about.

Doing empirical research can also help us reflect on our philosophical theories and ideas, and think about how they might be improved or changed - for example, we might get insights that prompt us to think more about our definition of "health" and "disease", or what it means to live a good life.



RELATED FIELDS

- Applied ethics • Bioethics • Applied philosophy • Moral psychology
- Experimental psychology • Applied epistemology • Political philosophy • Legal philosophy



WHAT TOPICS DO EMPIRICAL BIOETHICISTS LOOK AT?

Let's think about some examples of topics that empirical bioethicists might work on. Remember - the research questions and empirical methodologies we use are wide and varied!

EXPERIENCES, BELIEFS & ATTITUDES We often look at what kind of *experiences, beliefs and attitudes* people have. Those people might be the general public, or people with a specific kind of background, experience, identity, or role.

VIEWS ON ETHICAL ISSUES We may be interested in understanding *what people think about a particular ethical issue*, and why - for example, do they think euthanasia should be legally available, and under what circumstances?

ETHICAL REASONING At other times, we might explore *how people reason about ethics more broadly* - such as, is it always wrong to lie, or is it ok in some situations?

LIVED EXPERIENCES We might also seek to *understand people's lived experiences* - for instance, what does it feel like to be chronically ill, or to navigate a healthcare system that doesn't recognise your pain?

OUTCOMES & TRENDS We might also want to *analyse particular outcomes or trends* - for example, is it becoming more common for people to use a particular type of screening test?

SELF-REFLECTION This kind of inquiry isn't only directed outward. Empirical bioethics can also involve *reflecting on one's own experiences, beliefs, and ethical commitments*. The knowledge we gather, whether from others or ourselves, helps inform ethical reflection.

In summary: we use the results, information or knowledge that we've found out or developed (what we understand *is* the case) as part of our development, analysis or interrogation of a *normative position* (what *should* be the case).

There's a range of different approaches, but the key point is learning about the world as part of our thinking about how the world should be.

WHAT MAKES EMPIRICAL BIOETHICS DIFFERENT?

There is not a neat dividing line between empirical bioethics and other fields that do empirical research - it is by its nature a very interdisciplinary field.

KEY POINT: The primary point of differentiation is that empirical bioethics focuses on the *ethical and philosophical* dimensions of an issue.

As an example, the empirical research we conduct often aims to find out important and morally relevant information about a particular ethical issue. If we want to know who we should give vaccines to first in a pandemic, it's important to get answers to questions like this: who is most likely to be hurt or die from the disease? Who has historically been unjustly denied access to vaccines? How can we make sure as many people get access to the vaccine as possible?

Many other fields that use empirical methods, such as economics, sociology, and political science, also engage with similar questions. There may be overlap in the kinds of questions asked - however, the framings, priorities, and kinds of answers sought often differ, shaped by the disciplinary values and commitments guiding the inquiry.

► Example: Vaccine Distribution

For instance, researchers across different fields might begin with the same broad question: "How should we distribute vaccines in a pandemic?"

A health economist might approach this question by asking: What is the most cost-effective way to distribute vaccines? Or, what are the economic implications of various distribution strategies?

These questions, while grounded in empirical data, can already carry normative pre-suppositions about what outcomes are prioritised, such as economic efficiency or productivity. We might also want to think about whose voices, experiences, and values are being considered and whose are left out.

An empirical bioethicist might therefore ask questions that focus more on these normative elements: What is the most ethical way to distribute vaccines? Or, what are the ethical implications of our current distribution methods?



WHERE'S THE PHILOSOPHY?

Empirical bioethics isn't just about asking people what they think - it necessarily involves thinking about bigger ideas, positions or theories from ethics, epistemology, ontology, and other areas of scholarship.

Before we ask questions like "what is the most ethical way to distribute vaccines?", we need to think critically about what it actually means for a particular distribution of vaccines to be **"ethical"**.

What counts as "ethical" is shaped by which moral frameworks are being used, whose perspectives are being centered, and who is engaging in the deliberation.

For instance, a utilitarian framework might lead to very different conclusions than an ethics of care, or a justice-oriented approach rooted in historical marginalisation.

The way we do empirical research itself is also shaped by philosophical theories and ideas. There might be many different ways of understanding what "is the case". How we learn about the world can reflect our existing values and beliefs, and how we already think about how the world should be. This is why some scholars engage and practice reflexivity, where we reflect on these existing values and beliefs in the process of conducting our research.



ANOTHER WAY OF THINKING ABOUT IT

Drawing a map to figure out where to go

Let's try a metaphor to explain all these different levels!

You are a builder, and you live in a city. You walk through it every day, and there's lots of areas you know very well, though there's also some areas where you've never been.

Your city has a bit of a problem: there's a big river running right through the middle, and in parts of the city, it can be very difficult to cross to the other side. This makes things harder for people who live on one side of the river to do their grocery shopping or get to work, because most of the shops and workplaces are on the other side. Some people have family members on different sides of the river, which makes it a challenge to get everyone together for birthday parties.

The city council has come to you and asked for your help - they've got some money to build a new bridge, and they want to figure out where to build it.

So we have an (ethical) question: ***Where is the best place to build the new bridge?***

We might think we can figure that out just from abstract mathematical or engineering principles - so we decide not to go get our boots muddy walking up and down the riverbank. This might work, but a bridge is something material and concrete that people are going to use every day - it seems sensible that we should at least look at where the river runs.

A useful first step would be to look at a map. But all the maps you have are out-of-date, or they don't have the information you need, or they're actually of a different city altogether. None of the maps you have quite help you answer your question: ***where is the best place to build the new bridge?***

This means we need to make a map. But just as empirical bioethicists can use many different methodologies, so can you draw many different sorts of maps!



MAP METAPHOR (continued)

Some examples of sorts of maps you could draw to represent the city:

- **Topographic map**, which shows information about the terrain and the heights of the riverbank
- **Population density map**, to show which areas of the city are most crowded
- **Political district map**, to show which political party different areas of the city voted for
- **Road map**, which will help you navigate all the different streets, roads and highways
- **Train network map**, which is a very colourful and stylised diagram showing all the different train stations in the city, and connecting points
- **Tourist map**, with nice illustrations of all the big landmarks and tourist attractions
- **Historical map**, to show what the city looked like many years ago

No matter which type of map you make, you need to choose to show some things and not show others. No single map can show you everything about the city, or truly represent the city in its entirety (otherwise it wouldn't be a map - it would be the city itself!)

And when you're choosing which sort of map to draw, you've got to reflect on what it means for somewhere to be the "best" place to build the bridge. There might be a lot of disagreement or differences on what people think that means. This is where you reflect on bigger ethical, philosophical and theoretical ideas.

- *Is the "best" place the one that will look the most beautiful and win design awards?*
- *Or is it the place where the most people live?*
- *Should it be the place closest to the shops, schools and hospitals?*
- *Or, the place where it's cheapest to build the bridge, even if it might be far away from all those other things?*

Let's say you decide that, first, you are going to think about it in terms of where **the most people will be able to get across** (your conceptual framework or background theory). If you're doing it that way, it sounds like it would be useful to have a population density map to represent your city. So you go out and collect lots of information about how many people live where, and use this information to draw a map.

MAP METAPHOR (conclusion)

Remember, you are still making a lot of choices when you draw this map - you're not just neutrally representing information. For example, do you include temporary or short-term residents in your population density calculations? What if some people aren't represented in the official statistics? How are you making your calculations? So, you draw your map. Now here comes the tricky part - which is using it to think critically about where to build the bridge.

⚠ KEY INSIGHT: The map doesn't tell you, "here's where to build the bridge!". It shows you lots of important information, like that there's an area with lots of people living in it, but it *doesn't tell you that you should build the bridge there.*

That's because there might be other considerations to account for - for example, there might be some places where you can't build a bridge because they have religious or cultural significance. There could be some parts of the riverbank that aren't very structurally sound. You might want to build the bridge next to your own house, just so you personally can get to work really fast.

Taking all the various considerations into account, let's say that you now decide on somewhere you think is the best place to build the bridge. What do you do next?

You could decide to build the bridge yourself, or work with someone else who can do it. You might write a long and technical report to the council outlining your reasoning for why the bridge should be built there. You might write a fiery editorial in the city newspaper to convince others that this is where we must build the bridge!

THESE ARE THE STEPS

We have the city (the real world). To help us answer an ethical question, we go out and get some information (collect empirical data) to help us make a map (a representation of how the world is). However, the way we represent the world through our map is itself also shaped by our ideas and decisions (our ethical and philosophical commitments, our personal beliefs and values, lived experience, etc). Then, we use that map, and our ideas, to help us answer the ethical question.

Different researchers might draw different maps (representations of reality) to answer the same ethical question. Sometimes researchers might draw very similar maps to each other, but are asking different questions (varying approaches to conceptual analysis).

► Other questions we might ask with a population density map

- The council changed some building rules ten years ago - how did that affect where people live today?
- Where are there different communities in the city, and what are those communities like?
- If there's an earthquake, which areas will we need to evacuate to minimise casualties?

? FREQUENTLY ASKED QUESTIONS

? What about the "is-ought problem"?

Are we just saying that [what is the case should be the case](#)? Are we trying to make David Hume roll over in his grave?

No! A key part of doing empirical bioethics involves thinking a lot about the relationship between the 'is' and the 'ought'.

For some empirical bioethicists with a more analytic philosophical bent, there is an immediate concern with moving from an is (empirical data about some feature of the world) to an ought (an ethical claim about what should be done with regards to that feature of the world).

This is often referred to as the 'is-ought problem'. Put simply, it is the worry that empirical bioethics research might move too quickly from describing what is happening to making claims about what ought to happen, without providing the right kind of reasoning in between. For example, knowing that most patients or clinicians behave in a certain way does not, on its own, show that this behaviour is ethically justified.


To address this, some empirical bioethicists pay close attention to what are called "normative bridging" premises. These are the steps in an argument that explain how evidence about people's experiences, practices, or attitudes can meaningfully inform ethical claims. Much methodological work in empirical bioethics has been motivated by this challenge, developing ways of linking empirical research with ethical analysis so that the conclusions drawn are both valid and sound.

However, there are other ways of thinking about the is-ought problem.

For other scholars, empirical bioethics is motivated by a call to recognise that both the 'is' and the 'ought' are socially, culturally, historically, and politically situated. With this commitment in mind, the idea is that we need to recognise that neither the empirical observations we make, nor the ethical judgments we offer, are value-neutral or objective in any absolute sense. The progress to understanding the relationship between values-in-context, and the role of ethical thinking in shaping these values, demands a more socially grounded and responsive approach.

Approaching empirical bioethics in this second way often invokes deeper questions about the relationship between empirical facts and ethical values. From this perspective, the importance of grounding ethical thinking in social practices reflects a more fundamental commitment to how ethics should be practiced and how ethical claims should be formulated.

If you are familiar with philosophy or social theory, you might see similarities here to the difference between broadly "positivist" and "constructivist" approaches.

 **REMEMBER:** Regardless of these theoretical differences, it's important to remember this: when we learn information, explore the world around us, and collect empirical data, this information doesn't just tell us what should be the case in some simple or straightforward way. Rather, it informs and plays an important role in our analysis or understanding of what should be the case.

Precisely what role such data play, and how that data should be collected and analysed in the process of developing an ethical claim, lies at the heart of much contemporary thinking about how empirical bioethics should be practiced.

? How can you use empirical data in ethical analysis?

There are many different ways of using data in empirical bioethics - and there's a lot of debate about what "counts" as empirical bioethics.

Some people think about the "empirical" as being completely separate from the "normative". Perhaps you do one first, and then the other - you do a survey and then you draw on the results when you do your ethical analysis of an issue. Or, maybe you go back and forth between them.

Other people see the "empirical" and the "normative" as being inherently intertwined - you can't pull them apart. Your survey data and your ethical analysis are not separate steps at all.

This in part explains why there is such methodological variation, and much innovation, in the ways in which empirical bioethicists pursue their scholarly work.

CASE STUDY: *Should we keep cats indoors?*

You are interested in answering this ethical question: should we keep cats indoors? As part of this study, you conduct a survey of cat owners. Now, it could be that 95% of survey respondents tell you that it's horribly unethical to keep cats indoors. However, that doesn't mean that it is horribly unethical to keep cats indoors - you might come to the entirely opposite conclusion. But, it is useful to know that 95% of survey respondents think it's horribly unethical to keep cats indoors - and, if possible, why they think it's horribly unethical to keep cats indoors.

Do they have different values, principles and standards to you? Perhaps they are unaware that outdoor cats might kill native wildlife or have a higher risk of getting injured? Or, do they have a mistaken belief that keeping cats indoors gives the cats anxiety? Or, do you have a mistaken belief that keeping cats indoors has no effect on their anxiety? (Do you now need to go talk to some veterinarians?)

As empirical bioethicists, we could disagree with the majority of respondents! Plus, we might not necessarily end up saying "Having done this survey, I argue we should keep all cats indoors." We might also say something like: "Having done this survey, we should think about X, Y and Z when deciding whether to keep all cats indoors."

Or, we might say something like one of these statements:

- "Having done this survey, I would like to talk about an ethical consideration we haven't previously talked about when it comes to keeping all cats indoors."
- "Having done this survey, I think we do have a general moral obligation to keep cats indoors, but it might also be outweighed by other things in these specific circumstances."
- "Having done this survey, it seems like there are morally relevant differences between different geographic regions when we think about keeping cats indoors."
- "Having done this survey, I think we actually need to know what the cats think and feel before we decide whether we should keep all cats indoors."

Or we might realise we need to think about a completely different issue, like: "It turns out cats are actually creatures from outer space; how did they get here and what do they want?"

? How can I explain my research to people in other fields?

Working in empirical bioethics often means moving between different disciplines, and this can create uncertainty about your disciplinary "identity" - especially if you are early in your career!

Some researchers feel tied more closely to philosophy, others to social sciences or health research, while many sit somewhere in between. These different positions are not just abstract. They shape how you describe your work, the audiences you write for, and the methods you choose. Being clear about how you see yourself, and how you want others to see your research, can make it easier to navigate this space.

Another challenge is engaging with people who might not recognise empirical bioethics as a distinct approach. Some philosophers may assume empirical bioethics lacks sufficient engagement with theory or deeper philosophical ideas, while some social scientists may question what is "ethical" about empirical work.



TIP: In these moments, it helps to have a short and simple way of explaining what empirical bioethics is, why the empirical and the ethical need each other, and how the combination produces insights that neither approach could achieve on its own. Having concrete examples ready can make these conversations easier.

These issues also link to career decisions. Choosing where to publish, which conferences to attend, and which networks to build all involves weighing the audiences you most want to reach. You may sometimes feel pressure to fit into one discipline more than the other, but it can also be valuable to embrace the position of being in between. Seeking out mentors and peers who understand these tensions can provide useful guidance and support as you develop your own path.

? So, how do I get started?

There's no "one right way" to do empirical bioethics. Not only are there a wide range of different methodologies, there is also a lot of debate around how to classify and distinguish these different methodologies. You can choose an approach that is most suitable for you (see below for a list of some places to start).



KEY QUESTIONS TO CONSIDER

However, the most important thing is that you think carefully about, and are able to explain your answers to, the following questions:

- **WHY** am I collecting these data?
- **HOW** am I going to use these data as part of my ethical analysis?
- **WHERE** is the normative claim, position or element of my work? Where is the "should"?




ARTICLES & BOOKS TO START WITH

This is a list of articles and books that focus specifically on empirical bioethics. This can get you started, and provide an overview of different approaches and different schools of thought. But - it doesn't mean we've gotten everything!

You can also find this reference list as a group Zotero library here:

https://www.zotero.org/groups/6338029/empirical_bioethics/

 **SEARCH TIP:** Searching the literature in empirical bioethics presents particular challenges. Different disciplines (e.g. sociology, philosophy, anthropology) often address the same or closely related topics, but they may do so using different terms, theories, or conceptual frameworks. Because of this, important work can be overlooked if searches are not broad or flexible enough. Being aware of this, and deliberately looking across disciplinary boundaries, can help ensure that relevant insights are not missed.

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V1.2, December 2025
