

DOI: <https://doi.org/10.36719/2706-6185/52/130-137>

Mohammed Arbaoui

University of Algiers 2 - Abou EL Kacem Saadallah
<https://orcid.org/0009-0009-0561-9451>
medm2612@gmail.com

Hedad Badia

Mohamed Seddik Ben Yahia University, Jijel
<https://orcid.org/0009-0009-0560-7459>
badia.hedad@univ-jijel.dz

Value Change in the Context of Applied Ethics

Abstract

This study explores the transformation of values in contemporary societies under the influence of applied ethics, which has emerged as a response to the complex moral challenges posed by rapid scientific and technological progress. It examines how applied ethics — particularly in fields such as bioethics, medical ethics, and environmental ethics — has reshaped traditional moral frameworks and redefined the relationship between ethics, law, and human rights. The research highlights the growing interdependence between ethical reasoning and legal norms, showing how moral principles have increasingly influenced legislative developments. Through a critical analysis of philosophical and legal sources, the study reveals that value change in applied ethics is not merely a moral evolution but a structural shift in how modern societies negotiate the boundaries between individual autonomy, scientific innovation, and collective responsibility.

Keywords: *applied ethics, value change, bioethics, moral philosophy*

Məhəmməd Arbaui

Əlcəzair Universiteti 2 - Abou EL Kacem Saadallah
<https://orcid.org/0009-0009-0561-9451>
medm2612@gmail.com

Hedad Badia

Mohamed Seddik Ben Yahia Universiteti, Jijel
<https://orcid.org/0009-0009-0560-7459>
badia.hedad@univ-jijel.dz

Tətbiqi etika kontekstində dəyər dəyişikliyi

Xülasə

Bu tədqiqat, sürətli elmi və texnoloji tərəqqinin yaratdığı mürəkkəb mənəvi çağırışlara cavab olaraq meydana çıxan tətbiqi etikanın təsiri altında müasir cəmiyyətlərdə dəyərlərin transformasiyasını araşdırır. Tətbiqi etikanın — xüsusən də bioetika, tibbi etika və ətraf mühit etikasını kimi sahələrdə — ənənəvi mənəvi çərçivələri necə yenidən formalaşdırdığını və etika, hüquq və insan hüquqları arasındakı əlaqəni yenidən müəyyənləşdirdiyini izah edir.

Tədqiqat etik düşüncə ilə hüquqi normalar arasında artan qarşılıqlı asılılığı vurğulayır və əxlaqi prinsiplərin qanunvericilik inkişafına gətirdikcə daha çox təsir etdiyini göstərir. Fəlsəfi və hüquqi mənbələrin tənqidi təhlili vasitəsilə araşdırma, tətbiqi etikada dəyər dəyişikliyinə sadəcə mənəvi təkamül deyil, həm də müasir cəmiyyətlərin fərdi muxtariyyət, elmi innovasiya və kollektiv məsuliyyət arasındakı sərhədləri necə yenidən müəyyənləşdirdiyini nümayiş etdirən struktur dəyişiklik olduğunu ortaya qoyur.

Açar sözlər: *tətbiqi etika, dəyər dəyişikliyi, bioetika, əxlaq fəlsəfəsi*

Introduction

The development that has taken place in the field of biomedical sciences has led to the emergence of many problems that threaten human dignity and humanity. The unprecedented experiments conducted on humans in the hope of finding cures for incurable diseases did not take into consideration the dignity of the human being, resulting in a calamity for humanity and causing an imbalance between science and the requirements of respect for human beings. This situation raised the issue of regulating scientific research.

The preliminary stage of the emergence of bioethics was marked by a rebellion against the paternal authority exercised by doctors and coincided with an enormous technological revolution that affected medical and biological research. In addition, the violations and infringements of patients' rights and the degradation of their dignity led to the emergence of new issues, primarily of an ethical nature, related to the responsibility of doctors and the rights of patients. These include matters of reproduction, aging, chronic diseases and their complications, organ transplantation, dying, and genetic engineering experiments and research. However, attempts to address these issues by returning to classical medical ethics were unsuccessful, prompting the need to renew ethical thought in the hope that it could offer solutions to these issues.

Research

With the emergence of the term *bioethics* by Potter in the United States, and simultaneously with the establishment of *ethics committees* (*comités d'éthique*) by American authorities that included individuals not necessarily belonging to the fields of medicine or biology, several notable ethics committees appeared, such as "The National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research," "The President's Commission for the Study of Ethical Problems in Medicine," and "Hospital Ethics Committees." In Canada, there were "Ethics Committees Specialized in Scientific Research." However, all this regulation was not comprehensive across all states, as some adopted certain laws while rejecting others (Sgreccia, 1999, p. 23).

The birth of bioethics did not therefore originate from doctors' questions about the new powers offered by biology, but from the emergence of research in the medical field through the approval of internal management of the ethical issues raised by the technical applications of scientific research. The aim of medical circles involved in research was to avoid state supervision by establishing self-regulation, allowing monitoring by their peers. It thus concerns professional ethics specific to biomedical sciences (*déontologie médicale*), which are directly linked to the Hippocratic Oath (*serment d'Hippocrate*), a part of medical practice.

1. The Sliding of Ethics toward Law:

Recent international texts in the medical field have exhibited a high degree of integration between professional ethics and moral ethics, with no recorded conflict between them. Examples include the *Geneva Declaration* and the *Helsinki Declaration*, both adopted by the World Medical Association. The 1948 *Geneva Declaration* established a code containing binding principles for doctors and implicitly referred to the rules of professional ethics (*Déontologie*), which were collected into a code considered the first international code of medical professional ethics and, at the same time, the first international code of medical ethics (Massé, 2003, p. 78).

The *Helsinki Declaration* of 1964, adopted by the World Medical Association, endorsed the establishment of ethical foundations at the international level by incorporating professional ethical rules regarding biomedical research.

It is noted that these two texts (the 1948 *Geneva Declaration* and the 1964 *Helsinki Declaration*) introduced two dimensions: *professional ethics* and *moral ethics*.

Ethics, according to E. Sgreccia, is defined as "the science that studies human behavior and its relationship with moral values, principles, and standards." Meanwhile, R. Massé saw ethics as "a questioning of the moral foundations of social practices."

J.-F. Poisson specifically defined medical ethics as "the system that governs human actions between persons engaged in establishing a doctor-patient relationship." He did not stop there but extended his definition to *bioethics*, describing it as "the system that governs human actions between

a doctor and his patient, as well as in all research or experimentation on living beings, aiming ultimately at therapeutic application.”

It is observed that J.-F. Poisson distinguished *medical ethics* from *bioethics*, giving the latter a research and technological dimension (Poisson, 2003).

Ethical debate is therefore called upon to reflect on the foundations of science and to foster relationships between the scientific community and the society that receives the developments resulting from research and technology. This obliges ethics to possess rules applicable to doctors in particular and to science in general, while also introducing “duties of action” for doctors and referring to patients’ rights.

Ethics contributed to the creation, formulation, and codification of rules that became standards for some and were soon appropriated by legislators. Thus, could ethics serve as a reference for legal rules in bioethics? Did ethics contribute to developing and adapting these legal rules?

Undoubtedly, legislating bioethics requires a transition from ethics to law to establish a new normative system. Within bioethical debates, it became necessary to determine what ethics actually means—a difficult task given the multiplicity of definitions today. Before entering a specialized phase, the concept of ethics proposed a clear framework that clarifies and gives meaning. Yet understanding “ethics” seems increasingly complex because the fields referring to it have multiplied, and some principles replace one ethical system with another (Sgreccia, 1999).

Amid this plurality, E.Sgreccia proposed a “consensual completion” to avoid the risks—especially in bioethics—associated with moral rigidity, which restores absolute standards of existence on one hand, and opportunism on the other, where everyone seeks the greatest share of the results of actions without adequately justifying the ethical conception of “good” and on whose behalf one acts.

Given the complexity of ethical debate, can past moral references keep pace with scientific progress and changing social mentalities? Can they find relevance in the face of new or future situations?

Logically, ethics must evolve with scientific progress, constantly renewing itself—though this may cause it to lose legitimacy. Thus, does the goal of ethics lie in allowing law to adapt to scientific developments?

The slide of ethics into the legal sphere resulted from a new conception of ethics centered around the concept of responsibility, without denying the values on which it was founded. Faced with the obsolescence of traditional moral values, new questions emerged, while others disappeared due to their inability to coexist with scientific and social development, making them obsolete or even restrictive. Yet this does not mean that moral reflection has vanished—the spread of the “ethics of responsibility” is proof. Humanity must answer to the future—and to its own future (Jonas, n.d.).

Hans Jonas’s idea of the *Principle of Responsibility* drew great interest. Dominique Folscheid explained it as follows: “Because scientific rationality, supported by potential biochemical and medical technologies, can take on the face of a zealous believer, it is also capable of destroying or transforming humanity by employing new forms or even illusions of determinism. Contemporary ethics must therefore advocate an ethics of responsibility tied to the future of humanity.”

Practically, the production of ethical norms seeks to safeguard individuals, addressing human beings in both their individuality and collectivity, invoking the personal and political spheres—especially when humanity itself is concerned. Establishing an ethical rule thus expresses a will to ensure that ethics does not remain mere discourse, but transitions from abstract expression of values to formal inclusion in a framework imposed upon society—granting ethics procedural authority.

However, the process of preparing ethical norms constitutes, as L. Martinez sees it, “a process of construction based on a certain formalist doctrine, resulting from the deliberations of an ethics body or committee... operating according to a specific methodology, sometimes codified. Ethics cannot be identical to law.”

And even if ethics is not identical to law, can it be considered a source of it?

The sliding of ethics toward law creates a dynamic between the two spheres. Law evolves through adaptation to ethical issues. In this sense, one can speak of *bioethics law*—a law that responds to

ethical questions and scientific inquiries. In other words, it seeks reconciliation between humans and the scientific developments they themselves produced, aiming to establish rules for the “good” use of science in a harmonious relationship between the individual and the doctor (Folschied, 1997).

Law should therefore evolve into a law imbued with ethical values, attempting to respond to many questions by returning to moral references. Parallel to this, scientific progress has produced complex consequences, accelerating questions such as: If ethical reflection has a place, must it be transcribed to become readable and verifiable in its principles of regulation, even though only law can provide such structure? Is it appropriate to entrust this task to law?

From the foundational texts of bioethics, it is clear that ethics slid toward law, thus shaping bioethical thinking—translating moral principles into legal form, clarifying what applies to bioethics law and what this law will entail.

“The transition from ethical or professional-ethical norms into the legal sphere testifies to the precedence of ethical or professional-ethical rules over legal norms. Law has thus drawn from and adapted to their substance, binding itself to their requirements.” Law confers legitimacy and recognition upon them, yet the transfer of ethics into the legal domain had repercussions for law itself, just as it had reciprocal effects on ethics, creating a dynamic interaction between medical ethics and law (Martinez, 2004).

“Professional ethics is a regulatory medical discipline that aims to organize medical professionalism systematically with binding special laws.”

At the French governmental level, the issue of the legal value of medical professional ethics standards is no longer raised seriously, as their normative status, though evolving, remains somewhat unclear despite their reflection in law through a long developmental process.

“This discipline—medical professional ethics—has legal value through its legal provisions. Even some legal texts of professional medical ethics have served as references, such as the international code of medical ethics issued by the World Medical Association, as well as various charters and resolutions.”

Awareness of the questions raised by scientific developments and the ethical debates surrounding them underscores the difficulty of setting boundaries for research—hence the recourse to ethics, defined by Professor Jean Bernard as “the science that takes into account the management and governance of conscience and the set of norms arising from respect for procedure (Gwicon, Lokiek, Vacarie, 2000).”

The importance granted to ethics and its incorporation into the legal field led to the production of multiple opinions that enriched the law, which might otherwise have remained overly reductionist had it not drawn upon ethics—limited to political and legal dimensions, it would have excluded social perspectives, which are crucial. The scientific developments, particularly in medicine and the accompanying inventions, called for the creation of new normative or non-normative rules from fresh sources.

“The key conclusion is that there has been a transformation from the normative conception of ethics linked to individual conscience toward a more binding regulator—law—which has local, national, and international social depth. This is what scholars mean when they speak of the transition from ethics to law.” (Charter of Hospital Physicians, 1967).

2. Bioethics and Law:

It is known that law exists to regulate human relationships within society by organizing individual interests and resolving conflicts—all within the basic values of a particular society or culture, through the imposition of rules. It seeks the greatest common denominator accepted by society and is thus not far removed from moral values. There exists a form of containment, inclusion, and mutual influence between law and ethics, as law reflects societal consensus or the views of certain interest groups, aiming to protect and promote values beneficial to society. This is reflected in numerous legal texts (charters of rights and freedoms). Yet law remains less strict and less comprehensive than ethics.

Integrating ethics into law aims to reflect on moral principles and translate them into standards by establishing a framework consistent with the desire to monitor science—expanding the field of

law, which sometimes narrows. Ethics grants human beings the freedom to assert certain principles, with the principle of free consent standing as testimony to this entitlement and affirmation of freedom.

The 21st century witnessed the emergence of ethical laws that served as precursors to future committees. However, the content of these laws remained disappointing because their essence and substance focused only on regulation and access to the medical profession. This means that ethical debate was expected to take place globally, though prematurely. In his *Project for Perpetual Peace* (1795), Kant alerted us to such an endeavor that could justify the imposition of a unilateral ethics—such as that originating from the West and imposed on the rest of the world (Terrier, 2002).

Parallel to scientific and research advances, bodies such as ethics committees emerged, linked to specific fields. The first committees appeared in the 1970s, focusing on research areas and establishing guidelines for projects. They later extended to hospital and clinical settings, aiming to protect practitioners by regulating medical responsibility, and subsequently addressed social and existential concerns.

A key question regarding these committees and bodies framing ethics is the legitimacy of their actions. Can ethics be both familiar and regulated? What value can be granted to their reports and opinions? Can they acquire legal force? If one accepts that the texts produced by these committees lack normative status, can we nonetheless consider that their texts “influence legal thought”? Even if they are mere recommendations, do their effects impact the law? Should ethical bodies have been given a role in shaping law?

Theoretically, the opinions of ethics committees have no legal value; they are, in fact, characterized by a special kind of legitimacy that can be termed *pre-legislative*, marking the link between ethics and law, and between ethics and politics. Law is influenced by ethical reflection and inherits, at the same time, what multidisciplinary debate and even doubt have produced (Amir, 2014).

Doubt arises both from the accumulation and instability of knowledge at a given level and from the constantly evolving nature of life sciences, which continuously raises new questions. On January 18, 2001, C.Byk, in announcing the preliminary project for revising bioethics laws, stated that “the National Consultative Committee on Ethics has become a true ‘Council of State for Bioethics.’ In addition to its advisory and reflective role, it produces pre-normative work that gives legitimacy to proposals at the political level. It does not act merely as a legal advisor but contributes effectively to the creation of norms through opinions and recommendations. We can affirm that its opinions and texts, even indirectly, have a legal effect through their influence or translation into legal standards.” This is an important clarification of the phenomenon of *inter-normativity* (As was the case in British laws of 1803 and American laws of 1947).

The influence of ethical references and recourse to committees undoubtedly leads to consequences on the legal standard, although the form of these ethical references, opinions, and recommendations is also influenced by law. This is what J.C.Galloux noted when he stated that “ethical committees deepen their legal analysis considerably when they are asked to give their opinion on a given project or on the preliminary draft of a particular law. This observation also applies to several committees such as the European Group on Ethics (G.E.E.), the Steering Committee on Bioethics (C.D.B.I.), and even the International Bioethics Committee (C.I.B.)” The formal or procedural framework surrounding the work of the National Consultative Committee on Ethics has thus contributed to reinforcing its legal character, in addition to the emergence of the phenomenon of *inter-normativity*, which continually leads to a richer law because it stems from multiple sources. This, however, creates a problem characterized by caution and difficulty when interpreting laws that appear complex due to their connection with bioethics and its inherently intricate nature (Byk, 2001).

Several ethical principles have established themselves as the foundation of bioethics as codified on July 29, 1994, and these principles have acquired the status of “fundamental ethical principles.” The indivisibility of the human person was the most important of these principles, from which was derived the prohibition of treating the human body as property and of any commercial transactions involving it—thus establishing the rule of gratuity in bioethics—followed by the principle of the individual’s free and informed consent (Byk, 2001, p. 1378).

Law has limited understanding of medical issues and the disputes that may arise from them, which has compelled it to open up to the discipline of medical deontology, which is independent of law. “It has developed in an interesting way to the point of achieving normative status, thereby becoming a recognized customary rule. In 1971, the Constitutional Council decided to elevate certain rules of deontology to the rank of fundamental principles, and the Council of State also did the same through its rulings, examining the constitutional value of these principles and questioning whether they were equivalent to the fundamental principles recognized by the laws of the Republic.” It seems that the Constitutional Council was not explicit in its wording regarding the recognition and granting of value to these principles, as it affirmed that they possess a special nature and a higher normative character—a value reinforced by their reception among medical professionals and even by actors in French society. Thus, the integration of deontology into the legal sphere, its implementation by official bodies, and the recognition of certain rules as fundamental principles are sufficient indicators of the interconnection between law and medical deontology (Galloux, 1993).

By the end of the 1980s, scientific capacities were developing rapidly, making it urgent to create a legislative framework. The remarkable progress of scientific research, particularly in genetic engineering, awakened society to new ethical questions that did not exist before 1988.

This was expressed by N. Le Noir in 1991 in his report: “There is a pressing and urgent need to construct a new ethics consistent with current scientific progress, which has brought about real revolutions for the human species. In practice, the call to establish such ethics translates into a project to create a law founded on biomedical ethical principles... These rules are therefore presented as the foundational principles of law, around which actions and practices will be organized. While the legislative aspect of this task is necessary as it lays the groundwork for a law that provides a clear framework for ethics, the latter – ‘ethics’—appears as the guiding thread of this project” (Le Noir, & Sturles, 1991).

It can be said that Le Noir’s 1991 report represents a concrete step toward establishing a legal framework addressing biomedical ethics and its practical aspects. Biomedical ethics began accusing “old” ethics of stagnation and incapacity to keep pace with scientific progress, unable to provide answers within non-adaptive principles. The human being had become an object of experimentation, and science prided itself on its ability to reconstruct humanity itself. Science thus compelled a rethinking of the human being, producing a new situation that required innovative responses, a redefined ethics, and laws to govern them.

This scientific revolution relies on what science has granted it—knowledge—to ensure that ethics subsequently directs and regulates the actions derived from this scientific transformation. This led to calls for the formation of a new ethical system, as humankind and science had, for the first time, acquired the power and responsibility to alter the human species (Byk, 2005, p. 953).

It was therefore highly appropriate to regulate what science and humanity held in their hands and to translate that regulation into enforceable legislative texts. The legislative initiative in France took shape in 1994, following an in-depth study of ethics. The relationship between ethics and action appeared to have been reversed, as ethics came to exert its influence on the normative field of bioethics with the initiation of legislation that aimed to guide the creation of a new ethics. This was expressed by C. Byk: “Bioethics and law form a two-edged outlet in their pursuit of values and norms. This is recorded within the ‘normative world,’ which is nourished by a strong rationality of principles and methodologies. Yet, while embedding bioethics in law seems to strengthen it by providing guarantees for organizing and establishing institutions within the scientific and bioethical domain, the shortcomings of the law have also revealed objections and criticisms toward the values constructed through a part of science. Thus, the protection of human rights has imposed itself as a defensive mechanism for both the individual and humanity as a whole” (Hottois, 1993).

3. Bioethics and Human Rights:

Bioethics, in its European approach, is strongly linked to the concept of human rights.

Numerous studies and scientific conferences have dealt with the topic of “Medicine and Human Rights.” Modern technology has given new powers to doctors and researchers, and human rights have

called for their regulation. The concept of *human rights* refers to “the set of universal rights that every individual can claim simply by belonging to the human species. Human rights prevail in principle over any rule, law, procedure, or practice established by any authority whatsoever. These rights are absolutely fundamental and inalienable” (Doucet, n.d., pp. 334–335).

Three conceptions of rights can be distinguished:

- **The conception of human rights as natural rights**, meaning they are connected to natural law and founded on religious and metaphysical principles. They were conceived through reflection on the rights of others, in connection with natural law and the rational law established by reason. These two meanings—natural law and natural right—link human rights to ethics, as they are based on human dignity and respect. All humans are equal regardless of gender, religion, race, or nationality. In this conception, rights are not limited by codified laws, which has led to criticism of positive laws and moral systems.

- **The conception of human rights as fundamental law**: after some rights were codified in charters, constitutions, and treaties, they became, through constitutional recognition, a mediator between ethics and positive law.

- **The conception of human rights as the foundation of legislation**, as is the case in France and within the European Union, where human rights are explicitly embedded in the basic texts of positive law. These texts frequently refer to bioethical laws, thereby giving them binding legal force and opening the way for legal rather than moral interpretation — “one of notable coercive strength but of more limited scope.” Robert Badinter believes that human rights should serve as a source of inspiration for legislators in the field of life sciences generally. He calls for expanding existing legal concepts—such as the right to life, the right to health and safety, and the right to privacy—to include new issues like artificial reproduction techniques, organ donation, and research on embryos: “The reflection and regulation of these developments in medicine and biology find their justification in human rights” (Badinter, n.d., p. 10).

Meanwhile, Gilbert Hottois tempers the enthusiasm of those who believe that the concept of human rights can offer solutions to all bioethical problems. He argues that while some bioethical issues can find reference within the general framework of human rights, others remain ambiguous. In some cases, these issues are unclear or undecidable. When emphasis is placed on individual freedom—including freedom of research—it may conflict with other values derived from human rights, such as dignity, equality, or even the balance between individual freedom and protection and the collective good (Hottois, 1993, p. 160).

Furthermore, there are issues that cannot be resolved by reference to human rights: “The human rights recognized in 1948 may inspire some questions but do not provide clear answers,” given the rapid evolution of biomedical sciences—such as research on human embryos, the human genome, genetic manipulation, and artificial reproduction technologies.

Guy Durand, however, does not oppose the consensus that the concept of human rights, whether viewed as natural or rational rights, rests on respect for human dignity—both as an individual and as a member of humanity. Thus, “human rights will be one of the main inspiring sources of legislation in the field of bioethics (Durand, n.d., p. 137).

Conclusion

The study of value change in the context of applied ethics reveals a profound transformation in the moral, legal, and social frameworks that guide contemporary human action. Applied ethics, emerging from the intersection of philosophy, science, and law, has redefined the meaning and function of moral values in response to the challenges posed by biotechnology, medical innovation, and technological advancement. This shift demonstrates that ethical reasoning is no longer confined to abstract moral theory but has become a dynamic process embedded within real-world practices and institutional structures.

The evolution of values within applied ethics reflects a move from traditional, universal moral codes toward context-sensitive principles that emphasize responsibility, human dignity, and the

protection of life. It underscores the need for continuous dialogue between ethics and law, ensuring that normative systems evolve in tandem with scientific progress while preserving the fundamental rights and integrity of the human person. Ultimately, value change in applied ethics represents not the erosion of moral foundations, but their renewal — a necessary adaptation to an era in which human agency, science, and technology are inseparably intertwined.

References

1. Sgreccia, E. (1999). *Manual of bioethics: The foundations of biomedical ethics* (R. Hiyon, Trans.). Wilson & Lafleur Ltd.
2. Massé, R. (2003). *Ethics and public health: Issues, values, and normativity*. Laval University Press.
3. Poisson, J.-F. (2003). *Bioethics, ethics, and humanism: The French laws of 1994*. Bordeaux: Hospital Studies Editions.
4. Sgreccia, E. (1999). *Manual of bioethics: The foundations of biomedical ethics* (R. Hiyon, Trans.). Wilson & Lafleur Ltd.
5. Jonas, H. (n.d.). *The imperative of responsibility: In search of an ethics for the technological age*.
6. Folschied, D. (1997). The question of values. In *Philosophy, ethics, and the law of Medicine* 92. R.V.F.
7. Martinez, L. (2004). *Manual of the National Consultative Committee on Ethics*. Bordeaux: Hospital Studies Editions.
8. Gwicon, A. S., Lokiek, P., & Vacarie, I. (2000). *Biomedical research report and proceduralization of law*. Roneo.
9. Charter of Hospital Physicians. (1967); Charter of Physicians of the European Union. (1996); United Nations General Assembly Resolution No. 194/37.
10. Terrier, E. (2002). *Medical deontology and law* (Thesis collection). Hospital Studies Editions.
11. Amir, A. Z. (2014). Bioethics, philosophy, and law. In A. A. Al-Mohammadawi (Ed.), *Bioethics and the philosophical mission* (H. Mossadeq, Pref.). Difaf–Ikhtilaf Publications.
12. British laws of 1803 and American laws of 1947. (Contextual reference, not a separate source.)
13. Byk, C. (2001). *Bioethical chronicle*. Consultative Journal of Parliament, 2001-I-336, 1370.
14. Galloux, J.-C. (1993). Is the Consultative Committee for Life and Health Sciences an authority of doctrine? *Legal Doctrine*. PUF.
15. Byk, C. (2001). *Bioethical chronicle*. Consultative Journal of Parliament, 2001-I-336, 1372.
16. Le Noir, N., & Sturles, B. (1991). *At the frontiers of life*. French Documentation.
17. Byk, C. (2005). *Bioethics, legalization, jurisprudence, and opinions of ethical bodies*. *The Legal Week, General Edition, Doctrine*, Chrono No. 21, May 25.
18. Hottois, G. (1993). Human rights. In *The words of bioethics: An encyclopedic vocabulary*. De Boeck–Wesmael/ERPI.
19. Doucet, H. (n.d.). *Manual of bioethics*. 334–335.
20. Badinter, R. (n.d.). *Human rights and ethics*. 10.
21. Hottois, G. (1993). *The words of bioethics: An encyclopedic vocabulary*. Brussels–Montreal: De Boeck–Wesmael/ERPI.
22. Durand, G. (n.d.). *Introduction to bioethics*.

Received: 12.04.2025

Accepted: 28.09.2025