Chapter 4
The Need for Global Standards in Biomedical Ethics and the Qualitative Methodology

F. Sigmund Topor
Keio University, Japan

ABSTRACT

The unity of humanity has placed the role of culture in maintaining wellness and coping with illness under examination in biomedical research. The qualitative methodology, which is the method most widely used in healthcare research, been placed under the globalization microscope for its role in intercultural biomedical research. Neither does the etiology of diseases such as, for example, the common cold, the adenovirus and influenza respiratory viruses, among others, nor treatments of such ailments distinguish between the religious, geographic, and linguistic dissimilarities that violate the unity of humanity. The subjectivity that clods investigators of various cultural backgrounds and disciplinary stripes, deems it expedient that stakeholders be provided with the means to ontologically verify research findings. Researchers employing the qualitative methodology can mitigate subjectivity and enhance objectivity by being culturally cognizant. The unity of humanity is manifested in healthcare and transcends national borders, laws, ethics, and customs.

INTRODUCTION

Cross-cultural research employing qualitative methodology presents challenges that were not contemplated in a preglobalized world. This chapter discusses the need for a global standard in biomedical research given the global unity of the human condition. All human activities conditionally arise from ethical convictions that are nurtured and enshrined by their respective sociocultural institutions. As humans, researchers see the world through culturally conditioned perceptibility. Given differences exemplified by empirical vs. holistic epistemologies, the need to balance local or cultural research prescriptions against those of a global or universal regimen becomes ever-pressing. The use of technology such as robots also incorporates moral standards in healthcare.

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The individualism of Western cultures counters collectivism in Eastern cultures of China, Japan, Korea, and other countries. Collectivist societies prefer group harmony to individual initiatives. Whereas egalitarianism is advocated and practiced in Western cultures (e.g., North America and Europe), hierarchy based on social class, age, gender, and other attributes may inform qualitative data in, for instance, Japan (Cockerham, Lueschen, Kunz, & Spaeth, 1986; Ishikawa & Yamazaki, 2005). In contrast to Japan's venerated social hierarchy and status quo, change is encouraged and sought in Western societies. Belonging to a group-oriented society, individuals in Japan typically adhere to customs, tradition, and the status quo unremittingly (Hofstede, Hofstede, & Minkov, 1997), as opposed to the dynamic individualism in Western societies. However, such differences need not prevail at the peril of the health and welfare of humanity. The background, pathophysiology, and epidemiology of diseases clearly indicate the similarities of humans everywhere (Centers for Disease Control and Prevention, 2007).

Neither does the etiology of diseases such as, for example, the common cold, the adenovirus, and influenza respiratory viruses (Couch, 2001; Heikkinen & Järvinen, 2003; Lee et al., 2007; Ljungman et al., 2001; Marcone et al., 2013; Wright et al., 2007; Yuen et al., 1998), nor treatment of such ailments distinguish between the geographic, licit, ethical, and linguistic dissimilarities that violate the human condition (Heron, 1996; Kleinman, 1988), herein referred to as the *unity of humanity*. One of the most troubling phenomena that tend to annul the unity of humanity pertains to epistemological differences that both inform and invalidate research methodologies adopted in Eastern and Western civilizations.

In high-context cultures such as Japan (Hofstede et al., 1997; Kim, Pan, & Park, 1998), informants are often needed for translation purposes. As the Japanese language is imbued with multiple layers of politeness and other distinctive differences based on age (Hinds, 1971, 1975; Topor, 2013), syntactic and lexical distinctions between male and female speech (Loveday, 1981; Miller, 1967; Neustupny, 1978), and social status (Hidaka, 2010; Hinds, 1971, 1975; Ide, 1982; Inoue, 2002; Loveday, 1981; Suzuki, 1976, 1978), interpretative precision often depends on the social hierarchical juxtaposition of the interpreter and the informant. An informant–interpreter mismatch can potentially distort the data obtained in such scenarios (Hirano, 1999).

Given the burgeoning array of multiculturalism engendered by globalization, the need for global research has never been greater. Globalization can be summed up in one word: transfer—(a) of labor or skills (Berman & Machin, 2000; Taplin, 1997), (b) of knowledge or information (Inkpen & Tsang, 2005; Rodrik, 1997), (c) of capital or wealth (Tobin, 2000), and (d) of technology or dexterity (Bresnahan & Trajtenberg, 1995; Selinger, 2009) across continents and national borders. All attributes associated with globalization have had socioeconomic implications for all nations, cultures, and individuals. Globalization has facilitated the dissolution of trade barriers that were erected by national laws to safeguard and protect local manufacturing, technology, labor, skills—all financial and human capital.

The transcultural transplantation of human capital, a natural consequence of globalization, continues to accompany all the transfers subsumed under the globalization marvel. Universities continue to lead such transfers (Bouchard & Lemmens, 2008). Harmonization requires agreeable operationalization of variables through clear identifications, definitions, measurements, and so on (Calder, Phillips, & Tybout, 1981; Kazdin, 1998). Global results from research that are beneficial to humanity are generalizable only when intentions and conclusions are obviously well defined and transcend the locality of the research. Consistent with the unity of humanity, local healthcare needs are no less different from global requirements, even as societies and philosophies differ—Confucianism and Cartesianism being examples of Eastern and Western notions of ethics.