



A Quarter Century's Worth of Furniture

by Howard Brody

What is it like leaving the place that has been my home for the past quarter century? I grew up here, as a professional and in other ways. New vistas and new challenges are exciting, but it is very difficult to leave behind my housemates who have been with me this for so long.

One of the colleagues in the new home I am going to paid me a nice compliment. He had last spent time with me up close about 14 years ago. He had thought that back then I showed a number of good qualities, but he was also pleased to see that today some of the rough edges had been rubbed off. If he's right, I have no doubt that my housemates helped a lot with the sandpaper.

As much as I will miss my housemates, they have made me a very handsome offer. They are going to let me take some of the furniture from the old place with me. In my new home, I'll be able to look fondly at these furnishings and remember my former associates all the more clearly.

So what do I plan to take with me?

First off, there is competence and professional responsibility. My housemates are teachers down to the marrow of their bones. They care deeply that those who come into contact with us take away something of value. I have never done teaching with any of them when I have not taken away some new tips on how to become a better teacher.

Next, I had thought of taking honesty. When I was starting to think about leaving, I took the first opportunity to talk with all my housemates about my thoughts, plans, and concerns. It would have been unfathomable to treat them any other way. Any hesitation or prevarication on my part would have been a churlish recompense for the way that they have treated me for so many years.

I definitely want to take compassion. This past year, which caused me to consider leaving the place that had been my home for so long, was in some ways very painful. At every step, I felt the support of my housemates. When one of our beloved housemates died recently, the sense of loss and the concern for her family were palpable as one walked though the rooms of our house. I hope to live up to this standard of compassion in how I treat all my new colleagues in my new place.

Respect for others is another thing I want to bring with me. In our house, we have taken many actions and made many decisions. I cannot recall when, if ever, we did anything by vote. We have talked and discussed and listened, and always have found ways to agree on what was best. Again, I hope to be able to rise to that standard in how I treat my new colleagues.

Finally, there is social responsibility. My housemates have always been concerned for those who are ignored by our society, those whose voices have not been heard. They have taught me that this thing we call bioethics and humanities in health care is not worth calling as such if it does not welcome the voices that have not been heard and adopt the concerns that have not been addressed.

I hope that some of our students in the College of Human Medicine read what I have written here. They will, I trust, recognize my furniture inventory. In the College, we call this list the virtues of professionalism. We hope that they will strive toward these virtues in how they treat their patients.

I hope that my faculty colleagues in other departments are as fortunate as I have been. I hope you can say that you treat each other the same way that my housemates have treated me—that as faculty, we model for ourselves and our colleagues, as well as for our students, this list of virtues. (If not, I invite you to imagine how things could change.)

There is one immensely rewarding thing about my furniture inventory. I can take as much of this furniture with me as I can possibly haul away, and plenty will still remain in the house that I am leaving.



Transitions

by Judith Andre

Unlike Howard Brody, I'm not leaving home. I'm just moving across the hall. Like him, I appreciate the people with whom I work, and their company—professional and personal—is one reason I'm staying, working part-time for a few years.

My new office is smaller, befitting my reduced commitments. I have left some tasks behind in order to focus on others. What keeps me here—besides the company of my colleagues and the state of my bank account—is the desire to work with the focus that only sabbaticals have provided me before. For academics, as for artists and scientists, it is a luxury and a joy to be able to think solely about one's work. Sometimes those hours are undistracted; but even distractions are often fruitful, because my energies are centered on one major project. Whatever is at the forefront of my mind, at the back, ideas are germinating and bearing fruit—understanding grows even, or even especially, when I am not aware of it. Contemporary academic life is too full of competing agendas, urgent and time consuming, to allow this kind of immersion.

I'm looking, then, to simplify my life. In the process of moving office I pruned my collection of books—a pruning that kept getting deeper; the more I decided to give away, the more I decided I could live without. (So much is available electronically now, and the MSU library is large and accommodating; the decisions were almost painless.) I found that what I wanted to keep fell into three categories: books that I loved, classics, and books I'll be using soon. In the end I cut my collection in half. May those I gave away find loving homes. It was a particular joy to see graduate students take away armfuls of books. To one student I remarked apologetically that the books were pretty old; she grinned and said "That's what makes them great." Another day an anthropology student cradled a translation of Aquinas's *Summa Contra Gentiles*. Her father had been talking about it only the week before. My own copy, now hers, had been discarded thirty years ago by Mercy College of Detroit (long since merged with the University of Detroit). The electronic worldwide web is a marvel, but books also create webs, of a different kind, across years and owners. I am glad to have joined to so many.

So much for what I'm leaving behind. What I'm taking up is a new project tentatively called "Cosmopolitan Virtue: On Becoming Citizens of the World." Nice title, one might say, but what does it mean? Roughly speaking, a virtue is a quality of character that protects some aspect of a good life, for oneself or for others. Some virtues are probably universal: it is hard to imagine a way of life that does not need courage. Others are more specific; thrift is not a virtue unless there is scarcity. As societies change, so do the virtues they require. Our world is manifestly changing; it grows more interconnected by the day. The interesting question is what qualities of character are particularly necessary in the global village. Since health is a precondition for much of what makes life good, my years in medical ethics will not be wasted. But my focus will be larger, including not only health care workers but tourists, policy makers, consumers, and charities. The project requires considering not only what we owe others, but what we can learn from them. For that reason, I have been writing about a virtue that so far I simply call listening. Respectful

attention to others has never been more important, and rarely been quite as hard. (Closely related to these topics is my long term interest in the limits of the market: What should be for sale? More and more is, but this is not necessarily progress.) Writing this book is a major task; projects like this are what a philosopher's retirement is for.

Back home my plans are typical: clean out the closets, read *War and Peace*, balance my checkbook, weed the garden, travel. Work on my French. And take more naps.

John Lennon was right, however, in defining life as what happens when you're making other plans. A year ago a young niece unexpectedly arrived on my doorstep. Sometimes a change of venue is just what a teenager needs, and we've had a good year. She will fledge soon, but until then the closets, and Tolstoy, will have to wait.

Whatever happens, I look forward happily to the years ahead. I have much to be grateful for, especially the chance to remain part of MSU.



Saying Good-Bye

Another transition for the Center is the departure of Clayton L. Thomason, JD, M.Div. In July 2006, Clayton began his new job as the Bishop Anderson chair of the department of Religion, Health, and Human Values at Rush University Medical Center in Chicago.

While sad to leave the Center, Clayton feels that his leaving is a natural outgrowth of the training that the Center offered him. Working at the Center not only helped him articulate what his vision of bioethics is, but it also gave him insight and experience for how to contribute to bioethical professional education across disciplines. Bioethics, according to Clayton, is inherently interdisciplinary. It is this interdisciplinary nature of bioethics that was the biggest challenge for Clayton in working at MSU. Though the interdisciplinary nature of bioethics has its disadvantages, Clayton asserts that it is also a benefit and perhaps even the greatest gift of bioethics.

One of Clayton's favorite aspects of working at the Center was the engagement in teaching and academic development for all kinds of students at MSU—medical, nursing, veterinarian, graduate, and law. He says the best thing about working at the Center was the collegial atmosphere and the intellectual rigor that his colleagues brought to the work they did together. He is grateful to his colleagues for all that he has learned from them. In particular, he has learned a lot about leadership from the Center, especially from Howard and Tom. The transparency with which they engage faculty in the Center's mission and work, as well as their natural leadership gifts made the Center a great place to work and a great place for people to learn and grow. Clayton's new job in a leadership role reflects the success of the Center.



InkLinks is a regular column in which readers reflect on issues related to the previous lead article. In the last issue of MHR, Paul Ndebele discussed the problem of undue inducements in internationally sponsored research. This InkLinks continues that discussion. The contributors to this InkLinks share their study abroad experience.

Rethinking Capacity Development for Ethical Review for Human Subjects Research in Developing Countries

by **Gerald S. Schatz**

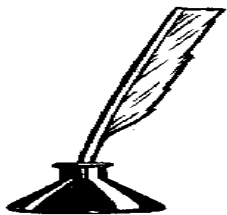
Paul Ndebele's essay, "Undue Inducement in Internationally Sponsored Research," touches on four troubling problems in the ethics of research on human subjects outside the industrial countries: need for individuals to become or continue as subjects of health-related research; vulnerability of individuals to undue inducements to do so; what kinds of inducements would encourage but not coerce; and how to develop and improve local capacity for effective ethical review and monitoring of proposed and continuing human subjects research. Professor Ndebele, based in Zimbabwe and active in the politics of health and medical research ethics in sub-Saharan Africa, has keenly and rightly felt the need to strengthen local capacity to screen and review human subjects research for ethical problems, including undue inducement. He would channel any inducement money into local community benefits, in order to thwart coercion of individuals while appealing to communal values to attract and retain research subjects. His remarks prompt second thoughts about capacity development in this context.

He and others have assumed that capacity development is a proper quid pro quo for research on local populations and have proposed that sponsors and investigators therefore contribute out of program and project funds. One proposal would use possible community benefit to justify burdens to individual research subjects. These approaches seem unlikely to eliminate coercion where individual rights go unrecognized. Moreover, they perpetuate a misperception of probable benefit from most or all research on human beings, and they encourage dubious bargaining for access to research subjects.

Research sponsors (whether governmental or private) and researchers are not disinterested contributors to capacity development, even for ethics review, and local authorities that see health research on human beings as a financial boon or as a certain answer to health problems are on a wrong track. However, there is a long history of donor-country contribution, often successful, to educational, scientific, technological, and public health capacity in developing countries. Donor countries' international assistance agencies, not sponsor agencies or research programs, should be contributing to the infrastructure for ethical research but not as a quid pro quo. Such aid might take the form of exchange programs and consultation rather than direct subsidy and should have

as a principal goal the general strengthening of host-country institutions for conscionable conduct of human subjects' research.

"To those people in the huts and villages across the globe struggling to break the bonds of mass misery," President Kennedy said in his inaugural address, "we pledge our best efforts to help them help themselves, for whatever period is required—not because the Communists may be doing it, not because we seek their votes, but because it is right." That thought still holds.



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Challenges in Implementing Community Compensation

by **Gretchen L. Birbeck**
Director & Associate Professor, INPEP

As a researcher who works almost exclusively in less developed regions, I found Dr. Ndebele's article an insightful commentary on the double-edged sword faced when trying to appropriately compensate study subjects in such environments. Too little compensation fails to recognize the value of the subjects' scientific contribution in terms of time, effort, inconvenience, etc. Too much compensation and one risks inadvertently using fiscal coercion for recruitment—in regions where people may earn less than one dollar for hard labor (if they are lucky enough to be in paid employment!) this is amazingly easy to do.

Ndebele suggests that compensation to research subjects in developing regions should be commensurate with payment to their developed region peers. He also recommends that benefits be distributed across the research subjects' communities as a way to obviate the risk of coercion. In other words, transferring the benefits from individual compensation to community compensation would encourage people to participate in research trials without unfairly inducing them.

While I whole-heartedly agree with Ndebele's ideas, operationalizing such plans would not be trivial and, without a substantial investment at the start, developing appropriate mechanisms would be difficult to put into place. Also, the promise of community goods should not serve as a distracter. If the results or application of research fails to offer any benefit to the population under study then no level of community compensation would make the conduct of such research ethical in that population. Finally, the use of such funds to assist in "leveling the playing field"—to allow local researchers an equal capability for recruitment even when they lack significant funds for compensation—would not be addressed by such wealth redistribution (that is, shifting benefits from individuals to communities) and might simply shift the bias from patient-level decisionmaking to institutional or community level refusal. Mechanisms would need to be in place to encourage and support local researchers as well as important research on neglected conditions, such as African Sleeping sickness, which only impact populations in developing regions and therefore invite little commercial interest from the pharmaceutical industry.

Ndebele's article offers excellent ideas on this complex issue. Further dialogue incorporating input from some of our international colleagues involved in human subjects protections would be extremely valuable.



The Center Welcomes New Faculty

P. Sean Brotherton

P. Sean Brotherton is Assistant Professor with a joint-appointment in the Department of Anthropology and the Center for Ethics and Humanities in the Life Sciences. He is a medical anthropologist whose teaching and research interests are primarily in the critical study of health, medicine, subjectivity, and the body. His current research examines the impact of public health policies on everyday lives, and the role of the state in mediating the impact of macroeconomic changes in the context of the Caribbean (and, more broadly, Latin America). Theoretically, this research explores the relation between medicine, morality, and power, and how these factors influence the formation of individual and collective subjectivities.

Sean received his Ph.D. in 2004 from the Departments of Anthropology and Social Studies of Medicine at McGill University (Montreal, Canada). From 2004-2006, he was a Social Science and Humanities Research Council of Canada Postdoctoral Fellow. His recent work includes “Macro-economic Change and the Biopolitics of Health in Cuba’s Special Period” in the *Journal of Latin American Anthropology*.

Linda Hunt

Linda Hunt is Associate Professor of Anthropology and is jointly appointed to the Department of Anthropology and the Center for Ethics and Humanities in the Life Sciences. She holds a Ph.D. in anthropology from Harvard University (1992). She has conducted research both within the US and in Mexico, primarily focusing on ethical issues in health care and health research on Latino and other minority populations. She has been particularly concerned with issues of ethnicity and health, the management of chronic illness, health disparities, and the culture of biomedicine. In her current research she is examining the way that health researchers and clinicians view minority populations, focusing on how concepts about cultural and biological difference are manifest in current health policy, interventions, professional training and research agendas. In one recent project she studied how clinicians present the opportunity for prenatal genetics diagnosis to Latinas and how those patients perceive and respond to the offer. In a current project, she is examining how a group of genetic scientists and clinicians integrate racial and ethnic variables into their work, and is considering how these endeavors both reflect and produce social constructs of racial and ethnic differences.

Ann Mongoven

Ann Mongoven has been appointed Assistant Professor in the Center for Ethics and Humanities in the Life Sciences with a joint affiliation in the Department of Philosophy. She received her Ph.D. in religious studies/ethics from the University of Virginia and her Masters in Public Health from Johns Hopkins University. Her research interests include public health preparedness, justice in health care, transplant ethics, democratic deliberation on health policy, and challenges of diversity in health care—including religious, cultural, and gender issues.

Ann formerly taught in the Department of Religious Studies at Indiana University/Bloomington, with an adjunct affiliation in the Center for Bioethics in Indianapolis. In policy arenas, she worked for a congressional commission addressing Medicare reform, served as an ethics consultant to the U.S. Department of Health and Human Services on transplant issues, and participated in the conceptual design of a national survey on terrorism preparedness. She completed a fellowship in women's studies at the Harvard Divinity School and recently spent a year in Japan as an Abe Fellow conducting ethnographic research on Japanese transplant debates. Mongoven has participated in collaborative research projects addressing civic virtue (with the Markkula Center for Practical Ethics at Santa Clara University), ethnographic approaches to bioethics (with Indiana University's Poynter Center), democratic deliberation (with the Poynter Center), and health-related philanthropy (with the IUPUI Center for Bioethics and Center on Philanthropy).

Misha Strauss

Misha Strauss joined the College of Human Medicine and the Center for Ethics and Humanities in the Life Sciences as a Visiting Assistant Professor. Misha received her Ph.D. in philosophy from Georgetown University in 2005. In her dissertation, *A Social Account of Integrity*, Misha challenges standard identity-based accounts of integrity arguing that while integrity is a matter of fidelity to one's identity what counts as fidelity in this sense is highly contingent on the socially shared understandings of what it means to enact a particular identity. An early version of this thesis appeared in *MHR* in 2002.

During graduate school Misha pursued her interest in biomedical ethics through internships at the National Institutes of Health and Johns Hopkins University where her collaboration with researchers led to a publication in *The Hastings Center Report*.

Since moving to Michigan in 1999 to write a dissertation while raising her 3 children (ages 2, 6, and 9 years), Misha has taught in the philosophy departments of the University of Michigan, Western Michigan University, and MSU. In addition, Misha has provided consulting services to hospital ethics committees as both a paid consultant and a volunteer.

Her research interests include the intersection of social justice and personal integrity, the ethics of genetic testing, and reproductive ethics. Most recently Misha helped her husband start his own pediatric practice in Chelsea, MI—an experience that has kindled a new interest in organizational ethics as it relates to the delivery of healthcare, the use of technology to improve patient safety and enhance the patient-physician relationship, and the understanding of the primary care physician as a patient advocate within our healthcare system.



The Center Welcomes New Fogarty Fellows

For the third year of its four-year Training Program in International Research Ethics, CEHLS welcomes three new Fogarty fellows. Generously funded by the NIH Fogarty International Center and in collaboration with the University of Malawi College of Medicine, this 15-month program enables individuals with outstanding research and scholarly potential the opportunity to develop a sustainable research and teaching program in the field of international research ethics. Joining us from both Malawi and Kenya, the following 06-07 trainees will be in residence on the MSU campus for the duration of the fall semester.

Ms. Veronica Maluwa (2002 Nursing Education University of Malawi) is currently a nurse tutor at St. Luke's College of Nursing, a program jointly administered by the Ministry of Health and the Christian Health Association of Malawi (CHAM). A certified midwife, she recently participated in a nursing exchange program between Norway and Malawi.

Ms. Rose Mwangi (B.A., Sociology, University of Nairobi Kenya; Masters of Philosophy in Gender and Development, University of Bergen, Norway) currently leads the social science component of a European Union funded project exploring the quality of care in pediatric wards in district hospitals in Tanzania with a focus on febrile illnesses in children. Her Masters thesis explored issues surrounding women and health with a special focus on malaria.

Mr. Mike Kachedwa (B.A., Social Science University of Malawi - Chancellor College) is the Principal Scientific Officer of the National Research Council of Malawi. His responsibilities include screening health research protocols for science and ethics; health research monitoring and evaluation; and initiating the development, implementation, and review of research policies, regulations, procedures, and guidelines in health research in Malawi. He currently coordinates a Southern Africa regional project entitled "HIV and AIDS Research Database and Information. Portal."



Study Abroad Opportunities

Medical Ethics and History of Health Care: London

Michigan State University will offer a six week study abroad course, “Medical Ethics and the History of Health Care in London” next summer, July 2-August 10, 2007. The 7 credit course will be co-taught by Len Fleck, Ph.D. (Michigan State University) and Chandak Sengoopta, M.D., Ph.D. (Birkbeck College, University of London). It includes two half day experiences for each student shadowing a health care practitioner. For further information, see <http://studyabroad.msu.edu/programs/ukmed.htm>.

Costa Rica Spring Break

Michigan State University will offer a one-week, spring break experience “Broadening Perspectives on Health Care in Costa Rica.” The March 3 –11, 2007, 1 credit course will be directed by Tom Tomlinson, Ph.D., in collaboration with the International Health Central American Institute (IHCAI). Enrollment is limited to students in MSU’s Colleges of Human and Osteopathic Medicine. For further information see <http://bioethics.msu.edu/pages/intnat/abroad.html>.



News & Announcements

Elizabeth Bogdan-Lovis

- Published “Introduction: Gift Horse or Trojan Horse? Social Science Perspectives on Evidence-based Health Care” with H. Lambert and E. J. Gordon. 2006, *Social Science and Medicine* 62(11): 2613-2620.
- Guest co-edited same June 2006 special issue of *Social Science and Medicine* 62(11). (Co-editors H. Lambert, E. J. Gordon and E. A. Bogdan-Lovis).
- Co-authored, with Aron Sousa, “The Contextual Influence of Professional Culture: Certified Nurse-Midwives’ Knowledge of and Reliance on Evidence-Based Practice” in same June 2006 special issue of *Social Science and Medicine* 62(11): 2681-2693.

P. Sean Brotherton

- Presented “Shifting State Ideologies, Incipient Capitalism, and Cuba’s Changing Therapeutic Itinerary” at *Cuba: In Transition? Pathways to Renewal, Long-Term Development and Global Reintegration* at Bildner Center for Western Hemisphere Studies, The Graduate Centre, City University of New York (March 2006).
- Presented “La batalla de ideologías: A Historical Examination of El Bloqueo in Contemporary Cuba” at the International Business Law Course, The Eli Broad College of Business, Michigan State University (April 2006).

Harry Perlstadt

- Gave a short talk on dealing with IRBs at the First Annual Conference sponsored by Journal of Empirical Research on Human Research Ethics, Oakland CA (July 2006).
- Presented “Network Support for Dealing with IRBs in Multi-Site Clinical Trials: A Research Proposal” at North Central Sociological Association Meetings, Indianapolis (March 2006).
- Presented “How Has the Concept of Disease Changed, and to What Consequence? The Case of ADHD” at the Ninth Annual National Undergraduate Bioethics Conference, Notre Dame University (March 2006).
- Gave talk on “Definitions of Benefit and Risk in Practice Based Research” at the International Conference on Clinical Sociology, Salerno, Italy (June 2006).
- Presented “Creative Ethical Problem Solving in Human Research: Challenges and Solutions for Researchers and Ethics Committees” Oakland, CA. (July 2006).

Gerald Schatz

- Elected to the Executive Committee of the Teaching International Law Interest Group of the American Society of International Law.

Tom Tomlinson

- Published “Futility beyond CPR: The Case of Dialysis” in Healthcare Ethics Committee Forum 2006.
- Presented “Organ Donation after Cardiac Death” at Northern Michigan Hospital, Petosky, MI (June 2006).
- Appointed as Chair of CHM's Task Force on Conflicts of Interest.