



RESEARCH IN DEVELOPING COUNTRIES

Ethics: Bioethics (Spring 2015)

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Normative Enterprise: Clinical Research

- **Norms that do not fit**
 - Therapeutic practice
 - Marketplace
- **Investigational stance:** “responsibilities investigators and designers have toward those who participate in their studies” (Carse & Little)
 - **Differential between investigational stance & therapeutic stance**
 - Justifying studying, rather than treating

Normative Enterprise: Clinical Research

- **Public Health norms, aims** (need not be based in strict utilitarian)
- **Constraints on**
 - What benefits investigators can justifiably accrue
 - Using subjects for greater good, social utility
 - What community or individuals can justifiable undertake/accept
- **Worries about exploitation**
 - Taking unfair advantage of another's vulnerability
 - Taking advantage of vulnerabilities that one is charged to alleviate (in the name of public health norms)

Dignitary-Based Concerns

- What does ‘dignity’ mean? How might it be used and interpreted differently?
 - E.g., dignity of disability community, medical profession, Terri Schiavo, fetus, sex worker subjects in Guatemala
- Matter of *not using someone as a mere means*
 - “your medical need may not be seen exclusively through the lens of its usefulness to my investigation” (C&L)
 - Researchers “must also indicate appreciation of the meaning those [health] needs carry for you” (ibid.)

Core Protections

1. Informed consent (positive & negative obligations)
2. Minimal risk, relative to importance of knowledge to be gained
3. Scientific validity
4. Equipoise
5. Minima of standard of care



Going Beyond Core Protections

- **Attending to current and emergent vulnerabilities**
 - In virtue of researcher-subject relationship
 - In virtue of other contextual factors
 - Those that exist before researcher arrives & those that arise in course of research
- **Justificatory burden**
 - Minimize burdens
 - Soften differential b/w IS & TS
 - Diminish “on behalf of others” proportion



How To

- A. **Morally preferable:** Use world's best standard of care, inc. for control arm

- B. **Next option, when can't do (A)**
 - Participants will likely (based on real, on-the-ground conditions) benefit from research

 - Will likely and sufficiently benefit those who are relevantly like subjects



Up Top: Research Approval

- Whether subjects will benefit based on actual affordability and accessibility – needs to be considered *before* research is approved
- “so that limited research funds are not wasted, and research subjects are not drawn from populations that will not be able to benefit from the research” (Glantz et al. 807)
- Thoughts on the AZT trial to improve affordability in Africa?

Discussion Questions

- Do you think the criteria offered by these bioethicists are too stringent, too lax, or just right?
- How can researchers avoid complicity in injustices when conducting research based on less-than-ideal conditions?
- Is the recommendation made by Glantz et al. morally obligatory of IRBs and funding agencies?



QUESTIONS? COMMENTS?