

BIOETHICS BULLETIN

NIH CLINICAL CENTER DEPARTMENT OF BIOETHICS

INTERVIEW WITH KATHLEEN FENTON, MD

Kathleen Fenton is Deputy Branch Chief of the Advanced Technologies and Surgery Branch in the Division of Cardiovascular Sciences, NHLBI, and an Affiliated Scholar in the NIH Department of Bioethics.

Q: What were you doing prior to joining the Department of Bioethics faculty? Why were you interested in coming here?

Before coming to work in NIH in summer, 2018, I worked for a nonprofit humanitarian organization helping to establish heart surgery programs for children in developing countries. As a part of this work, I lived in Nicaragua for 10 years, and from there traveled to other sites in Central and South America, Eastern Europe, and Africa. I'd always (since my residency, at least) been interested in bioethics, so when I had the opportunity to apply for a scholarship through my professional society (Society of Thoracic Surgeons "STS") to do formal study, I took advantage of it and got a Masters through Albany University in 2017. I came to NIH looking for a way to combine my background and interests in medicine, global health, and bioethics.

Shortly after getting settled, I contacted Christine to see if I could find out more information about the Bioethics Department. She invited me to attend some of the Department activities, and I was delighted to have the opportunity to interact with such a diverse and stimulating group of people. So, when I started to consider various permanent positions within NIH, I wanted to find a way to officially be part of the Department of Bioethics! The short version is: I felt (feel) that I had something to contribute to the Department, and I knew (know) for sure that it will benefit me to have ongoing intellectual interaction with bioethicists from different backgrounds and with different areas of expertise. **Continued on page 4**



Teatime in the Department of Bioethics, Spring 2020.
Discussion topic: do humans have moral status?

TABLE OF CONTENTS

Interview with
Kathleen Fenton
(Pages 1, 4-5)

Christine's Corner
(Pages 2-4)

Jorge Ochoa:
Diversity, Justice,
and Participant
Recruitment in the
'All of Us' Research
Program (Page 2)

Interview with
Andrew Peterson
(Pages 6-7)

2017-2019 Fellow
Biographies (Pages
8-9)

Alumni Updates
(Pages 10-13)

CHRISTINE'S CORNER



Greetings from the NIH CC Department of Bioethics!

Last year, I started this newsletter missive with a note about how being a strong community helps us in the Department of Bioethics to produce excellent and impactful research, attract exceptional fellows, and provide high-quality consultation to the CC and NIH. This year, our community remains strong and productive, despite some extraordinary and unanticipated challenges. The coronavirus pandemic has affected all of us in myriad ways. Our normal routines have been replaced with remote interactions, webinars, and Zoom calls. For many, priorities have urgently shifted towards coronavirus-related activities and research projects. Our personal lives have been disrupted, with children at home taking classes online, separation from family members who live far away, and fear about the safety and well-being of many loved ones. Future plans are more uncertain and we are striving to adapt our expectations and day to day activities.

Continued on next page

JORGE OCHOA: DIVERSITY, JUSTICE, AND PARTICIPANT RECRUITMENT IN THE 'ALL OF US' RESEARCH PROGRAM

'All of Us'—implied in the name of the federal precision medicine research program is a key goal of inclusion. The recruitment of one million research participants that reflect the diversity of the American nation-state is a critical step for the program to achieve this goal.

My project analyzes transcripts from a series of All of Us launch events that occurred simultaneously in cities across the country in 2018. The events were at once informational and served to recruit participants. At these events, the vision of diverse participation in All of Us was presented to the public. Diversity was framed in multiple different ways that varied from speaker to speaker and across cities.

I analyze the ethical underpinnings of these various framings, including the differing notions of justice that they embody. At times, the framing is one of distributive justice: Diverse participation will facilitate the just distribution of benefits that will be gleaned from research. At other times, the framing is one of a reckoning with and rupture from injustices of the past: Diverse participation will help transform the way research is done such that histories of marginalized communities' abuse during research or exclusion from research will not repeat themselves.

What are the stakes and implications of these framings of diverse participation as articulated at All of Us launch events? What are the obligations to participants and communities across the various framings? My empirical project seeks to answer questions such as these, while thinking through the ethics of a targeted recruitment of 'diverse' populations for this large-scale federal precision medicine research project.

CHRISTINE'S CORNER, CONTINUED

In the CC Department of Bioethics, we continue as a community, prioritizing many activities that you remember, albeit in a different format. Except for those on call for the Bioethics Consultation service, most of us have been teleworking since mid-March. We have weekly staff meetings, first year seminars, JBCs, guest lectures, journal club, and WIPs via WebEx. We even have a weekly virtual tea! (See photo of the tea table on page 1.) We have been involved in multiple consultations about significant and thought-provoking issues, including human challenge trials, fair distribution of remdesivir, fair participant selection when demand exceeds available slots, and others. Many of us have been busy writing papers, doing research projects, participating in NIH working groups, the DC Ethics Consortium, professional associations, and other COVID-19 related endeavors, while continuing our other research as well as we can.

The NIH campus emptied out in mid-March, with most NIH employees working remotely. The Clinical Center was an exception, however it also significantly reduced patient and staff volume and had to make ethically-laden judgements about what could be postponed and what could not wait. Research on SARS-CoV-2 and COVID-19 became an urgent NIH priority, and across ICs, there is an enormous amount of ongoing activity and discussion. At the end of May, the CC is beginning to increase the census and bring more people back to campus. It is not certain when we will be physically back in the department, but the next few months will require some creativity and flexibility.

A few other notable happenings in 2019-20. First, ethics grand rounds continues to draw large crowds. In February, Paul Appelbaum was our invited commentator. Since March we have held a series of less formal virtual "bioethics discussions" about COVID related topics (resource allocation, healthcare provider responsibilities, human challenge studies, etc.) for the CC/NIH community, all well received.

Second, as usual, we have a great cohort of fellows who are already part of our community and also coming in September. We held our 6th Mid Atlantic Regional Bioethics Workshop, this time successfully via Zoom. Our stellar departing fellows are all headed for great things—exciting new jobs and graduate programs. To support their graduate education, two of our departing post-bacs received NSF scholarships and one a Knight-Hennessy fellowship!

Third, we continue to have fruitful liaisons with other NIH institutes. In addition to our longstanding relationship with NHGRI, NIAID, and Fogarty, we more recently established associations with NINDS sharing Saskia Hendriks, with NHLBI as Kathleen Fenton joined us part time, and with NCI as Leila Jamal transitions to a new position there. Andrew Peterson, from George Mason University, has also enriched our department by spending a day per week with us. (See interviews with Kathleen Fenton and Andrew Peterson in this newsletter.) We are looking forward to having Maria Merritt as a visiting scholar in September. We continue our international efforts towards developing bioethics knowledge. We had a successful workshop in Bhubaneswar, India in November, and are planning webinars in the summer 2020

CHRISTINE'S CORNER, CONTINUED

with the Indian Department of Biotechnology, Ministry of Science and Technology. We recently established a Mentored Research Program for Early Career Bioethics Scholars from Low- and Middle-Income Countries, but have not yet brought in an early career scholar.

Fourth, thanks to very generous letters of support written by many of you (spearheaded by Seema), I was the recipient of the 2019 ASBH Lifetime Achievement Award, which I was honored to accept at the ASBH meeting in Pittsburgh in October. It was great to see many of you at the annual department dinner that Marion coordinated at ASBH.

I hope that you and yours are healthy, happy, and productive, despite the challenging times we are living in. We love to hear from you about your many adventures and accomplishments. As always, you are welcome to present a work in progress or other presentation (maybe virtually!), collaborate with us on a project, or check us out on twitter ([@NIHBioethics](https://twitter.com/NIHBioethics))!

Warm wishes, Christine

Interview with Kathleen Fenton (continued)



What are some of the unique ethical issues a cardiothoracic surgeon might face?

I think one of the most interesting questions relates to the question of making “contracts” with elderly or otherwise high risk patients prior to surgery, in which the patient agrees to not request discontinuation of life-sustaining treatments for a defined recovery period. Recovery from surgery is hard, and patients (or families) can get discouraged. Some surgeons want the patient to “buy in” to a package up front and agree to wait for 2 weeks or a month after the operation to see how they are, but this is obviously controversial.

Q: What have you been working on in the Department?

I brought with me several ongoing projects in various stages of completion. I am a member of the Joint STS/AATS (American Association for Thoracic Surgery) Ethics Forum, and in this capacity am the first author and lead of a writing group for a position paper that lays out guidelines for humanitarian work in cardiothoracic surgery. That paper should be published soon. The Forum also just published ethical guidelines for surgeons related to the coronavirus pandemic; I was not in the writing group for that paper but, as a Forum member, participated in the final editing. There are one or two other papers that are in progress as well, and I attended the meeting in New Orleans in January. I also have ongoing projects related to implementation science research ethics that stem from my most recent former position in NHLBI/CTRIS, including an editorial I am writing with two coauthors, and a workshop that is planned for later in 2020. (Scott Kim and Joe Millum are both helping with the workshop.)

Since starting officially in January, I've been asked to work on several things coming out of my work in NHLBI, including identifying and addressing some issues we have with the single IRB process (Holly has been helping me with that), and some questions of conflict of interest and of organ donation after

circulatory death. These projects are really just getting started. I've also been a coauthor on two ethics-related initiatives in NHLBI, the administrative supplements for bioethics, and the ELSI funding opportunities (secondary sign on to an NHGRI program).

Q: It sounds like you have lots of irons in the fire. Is there a particular project you are excited about? Tell us more about it and why it's exciting to you.

I think the one single project about which I am most excited is almost finished--the ethical guidelines for surgeons doing humanitarian work really brings together all the aspects of my professional life: surgery, global health, ethics and even teaching.

Of what I am doing now, I think it's not a particular project but rather watching and helping others to recognize and get excited about ethical issues that arise in all the different projects I mentioned above. People are dealing with these things every day, but when they suddenly see it through the "lens" of bioethics it's like watching a little lightbulb go on! So I am gathering people around me who never paid that much attention to ethics and now they see that there is ethics everywhere!

Q: What are you most excited about being a member of the department?

There are two things, really. First, I'm very excited to be able to continue learning. The department has such a wide variety of members and, in addition, brings in so many prominent outside experts that I am constantly being intellectually stimulated. (I love this!) I also really appreciate the way in which everyone is encouraged to participate and to express (sometimes dissenting) opinions.

The other side of that is that I am excited to be able to contribute, and to contribute really in a bidirectional manner. One of the reasons that my professional societies jointly sponsored (and continue to sponsor) a scholarship for members to formally study bioethics is because there are so few surgeon-ethicists, even though surgeons deal with bioethical questions and problems every day (some of which are relatively unique to surgery). I bring a different perspective to the department and I hope that will be a contribution. In the other direction, I "take back" all my experiences and information to my "day job" in NHLBI, bringing to the table, in every single meeting and conversation, a bioethical perspective, and an awareness of bioethical questions and issues.

INTERVIEW WITH ANDREW PETERSON, PHD

Andrew Peterson is an Assistant Professor and Greenwall Faculty Scholar in the Institute for Philosophy and Public Policy at George Mason University, and a visiting scholar in the NIH Department of Bioethics.



Q: What were you doing prior to joining the Department of Bioethics faculty? Why were you interested in coming here?

I tend to thrive in academic environments where I'm surrounded by exceptionally smart and hard-working people. These environments challenge me to do better work. NIH Bioethics has perfected this formula. I also have a soft spot for working in clinical environments. I received my PhD from the University of Western Ontario, where I worked directly with scientists, clinicians, and families who collectively supported patients with severe brain injury. George Mason has yet to establish a medical school, so being at NIH scratches that "clinical itch" for me.

Q: What have you been working on in the Department?

My work centers on brain injury and dementia. My work on brain injury addresses ethical and epistemological issues in the science of consciousness, with special focus on disorders of consciousness. My work on dementia addresses the issue of paradoxical lucidity—instances of unexplained "awakenings" in people with severe dementia—and how care partners react to these episodes.

One current project is a conceptual paper focusing on paradoxical lucidity in severe dementia. Paradoxical lucidity is provisionally defined as an episode of "unexpected, spontaneous, and relevant communication or connectedness in a person who is presumed to be noncommunicative due to severe and progressive neurodegeneration." This definition, however, is rather vague. What does "relevant" mean? What does "connectedness" mean? Who decides if communication is relevant? And what kinds of behaviors, other than verbal communication, should count as instances of connectedness? The National Institute on Aging has expressed interest in studying paradoxical lucidity,

yet systematic methods for measuring the phenomenon have not been developed. This paper seeks to clarify the definition of paradoxical lucidity for operationalization in scientific research.

This research emerged from my time as a graduate student at the Rotman Institute of Philosophy and the Brain and Mind Institute at the University of Western Ontario. Although I'm trained as a philosopher, I spent much of my time in Adrian Owen's neuroscience lab that develops neuroimaging methods to assess patients with disorders of consciousness, such as patients in the vegetative state and the minimally conscious state. These neuroimaging methods reveal that a significant proportion of patients who appear unresponsive at the bedside are actually aware. We regard these patients as being "covertly conscious" – their consciousness is manifest in their brain activity, not their overt behavior, and neuroimaging is the only method by which their consciousness is detected.

The ethical questions that emerge from this revelation are complex and multifaceted: Are these patients suffering? How

do families or care partners understand the neuroimaging data? Is such neuroimaging research on acutely comatose patients ethical? And should care be withdrawn from these patients to prevent iatrogenic harms? I've been lucky enough to collaborate with leading neuroscientists and philosophers on these issues, including Tim Bayne, Charles Weijer, Lorina Naci, Damian Cruse, Davinia Fernandez-Espejo, Machenzie Graham, Sean Aas, David Wasserman, and Joe Fins.

My recent work on dementia was inspired by new friends and colleagues at Penn, Jason Karlawish, Emily Largent, Shana Stites, and Kristin Harkins. This group recognized important connections between neuroimaging research on patients with disorders of consciousness and pre-clinical neuroimaging diagnosis of Alzheimer's disease. In both cases, there appears to be a general transition from defining a diagnostic category according to a patient's clinical presentation, to defining it according to brain activity – in fact, this seems to be true for many other areas of medicine that come into contact with the mind-brain sciences. A critical ethical issue is how patients and care partners find meaning in neuroimaging data. How should

neuroimaging data be disclosed? And how will patients and care partners make critical medical decisions on the basis of this information? My work on paradoxical lucidity is just one facet of my new fascination with dementia.

The COVID-19 pandemic has added extra complexity to this work. In fact, as I write to you from self-isolation, I'm also thinking and writing about the fair treatment of vulnerable populations, including persons with brain injury and dementia, in the context of this public health crisis. It's been wonderful to be involved with NIH Bioethics as I think through these issues.

Q: What has your experience at the NIH Department of Bioethics been like?

No more than 2 months after my arrival, the world was turned upside down by COVID-19. Operations at the Clinical Center changed drastically—a majority of employees transitioned to telework; webex became the norm; and friends, family, and colleagues grappled with the anxiety of becoming ill or caring for others who were already sick. These procedures matched those of other academic institutions and state lockdown orders across the U.S. My daily grind now consists of teaching a hastily

transitioned online philosophy of mind course in the morning, and then bouncing back-and-forth between afternoon Webex meetings with George Mason University, Penn, and NIH, all while entertaining my increasingly feral 5-year-old daughter, Eleanor. (She has actually been a champ through all of this!). Somewhere in between, I try to find time to write.

And yet, I think to myself that I must be one of the luckiest people to be a visiting scholar at NIH Bioethics *right now*. I have the opportunity to learn from, and participate in, the efforts of international leaders in the bioethics community in response to this crisis.

I have never admired my academic colleagues as much as I do at this very moment. Members of NIH Bioethics have unified in a common effort to address the ethical issues arising from this pandemic. From triage and rationing, to rapid review of IRB protocols, each member of the department has found a way to quietly contribute to the common good. The faculty are not working less, but more. The faculty are not disjointed; they have risen to the occasion. The department is firing on all cylinders. And it is inspiring!

2018-2020 FELLOW BIOGRAPHIES

Bernardo Aguilera is a postdoctoral fellow in the Department of Bioethics. He was trained as a physician and a philosopher at the University of Chile, and then completed his PhD in Philosophy at the University of Sheffield, UK. He has served as a physician in Chile, where he also gained some experience in bioethics. During his fellowship at the NIH, Bernardo has worked on neuroethics, animal ethics, and international research ethics. It has been a very intensive and rewarding experience for him, having the chance to know and work with an amazing group of academics. His next steps are to go back to Chile and work in a department of bioethics at a local university.

Dominic Mangino is a post-baccalaureate fellow who has focused mainly on the issue of euthanasia and assisted suicide of persons with dementia, including a review of all existing case reports from the Netherlands and an experimental survey of the U.S public regarding their overall views of practice and how their views are affected by challenges discussed in the bioethics literature. The Department has done so much for him personally and professionally. Dominic's background as a respiratory therapist in North Dakota gave him important clinical experiences on which to reflect, but he had a tremendous amount to learn regarding how to conduct research. As a fellow, he learned to systematically approach topics, to ask relevant ethical questions, and to construct feasible, rigorous and interesting projects to address those questions. No doubt, the skills learned and connections made will benefit him as he begins medical school at UCLA this fall and as a future physician-bioethicist.

Marie Nicolini (MD, MSc) is a postdoctoral fellow in the Department of Bioethics, with training in psychiatry and bioethics. Her work focuses mainly on euthanasia and assisted suicide in non-terminal disorders, psychiatric disorders in particular, and the ethical and policy challenges associated with the practice. Examples are how the concept of irremediability applies in psychiatry and why more women than men appear to die by psychiatric euthanasia. Her other interests include mental health law and policy. After the fellowship, Marie will be continuing her research at the NIH.

Will Schupmann, a post-baccalaureate fellow, graduated from the University of Pennsylvania in 2017, majoring in Health & Societies. Will spent the following year at the Urban Institute conducting research in various areas of social and economic policy. While at the NIH, he worked on both conceptual and empirical projects addressing ethical questions related to genetic testing, risk in pediatric research, and the social value of research. He also collaborated on a paper reviewing the historical context of the *Belmont Report*. Will is headed to UCLA in the fall to begin a PhD in medical sociology. His time in the department has instilled in him a deeper appreciation for multidisciplinary approaches to addressing complex questions and for pursuing research questions that have practical impact.

On June 1st, **Ben Schwan** began a permanent position as a Clinical Ethicist with Case Western Reserve University and The MetroHealth System in Cleveland, Ohio. During his postdoctoral fellowship in the

Department of Bioethics, Ben worked on issues of agency as they arise in bioethics—specifically, on the extent to which individuals are responsible for their health and on the role of patient autonomy in medical research and clinical care. This work culminated in two solo-authored papers: “Responsibility Amid the Social Determinants of Health,” forthcoming in the journal *Bioethics* and “Why Does Decision Making Capacity Matter,” currently under review. Prior to arriving at the NIH, he completed his PhD in philosophy at the University of Wisconsin-Madison where his research focused on accounts of agency, action, and ability and their implications for ethical theory.

Camila Strassle will be pursuing a JD at Stanford Law School with funding from a Knight-Hennessy Scholarship. She graduated from Stanford University with a bachelor's degree in human biology and a minor in philosophy. At Stanford, she was a public interest law fellow, mental health peer counselor, and co-founder of a patient-run research advisory committee, and she won the Lyle and Olive Cook Prize for her research at the Center for Ethics in Society. During her time at NIH, she has published in *William & Mary Law Review*, *Journal of Comparative Effectiveness Research*, and *Journal of Cystic Fibrosis*. She is now working on projects related to the current response to COVID-19 in U.S. jails and prisons, the various strategies to promote adherence within clinical care, and the health claims made by direct-to-consumer genetic testing companies.

ALUMNI UPDATES

From **Alex Rajczi**: *Like most people, I've spent 2020 sitting around my house having my life saved by Tony Fauci and Christine Grady!*

Before being locked at home, like everyone else, **Arnon Keren** was spending most of his time on a project on skepticism about testimony (funded by the ISF). He is also continuing to chair the Psyphas BA program in Philosophy and Psychology at the University of Haifa, and to simultaneously write too many other papers.

After eight years as a corporate lawyer, **Ben Krohmal** is now serving as Acting Director of the John J Lynch MD Center for Ethics at MedStar Washington Hospital Center and directing MedStar's program for medical aid in dying, but these days his primary job is making sure his four year old son washes his hands.

From **Colleen Denny**: *Currently an assistant professor at the NYU School of Medicine, working at Bellevue Hospital in Manhattan as an Obstetrician-Gynecologist. Also the Medical Director of Ambulatory Women's Health Services at Bellevue.*

From **Collin O'Neil**: *Still teaching at Lehman College, CUNY, but now becoming adept at Zoom.*

From **Dena Davis**: *Like so many others, I am working hard to make my zoom teaching as effective as possible in this crazy time. As my current class is on bioethics, there are many Covid-19 issues to bring to class. Writing projects mostly revolve around Alzheimer's, including a chapter, with Paul Menzel, on whether VSED is useful in the context of dementia.*

From **Emily A. Largent**: *I am at the University of Pennsylvania Perelman School of Medicine in the Department of Medical Ethics and Health Policy. My work these days focuses on legal and ethical issues in Alzheimer's disease research and care. I've been fortunate to have lots of chances to work with and see other alums this past year, which is always welcomed! I hope everyone is staying well.*

From **Govind Persad**: *Covid-19 has me roped back into writing on the fair allocation of scarce medical resources. This started with two co-authored pieces with Zeke ("Fair Allocation of Scarce Medical Resources in the Time of Covid-19," NEJM, and an op-ed in the NY Times), and has continued into a solo-authored piece ("Why Disability Law Permits Evidence-Based Triage in a Pandemic") in the Yale Law Journal Forum and a collaboration with Joe Millum and Dave Wasserman. Working on these issues has also been an opportunity to reconnect with alumni including Colleen Denny, Will Smith, and Connie Ulrich. Much of this writing has been done while keeping tabs on Julian, now 1 1/2 [picture to follow].*

From **Haley Sullivan**: *I am currently working at the Duke-Margolis Center for Health Policy. This fall, I will be moving to the Boston area to start a PhD in Health Policy at Harvard University.*



From **Lizzy Pike**: *Hi all! Greetings to the NIH Bioethics network! After nearly a decade outside the strictures of legal practice, I am back to putting my JD to official use as Associate General Counsel at the Patient-Centered Outcomes Research Institute (PCORI). My scholarship on ethical frameworks for health data came out in the New England Journal of Medicine and a law review article on that topic is forthcoming in the Emory Law Journal. I spend most of my free time alongside my husband David and our kiddos Evelyn (6) and Holden (3) tromping around the woods in our backyard while staying 6+ feet away from others (and then self soothing with copious amounts of chocolate and peanut butter...).*

Matthé Scholten currently works as a researcher at the Institute for Medical Ethics and History of Medicine of the Ruhr University Bochum, Germany. Together with Jakov Gather, he coordinates the research project [SALUS](#), a large interdisciplinary project on (the reduction of) coercion in psychiatry. The results of a workshop on human rights and mental health for an earlier project [HumanMeD](#) are forthcoming in a [Research Topic](#) in *Frontiers in Psychiatry*, for which Scott Kim serves as an editor. Matthé currently works on a German manual for competence assessment and supported decision-making for persons with dementia and he is a member of Alzheimer Europe's working group ethics working group for their 2020 report on legal capacity.



From **Matthew F. Morgado**: *Since spring is in full swing, I've been landscaping with my dad. It's been pretty easy to practice social distancing, as we work outside. This autumn, I'll be starting a philosophy PhD program at Johns Hopkins. It's an exciting time for the Philosophy Department there, as they recently received a \$75 million gift. Indeed, the Department plans to double their number of professors! Since I'll be in the area, I hope to revisit the Department of Bioethics. I miss the special people and the special environment!*



From **Ori Lev**: *As is probably the case with everyone these days, staying at home and teaching using Zoom. I am at Sapir academic college in Israel, heading the Public Policy and Administration department. A very engaged and socially committed department. I am ending my term this summer (if the virus allows:), the plan was to spend a sabbatical in London at LSE - sadly, at the moment it is difficult to see that happening.*



From **Owen Schaefer**: We welcomed our second son, *Rei Schaefer*, into the world in August 2019. He enjoys fast cars and slow food. Things have been even busier this year, especially now that Singapore has implemented our 'circuit breaker' to stem COVID-19 spread and we're all getting used to the comfy snug of government-issued cloth masks. As of writing none in our family have contracted the coronavirus, and we're otherwise doing well. Stay safe!



From **Rebecca Wolitz**: I am finishing up my PhD and am now a fellow with the Program On Therapeutics Regulation and Law at Brigham and Women's Hospital/Harvard Medical School. My research focuses on various legal and ethical issues surrounding drug pricing and pharma/IP regulation.

From **Rob Hughes**: My big news is that Matt and I got married in Los Angeles last July. We continue to live separately during the regular school year, trading weekends between New York and Philadelphia, but we are together in Brooklyn during this period of "social distancing." I am learning to teach business ethics online. I continue my research on transactional justice (inspired in part by Alan Wertheimer's work) and on the ethics of obeying and enforcing the law.

Robert Steel is currently finishing a postdoc at the Center for Population-Level Bioethics at Rutgers, and in the fall he will be joining the philosophy department at the University of Nebraska, Omaha. His work continues to focus on medical research ethics, particularly on questions surrounding the regulation of research risk. He misses tea.



From **Roseanna Sommers**: The job market has not yet concluded for me, but I nonetheless want to share the update that the process brought me to Durham, NC where I got to see Walter Sinnott-Armstrong. Walter was a visiting scholar at the NIH when I was a pre-doc fellow. He later hosted me, along with post-doc fellow Tina Rulli, when we traveled to Duke for "Wertheimerfest" -- the conference Jennie Hawkins and the Trent Center organized to celebrate the release of Alan Wertheimer's book on clinical research ethics in 2012. It was a joy to reconnect with Walter eight years later. We got lunch at an Indian buffet, just like we

used to in Bethesda, and reminisced about the time he and Frank Miller somehow drafted, workshopped, and submitted a paper in less than a week.

Sarah Gollust is sheltered in place in Minneapolis with her husband, a health economist, and 9 year old and 6 year old sons. She is an associate professor in the School of Public Health at the University of Minnesota. She is anxiously prepping her summer public health ethics class (there's just a bit of new material to include), trying her best to homeschool the boys and work, and is thinking fondly of all her bioethics friends and colleagues! Wishing everyone health and safety.

From **Sophie Gibert**: *I'm finishing the second year of my PhD program in philosophy at MIT. I'm currently working on a second year paper project in meta-ethics and the philosophy of action. Leah Pierson (a fellow pre-doc from my class of '18) and I co-authored a paper with Ben, Marion, and Joe that recently came out in JME. It presents a framework for allocating scarce biospecimens among researchers who need them.*