BIOETHICS BULLETIN

NIH CLINICAL CENTER DEPARTMENT OF BIOETHICS

INTERVIEW WITH MARIA MERRIT, PHD

Maria Merritt, visiting scholar from Johns Hopkins, speaks about her experience at the NIH Department of Bioethics

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

My regular job, which I will return to after my Visiting Scholar position has ended, is being a faculty member at Johns Hopkins University (JHU). I'm in the Berman Institute of Bioethics, and in the Health Systems Program of the Department of International Health (DIH) at the Bloomberg School of Public Health. I also have a secondary appointment in the JHU Department of Philosophy.

What I was specifically doing at JHU, before I came to the NIH Department of Bioethics to begin my Visiting Scholar position, was a combination of research, teaching, and departmental administrative leadership. In my leadership role, I served as Associate Chair in charge of Student Matters in DIH. In essence, the Student Matters team looks after academic quality of life and well-being for around 200 students at any given time. (DIH is a large department.) That involves a fair amount of troubleshooting and design work on policies and procedures: I found that making the effort to do that well, and with the appropriate engagement of all concerned, could make a real, positive difference for our students.

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MEMBERS OF THE
DEPARTMENT ENJOY
A SOCIALLY
DISTANCED
GATHERING IN A
LOCAL PARK



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CHRISTINE'S CORNER



Greetings from the NIH CC Department of Bioethics!

Greetings to you all. I hope that you and yours are well during these historic times. Who would have thought that a year later many of us would still be working mostly remotely? So much has changed and much has remained intact.

Despite the many personal and professional ways that coronavirus has affected all of us, including lots of Zoom and isolation, hopefully all of you have found ways to stay connected and productive, and joyful. Most of us are now vaccinated and seeing light at the end of the pandemic tunnel, and there are expectations for a return to some pre-pandemic life. I sincerely hope, however, that all we have learned from the disruptions and suffering that the world has experienced during this past year and a half will inspire us to be more compassionate, fair, and inclusive, and strive for harmony and good relationships rather than hate and divisiveness. Clearly, there is much to do to make our world better.

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SARAH RASKOFF, PHD: NUDGES AND HARD CHOICES

A nudge is a small change in the way options are presented that makes a predictable impact on people's decisions without closing any options off. Nudges are often justified as paternalistic interventions that nevertheless respect autonomy: they lead patients to make healthier choices,



while still letting them choose for themselves.

However, existing work on nudges assumes a framework that rules out the possibility of an important class of decisions that, following Ruth Chang, I call "hard choices": cases in which a person prefers one option in some respects, another in other respects, but has no all-things-considered preference between the two.

My current project argues that many significant medical decisions are indeed hard choices, and that such choices provide patients with an opportunity to exercise a distinctive aspect of autonomy: they must not only select options that better satisfy their preferences, but must also exercise what I call their "formative autonomy" in choosing or settling their preferences and so committing themselves to weighing their values in a particular way.

It furthermore argues that certain nudges infringe formative autonomy by depriving patients of this opportunity to settle their preferences, and that we must be mindful of this when importing nudges into clinical settings where hard choices are likely to arise.

CHRISTINE'S CORNER, CONTINUED

Our Department of Bioethics remains committed to a strong community, excellence in our work, and making a difference. Thanks to the creativity of fellows, we have weekly on-line "tea" involving games and activities that have helped us get to know each other better. Outdoor gatherings in local parks, using text messaging to "knock" on people's doors, and an array of meetings, seminars, and gatherings on zoom have kept us connected and engaged. The consult service continues to be very busy, even when the CC census was quite low, and we have received consult requests from intramural and extramural staff and NIH leadership. In Walter Isaacson's new book, The Code Breaker, he mentions our Bioethics Consultation Service (page 446) and how comforted he felt to know that NIH has one!

Our Department, like many others this year especially, has committed to enhancing our efforts related to diversity, equity, and inclusion in everything we do. A subgroup of Fellows wrote a very thoughtful report with ideas for improving attention to diversity and inclusion in fellowship selection and expanding the scope of bioethics. The CC ethics committee developed a statement on combating racism in ethics consultation. We've developed formal collaborations with Howard University and with NIMHD. We are beginning a search for a tenure track scholar who studies ethics and health disparities. More to come in the next years.

A few other notable happenings in 2020-21. Maria Merritt spent the year with us a visiting scholar, it has been wonderful to have her engagement, intellectual curiosity, and joie de vivre (all of which she exuded on Zoom)! As usual, we have great cohorts of fellows who are a solid part of our community, a new cohort starting in September, and a group who are moving on to new and amazing adventures. We held our 7th Mid Atlantic Regional Bioethics Workshop, the second successfully via Zoom. Annette Rid and Saskia Hendriks each gave birth to beautiful baby boys. And sadly, we will say goodbye in the next few months to some of our treasured departmental members: David DeGrazia is going back full time to GW, Joe Millum took a faculty position at St. Andrews, and Talia Bernhard is beginning a postbacc premed program at Temple University.

I hope that you and yours stay healthy, happy, and productive, as we move into a new phase of the pandemic. 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)!

Warm wishes, Christine

P.S. an updated photo of our plants which have thrived in each other's company!





Interview with Maria Merritt (continued)

In the spring of 2020, of course, we were all figuring out how to support our personnel and adjust our operations under pandemic conditions. The DIH Chair convened a dedicated Departmental COVID Response Team (DCORT) that kept up an intense pace for months on end. The purpose of DCORT was to coordinate our response across all department operations – including research, education, and communication – to the evolving COVID crisis and its many impacts on our hundreds of students, staff, and faculty. We were also responding in real time to policies that came down from the University and School

levels; the University and School were, in turn, often responding to the dynamic situation in the nation and the world – for instance, regarding issues of immigration affecting students' plans to enroll in our degree programs, and issues of travel safety for our students conducting international research. DCORT was an immensely educational experience for me. Some of my DIH colleagues have deep experience in public health crisis response. I appreciated observing how they led by example, projecting respect for others, competence, empathy, warmth, and quiet calm while being highly organized in their thinking, speech, and actions. The striking impression that stays with me, looking back on that time, is how deeply it matters for a leader to express care and concern for everyone in their organization – a lesson strongly reinforced this year by seeing Christine Grady's leadership in action in the Department of Bioethics.

I was interested in coming here so that I could engage in conversations to sharpen my thinking on ethical issues in priority setting for health resource allocation, and so that I could reorient to some of the philosophical questions in bioethics that I had less time to keep up with before now. And I'm so fond of everyone here – I just wanted to enjoy spending time with folks!

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

It's a combination of carrying on projects that I had underway before coming here, and developing new projects that I want to work on in the future. The ongoing projects relate to my effort to understand certain aspects of social justice, particularly for purposes of addressing social disadvantage, in the context of economic evaluation for health policy decision making. I was grateful for the opportunity to convene two focused reading groups for interested Department members, one from January through March 2021 and one in June 2021, to discuss current work in this area. In the January-March reading group, it was a pleasure to share, and to receive constructive criticism on, some of the work that my research teams and I have been doing. We have studied these issues mostly in relation to diagnosis, prevention, and treatment of infectious diseases that disproportionately affect the least well-off: for instance, multi-drug-resistant tuberculosis, and neglected tropical diseases.

My new work this year has been mainly in the form of preparing grant proposals for future projects. These are in collaboration with colleagues at JHU and elsewhere, and fall into two main areas of

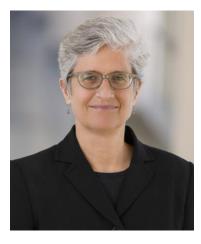
interest. The first area is the ethics of virtue and character (which I used to work on quite a bit), with special attention to the design of training programs in ethical leadership for healthcare professionals working at the interface of clinical practice and public health. The second area has to do with ethical issues at the intersection of health equity, the planetary climate emergency, and the co-production of meaningful research between academics and the communities most affected by global climate disruption. I'm just getting the lay of the land at present. I'm interested in learning about respectful engagement with the keepers of indigenous traditional ecological knowledge.

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

Well, since I had the transformative experience – many of you know what it's like! – of being a Fellow here about twenty years ago (2000-2002), I remember how utterly fabulous it was to be in the office with everyone during the workweek. We had afternoon tea every day! I loved coming to work back then. Now, since we've done almost everything by Zoom because of the pandemic during my whole Visiting Scholar time, I've sometimes had to redirect my attention gently from reminiscing about the glory days of in-person camaraderie, and focus on the present, alsofabulous opportunities to talk with people remotely during our many online activities together. My first love is education and supporting others' professional development, so it has been a privilege especially to get to know the Fellows and to form what I hope and trust will be lifelong professional bonds. My undying gratitude goes to Christine Grady for inviting me to serve as a Visiting Scholar. This has been a unique opportunity to refresh my bioethics thinking and collaborations in a world-class intellectual setting.

Q: What will you be doing next?

In early July I'm taking a vacation to Iceland with my husband, then returning to JHU for the summer. I'm most looking forward to serving as Co-Instructor for an August intensive course, led by Native faculty at the JHU Center for American Indian Health, on the ethics of conducting health-related research with Native communities. From September to November I have a three-month mini-sabbatical, which I hope to spend on Vancouver Island. I want to do some broad networking at several universities in the area that have excellent climate research programs, while also deepening my philosophical thinking about social justice and health equity in relation to climate change. Long-term? Maybe someday I'll become a pleasure activist. I'm beginning to read the inspiring work of adrienne maree brown, for instance, Emergent Strategy: Shaping Change, Changing Worlds and Pleasure Activism: The Politics of Feeling Good.



INTERVIEW WITH HOLLY TAYLOR, MPH, PHD

Holly Taylor discusses her career and projects since joining the Department in June 2019.

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

I entered undergrad with the plan to be a Pediatrician. By the time my senior year rolled around I realized what I was most interested in was health policy rather than the delivery of health care. I received my MPH from the University of Michigan in 1990 and started a career

in HIV/AIDS policy. I considered Law School as my next step but was drawn to the ethical rather than legal issues related to health policy and the conduct of research in particular. I found what was then called the Program in Law, Ethics and Health at Johns Hopkins Bloomberg School of Public Health (JHSPH) I finished my degree in 1999 (along with Sara Hull). After I graduated I was appointed to the faculty at JHSPH and traveled through a variety of positions, most recently as Associate Professor in the Department of Health Policy and Management and Core Faculty, Johns Hopkins Berman Institute of Bioethics. While at JHSPH I had a typical soft money research career spending most of my time applying for grants, doing research and writing manuscripts. Along the way I became involved with the research ethics consultation service at Hopkins, serving the Schools of public health, nursing, and medicine, and eventually became the director of the service. I also ran the PhD program in health policy and bioethics, taught classes on ethics and health policy, and sat on IRBs affiliated with the schools of public health and medicine as well as others in the public and private sector. I also started working with Maria Merritt, a former NIH Fellow and Visiting Scholar in the Department of Bioethics over the past year. We worked on a project on ancillary care, and we are now working on a project on social justice and multi-drug resistant tuberculosis. I discovered working on these projects that I love working with multi-disciplinary study teams. Our MDR-TB project is a collaboration between a social scientist, a moral philosopher, and a physician/epidemiologist. I'm convinced that working across different disciplines adds tremendous value to projects. One of the most attractive things about joining the Department of Bioethics was that it IS a multidisciplinary group of scholars. I have already had the pleasure of working with almost every faculty member in the Department and look forward to doing so for many more years. I will add that I spent many years reading journal articles authored by Department faculty and Fellows thinking, if only I had time to write the high-quality policy relevant manuscripts they produce. I am very lucky to have already been a part of a number of COVID related manuscripts. I feel privileged to work with such a great group of people on important ethical issues as we have all pivoted to address COVID.

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

My particular area of interest is in the local implementation of federal policy as it relates to human subject research. As such I am very interested in issues related to the review and oversight of research, how participants are recruited into research, who ends up enrolled, and how the informed consent process happens.

I have a number of initiatives and projects on my "plate". Just this week (May 26) The Consortium to Advance Effective Research Ethics Oversight (AEREO – www.aereo.org) which I Co-Chair with Holly Fernandez Lynch (UPenn) celebrated our 3rd anniversary. We established AEREO to address the gap in research on the quality of IRB review and to bring together individuals interested and able to support multi-site research. We now have close to 75 members from more than X institutions. The members are mostly directors of Human Research Protection Programs (HRPP), the office in which the IRB is a key component, at academic medical centers. The rest of the group is made of social scientists and legal scholars and leaders of professional organizations. I've always been really interested in how IRBs do their jobs. For example, what does it mean to protect the welfare of human subjects? We kind of know what that means because there are some regulations that everybody has to follow, but there aren't really any outcomes that tell us how well we are or aren't doing. We have, thankfully uncommon, notable outcome measures like unexpected death of a research participant, For example, right around I graduated with my PhD, a young man named Jesse Gelsinger, who had a mild form of a metabolic disease, enrolled in a clinical trial investigating genetic therapy with the ultimate goal of preventing the death of those born with a severe form of the disease. He died after he received an injection of the gene product embedded in adenovirus. Since then, I could probably count on my fingers the number of people who have died as a direct result of a clinical trial. You could say that, by this measure, the system must be working really well, because subjects die so infrequently. What we don't know about is what I'll call near misses, where someone barely survives. I'm guessing there are a lot more of those cases that we don't know about. If we really want to get a clear picture of the protection of human subjects, we need better outcome measures. At the moment we think one way of getting there is to gain a more detailed picture of how IRBs deliberate about the research they review, how often they engage in robust ethical analysis nor how often they make recommendations that enhance the protection of participants. In order to get to this point we have conducted a number of projects related to what quality means and what supports efforts to support quality.

For example, I'm just finishing up a project where we asked our members to share their experience of how they responded to COVID as an IRB. A project "on deck" will explore the role of the "community member" of the IRB. We don't know much about these people, but we have an idea that increasing their representation might influence how we think about IRB deliberations as they relate to the protection of human subjects. We also may have the opportunity this year to find out from investigators whether they have had experiences where they believe the IRB review enhanced their proposed research.

The other group that I'm really involved in is the Clinical Research Ethics Consultation Collaborative. I co-chair the group with Katie Porter (Seattle Children's Hospital). Marion Danis, along with two Department alums, Ben Wilfond and Donna Chen, are on the Collaborative Steering Committee. The collaborative brings together research ethics consultants (REC) from all over the country on a regular basis to talk about topics that we all struggle with. We meet once a month where members present challenging cases for discussion, we discuss an interesting journal article or have a round robin about REC practices and procedures. The cases presented often appear in the AJOB Challenging Cases in Research Ethics. As a follow up to a survey of RECs conducted more than 10 years ago, Katie Porter, Jen McCormick (Penn State) and I will be launching a survey of all the research ethics consultation services in the US and Canada. We will be collecting data to track the maturation of the field as well as adding a couple questions of more contemporary interest.

Another project I'm spending time on right now, with Annette and Christine is an exploration of the AIDS clinical trial group's (ACTG) experience with the single IRB. The single IRB is a novel policy put into place by the NIH that requires that multicenter domestic trials identify a single IRB of record to facilitate the review and oversight of research. I've written a bunch on why I think this might not be the best policy, but this is more a practical exploration of the ways they've been challenged, using in depth interviews with people affiliated with the AIDS clinical trial group.

I'm also working on a public opinion survey with many members of the department (Ben, Annette, Joe, Alex and Skye) about our responsibility to share COVID vaccines with poorer countries. We've been working really quickly to get it into the field this Spring!

Q: What has been your favorite part of being in the department?

I joined in June of 2019, and we were all sent home in March of 2020. So I had 9 months of being in the office. My favorite thing about the department pre-Covid is that on Monday, Tuesday and Wednesday everybody is in the Department. We all have our own projects with internal and external collaborators that we work away on in our offices but I love it when people come and knock on my door to ask a question or chat about an ideas. Also, having spent 20 years eating at my desk, I have adopted the Department standard of having lunch at Tea Table. Appreciate the chance to have casual and consequential conversations with others doing the same. The fact that the Department encourages being present and collaboration makes it a uniquely vibrant academic setting.

INTERVIEW WITH DAVID DEGRAZIA, PHD

David DeGrazia, who will be leaving the Department over the summer and returning to the George Washington University full-time in the fall, speaks about what got him interested in bioethics, his time at the NIH, and what's next



Q: Do you remember how you first became interested in bioethics? How have your interests developed over the course of your time with the Department?

I became interested in bioethics as soon as I heard of the field, which was surprisingly late (1982). I was told that it involved, among other things, philosophers putting their skills to use in biomedical contexts and addressing important social problems. Partly as a result of this interest, the only doctoral program I applied to was the one with a bioethics track:

Georgetown. However, I never lost my interest in philosophy as an academic discipline so,

throughout my career, I have had one foot planted in philosophy and the other in bioethics. The first bioethical issues that grabbed me were probably those associated with end-of-life decision-making. However, as soon as I read some articles on animal research ethics for a class in my first semester at Georgetown, I became extremely interested in animal ethics and moral status more generally—and knew I would write my dissertation in this area. Upon arriving in the Department of Bioethics in summer 2013, I continued my interest in a variety of areas: the two just mentioned, bioethical theory, the biomedical enhancement of human traits, issues connected to reproduction and genetics, pediatric research ethics, the definition of death, and the ethics of gun policy. Since joining the department, I have deepened my interest and engagement in animal research ethics, animal cognition and consciousness, and several topics in bioethical theory.

Q: What has been your favorite part of being in the department?

What are you going to miss the most?

The Department of Bioethics is the most high-functioning and collegial department I know. I will miss the cheerfully maintained high standards, collegiality, and excellent leadership.

Q: What are you up to next?

Since getting my Ph.D. I have worked in the Department of Philosophy at George Washington University, although I went to 40%-time during my eight years with NIH. I will return to full-time status at GW. In the next year I will teach two classes per term, write a book called Dialogues on Gun Control, and apply for fellowships for a project on moral status. I will be easy to contact via my GW email address.

Q: Do you have any parting words of wisdom?

Don't let social media gobble up your day. Don't let work take over your life. Strive for balance and health. Avoid the traps of cynicism and maintain your commitments to things of genuine value.

INTERVIEW WITH JOSEPH MILLUM, PHD, MSC

We spoke with Joseph Millum about his upcoming departure, looking back, and what's next.



Q: How long have you been at the Department?

I came for a post-doc in 2006 and didn't leave...Nearly 15 years!

Q: What was the first bioethics issue to grab your attention? How have your interests changed?

The topic that brought me into bioethics was commercial surrogacy – the practice of paying a woman to gestate a child on someone else's behalf. I think we had a week devoted to it in a bioethics class I TA-ed at U Toronto. I was just wrapping up my Ph.D. on metaethics—a long, long way from anything practical—and I was ready for something more connected to

the real world. The question of who are the parents of children born through surrogacy jumped out at me because I had no idea what the answer was. Other people seemed very sure, and judges were issuing legal rulings on surrogacy disputes, but the arguments that were given seemed philosophically ungrounded. Anyway, I never really published on surrogacy, but it got me into working on the ethics of parenthood and made me realize that there are all these fascinating questions around health and medicine. I don't know that my interests have changed per se while I've been here. It feels more like I kept adding interests. I'm still working on parenthood, but NIH got me thinking about research ethics, and then consent, and then priority-setting, and so on.

Q: What has been your favorite part of being in the Department? What are you going to miss the most?

I think I'll only really know the answers to these questions once I've left... The department is where I grew up as an academic (insofar as I've managed that!). I know that I'll miss the community here. We come from such different backgrounds and have very different approaches to engaging ethical questions and yet it's an incredibly supportive group. I'm definitely going to miss my colleagues!

Q: What are you up to next?

I'm going back to the UK, which is where I grew up. I'll be a senior lecturer in the philosophy department at St. Andrews University in Scotland. It's on the coast of Fife – come visit! I'll still be working on bioethics and I hope that I'll see you all at conferences.

Q: Do you have any parting words of wisdom?

Words of wisdom? That we should aim to find out the truth, even if it's not the answer we wanted. And that we should be asking questions to which we don't yet have the answer. I think genuine open-mindedness and curiosity are two of the most valuable virtues that academics can cultivate.

2019-2021 FELLOW BIOGRAPHIES

Emma (EJ) Jardas: I'm a post-baccalaureate fellow in the Department of Bioethics. My background in Psychology informs my work in bioethics, which sits at the intersection of psychology, predictive analytics, and clinical ethics. For example, in one project, I respond to criticisms about an algorithm meant to predict which treatment a patient with decisional incapacity would have chosen for themselves. In another project on the debate surrounding euthanasia for psychiatric disorders, I review evidence about whether algorithms can predict whether a patient will ever recover from their depression. In the future, I plan to obtain a PhD in Clinical Psychology and develop algorithmic tools to detect and treat suicidal ideation. Bioethics has forever influenced my academic identity, and I hope to continue to write about AI ethics.

Alex Iyer graduated from Brown University in 2019 with an ScB in Neuroscience. At the NIH, his research has focused on research ethics challenges for gene therapy trials and Covid-19 vaccine and treatment trials, as well as the challenges and opportunities presented by emerging digital and neurotechnologies in healthcare. His recent work has appeared in The BMJ, Genetics in Medicine, and Ethics & Human Research. He will attend Harvard Medical School in the fall of 2021.

Skye A. Miner is a postdoctoral fellow in the Department of Bioethics. She has a PhD in Sociology from McGill University. At the NIH she uses empirical methods to study emerging technologies and diseases. Her most recent project combines her sociological research interests in families, gender and social inequities with her bioethical interests in moral distress to qualitatively examine how frontline workers who are also parents are navigating their roles as community members, caregivers and workers during the COVID-19 pandemic. In the fall of 2021, she will start as an Assistant Professor of Bioethics and Humanities at University of Arkansas for Medical Sciences (UAMS).

Kevin Mintz received his Ph.D. in Political Science from Stanford University. He also holds an MSc in Political Theory from The London School of Economics and Political Science, and an AB in Government from Harvard College. Born with cerebral palsy, his research focuses on disability ethics. His work has appeared in a variety of venues including Pediatrics, Disability & Society, and the Los Angeles Times. On August 1st, Kevin will be returning to Stanford as a Postdoctoral Fellow at the Center for Biomedical Ethics, focusing on the ethical, legal, and social implications of genetics and genomics.

Jorge Ochoa is a second-year research fellow in the NIH Department of Bioethics. He is currently on a rotation working as a Junior Policy Advisor in the White House Office of Science and Technology Policy in the inaugural Science and Society Division. Trained in Neuroscience and Ethnicity and Race Studies,

his portfolio of research has focused on substance use disparities among LGBTQ communities, diversity and health equity in precision medicine, and COVID-19 vaccine trial ethics. Jorge plans to begin doctoral training in sociology beginning in the fall of 2022.

Coleman Solis: Right now, I'm wrapping up my time at the NIH and preparing to transition to a philosophy PhD at UC Berkeley. I've had two major projects at the NIH: One is about the possibility of humane animal farming practices and the harm of killing – if you'd like to read it, it's called "How Much does Slaughter Harm Humanely Raised Animals?" and it's in J Applied Phil. The other, which Kevin Mintz, Marion Danis, Kathleen Fenton, and David Wasserman, and I are collaborating on, is about the normativity and meaning of care in home care work. We haven't submitted that one to journals but hope to soon. I'm keeping an open mind about what I'll write in the future, since I'm just beginning grad school, but I've been especially interested in the meaning of "harm," lately. Otherwise, I'm just enjoying my last few months in DC/first few months in the bay!

On March 1st, **Sungwoo Um** began a tenure-track position as an Assistant Professor in the Department of Ethics Education at Seoul National University, South Korea. During his postdoctoral fellowship in the Department of Bioethics, Sungwoo tried to apply a virtue-ethical approach to important bioethical topics such as autonomy and decision-making. His paper, "Vices in Autonomous Paternalism: The Case of Advance Directives and Persons Living with Dementia," has been awarded the Mark S. Ehrenreich Prize in Healthcare Ethics Research for the best paper (Asia) from 2020 World Congress of Bioethics and has been revised and resubmitted to the journal Bioethics. Another paper, "Autonomy and Non-Intrusion," co-authored with Dave Wendler, is currently under review. Before joining NIH, he received a PhD in the Philosophy Department at Duke University. He also has philosophy degrees from Oxford University (BPhill) and Yonsei University (BA and MA).

ALUMNI UPDATES

Govind Persad: I've been on parental leave with Duncan, 7 months old, but got roped into a few COVID-19 related opeds: "US should share vaccine doses it's not using with the world" (Boston Globe, w/Zeke Emanuel); "Age-based vaccine distribution is not only unethical. It's also bad health policy" (WaPo, w/Zeke & Emily Largent); "Extending the Johnson & Johnson vaccine pause for a week was a deadly mistake" (WaPo, w/Will Parker). My "Pricing Drugs Fairly," presented prepandemic at NIH, just came out in the



William and Mary Law Review, and "Allocating Medicine Fairly in an Unfair Pandemic," on the law of addressing COVID-19 racial disparities, will be in the University of Illinois Law Review soon.

Gopal Sreenivasan: I spent 20-21 on sabbatical in Oxford with my family. I was a visiting fellow at All Souls College and then at Corpus Christi College. It was a strange year in some ways, thanks to Covid, but still worthwhile. Janaki and Ambika got to wear uniforms to school and learned strange sports, like netball and cricket. After many years, my book EMOTION AND VIRTUE (Princeton) was finally published. I worked on the human rights half of a new book on rights and human rights. I also got the local vaccine (Astra Zeneca).



Akilah Jefferson Shah: In September 2020, Dr. Jefferson Shah joined the faculty at University of Arkansas for Medical Sciences (UAMS) and Arkansas Children's Research Institute (ACRI). She has appointments in the Department of Pediatrics (Division of Allergy and Immunology) and the Department of Medical Humanities and Bioethics. Dr. Jefferson Shah also joined the ACRI asthma research program where her research focuses on asthma, health disparities, health policy, and ethics. This year Dr. Jefferson Shah has immersed herself into issues related to the pandemic, namely health disparities and ethics, engaging through invited lectures,

publications, and popular media outlets such at the Huffington Post and NPR. She is also the UAMS/ACRI site lead at for the NIH-sponsored SARS Vaccination trial, investigating allergic reactions to SARS-Co-V-2 mRNA vaccines. She was recently awarded the National Minority Quality Forum's 2021 "40 Under 40 Leaders in Minority Health Award."

Becky Wolitz: My update is that I'm very excited to be joining the faculty at The Ohio State University, Moritz College of Law this summer. Moreover, I'm thrilled that I'll get to be colleagues with NIH alumnae Patti Zettler and Dana Howard!

Annette Rid: Thomas and I had the good fortune to welcome a brother for Oskar last summer - meet Gustav! Both boys are thriving and (mostly) blissfully ignorant about the craziness outside their microcosm. In hopes that travel will be possible again at some level sooner rather than later: please get in touch if you're in DC!



Matthew F. Morgado: I'm taking my philosophy PhD at Johns Hopkins. I've just finished my first year. It went very well! I still have some time to pick a dissertation topic. At this point, I'm heavily leaning toward a project in the philosophy of psychiatry. But we'll see. In other news, I still study music on the side. I also plan on getting vaccinated soon. (But I can't convince the rest of my family to do so.) I'm so thankful for the experiences and opportunities afforded by the NIH fellowship. I'll never forget them, and I hope to someday revisit the Department.

Dena Davis has survived a year of zoom teaching and is looking forward to her sabbatical in the fall, hopefully in Belgium and Holland.

Dana Howard: I'm currently an Assistant Professor at the Ohio State University Division of Bioethics, in the College of Medicine. I have been running a research ethics panel series at OSU where I have brought in a number of NIH affiliated faculty and alums: topics this year have included the ethics of public policy research, the ethics of research with sexual and gender minorities, and the ethics of DIY science. Check out our programming here: https://cehv.osu.edu/care/events. I continue to work on issues related to marginal agency and medical decision-making, norms of advising in public health context, and transformative choices in medicine. I have been working with an interdisciplinary group at OSU on questions related to addiction regulation, clinical practice, and particularly focusing on opioid treatment agreements. For updated CV see: https://sites.google.com/site/danasarahhoward/

Colleen Denny: I'm an ObGyn, currently working as the Medical Director of Women's Health Services at Bellevue Hospital in Manhattan and an Assistant Professor with the NYU School of Medicine. My work is mostly clinical, teaching, and administrative, but I also serve on a few national professional committees, including the Ethics committee for the American College of Obstetricians and Gynecologists (alongside other former fellow Dave Shalowitz)! I'm moving towards more work in physician leadership and advocacy, particularly around improving care models for underserved groups and promoting reproductive health generally.

Roseanna Sommers: In July 2020, Robert and I moved to Ann Arbor, MI to join the faculty at the University of Michigan (me in the Law School and he in the Sociology Department). We feel very lucky to have landed our dream jobs! It was undoubtedly a strange time to move to a new city, but it already feels like home. I gave my first faculty workshop over Zoom and taught my first big doctrinal course (torts). As the semester



wraps up, I am looking forward to diving back into research. I remain eager to collaborate with bioethicists on issues relating to consent and deception, so please seek me out if you are interested in empirical research on these topics (rosesomm@umich.edu).

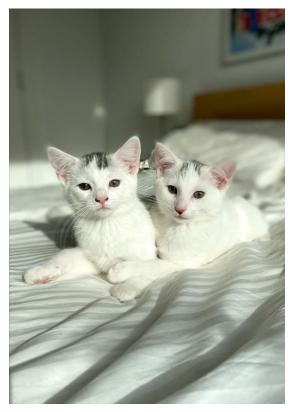
Elizabeth Pike: Hi everyone--well, this past year has certainly been an adventure. Since my last update, I moved from HHS and now serve as Associate General Counsel at the Patient-Centered Outcomes Research Institute (PCORI), where I focus on legal issues associated with human subjects research, data, and technology (essentially all the scholarly things I've thought about since my time at NIH) along with the legal issues associated with running an organization during a pandemic. I've also coupled that



with the adventure that was pandemic parenting (my daughter Evelyn is now 7 and my son Holden is 4) and a pandemic puppy (Teddy, 8 months, named by the kiddos). Wishing everyone well!

After leaving the dark side (big law) to return to bioethics in 2018, **Ben Krohmal** has been serving as acting director of bioethics at MedStar Washington Hospital Center for the last year. He and his wife and son Ezra (5) welcomed a new baby girl, lvy, in March, and just moved to a new house Mt Pleasant in DC.

During the past year, **Marie Nicolini** remained affiliated with the Department as a visiting scholar and completed her PhD in Bioethics at KU Leuven, Belgium (to be conferred May 2021).



Leah Pierson: I just finished the first year of my PhD (and third year of my MD-PhD) in Global Health and Population at the Harvard School of Public Health. This summer, I will be researching ethical issues related to global health priority setting as a Global Priorities Fellow at Oxford. I also adopted two kittens.

sophie Gibert: I am finishing up my third year of the PhD program in Philosophy at MIT. I'm officially ABD and working at the intersection of ethics and the philosophy of action. This summer, I am running Experiential Ethics, an ethics of technology course at MIT that I taught for last summer. In other news, starting this fall, Haley Sullivan (fellows class '18) will be my roommate! And for a shameless plug, I started a small digital art business this year (find me on Instagram @by_sophiegibert or online at sophiagibert.com/art).

Rob Hughes: I continue to teach business ethics at the Wharton School while pursuing research on the ethics of obeying the law, the ethics of enforcing the law, and the ethics of exploitation (including exploitation in the pharmaceutical industry).

Haley Sullivan: I just completed the first year of a PhD in Health Policy at Harvard. This summer I will be doing research in Harvard's Department of Population Medicine on the cost effectiveness of genomic sequencing for pediatric populations. I also spent May in Oregon with my fellows classmates Leah Pierson and Sophie Gibert.

Kacey Wulff: Jonny, Luna, and I are officially back in DC after spending the past four years in Colorado. Out there I worked in state government



running a health care reform policy office called "The Office of Saving People Money on Health Care" (yes, really), and then moved over to run the COVID-19 response in the Governor's Office when the pandemic hit. As of this January, I joined the Biden administration where I'm the Chief of Staff of the public health emergency office at HHS, the Office of the Assistant Secretary of Preparedness and Response. I'm currently a "stop out" student in the Doctor of Public Health program at Hopkins, and I'm excited to dig back into that work on the other side of the pandemic. We are thrilled to be back in DC, and are welcoming our first kid. Wish us luck!

