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The Paywall as Metaphor and Symptom

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Chattopadhyay and colleagues (2017) basically present two lines of argument in regard to access to bioethics journals by those working in this field in low- and middle-income countries (LMICs). The first is a harm-based argument: poor access to bioethics literature in leading journals causes harm parallel to the harm that lack of poor access to medical and public health journals can have in LMICs for local medical practitioners or epidemiologists. Clearly, the type of harm is not the same in both cases. In the bioethics case, it is harm to the field of bioethics itself, in that poor access to information prevents the flourishing of a truly global bioethics. The second argument is a justice-based argument: poor access to bioethics literature is unfair to those in LMICs who want to pursue interests in this field, a form of inequality of opportunity relative to their counterparts in the global north. We mostly focus on this second line of argument, as do they. While we are largely in agreement with the views of Chattopadhyay and colleagues about the injustice of global inequalities in access to bioethics journals, we submit that the “moral ecology of bioethics,” as seen from a non-Western perspective, may be in even worse shape than they suggest.

Let’s back up, with a disclosure. We are principal investigators of National Institutes of Health (NIH)-funded bioethics training grants in southern and central Africa. Unlike Chattopadhyay and colleagues suggest, not all such programs consist in sending scholars from the developing world to courses offered in North America and Europe; ours are Africa based, and aim at both individual capacity building and institutional change. That being said, efforts to stimulate interest in local bioethics issues and support “indigenous” responses to them are incredibly challenging, for the reasons that Chattopadhyay and colleagues indicate and many more. We submit that even if the global information gap in bioethics were overcome, the goal of unlocking the authentic bioethics voices of LMICs would be still quite far off.

Let’s start with the language that the bioethics information is in, namely, English. Anyone not convinced of the predominance of English in bioethics should try to create an “English-free” or even “English-light” bioethics curriculum or syllabus. Take away English-language books and journals, and the number of available resources to teach bioethics drops precipitously. This brute fact requires prospective trainees in LMICs to have a strong command of English; it also compels programs to search high and low for suitable bioethics-related material in alternative languages, or to conduct massive amounts of translation (some of which is hindered by copyright protections). In Francophone Africa, bioethics literature items in French relevant to local circumstances are few and far between, not to mention in other less used colonial languages (i.e., Portuguese), not to mention the thousands of indigenous languages on the continent. A person in an LMIC learning about bioethics may be doing so in his or her third language.

Perhaps, one could argue, those trained in bioethics in LMICs are precisely those who should create alternative literatures and resources. But how do you get started? Besides the challenge of journal access, there are other barriers to engaging with bioethics traditions and others in the bioethics community. There are issues at both the consumption and the production ends of academic publishing. Many so-called “international journals” publish articles written predominantly by bioethicists from high-income countries about first-world bioethics problems. This has a crowding out effect, with bioethicists from LMICs consequently suffering high rejection rates. This means that even if LMIC bioethics workers had better journal access, they would discover little in the literature that resonates with their own experience and concerns. Furthermore, bioethics workers from LMICs often have difficulties attending international bioethics conferences, particularly those

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hosted in faraway, expensive venues in Europe and North America, which commonly have hefty registration fees. Less expensive bioethics gatherings, closer to home, are very few and far between. Some conferences (such as PRIM&R) offer limited discounts to increase access to those from the global south. Like policies and programs (such as HINARI) to improve journal access, this at least acknowledges the problem. But the pattern remains the same. Exclusion is the rule; inclusion is the exception.

More fundamental, however, are the profound challenges faced by those hoping to pursue something resembling a career in bioethics in LMICs. Bioethics workers there, with relatively rare exceptions, do not enjoy the support of a strong institutional home. This means that in places like Malawi or Madagascar, it is next to impossible to live by bioethics alone, and even devoting a portion of one's time and effort requires significant professional and personal sacrifice. Bioethics would have a greater chance of flourishing in LMICs if local academic and health institutions were in (much) better shape than they often are. In our experience, while there is great interest in LMICs in regard to mindfully tackling locally relevant bioethics issues, local institutions are typically struggling to meet other priorities.

What would it take to realize the goal of a truly global bioethics that included the authentic voices of LMICs? There is, of course, the "big picture" issue of global inequality: The ethical issues faced by bioethicists in LMICs, the challenges encountered in pursuing their intellectual interests, and their relatively subordinate position in the global bioethics community would be quite different if the world were less marked by inequity, oppression, abuses of power, and the legacies of historical injustices. Western hegemony in bioethics mirrors related hegemonies. But short of the radical transformation that some LMIC bioethics workers have called for (Benatar, Daar, and Singer 2003), what in the short term could help? We end with a few suggestions.

Journal access. The ultimate way to achieve equity in terms of access to journals could be free access to bioethicists working in LMICs. Furthermore, if each international bioethics journal had a section dedicated to LMIC perspectives, this would level the playing field to a significant extent. One might argue that there is already a journal devoted to LMIC bioethics issues (*Developing World Bioethics*). But it is worth reflecting on the fact that there is one specific bioethics journal for all non-Western bioethics workers. Imagine an alternative world in which all bioethicists from the industrialized north were

supposed to be satisfied by having "their own" journal named *Developed World Bioethics*.

Conference access. To begin with, hosting international bioethics conferences in LMICs would start to shift the balance slightly in favor of bioethics scholars who are otherwise excluded from participation in meetings in developed Northern settings. To take African examples, neither the International Association of Bioethics (IAB) meeting nor the International Conference on Clinical Ethics Consultation (ICCEC) has ever been hosted in Africa. Voices from Africa are conspicuously absent in plenary sessions of major global conferences. Conference tracks very rarely include the global philosophical perspectives alluded to by Chattopadhyay and colleagues.

Curriculum diversification. In Africa, at both undergraduate and postgraduate programs, there is a growing call to "decolonize" academic teaching. This can and should be extended to bioethics teaching (Fayemi and Macaulay-Adeyelu 2016). Directors and faculty of Western-funded capacity development programs pay heed to these calls via curricula reform and contribution of African, Buddhist, and other philosophical perspectives to the global bioethics literature (Moodley 2017). Moreover, though unlikely to happen overnight, this form of curriculum change should be a goal wherever in the world bioethics is taught, including North America and Western Europe.

As a discipline that strongly supports global justice and frowns upon power asymmetries and exploitation in all contexts, bioethics is ideally placed to put its own house in order in regard to closing the gap between the privileged global north and LMICs located primarily in the global south. ■

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