

Forum for Medical Ethics Society: A Journey (1995-2020)

FORUM FOR MEDICAL ETHICS SOCIETY (FMES)

Indian Journal of Medical Ethics (IJME)(www.ijme.in)

Health, Ethics and Law Institute for Training, Research and Advocacy
(www.fmesinstitute.org)

National Bioethics Conference (NBC)
(<http://www.ijme.in/ijmenbc/index.php>)

We stand for Integrity in Science and Practice in Health & Allied
thematics

We contribute to bioethics discourse in the context of the developing
world to off set knowledge asymmetry



FMES at a glance

- Life span: Quarter century
- Overall goals: To work towards enhancing ethical practices in health and allied theme with regards to policy, research, clinical care, and public health
- Organisational Structure
 - Current: Registered Society, Managing Committee (MC), IJME Editorial staff and admin-finance human resource primarily governed by and overseen by the MC
- Present activities: Advocacy and campaigns; bioethics trainings, public engagement on bioethics matters, Research; IJME publishing
- Future plans: Further strengthening of current activities; expanding FMES scope of work to research, advocacy, intervention-research, institutionalizing bioethics training program, innovative e-platforms for health news analysis, critique

Ethics	Considered as an applied philosophy
Discipline of bioethics	Evolved over last about seven decades as a multi-disciplinary field of enquiry comprising medicine, biology, law, humanities and the social sciences.
Prominent sub fields of bioethics	Medical ethics , health care ethics, research ethics (biomedical sciences, social sciences, health research) professional ethics, environmental ethics
Our work – Goals	Striving towards improving quality of care and research in medicine and allied areas including social science research in health which complies with ethics standards
Our work – approaches	<p>Inherently multi-disciplinary, collaborative</p> <p>Involves persons engaged with and practicing different disciplines</p> <p>Involves contributing to training various constituencies towards critical analysis and ethical reasoning to help navigate through difficult territories when confronted with challenges faced by practitioners , such as, health professions and researchers.</p>

FMES: Inception (Mid & late 1980s)

Contemporary context

Controversies on Consumer Protection Act, Medical negligence and malpractice cases, Amniocentesis - sex determination, role of doctors in violence, etc.

Impact on health care system

Eroding credibility of profession

Coming together and regular meetings – 1989 to 1999

Establishment of Forum for Medical Ethics - 1993

Response

Contested Maharashtra M Council elections - 1992

Discovery of electoral malpractices,

Need felt strongly for long term intervention around ethics for health care reforms

FMES: Formalization & consolidation

Registration status	<ul style="list-style-type: none">◉ As a Society and Trust – 1995◉ Income tax section 12A and 80G
Structure/s	<ul style="list-style-type: none">◉ Managing Committee – decision makers◉ Key collective to shape the work of FMES◉ Honorary only, no remuneration
Membership	<ul style="list-style-type: none">◉ Only by invitation, currently 55 members◉ Multidisciplinary (medicine, public health, social sciences, humanities, law, journalism)◉ Evolved from a small localised group of medical professionals in Mumbai to a multidisciplinary national level collective◉ Initiatives still concentrated in Mumbai-Pune
Three key platforms	<ul style="list-style-type: none">◉ <i>Indian Journal of Medical Ethics (IJME)</i>◉ National bioethics conferences (NBC)◉ Health, Ethics and Law (HEaL) Institute

Brief history and background

Indian Journal of Medical Ethics www.ijme.in

Initiation and evolution

- Started in 1993
- From a newsletter to full fledged jr of relevance
- From 8 pages to 84 pages in 2017-18
- Scope for expansion to 100 pages in 2018-19
- Core editorial team (honorary)

Uniqueness

- The only jr in bioethics in India
- Provides space for critical commentaries, educational case studies, academic research
- In this format, the only jr in Asia

Select achievements

- Completed 25 yrs of uninterrupted publishing
- About over 100 issues published
- Five special issues for five NBCs from 2005
- A number of theme issues published
- Peer reviewed, indexed (PubMed, MedLine, TPI)
- Membership to CrossRef and DOI assignment

Brief history and background

Indian Journal of Medical Ethics www.ijme.in

Recognition and relevance

- ◉ National and global, runner up BMJ awardee in 2017
- ◉ Contributors, reviewers , editorial board members from around the world

Journal access

- ◉ Available as open access free journal
- ◉ No fees charged to contributors or readers

Web presence

- ◉ Website established n yr 2000
- ◉ All past issues available digitally, issues archived
- ◉ Jr publishes both in print and electronically

Web based peer community & outreach (2016)

- ◉ 4.9 million hits (average 4,08,029 per month)
- ◉ 3,30,090 unique visitors with 4,34,180 visits (ave 27,508 & 36,182 respectively/month)
- ◉ over one million (ave 84,640 / month) page-view
- ◉ 192 GB download (ave 16 GB/ month)

Brief history and background

National Bioethics Conference (NBC)

(<http://www.ijme.in/ijmenbc/index.php>)

Yr of platform establishment & evolution

- 2005 to meet every two years;
- Six NBCs organised so far, the seventh one in Dec 2018

Approach

- Collaborative with other like-minded entities;
- Across three NBCs collaborators varied between 20 and 38
- Two NBCs opted for a smaller number of conf organisers

Host cities

- Mumbai, Bangalore (2), New Delhi, Hyderabad, Pune

Scale & scope of participation

- Across five NBCs varied between 300+ and 700+; multidisciplinary

Themes

- Ethical challenges in biomedical and social science research;
- Moral and ethical imperatives of healthcare technologies;
- Governance of healthcare: issues of ethics, equity & justice;
- Ethics and regulatory challenges in health research, and
- Integrity in medical care, public health & healthcare research; Ethics and palliative care, end-of-life care, euthanasia

Funding

- Heartening response, diverse funding sources, have been able to sustain the platform

Do we matter?: Salience & shifting landscape

FMES

Essential for the existence of IJME and NBC

Increasingly involved in active advocacy initiatives independently or collaboratively

Aspires to respond to issues by undertaking research , policy analysis & shaping ethics related regulatory frameworks

Aspires to institutionalise bioethics training

Preparation on for 6th NBC in Pune in Jan 2017

Won the bid to host 14th World Congress of Bioethics in Dec 2018 jointly with 7th NBC

IJME

Platform for critical reflections, debate, self & peer learning,

When no players were there we initiated ethics training activities in research and clinical care

Scholarship in bioethics in systematic form was not available, we made significant contribution

It serves as a bridge between academia and advocacy initiatives informed by grassroots players & their work

Impact on practice & policy

NBC

A response to the need for a more active and inclusive platform

Enabled direct dialogue across disciplines

Attracts younger practitioners, scholars and advocates

Enabled networking

Enabled exploration of newer areas and focused debate on contemporary pressing issues in bioethics

Recent expansion for programmatic work

Health, Ethics and Law Institute for Training, Research and Advocacy (2018 onwards)

- Institutionalizing bioethics training
- Digital platform for health news analysis
- Research
- Campaigns and advocacy
- Public engagement
- Other activities underway

Institutionalizing bioethics training

- ◉ Streams: Clinical ethics, public health ethics, research ethics
- ◉ Institutional collaborations with academic entities
- ◉ Institutional collaboration with ICME-ICSSR entities
- ◉ Online ethics training: UGC-MOOCs
- ◉ Credit courses
- ◉ Short and long term trainings

Digital platform for health news analysis

- ◉ Work in progress
- ◉ Concept mapping done, prototype will be developed
- ◉ Tech partner: Samanvaya Foundation
- ◉ Grant request developed
- ◉ Funding being explored, have approached a potential funders

Research

- ◉ Gender and health: Gender Justice
- ◉ GBV and health care system's response as legal and ethical obligations
- ◉ FGM
- ◉ Palliative care, EoLC, Euthanasia: Ethical and legal matters
- ◉ UHC-Health for all: Health justice
- ◉ Social science research ethics
- ◉ Climate change, health impact, ethical analysis
- ◉ Controlled Human Infection Models – ethics analysis

Public engagement

- ◉ Ongoing activity
- ◉ Public lectures, panel discussions
- ◉ Seminars and workshops
- ◉ Various collaborators
- ◉ Wide ranging issues – contemporary and otherwise

Campaigns and advocacy

- ◉ EoLC
- ◉ ReAmina
- ◉ Uterus transplantation

Other activities underway

- Members contribute to policy level conversation by serving on committees/working groups constituted by government (ICMR Ethics guidelines, NHM, NMC Bill, DBT-CHIM)
- International: Faculty for bioethics training, invited participants in international consultations on issues on bioethics
- Launched IJME Ethics Award supported by Elsevier Foundation
- Advocacy and campaigns during the COVID-19 pandemic

FMES: Evolution of funding scenario & major expenditure heads

Evolution of funding scenario

Until 2005: All activities were run by volunteers; financed almost fully by contributions from individual members and friends

2005-2014: NBCs partially helped raise funds to support FMES-IJME work

2014 – to date: Actively and fervently reached out and explored funding support. Secured funds under CSR from two sources; Grants being explored

Honorary contributions and leadership continues to be the mainstay

Major expenditure heads

Current

- Salaries (modest scales, part time, less than necessary human resources, good will of the collective and commitment to the cause is the motivation)
- Copy editing services
- Web services

Looking back and looking ahead

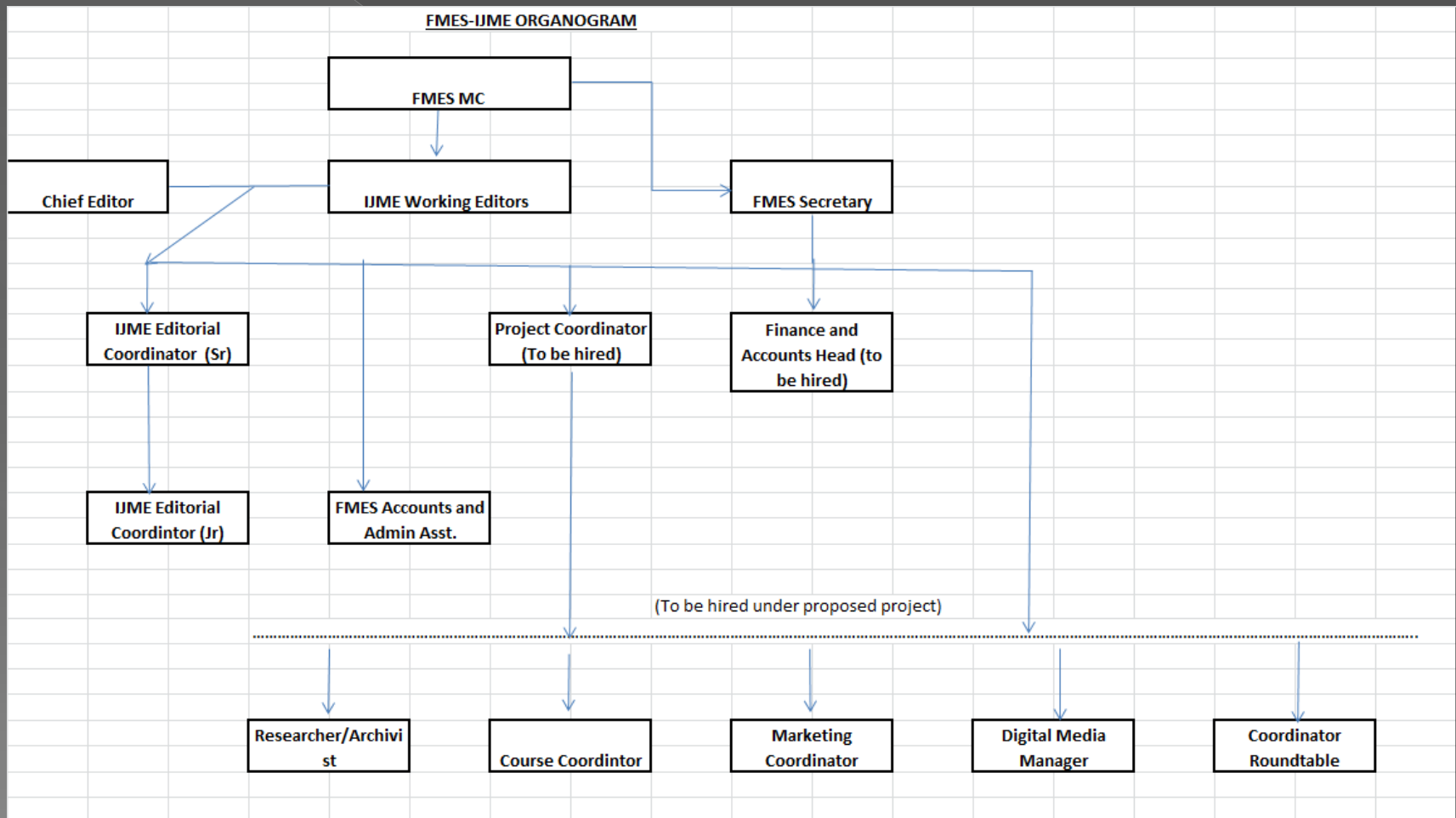
Achievements so far

- ◉ An alternative voice for 'bioethics' in a climate dominated by information asymmetry & market medicine
- ◉ Platform for solidarity amongst individuals & organisations working towards humane & ethical health care
- ◉ Institutionalizing bioethics as a discipline
- ◉ A 'survival' model for an academically rigorous journal free from Pharma & industry funding

Opportunities and Continuing challenges

- ◉ Mainstreaming bioethics
- ◉ Attracting increased attention from the profession without compromise & cooption
- ◉ Impacting policy change
- ◉ A viable & sustainable financial model

FMES-IJME ORGANOGRAM



A little more about IJME

Overview

- Genesis, Principles & foundations, and goals
- Early years
- Spectrum of what we publish
- Institutional/Disciplinary affiliations of contributors
- IJME: Currently poised at...
- Transition: At a glance



IJME: Genesis, founding principles & goals

Genesis

- 'Unethical practice' in Indian healthcare under scanner; 'cut practice', 'kidney rackets', 'capitation' colleges
- Medical profession brought under the purview of the Consumer Protection Act
- A group of concerned doctors get together in Mumbai
- Contest state medical council elections, receive support & substantial votes
- 'Forum for Medical Ethics' established, a small newsletter started

Founding principles

- Averting conflict of interest: No industry funding
- Editorial independence: Publisher (Forum for Medical Ethics) has no say in editorial matters
- Editor not on payroll
- Quality standards: Publication by two independent peer reviewers

Goals

- Provide platform for critical voices to diverse constituencies including patients and research participants engaged with health and allied themes
- To ensure knowledge is accessible to all regardless of capacity to pay - open access policy

IJME: Early years & evolution thereafter

Early years

- ◉ First editor Dr Sunil Pandya , Dept of Neurosurgery, KEM Hospital
- ◉ Weekly meetings, Study circles
- ◉ Voluntarism, subsidy from supporters.
- ◉ “Medical ethics’ grows to ‘Issues in medical Ethics’ to ‘Indian Journal of Medical Ethics’
- ◉ Curiosity, healthy respect but limited support from the profession
- ◉ Media interest
- ◉ Support from health movements, activists, victims of malpractice, patients rights groups

Evolution thereafter: Stabilization & growth

- ◉ Persistence, regularity, on time.
- ◉ Gradual growth in size , original articles, academic rigour
- ◉ Peer review, indexing by NLM (Medline) in 2005 with retrospective effect from 1993
- ◉ Pubmed (2005), Scopus (2009), The Philosophers Index (2015), Elsevier
- ◉ Increasing submissions & citations
- ◉ Individual donations , philanthropic grants, CSR funds from publishing house

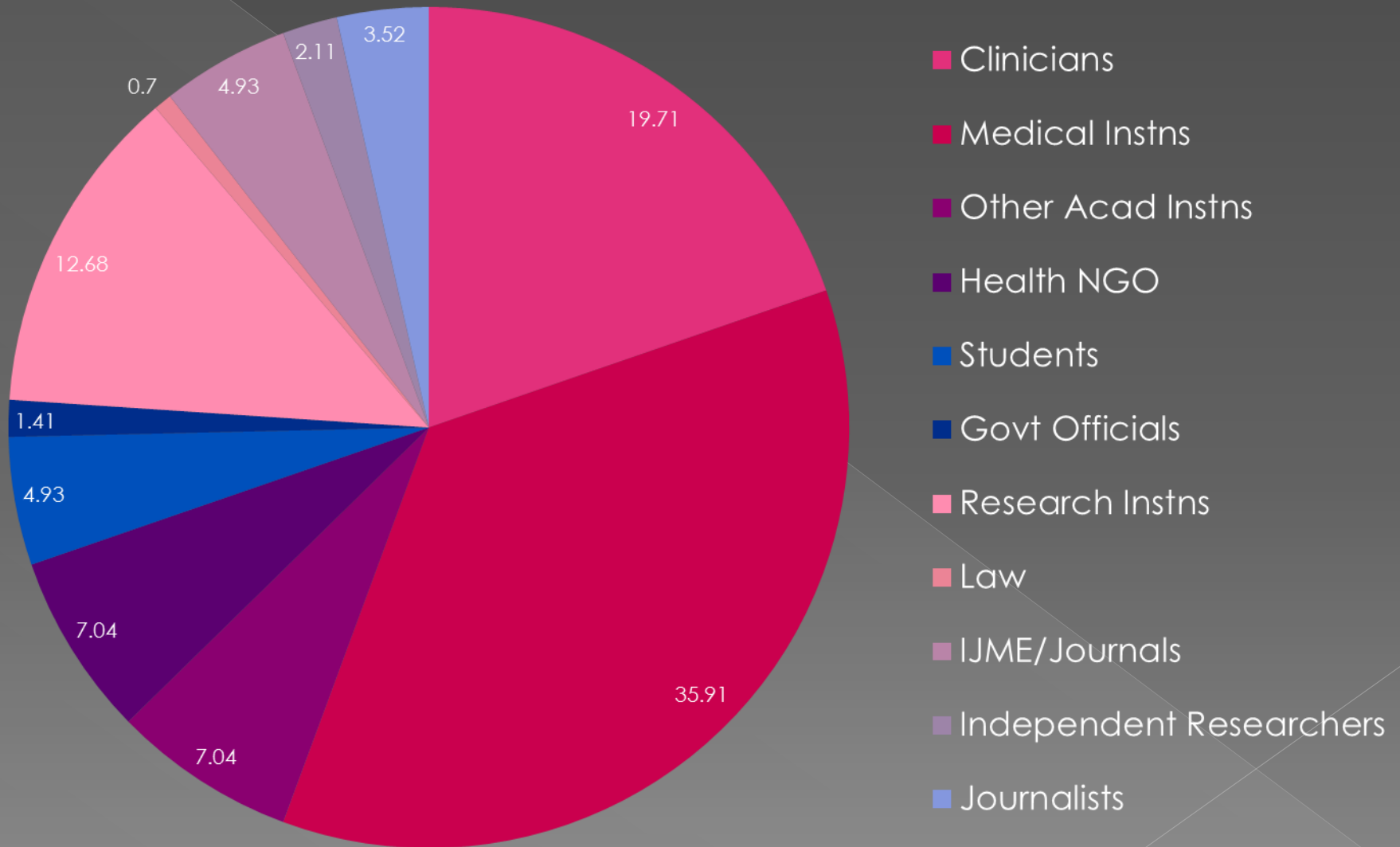
IJME: current poised at ...

Frequency of Publication	Quarterly (print issue)
Pages per issue	84
Copies printed per issue	500
Journal access (online) per week	5000 views/week (average)
Access Model	Open Access, no fees
Indexed by	PubMed, Scopus, The Philosopher's Index, Google Scholar, Medline, Elsevier
'Business' Model	No pharma/industry support; advertisements only from academia, publication houses, non-health industry

The Spectrum of what we publish

1. Madhan M, Gunasekaran S, Arunachalam S. Evaluation of research in India: Are we doing it right? Indian J Med Ethics. Published online on March 23, 2018. DOI: 10.20529/IJME.2018.0
2. Lexchin J, Kohler J, Gagnon M-A, Crombie J, Thacker P, Shnier A. Combating corruption in the pharmaceutical arena. Indian J Med Ethics . Published online on March 15, 2018. DOI:10.20529/IJME.2018.0
3. Jain Y, Desiraju K. It is not enough to grieve; we must learn from Gorakhpur. Indian J Med Ethics 2017 Oct-Dec;2(4) Ns:221-3. DOI: 10.20529/IJME.2017.08
4. Wilson M. **The New England Journal of Medicine: commercial conflict of interest and revisiting the Vioxx scandal.** (2016 Jul-Sep):
5. Srinivasan S, Johari V. **Response to proposed research to reverse brain death: more than regulatory failure.** (2016 Jul)
6. Ayarkar S, Chandrashekhar A. **Who decides the “best interests” of the child?** (2016 Jul-Sep):
7. Satalkar P, Shrivastava S, De Sousa A. **Internet-mediated psychotherapy: Are we ready for the ethical challenges?** (2015 Oct-Dec):
8. Bandewar SVS, Pai SA. **Regressive trend: MCI's approach to assessment of medical teachers' performance.** (2015 Oct)
9. Johari V. **A million little pieces of broken trust.** (2015 Jul-Sep)
10. Mariaselvam S, Gopichandran V. **The Chennai floods of 2015: urgent need for ethical disaster management guidelines.**(2016 Apr-June)
11. Pandya SK. **Making medical care and research rational and affordable.** (2016 Apr-June)
12. Bhatia R. **A reproductive justice perspective on the Purvi Patel case.** (Published online first May 2016)
13. Nair S. **Aruna Shanbaug and workplace safety for women: the real issue sidestepped.**(2016 Jan-Mar):
14. Rao S. **When corruption becomes the norm and ethical conduct an exception.** 2016
15. Hossain N, Khan S. **Domestic abuse and the duties of physicians: a case report.** (2015 Oct-Dec):
16. Kane S, Calnan M, Radkar A. **Trust and trust relations from the providers' perspective: the case of the healthcare system in India.** (2015 July-Sept)
17. Kagal N. **Feminist counselling and domestic violence in India.** (2015 Jan-Mar):
18. Mahajan T. **(Mis)regulation – the case of commercial surrogacy.** (2015 Jan-Mar)
19. Pathare S, Nardodkar R, Shields L, Bunders, JFG, Sagade J. **Gender, mental illness and the Hindu Marriage Act, 1955.** (2015 Jan-Mar)

IJME: Institutional/Disciplinary affiliations of contributors in 2016



MEDICAL ETHICS

Quarterly Newsletter of the Forum for Medical Ethics

Vol. 1 No. 1

August-October 1993

ELECTIONS : THE TRUE STORY

Manohar S. Kamath¹

The Maharashtra Medical Council

The Maharashtra Medical Council (MMC) is a statutory body set up by the Government under the Maharashtra Medical Council Act 1956 for carrying out three principal functions : to maintain a register of doctors practising modern medicine in Maharashtra, to discipline erring doctors and to inspect and licence medical colleges in the state.

The MMC has an Executive Council of twenty-three members, of whom nine are elected directly by registered medical practitioners in the state. Six are elected - one each from the six Universities in the State. Five are nominated by the State Government. Two ex-officio nominees of the Medical Education Department, Government of Maharashtra and one representative of the College of Physicians and Surgeons of Maharashtra are also included.

The MMC is generally accepted as one of the better councils in the country under the parent body - the Medical Council of India (MCI) - partly because of the economic and social progress in Maharashtra and largely because of the high traditions and standards set up by the founders of modern medicine in Bombay, Pune, Nagpur and other areas in the state.

Elections to the MMC were last held in 1985. Despite a legally permitted life of five years, no fresh elections were held in 1990 necessitating a Supreme Court order to hold the elections by the end of January 1993.

In the last decade or so, there have been several complaints against the functioning of the MMC. These range from not updating the register of doctors to inefficient disposal of accusations by patients or their families of negligent behaviour by doctors.

The medical profession, the press and public at large gradually came to accept that the MMC is a defunct body bogged down by its own controversies, inefficient in taking action to stem the various malpractices within the profession. These impressions were strengthened when the profession was faced with ethical issues like amniocentesis for sex determination and donations of kidneys by unrelated persons for a consideration - a form of exploitation of the very poor. The profound silence of the Medical Council in issuing guidelines or orders was deafening!

Elections - 1992

Elections to the MMC were announced in September 1992. There were three groups of six to nine persons, headed by sitting members Dr. S.N.Deshmukh, Dr. Sudhakar Deshpande and Dr. Jaswant Mody respectively jousting with each other for a place in the corridors of power.

We decided to form a fourth group consisting of consumer activists and other doctors. The Forum for Medical Ethics (FME) is led by Dr. Arun Bal.

1. Dr. Manohar Kamath practises in Bombay. He is also a qualified lawyer.



MEDICAL ETHICS

JOURNAL OF FORUM FOR MEDICAL ETHICS

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INDIAN JOURNAL OF MEDICAL ETHICS

Vol VII No 2 April - June 2010

(Incorporating Issues in Medical Ethics, cumulative Vol XVIII No 2)

www.ijme.in



GIFTS TO DOCTORS AND THE CREDIBILITY GAP IN THE MCI

- The new rural doctor: qualified quack or appropriate healthcare provider?
- Boundary violations in the doctor-patient relationship in India
- Supreme Court judgment on medical negligence
- Law and ethics: legal changes towards justice for sexual assault victims

MEDICAL ETHICS

Vol XI No 3 July-September 2014

(Incorporating Issues in Medical Ethics, cumulative Vol XXII No 3)

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ETHICAL CHALLENGES IN THE DECEASED ORGAN DONATION PROGRAMME: ASIAN PERSPECTIVE

US-funded measurements of cervical cancer death rates in India - scientific and ethical concerns

Establishing institutional ethics committees: challenges and solutions

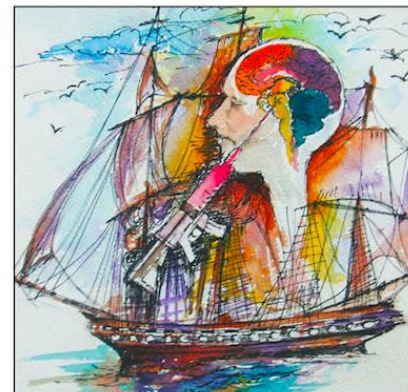
Ethical blind spots of a Tuskegee scientist

INDIAN JOURNAL OF MEDICAL ETHICS

Vol XIII No 1 January-March 2016

(Incorporating Issues in Medical Ethics, cumulative Vol XXIV No 1)

www.ijme.in



THEME - HEALING AND DYING WITH DIGNITY

Stigma and disease as seen by patients and healthcare staff

Workplace safety for women

When corruption becomes the norm

Book review: An uncertain glory

INDIAN JOURNAL OF MEDICAL ETHICS

(2016) XIII No 4 (Incorporating Issues in Medical Ethics, cumulative series Vol XXIV No 4)



MEDICAL EDUCATION IN INDIA: BLUEPRINT FOR CHANGE

ISSUES IN MEDICAL ETHICS

VOL. I No. 1 • January 1998



The Second Opinion

- What's the big deal about cloning?
- Ethics and HIV
- Book review the plague in Surat

A little more about the NBC Platform

Overview

- Goals
- Approach to NBC platform (1-3)
- NBCs organised so far: Themes and co-hosts
- Forthcoming joint NBC and WCB (1-2)
- Expected impact of the joint NBC and WCB



National bioethics conference(NBC): Concept

- Contributing to the debates and discourse
- Platform for interaction & networking
- Solidarity & sharing
- Involvement of National Institutions& Universities(hosts)



Approach to NBC platform: Collaborative (1)

1. Tata Institute of Social Sciences, Mumbai
2. Sree Chitra Tirunal Institute of Medical Sciences and Technology, Thiruvananthapuram
3. National AIDS Research Institute, Pune
4. KEM Hospital /Seth G S Medical College, Mumbai
5. Christian Medical College, Vellore
6. All India Institute of Medical Sciences, New Delhi
7. Department of Humanities and Social Sciences, Indian Institute of Technology, Madras, Chennai
8. Father Mueller Medical College, Mangalore
9. Institute of Law and Ethics, National Law School of India, Bengaluru
10. Public Health Foundation of India, New Delhi
11. St John's National Academy of Medical Sciences, Bangalore
12. Centre for Social Medicine and Community Health, Jawaharlal Nehru University, New Delhi
13. LV Prasad Eye Institute, Hyderabad
14. Medecins Sans Frontieres, New Delhi
15. Oxfam India, New Delhi
16. Tata Memorial Hospital, Mumbai
17. Sanjay Gandhi Post Graduate Institute of Medical Sciences, Lucknow
18. University of Hyderabad, Hyderabad

Approach to NBC platform: Collaborative (2)

6th NBC: Collaborating Organisations

1. Anveshi Research Centre for Women's Studies, Hyderabad, Telangana, India. www.anveshi.org.in/
2. CanSupport, New Delhi, India. www.cansupport.org/
3. Centre for Enquiry into Health and Allied Themes (CEHAT), Mumbai. MH, India. www.cehat.org, www.gme-cehat.org and www.patientsrights.in
4. Centre for Ethics, Yenepoya University, Mangaluru, Karnataka, India. <http://yenepoya.edu.in/colleges.php?id=41&org=center/>
5. Centre for Health and Social Justice (CHSJ), New Delhi, India. <http://www.chsj.org/>
6. Cipla Palliative Care & Training Centre, Pune, MH, India. <http://www.carebeyondcure.org/>
7. The Department of Critical Care Medicine, Bharati Vidyapeeth University Medical College, Pune, MH, India. <http://mcpune.bharativedyapeeth.edu/SiteData/pdf/Medical/CriticalCare.pdf>
8. FIAMC Biomedical Ethics Center, Mumbai, MH, India. www.fiamc.org
9. HALO Medical Foundation (HMF), Osmanabad, MH, India. <http://www.halomedicalfoundation.org/>
10. Jnana-Deepa Vidyapeeth (JDV), Pune, MH, India. www.jdv.edu.in/
1. MOHAN (Multi Organ Harvesting Aid Network) Foundation, Chennai, TN, India. www.mohanfoundation.org/
2. Observer Research Foundation (ORF) Mumbai, MH, India. www.orfonline.org/
3. Sama Women's Health, New Delhi www.samawomenshealth.org
4. Simpatico Palliative Connect, Pune, MH, India. www.simpaticopalliative.org/
5. Sri Chitra Tirunal Institute of Medical Sciences and Technology, Thiruvananthapuram, Kerala, India <https://www.sctimst.ac.in/>
6. St Johns Medical College and Hospital, Bengaluru, Karnataka, India. www.stjohns.in/
7. University of Hyderabad and the Institutional Ethics Committee, Hyderabad, Telangana, India www.uohyd.ac.in/
8. Vidhayak Trust, Pune, MH, India.
9. YR Gaitonde Medical, Educational and Research Foundation (YRGCARE), Chennai, TN, India www.yrgcare.org/
10. Zonal Transplant Coordination Center (ZTCC), Pune, MH, India www.ztccpune.com

Approach to NBC platform: Interdisciplinary including arts (3)

Beyond academics... Arts and Ethics

- ◉ Film screenings
- ◉ Performances
- ◉ Installations
- ◉ Art exhibitions



NBC, themes & venues

NBC	Theme	Venue & Host	Year
1	Ethical challenges in biomedical and social science research	FMES, Mumbai	2005
2	Moral and ethical imperatives of healthcare technologies	NIMHANS, Bengaluru	2007
3	Governance in healthcare	AIIMS, Delhi	2010
4	Ethics and regulatory challenges in health research	University of Hyderabad	2012
5	Integrity in healthcare and research	St Johns, Bengaluru	2014
6	Healing and dying with dignity: ethical issues in palliative care, end-of-life care and euthanasia	University of Pune	2017

Joint 7th NBC and 14th WCB, Dec 3-7, 2018, Bengaluru

Theme and objectives

Health for All in an Unequal World: Obligations of Global Bioethics



- To address **health inequity** in this interconnected but unequal world
- To highlight the **ethical obligations of state and non state actors** towards 'health for all'



To facilitate **intersectional and multidisciplinary conversations and debates on ethics and health** from diverse philosophical traditions, approaches and perspectives



To provide a **platform for a critical and open dialogue** and challenging philosophical and political questions relating to all pervasive injustices and inequities

Congress website



14th WORLD CONGRESS OF BIOETHICS OF
International Association of Bioethics &
7th NATIONAL BIOETHICS CONFERENCE OF
Indian Journal of Medical Ethics
Pre-Congress: Dec 3-4, 2018
Main Congress: Dec 5-7, 2018

[ABOUT CONGRESS](#)[PROGRAM](#)[PRE CONGRESS](#)[REGISTRATION](#)[RESOURCES](#)[PAST NBCs](#)[COLLABORATORS](#)[SECRETARIAT](#)[Announcements](#)[Call for Abstracts](#) | [Call for Symposia/Workshops](#) | [FAB 2018 - Call for P](#)

FROM THE CONGRESS ORGANISING COMMITTEE

The Congress Organising Committee takes great pleasure in inviting you all to the 14th World Congress of Bioethics and 7th National Bioethics Conference. The Congress theme is 'Health for All in an Unequal World: Obligations of Global Bioethics'.

2018 marks the 70th anniversary of the *UN Declaration of Human Rights* which laid a foundation for the highest attainable standards of health. It will also mark the 40th anniversary of the *Alma Ata Declaration*, in which the world pledged "Health for All" by 2000. More recently the chief of WHO issued a call for universal health coverage, drawing attention to issues around equity in health systems, including health systems research.

Despite several gains in health research and healthcare, we as a global community have not been able to achieve equitable healthcare systems so far. Global bioethics ought to be squarely addressing health inequity in an interconnected but unequal world. We are witnessing the emergence of the stronghold of the private corporate sector on the one hand and health conditions requiring huge investments in research on the other hand. Alongside, we observe growing inequities in the health status of human populations, growing conflicts, increasing episodes of natural disasters and adverse economic situations directly impacting the purchasing capacity of common people. The inequity in access to healthcare continues as much in the global North as the global South. In this context, the global bioethics community needs to engage with and strengthen the scholarship in the field of enquiries such as 'justice' and 'solidarity' in the coming times.

We sincerely hope that you will join us to bring your own voice into multidisciplinary conversations on the Congress theme. Needless to say, the Congress is open, as has always been the case, for debates and conversations on other wide-ranging themes from the broader discipline of bioethics.

The Congress will be held at St. John's National Academy of Health Sciences, Bengaluru, Karnataka, India. Bengaluru, known as a leader in information technology, is teeming with multidisciplinary educational institutions and a metropolitan culture of performing arts and literature. Home to scenic gardens

14th World Congress Of Bioethics and 7th National Bioethics Conference

THEME:

Health for all in an unequal world:
Obligations of global bioethics

Oral presentation of papers, poster presentation, workshops, and symposia will be open to topics from within the broader discipline of bioethics, including the conference sub-themes.

DATES:

Pre-Congress satellite meetings:
Monday- Tuesday, December 3-4, 2018

Main Congress:
Wednesday-Friday, December 5-7, 2018

VENUE:

St. John's National Academy of Health Sciences,
Sarjapur Road, John Nagar,
Koramangala, Bengaluru, Karnataka
560034
(<http://www.stjohns.in/medicalcollege/>)

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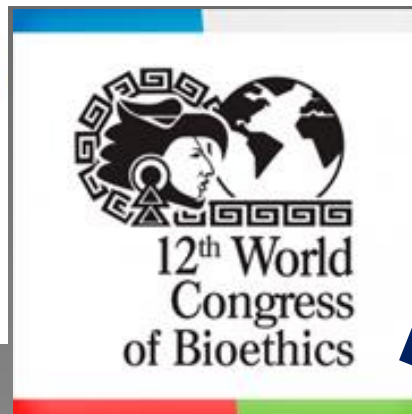
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Username

Password

☐ Remember me | [Register](#) | [Forgot password](#)

Past WCBs and NBCs



Past WCBs

Past NBCs

Expected Impact of the joint NBC & WCB

- ◉ Pushing the agenda for universal health coverage
- ◉ Expanding the boundaries of bioethics to include diverse topics like climate change
- ◉ Strengthening public engagement and movement; application of the ethical principles, framework and analysis in research, practice, policy formulation in the context of Health for All.
- ◉ Contributing to the development of bioethics discourse and to potential / future engagement in the region
- ◉ Fostering linkages between ethicists, activists, and public health practitioners, from across the globe
- ◉ Provide the opportunity for exploring collaborations and joint activities among the participants and participating organizations.

Thank you