ISSUE 4 / SEPTEMBER 2025

SOUTHEAST ASIA
BIOETHICS NETWORK

NEWSLETTER

Message from the Southeast Asia Bioethics Network Team

Dear Colleagues and Friends, Welcome to the latest edition of the Southeast Asia Bioethics Network newsletter! We extend our warmest congratulations to our 2025 Grant awardees whose innovative research proposals demonstrated their remarkable scholarly commitment to bioethics. With so many outstanding proposals, the selection was indeed challenging. We wish our awardees success ahead and look forward to the important contributions their research will yield.

This issue underscores several significant initiatives including establishing a regional working group on migrant health ethics, hosting a workshop to address critical challenges and discuss practical approaches to health data sharing in LMICs, and bringing science and ethics to the public through the Pint of Science event.

We also highlight our mentoring programme, in collaboration with the Asian Bioethics Review, designed to support researchers in their research, writing and publishing journey. The ‘Voices from our Contributors’ section feature writings from across the region on contemporary bioethical topics in our region.

We encourage you to connect, share your thoughts, and collaborate with us as we continue to advance the dialogue on bioethics across Southeast Asia. We look forward to your continued engagement and feedback!

SEA BIOETHICS NETWORK GRANT AWARDEES

We are delighted to announce our 2025 grant awardees. These remarkable individuals exemplify dedication and excellence in bioethics across the region. Their innovative research and projects highlight the vibrant passion within our community, and we eagerly look forward to seeing how their work will advance the field. Please join us in congratulaing these outstanding awardees on their well-earned success. We wish them the very best as they pursue their research and continue to shape the future of bioethics in our region.

Research Fellowship Grant


Dr Janet Alexis De los Santos


Dr Robert James M. Boyles


Dr Rumana Akhter Saifi


Dr Shaikh Mohd Saifuddeen


Prof Dr Wong Li Ping


Ms Poi Srey Mom

Internship Grant


Dr Muhammad Danish bin Abdul Aziz,

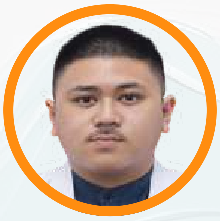

Mr Arnold Keane


Ruth Goh


Carmen Chang Jia Yinn

Research Seed Grant


Mrs Nguyen Thi Hong Nga


Dr Reynardi Larope Sutanto

Professional Growth Fellowship Grant


Dr Ng Wan Jun

VOICES FROM OUR CONTRIBUTORS

We share reflections, experiences, and insights from individuals who have engaged with or contributed to discussions within the SEA Bioethics Network. Their voices capture the diverse perspectives that continue to enrich our collective journey.

Ethical, Legal and Governance Approaches in Data Sharing

By Dr Owen Schaefer, Centre for Biomedical Ethics,
Yong Loo Lin School of Medicine, National University of Singapore

For some time, we have been living in the 'big data' era, where reams of information about ourselves is collated, analyzed and shared – sometimes for the good of society, but other times for private interest or even ways that can be harmful. These issues have long attracted ethical scrutiny, and are more acute now than ever as artificial intelligence (which requires enormous training datasets) capabilities expand and are brought into practice in medicine and beyond.

The concept of ELSI – ethical, legal and social implications - was developed originally (Dolan et al, 2022) in the genetics research context, but has much broader utility in capturing a nexus of interrelated considerations, including (but not limited to) the data sharing sphere. ELSI are themselves distinct from technical or scientific matters, insofar as we cannot derive whether (for instance) a given data sharing plan is good, lawful and/or socially acceptable simply from how the system is designed. ELSI of data sharing, then, represents a distinctive sphere of attention and investigation.

Within ELSI, we can further distinguish the three pillars: ethical, legal and social. Each of these are admittedly contested concepts in themselves, and some have argued (Jose et al., 2024) for a blurring of their boundaries, but here I will focus on their divergences for reasons that will become clear shortly. Ethics can be best understood in terms of the moral: what is right or wrong, good or bad. Legality relates to established systems of statue, regulation and precedent (and perhaps also 'soft law' found in guidance). The social concerns social structures, public attitudes, and cultural contexts – for present purposes, in relation to the sharing of data.

These can come apart in various important ways. Data sharing regulations can be overly restrictive (such that they prevent good uses of data) or overly permissive (allowing ethically objectionable uses). Those regulations could also be broadly publicly acceptable, or out of line with the values of the population they govern.

continued on page 4

Ethical, Legal and Governance Approaches in Data Sharing (Cont.)

But those attitudes themselves can be ethically mistaken: it is quite possible (perhaps even common) that various societies get the ethics of data sharing wrong. This possibility of divergence between the ethical and social is implied by existing, sometimes vociferous, disagreement over the ethics of data sharing. With these tensions in mind, I would propose that data sharing regimens recognize a primacy of sorts for the E of ELSI: Ethics. This is because the central questions that we are grappling with in data sharing are, at core, moral in nature – they implicitly or explicitly invoke concepts of right and wrong, good and bad.

For instance, in asking who should have access to a given dataset, we implicitly suggest it would be (morally) better for some parties to have access, and worse for others. Different people and different societies may give different answers to these questions of who should have access, but they are still addressing an ethical question. And different legal regimes may vest different parties with different legal rights or permissions over said data, but those laws and regulations are in pursuit of aligning (as much as feasible) actual data sharing practices with some normative ideal of who should have access.

“With these tensions in mind, I would propose that data sharing regimens recognize a primacy of sorts for the E of ELSI: Ethics. This is because the central questions that we are grappling with in data sharing are, at core, moral in nature “

The point generalizes across many other questions: What sort of consent should be obtained? What are acceptable risks of sensitive data breach? Who should control data access? What are legitimate purposes for data sharing? These are ethical questions first and foremost, which means addressing them requires ethical analysis.

What, then, is the most fitting analytic framework for ethics in data sharing? There are too many possibilities to adequately survey in this brief space, but I will briefly defend what is in some ways the dominant approach: pluralistic principlism (Khushf, G, 2004). This approach identifies several ‘mid-level’ ethical concepts (I will set aside here whether they are best characterized as principles, values or something else) that are broadly relevant to the domain, ethically distinctive from one another, and generally accessible across a range of moral theories and commitments. Pluralistic principlism has several advantages that has led to its (I would say, justifiable) dominance: (1) the pluralistic foundations enable deployment cross-culturally; (2) the broadness of the principles make them generally acceptable, improving uptake ; (3) the mid-level approach dodges thorny issues in ethical theory, so we don’t get bogged down in debates that stall practical progress; and (4) we have a common ethical language allows more straightforward engagement and deliberation, reducing the risk of interlocutors talking past each other.

A natural next question is, what principles or values are most fit for data sharing? Here, flexibility is warranted (we need not stick to the original 4 principles of Beauchamp and Childress, 2019), and there are a number of different reasonable ways we could divide up the conceptual space in a way that is pragmatically useful.

continued on page 5

Ethical, Legal and Governance Approaches in Data Sharing (Cont.)

In a previous work(Xafis et al.,2019), I and colleagues developed a long-list of 16 values of relevance in health data, but parsimony in any given context is warranted. For data sharing, I would suggest four substantive (directly germane to the answer to a given ethical question) and three procedural (concerning the processes of how we go about answering the question).

The substantive values would be: Public interest/benefit (more below); Privacy (understood as individual control over the sharing of data); Justice (in terms of fair distribution of benefits/burdens); and solidarity (emphasizing obligations that cross social and national boundaries, just as data does). The procedural values are: Accountability (identifying who is responsible for sharing decisions, and may get dinged if something geos wrong); transparency (broadly sharing data sharing decisions with the public/data subjects); and engagement (involving public/data subject perspectives in adjudicating data sharing decisions). Again, these are hardly the only defensible way to organize the most relevant ethical concepts in the ethics of data sharing, but they are indicative of some of the central ethical fault lines.

A further word about public interest: while for some data ethics revolves primarily around privacy, I would argue that public interest is more fitting as a first-among-equals value. I am taking public interest somewhat broadly, to refer to the aggregation of morally relevant interests of morally relevant populations. This is wide-scope, so encompasses not only physical well-being but also social, psychological and cultural interests. It encompasses both the good and the bad, with the idea to identify whether on net, across a population, a given data sharing plan is for or against their aggregate interests. As for which populations are morally relevant, this will depend on the context, but a reasonable starting point is the fundamental moral equality of all humanity. There may be space for some degree of [GS4] (Emanuel E et al., 2021) reasonable priority to co-nationals, but in the ethics of data sharing we should be careful not to discount the interests of different parties sending or receiving data no matter their country of origin.

Public interest is a reasonable primary value because it lies at the heart of why we are even interested in data sharing in the first place. Especially in the research context, data sharing is not primarily for the sake of the careers of data scientists, the interests of funders, or (ideally) private profit.

"A further word about public interest: while for some data ethics revolves primarily around privacy, I would argue that public interest is more fitting as a first-among-equals value."

continued on page 6

Ethical, Legal and Governance Approaches in Data Sharing (Cont.)

The aim of such research is to generate generaliseable knowledge, knowledge which has social value across boundaries. There is some intrinsic value to this knowledge, but its greatest weight comes from its instrumental utility in improving the lives and advancing the interests of populations.

Putting public interests first suggests certain approaches to addressing ongoing debates in data sharing ethics. For instance, in Data Access Committee review, there is a reasonable place (Smedinga M et. al., 2025) for assessment of public benefits and harms before releasing even anonymized data. In terms of consent, it may justifiably be waived (Ballantyne & Schaefer, 2018) in circumstances where a clear public benefit can be articulated. When setting regulations, we must consider the efficiency cost in terms of stymieing socially valuable research. And when engaging private entities, we should be clear-eyed that such entities are primarily aimed at advancing private owner/shareholder interests, not benefitting the public; extra scrutiny and protection, then, may be warranted when sharing with the private sector.

Emphasizing the public interest does not mean ignoring other considerations, and a balance must still be struck. Further, I must acknowledge this emphasis is not quite so ecumenical and pluralistic as the overarching principlist framework highlighted above. As such, it is a proposal for consideration by relevant decision-makers and stakeholders rather than a definitive universal prescription. Nevertheless, I would hold it offers a reasonable and attractive way of adjudicating tensions between principles/values, one that rightly puts in central position what really matters most and what motivates our interest in data sharing in the first place: improving people's lives.

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Bioethics As Values Education

By Dr Leander Penaso Marquez, Assistant Professor, University of the Philippines Diliman

Bioethics is often understood as the study of ethical issues related to health, medicine, and life sciences. It touches on philosophical, legal, social, anthropological, clinical, and religious frameworks to discuss, if not address, moral concerns in policy, technology, practice, and research, among others that affect human, animal, and environmental life. It employs approaches such as casuistry and principlism to determine what is right and wrong or good and bad in certain clinical or research scenarios. In this regard, bioethics can be described as reactive rather than proactive. It plays catch up to advancements in technology and can be caught unawares by ethical dilemmas that are outside of the mainstream, for instance, the use of artificial intelligence in health research.

> ***"The idea behind bioethics as values education is to teach elementary and high school students 'bioethics values' for them to practise and develop a habit as they mature into adulthood."***

Even learning bioethics can be characterized as reactive in the sense that it learns from the lessons of the past. These lessons, of course, were learned because unethical practises have been committed and what has been done to ensure that these unethical acts would not happen have built the corpus of what is now learned in bioethics courses. Case studies are staples in bioethics classes; cases are analyzed wherein university students – or researchers and healthcare practitioners who have taken bioethics training courses – are expected to identify the ethical issues and what should have been done for the issues to be avoided. Ultimately, the cases are appreciated with the wisdom of hindsight. The glaring question, therefore, is how can bioethics be proactive?

In 2023, a Special Topics class was offered to undergraduate students at the University of the Philippines College of Education. The class focused on Bioethics for Secondary Values Education. The goal was to train students on how bioethics can be used to teach values to secondary education (high school) students. Similar with other bioethics classes, the class engaged with concepts such as consent, sustainability, justice, care, beneficence, and respect among others. The difference is that these concepts were treated as values that must be appreciated, imbibed, and practised early on in life.

In the Philippines, students from Grade 7 to Grade 10 study Values Education as a formal subject; a version of this, Good Manners and Right Conduct is studied from Grade 1 to Grade 6. In these subjects, students are taught values such as honesty, compassion, respect for life, and accountability, to name a few [1]. By teaching these values to students at an early age, they will be able to embrace these values and practise them in their day-to-day lives. In the same way, the idea behind bioethics as values education is to teach elementary and high school students "bioethics values" for them to practise and develop a habit as they mature into adulthood.

continued on page 8

Bioethics As Values Education (Cont.)

A decade earlier, a related project was conducted in Portugal wherein Grade 9 students were taught values to develop "a universal culture of human rights" and bridged it towards bioethics; the Education for Values and Bioethics project focused on "interpersonal relationships, human rights, responsible sexuality, health, environment and sustainable development, preservation of public property, culture, financial education, social innovation and ethical education for work" [2]. Unfortunately, there was no follow up study on whether the Grade 9 students retained the values that they learned and applied them in their respective jobs today.

> **"In the long run, if these 'bioethics values' have been genuinely imbibed, future healthcare researchers and practitioners... would apply these 'bioethics values' in their respective professions."**

Nevertheless, in the long run, if these "bioethics values" have been genuinely imbibed, future healthcare researchers and practitioners, even policymakers, decision-makers, and technological innovators, would apply these "bioethics values" in their respective professions. An expected result is that bioethics issues will unlikely be committed because the actions and decisions of future generations are grounded on "bioethics values".

The University of the Philippines College of Education in Diliman, Quezon City — a pioneering institution in teacher education since 1918.
Photo courtesy of the University of the Philippines College of Education (https://educ.upd.edu.ph/about-us/)

Ultimately, "bioethics values" are not distinct from values that most people hold. Teaching these values within the specific perspective of bioethics helps students to put these values into context compared to merely teaching them from a general perspective. This presents a new challenge to values education teachers and an exciting opportunity for bioethics educators. Collaboration between these two groups of experts is key towards making this vision a reality. Political will and government support are also necessary for national implementation. What is clear is that this is a promising way to steer bioethics towards being proactive.

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Reflections from the Cleveland Clinic Clinical Ethics Immersion Program (CLEIP)

By Dr Mark Tan, Healthcare Ethics Consultant & Associate Professor (Medical Ethics), Monash University Malaysia.

I was privileged to have been selected as a recipient of the Southeast Asia Bioethics Network Professional Growth Fellowship Grant for 2024, which enabled me to participate in the Cleveland Clinic Clinical Ethics Immersion Program (CLEIP) in May 2025.

The CLEIP is a unique immersion programme that combines a 4-day intensive course with a 2-week clinical ethics immersion at the Cleveland Clinic, and 6 applicants were accepted as the 10th cohort of the CLEIP this year. The intensive course aims to enhance participants' knowledge of classical methods of ethics consultation, and emerging approaches in clinical ethics through workshops and experiential learning exercises in a supportive classroom learning environment.

CLEIP 2025 Participant

The 2-week immersion experience is based on a plan that is specifically tailored to the needs and interests of the individual participant. It also includes the participants being attached to the on-call service team at the Department of Bioethics at Cleveland Clinic.

4-day Intensive Course

Over the course of the 4-days, we explored the role of ethics consultants, and dived into various aspects of an ethics consultation- we practised improving communication skills, identifying important facts that need to be gathered, developed strategies to tackle moral distress, conflict management, and took part in a simulated clinical ethics consult. There was significant depth in the discussion, and the skills learnt were essential for successful ethics consultation.

2-week Immersion Attachment

I was then attached with the Clinical Ethics Consultation team on service for the 2-week immersion. Each on-call team comprised 3 ethicists, and started being on service for a week beginning with Friday hand-offs. We received 39 consults in Week 1 and 30 consults in Week 2, with issues related to end-of-life decision making and decision-making for patients without surrogates forming the bulk of the consults. I also participated in family discussions, and multi-disciplinary team discussion in both the Main Campus and some Regional Hospitals. I was also able to attend rounds in the MICU, SICU, NICU, and NeuroICU where any ethical issues identified could be immediately referred to the service. In addition, I sat in on transplant meetings for liver, kidney, intestine, heart, lung, and various other living donor transplants that gave me insights into the role of a clinical ethicist in this area of medical practice.

continued on page 10

Reflections from the Cleveland Clinic Clinical Ethics Immersion Program (CLEIP) (Cont.)

Reflections:

My aim of participating in the CLEIP was to enhance my experience in clinical ethics consultations, and to learn how the clinical ethics consultation service is conducted at a high-volume centre. My hope in participating in this programme was to broaden my perspective and shape my understanding on how the field of clinical ethics could be developed in Malaysia and other Southeast Asian countries.

The CLEIP has helped me to grow significantly as a clinical ethicist especially with the many practical clinical ethics consultation skills (59 cases in 2 weeks compared to approximately 1-2 cases/month in Malaysia). This experience certainly complemented the knowledge and skills I had previously gained from qualifying for the US Healthcare Ethics Consultant certification and during my time pursuing my Doctorate in bioethics.

Participating in the CLEIP also provided me with practical insights regarding how a clinical ethics immersion programme is delivered, as well as insights on how a clinical ethics fellowship is run in the USA. I am excited to explore how this can be translated into establishing similar programmes in the South East Asia region as we need to focus on more clinical ethics capacity building efforts here.

Conclusion

Having now completed the CLEIP and becoming an alumni, I feel that this is an excellent opportunity for future clinical ethicists to participate in if there is an opportunity to do so. The clinical ethics immersion part of the programme is something that we are unlikely to achieve in the region for many more years to come.

For future projects, I will now focus on sharing my experiences locally, and also work on a project to map our clinical ethics services in Malaysia, with the view of establishing a network for further collaboration. I also look forward to collaborating regionally as there are also alumna from CLEIP in Singapore and Australia.

Lastly, I would like to sincerely thank the Southeast Asia Bioethics Network and the Jeffrey Cheah School of Medicine for the support received to attend the CLEIP.

CLEIP 2025 Participants and Facilitators at the end of the 4-day Intensive Course

Picture with the members of the Cleveland Clinic Department of Bioethics

PAST EVENTS

The Network reflects on its recent conferences, workshops, and talks, highlighting the key moments and discussions that have brought our community together. These events provide valuable opportunities for knowledge exchange, collaboration and driving progress in bioethics across the Southeast Asia region.

Regional Working Group on Research and Healthcare Ethics Relating to Migrant Populations

(Held on 29 - 30 April 2025 in Kuala Lumpur)

The SEA Bioethics Network held a workshop at the end of April 2025 to kickstart a regional working group focused on research and healthcare ethics for migrant populations. With support from the Global Infectious Disease Ethics Collaborative (GLIDE), the objective was to bring together ideas, plans, and people passionate about improving care and ethical standards for migrants across Southeast Asia.

The workshop started with a session led by Associate Professor Dr Sharon Kaur and Ms Napat Khirikoekkong, who mapped out plans for three upcoming workshops in Malaysia, Thailand, and Singapore. These would focus on research ethics and the unique challenges of working with migrant communities. Dr Voo Teck Chuan then shared a funding opportunity through the ACP Programme Grants. Participants provided critical research ideas which were aimed at the ethical treatment and care of migrant patients across borders. This was followed by Dr Veena Pillai's session dealing with how the ECS-MP (Ethics Consultation Service for Migrant Populations) could support ethics review boards and offer specialist input on studies involving migrants. This is especially important as migrant health research often requires a deeper ethical lens.

The workshop wrapped up with exciting next steps: a regional working group on research and healthcare ethics for migrants will be established, beginning in Malaysia and extending regionally. This initiative marks a significant step towards enhancing ethical standards and equitable healthcare access for migrant communities across Southeast Asia.

Pint of Science 2025

(Held on 26 May 2025 in Bangkok)

The Pint of Science featured a number of speakers on the theme “Trust in Science: Data. Ethics, and Dialogue”. The event was organised as part of the global Pint of Science festival and was held at a public space in central Bangkok. The event was co-organised by the SEA Bioethics Network, Data Sharing Working Group of the Coalition for Equitable Research in Low-Resource Settings, Global Health Bioethics Network and Mahidol Oxford Tropical Medicine Research Unit.

As Professor Mai Chun Wai, one of the speakers who spoke on “Integrity and Transparency: A Better Science for All” reflected, “Events like this remind us that science doesn’t exist in isolation … It thrives on trust—and that trust is earned through transparency, integrity, and meaningful dialogue.” The Pint of Science Thailand 2025 is known for bringing research to the community in relaxed settings and is a platform to connect with audiences outside traditional academic circles.

Data Sharing Workshop

(Held on 27 - 28 May 2025 in Bangkok)

A dynamic workshop held in Bangkok entitled “Advancing Solutions to Enable Effective, Ethical, and Equitable Data Sharing” recently brought together leading voices in global health, bioethics, and data governance. Co-hosted by the SEA Bioethics Network, Coalition for Equitable Research in Low-resource Settings (CERCLE), Global Health Bioethics Network (GHBN), and Mahidol Oxford Tropical Medicine Research Unit (MORU), the event gathered experts and stakeholders to examine critical challenges and identify pragmatic solutions for the sharing of health data with a focus on low- and middle-income countries (LMICs). The focus on LMICs is pressing because structural and systemic disparities often impede data governance and benefit-sharing mechanisms.

The workshop explored real-world case studies on data reuse, revealing the complex dynamics between consent, infrastructure, governance, and community engagement. It highlighted the shortcomings of universal frameworks and stressed the importance of adaptable, context-specific governance. Ethical data sharing models like IDDO and Epsilon showcased the potential for secure, participant-focused data reuse, provided strong legal and governance structures are in place. Yet, challenges such as cross-border legal inconsistencies, intellectual property issues, and lack of incentives for data sharing persist.

Governance models were seen as essential but underfunded and administratively burdensome. A key theme was the persistent imbalance between high-income and LMIC actors in global data systems. The workshop called for international data standards, investment in LMIC training and mentorship, and regulatory harmonization that respects both local needs and global demands.

SEA Bioethics Network Mentoring Programme

The Network launched a mentoring programme to strengthen research on bioethics in Southeast Asia. Researchers were invited to submit abstracts of proposed or ongoing work for review by the Asian Bioethics Review (ABR) editorial team. All applicants will receive written feedback from the ABR team. From these,, six abstracts will be selected for an extended mentorship programme. A webinar will then be conducted where the ABR editorial team and SEA Bioethics Network will meet with the researchers of the six selected abstracts to discuss and outline next steps; followed by a mentorship pairing with experienced bioethics scholars.

The primary aim of this mentorship is to provide guidance to the researcher throughout the research, writing and publication journey. This initiative underscores the Network's dedication to fostering high-quality bioethics scholarship in SEA by providing structured guidance and opportunities for meaningful academic collaboration and publication.

FUNDED BY:

SEA BIOETHICS NETWORK MENTORING PROGRAMME 2025

CALL FOR CANDIDATES

The Southeast Asia (SEA) Bioethics Network, in collaboration with the Asian Bioethics Review (ABR), has developed an exclusive mentoring programme to enhance research, writing and publishing skills in SEA.
The Network invites researchers to submit abstracts of their research for feedback by the ABR editorial team. ALL applicants will receive written feedback on their abstracts.

From the submitted abstracts, six will be selected and the researchers invited to participate in the extended mentorship programme. The selected researchers will be offered the opportunity to receive input and guidance on all stages of the research, writing and publishing process by working closely with senior bioethics scholars.

The extended mentorship programme is a two-step initiative:
STEP 1: The six successful candidates will be invited to participate in a webinar by the Network. This will involve exchange of all abstracts, feedback on individual abstracts, and discussion of next steps.
STEP 2: Each candidate will be paired with a mentor who will be a senior scholar in bioethics. The principal objective of the mentorship is generally the production of a co-authored published article.

You are eligible to apply if you are:

- From, based in, or affiliated with a SEA institution, AND
- Currently conducting research on bioethics in SEA

Documents to submit:

- An abstract (max 500 words) of your research addressing the following points clearly and concisely:
  1. *Bioethics Field: The area you intend to contribute to.*
  2. *Research Problem: The issue your research addresses.*
  3. *Research Questions: What questions you will answer to address the problem.*
  4. *Methods: What methods you will use to answer the questions.*
  5. *Impact: Why your research matters.*
- Additionally, a Personal Statement (max 300 words) outlining your training needs and how you expect to benefit from the programme.

Include in your submission:

- Full Name
- Institutional Affiliation
- Position
- Research experience (in years)
- Highest Academic Qualification
- Nationality/ Country of residence in SEA
- Email Address

Note: We prioritise early career researchers but also welcome submissions from those at later stages where a strong unmet training need is demonstrated.
The Personal Statement will play a key role in determining whether your abstract is selected for the extended mentorship programme.
Please submit your documents to: seabion@um.edu.my cc: peksantay@gmail.com using the subject line **'Mentoring Programme 2025'**
Deadline: 11 July 2025

For more information please visit: https://seabioethics.com/

SOUTHEAST ASIA
BIOETHICS NETWORK

SEA Bioethics Network @SEA_Bioethics seabion@um.edu.my

> "A mentor is a guide, a friend, and a role model who helps others find their path."
>
> Dr. Vivian Balakrishnan, Minister for Community Development, Youth and Sports, Singapore (Youth Mentors Summit 2008)

Just Transitions Working Group for AMR presents at the Oxford Global Health and Bioethics International Conference 2025

(Held on 8 July 2025 at the University of Oxford, United Kingdom)

On 8 July 2025, the Just Transitions Working Group for Antimicrobial Resistance (AMR) (co-led by SEA Bioethics Network researcher Prof Cheah Phaik Yeong from MORU and Prof Sonia Lewycka from OUCRU) organised a 75-minute panel discussion at the Oxford Global Health and Bioethics International Conference, held at the University of Oxford, UK.

AMR is a major global health threat that disproportionately affects the poorest and most marginalized communities, who are most vulnerable to infections. Although well-intentioned, solutions to mitigate AMR have been shown to have unintended consequences and may place a disproportionate burden on the very people they are meant to protect.

The Just Transitions Working Group for AMR is adapting the “;just transitions” approach, a concept increasingly used in climate change mitigation. In climate change literature, it refers to policies aimed at transitioning toward more sustainable, low-carbon economies in a fair and equitable manner.

There are many similarities between the challenges of mitigating climate change and addressing AMR—both are fraught with ethical issues, are super-wicked problems, and both disproportionately affect disadvantaged populations.

The panel was chaired by Cheah Phaik Yeong who introduced the topic. This was followed by a series of six 5-minute presentations by members of the working group.

Sonia Lewycka presented the origins and development of the Just Transitions approach and explained why it is being applied in the context of AMR. Sonia described how we are adapting the “just transitions” concept— used in climate change mitigation to promote fair and equitable policy transitions toward sustainable, low-carbon economies.

continued on page 16

Just Transitions for AMR Working Group presents at the Oxford Global Health and Bioethics International Conference 2025 (Cont.)

Tess Johnson (Ethox Centre) discussed various conceptions of justice being considered by the group in relation to AMR including distributive justice, procedural justice, restorative justice, recognitional justice and epistemic justice.

Deepshika Batheja (Indian School of Business and One Health Trust, India) illustrated how AMR affects different populations unequally, including disparities between men and women and among different caste groups in India.

AMR is a major global health threat that disproportionately affects the poorest and most marginalized communities, who are most vulnerable to infections

Duy Minh Vu (OUCRU) shared insights from a project in Vietnam in which his team engaged primary care doctors, healthcare stakeholders, and community members to explore their views on AMR.

Edna Mutua (KEMRI-Wellcome Trust, Kenya) presented an overview of policies surrounding AMR containment in low- and middle-income countries and illustrated gaps in governance mechanisms—most of which are adapted from the Global Action Plan and implemented in a top-down manner.

Finally, Sheila Varadan (University of Leiden, the Netherlands) drew connections between Just Transitions for AMR and climate justice, and highlighted important gaps in the current Just Transitions framework.

For more information:

Website: https://www.thebritishacademy.ac.uk/projects/just-transitions-to-contain-antibiotic-resistance-while-minimising-potential-burdens-and-harms/

Cheah PY, Lewycka S, de Vries J. Tracing epistemic injustice in global antimicrobial resistance research. Trends Microbiol. 2025 Jun;33(6):577-579. doi: 10.1016/j.tim.2025.02.005.

Varadan S.R., et al. A just transition for antimicrobial resistance: planning for an equitable and sustainable future with antimicrobial resistance. Lancet. 2024;403:2766–2767. doi: 10.1016/S0140-6736(23)01687-2.

UPCOMING EVENTS

The SEA Bioethics Network continues its efforts to expand the reach of bioethics, highlighting the unique challenges and perspectives of the field in the region.

Bioethics Track at the Upcoming Singapore Medical Humanities Conference 2025

(Taking place on 18 October 2025 in Singapore)

The Network is pleased to co-organise the bioethics track of the 3rd Singapore Medical Humanities Conference 2025.

As part of the event, the bioethics track entitled Cultures and Clinical Ethics—scheduled for 18 October 2025—will feature a diverse range of research presentations by invited speakers from the Network. These include Associate Professor Mark Tan (Monash University Malaysia), Associate Professor Pacifico Calderon (St. Luke's Medical Center College of Medicine, Philippines), and Dr. Agnes Bhakti Partiwi (Universitas Gadjah Mada, Indonesia), each of whom will offer insights into Southeast Asian perspectives on care and decision-making.

The Merlion—Singapore's iconic half-lion, half-fish symbol—represents the country's heritage as a fishing village and its bold vision for the future.

In addition, Dr. Kuek Chee Ying, recipient of the Network's 2024 Research Fellowship Grant, will present her work on the ethical and legal implications of health-related smart wearables in the Malaysian context at the Bioethics Festival of the Conference. The Network will also participate in a closed-door session aimed at fostering regional collaboration in various domains, including bioethics.

People Rush' by Nikada, Getty Images Signature — capturing the everyday diversity of Singapore's streets.

PUBLICATION HIGHLIGHTS

In promoting bioethics through the unique lens of Southeast Asia, the Network highlights the works of regional scholars. This continuous effort serves as a means to foster deeper understanding of the subject, capturing the nuances and values of the region.

Books

Mohammad Firdaus bin Abdul Aziz. (2025). Stem Cell Governance and Ethics. Routledge ISBN 9781032951669

Articles

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Cheah, P.Y. & Parker, M. Call for a fairer approach to authorship in publishing biomedical research. *Commun Med* 5, 99 (2025). https://doi.org/10.1038/s43856-025-00815-9

Doan, H.T. Expectations and Vietnam's responses during COVID-19: potential human rights violations and related propositions [version 4; peer review: 1 approved, 4 approved with reservations]. *Wellcome Open Res 8*, 147 (2025). https://doi.org/10.12688/wellcomeopenres.18972.4

Doan, H.T. Social listening and its issues: What can the Precautionary Principle Advice?. *ABR* (2025). https://doi.org/10.1007/s41649-025-00369-x

Doan, H.T. The Precautionary Principle as a General Principle of International Law and Global Health Law. *Asian Journal of WTO & International Health Law and Policy*. (2025). SSRN: https://ssrn.com/abstract=5192570

Gopalan, N., Khan R.I., Silverman, H.J., Sugarman, J. & Vaswani, V. Enhancing Research Ethics Capacity in Asia: Fogarty International Center Supported Initiatives India, Malaysia, Myanmar, and Pakistan. *Journal of Empirical Research on Human Research Ethics*. (2025). https://doi.org/10.1177/15562646251323133

Mcgee, A. & Prince, S. Is germline genome-editing person-affecting or identity-affecting, and does it matter?. *Bioethics* 39, 250 – 258 (2025). https://doi.org/10.1111/bioe.13385

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Articles (Cont.)

Prince, S. Lim, J.E. Black-Box AI and Patient Autonomy. *Minds & Machines* 35, 24 (2025). https://doi.org/10.1007/s11023-025-09729-w

Surendran, S., Toh, H.J., Voo, T.C., Cheah, D.F. & Dunn, M. A scoping review of the ethical issues in gender-affirming care for transgender and gender-diverse individuals. *BMC Med Ethics* 26, 54 (2025). https://doi.org/10.1186/s12910-025-01216-2

Tan, M.K.M., Wellester, A.A., Muhammad Izwan, A.M., Chia, W.T. Breaking Barriers and Building Bridges: The Influence of Ethics in Advancing Medical Practice. *Journal of Clinical and Health Sciences* 10, 1 (2025). https://doi.org/10.24191/jchs.v10i1.5421

Teo, M.T.L. From Abstinence to Assistance: Antinatalism's Unexpected Endorsement of the Principle of Procreative Beneficence. *Bioethics* (2025). https://doi.org/10.1111/bioe.13432

Ullah, A.K.M.A. Ethical framework and inclusivity: research mechanics of difficult-to-reach migrants in civil military context. *Int J Humanitarian Action* 9, 11 (2024). https://doi.org/10.1186/s41018-024-00153-w

Ullah, A.A. Ethical imperatives in migration health: Justice and care in forced migration contexts. *Developing World Bioethics* 1–9 (2025). https://doi.org/10.1111/dewb.12482

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> “Publications are essential not only for individual career progression but also for advancing knowledge and enhancing the reputation of one's institution.”
>
> — Prof. Dr. Nor Haniza Sarmin, "Why Publications Are Important" (UTM FRESH Research Hub)

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