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The Ethics Dispatch

November 2026

"Functioning as our better selves leads to better outcomes for patients and everyone."

-- Tarris (Terry) Rosell, PhD, DMin, HEC-C

Hot Topic

Scientific Integrity:
Midterm Elections Offer Renewed Hope

By Cassandra Shaffer Johnson, MA, Program Director of Ethics Services

For two long years, many of us in healthcare have dreaded the next wave of anti-science rhetoric surrounding vaccines, unproven treatments, and other threats to evidence-based medicine. But the 2026 midterm elections offer renewed hope that **scientific integrity**, **informed healthcare decisions**, and **public trust** can once again become national priorities.

As regular readers of the Center's *Ethics Dispatch* know, I have frequently examined the political climate's impact on science and public health, from threats to healthcare research and declining trust in medical professionals to the dangerous spread of misinformation and pseudoscience.

A recent *Scientific American* article examines the response of researchers and science advocates to the elections, which saw Democrats sweep control of Congress and make historic gains in state governments. For many in the scientific community, the results represent a welcome opportunity to restore research funding, strengthen public health institutions, and demand greater accountability after two years of significant disruption and harm.

Science and Public Health Under Political Pressure

Since taking office in 2025, the Trump administration has substantially reduced federal research funding, eliminated scientific positions, and redirected research priorities. Disastrous changes to vaccine policy under Health and Human Services Secretary Robert F. Kennedy Jr. have also drawn considerable criticism from healthcare professionals.

Shaughnessy Naughton, president of 314 Action, an organization supporting candidates with scientific backgrounds, expressed that frustration with RFK Jr. directly:

> "His administration of HHS has been an unbelievable disaster, and I do look forward to Congress holding him accountable and making him answer for the disastrous decisions that he has made and inflicted on the American people, whether it's to our public health system, or mRNA research that has clearly shown unbelievable potential for better health outcomes."

The election results suggest that many Americans are ready for a different approach. Among the newly elected officials are several individuals with backgrounds in medicine and public health, including Ohio Governor-elect Amy Acton, who previously led the state's public health response during the COVID-19 pandemic.

These developments offer reason for optimism. But beyond the political implications lies a fundamental ethical question: **What responsibility does government have to protect scientific integrity and public health, even when doing so conflicts with political priorities?**

Scientific research is not immune to bias, error, or disagreement. Indeed, questioning existing knowledge is fundamental to scientific progress. However, there is an important distinction between challenging scientific conclusions through evidence and dismissing those conclusions because they are politically inconvenient.

The Ethical Responsibility to Protect Science and Public Health

Public health decisions influence disease prevention, access to treatment, medical research, and the distribution of limited healthcare resources. When scientific evidence is disregarded or manipulated for political purposes, the consequences extend far beyond research institutions. Patients, families, healthcare professionals, and entire communities may bear the burden.

Several foundational principles of bioethics can be applied here.

Beneficence and nonmaleficence require us to promote well-being and avoid preventable harm. Public policies affecting healthcare should therefore be informed by the best available scientific evidence, with careful consideration of their potential benefits and consequences.

Justice requires attention to how those consequences are distributed. Reductions in Medicaid, public health programs, and medical research funding can disproportionately affect individuals and communities already experiencing significant barriers to healthcare. **Decisions about funding are never merely financial. They reflect judgments about whose needs will be prioritized and whose may go unmet. Essentially, they determine the “haves” and “have nots” of society.**

Respect for autonomy depends on access to accurate, reliable information. Patients cannot make meaningful, informed decisions about their healthcare when scientific evidence is distorted, withheld, or presented in misleading ways. Patients cannot make the best and healthiest decision for their own bodies if a politician is deciding what treatments they may or may not receive, whether or not those treatments will save that person’s life, thus robbing patients of their autonomy to make choices for themselves.

Of course, scientific evidence alone cannot determine public policy. Science can help us understand what is likely to happen, but ethical reasoning is necessary to determine what ought to happen. Policymakers must balance scientific findings with competing values, limited resources, and obligations to the public.

Restoring Public Trust in Science and Healthcare

The Democratic victories offer an important opportunity to restore that balance, strengthen oversight, and reaffirm the importance of scientific expertise in government decision-making. Whether that opportunity translates into

meaningful improvements in public health remains to be seen, but personally I feel a glimmer of hope for the first time in two years. I think we can do this.

But one principle should remain beyond partisan disagreement: **The health and well-being of the American people should never be secondary to political interests.**

The election outcome creates the opportunity; restoring public trust remains the responsibility.

Elections determine who holds power.
Ethics reminds us what that power is for.

Source:

Science advocates react to Democrats' historic midterm rout: 'It's a new day in Washington's | Scientific American

Bioethics in the News

'Revenge of the nerds': US midterms deliver a win for science – and a rebuke of Maha
The Guardian

Lindsay Clancy tragedy exposes blind spot in modern psychiatry
msn

Medical ethics in Ottoman Constantinople was a daily practice, not a formal code, study finds
bioengineer.org

Case Study

Mandatory Immigration Status Disclosure:
Mr. Alvarez Delays Surgery and Risks Death to Avoid Landing on State-Maintained List

Mr. Tony Alvarez is a 56-year-old male who was admitted to the hospital with shortness of breath and upper chest pain. He initially presented to the emergency department and was subsequently admitted for further evaluation. After diagnostic testing and consultations with other specialties, including pulmonology and cardiology, Dr. Bakkins informed Mr. Alvarez that he had a blockage in one of his arteries and required surgery.

Mr. Alvarez was extremely appreciative and expressed his desire to proceed with the procedure, particularly after being informed that his prognosis was very poor without surgical intervention.

During the intake and informed consent process, Mr. Alvarez was asked about his immigration status. When he refused to answer, he was informed that his

immigration status would not impact his access to surgery but that documenting this information was a requirement implemented by the state governor. The medical team explained that the information would not affect his care but was simply something they were required to document.

The state had recently held an election, and a newly elected governor was scheduled to take office in a few months. The incoming governor had publicly stated that she intended to eliminate the mandatory disclosure of immigration status across the state, particularly in hospitals, on her first day in office.

Mr. Alvarez explained that he had lived in the United States since he was three years old, had a family, and was deeply uncomfortable disclosing his immigration status because he feared being placed on a state-maintained "list." He stated that he would rather postpone the surgery for a few months until the new governor took office and eliminated the disclosure requirement.

The medical team was uncomfortable with this decision and informed Mr. Alvarez that delaying surgery could significantly complicate his condition and potentially result in his death. However, the team also acknowledged that they could not proceed with the surgery without his answer regarding his immigration status.

Ethical Musings

Bioethics and Public Policy:
Why Elections Matter for Ethical Healthcare

By Ryan Pferdehirt, D.Bioethics, HEC-C, Vice President of Ethics Services, Rosemary Flanigan Chair

There are aspects of bioethics that appear so deeply ingrained in the field that it seems impossible to imagine the field without them. The four principles, along with concepts such as respect for persons, human dignity, and quality of life, are woven into the fabric of bioethics. This is the value of a principlism approach to applied ethics: the principles exist independently of individual decisions. But the relationship between **bioethics and public policy** reminds us that principles alone cannot ensure ethical outcomes. They must also be put into practice.

As a field of applied ethics, bioethics does not exist solely within the realm of philosophical reasoning. It exists in our reality and lived experiences. And this requires something beyond ethical deliberation: action.

Consider the example of a patient's code status. While it is possible, and often necessary, to engage in extensive discussions about the ethical permissibility of different code status decisions, ultimately, the patient must have a code status. A decision must be made, and that decision must translate into action.

This step requires someone to act. The principles and concepts that seem essential to bioethics are only as effective as the people who put them into practice.

Where Bioethics and Public Policy Intersect

Understanding public morality and legislation is essential when navigating ethically complex situations. The law plays a major role in applied ethical decision-making, particularly when what is ethically supported conflicts with what is legally permitted. Perhaps more than anything, the law determines

which decisions can be put into practice and, consequently, the care and treatment patients receive.

This is why bioethics must advocate and maintain a voice in the public sphere. The field must actively provide education and support to the individuals and institutions capable of implementing change. These may include local, state, and federal governments, as well as other relevant authorities and organizations.

This year's midterm elections, like all elections, are an important component of the practice of bioethics. Elections provide an opportunity for the public to make its voice heard on issues of public interest. Elected officials are accountable to their constituents and, therefore, should seek to represent the will of the people.

Public morality is constantly evolving. This occurs for many reasons, including shifts in public opinion on particular debates and a growing understanding of the consequences of previous decisions. As public values change, the decisions and priorities of elected officials should evolve accordingly, at least in theory.

Why Elections Matter for Ethical Healthcare

Many challenging ethical issues directly affect people's lives, from state laws governing surrogate decision-making, medical aid in dying, and determinations of medically inappropriate care to federal debates concerning abortion rights and public health responses.

Given the profound impact of these issues, it is important that public values are considered when laws are written and implemented. Equally important is the responsibility of individuals to participate in the democratic process by voting for representatives who will develop and implement laws that appropriately reflect the values and interests of the people they serve.

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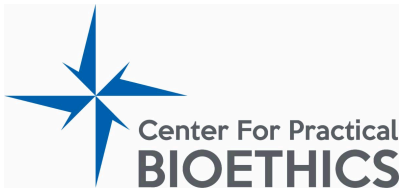
Ethics Committee Resources

Bioethics Case Studies and Resources



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