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31 Colwyn Street, Christchurch 8005, New Zealand

c/o Darryl Macer, RUSHSAP, UNESCO Bangkok, 920 Sukhumvit Rd, Prakanong, Bangkok 10110, THAILAND

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Official Journal of the Asian Bioethics Association (ABA)

Abstracts of presented papers at the **Eighth Asian Bioethics Conference (ABC2007) concurrent with the Second UNESCO Bangkok Bioethics Roundtable (BBRT2)**

19 – 23 March 2007

Century Park Hotel, Bangkok, Thailand

Monday, March 19, 2007

1. Opening Session

Chair: Dr. Soraj Hongladarom

Welcome to the Eighth Asian Bioethics Conference: All Nations ... The Phantom Next Generation (ABA Presidential Address)

- Jayapaul Azariah, Ph.D.

President, Asian Bioethics Association; Chennai, India
jazariah@yahoo.com

Distinguished dignitaries on the stage, honored experts in bioethics and techno sciences, ladies and gentlemen. I am happy to be present in this unique ABA conference. I would like to bring to your knowledge and concern some selected bioethical issues that are currently discussed in India. I perceive that these issues are also faced by all nations. Since all nations are concerned about the next generation I think that discussing these issues is very important.

Human beings are unique in this biosphere because humans are not only related to the past but also to the future generations. "Man (Humans) is Man because he shares a common culture... not only (with) its living members but also members of past generations and those yet unborn..." (Worsley, 1970). The problems of the present century and our generation are radically different from the previous century. It is going to be far, far different from the present! Are we the conscience keepers of the generation to come?

At the outset we need to consider the three realms (i) Ecology (ii) Economic and (iii) Ecuminics – anthropocentric development. All three spheres sprout from the same common Greek work "oikos" which means house or a dwelling place. The word 'nomics' stands for 'management'. We need to manage the principles of ecology and infuse it with the management of the commercial world with an aim to achieve a balanced, healthy and just society.

In this current era of neo-liberal globalization we are witnessing a proliferation of different types of ethical, legal and social Issues. The next generation is in increasing danger of facing extinction. Therefore, we need to consider the challenges confronting us. In identifying these global problems for global solution, let us consider the remedy in a reflective mood. Let me list some of the problem areas.

The Nathari Killings Loss of sacredness of human life

Nithari is a small village in the District of Noida in Uttar Pradesh, India. Reported to the police but unattended is the incidence of shocking and brutal and traumatic incidence of disappearance of young women and children (Jan-Feb 2007). The whole episode came into public light when human skeletal remains were unearthed in a near by gutter, close to the suspected murder(s). The motive of gruesome killing is not very well established. Killing for the organ trade has not been ruled out. In any case, these incidences raise a battery

of bioethical questions. The vulnerability of the poor in a village to exploitation, the human rights and human dignity of the innocent and poor victims, non-existence of accountability in law and legal systems. All these questions only endorse that human values have been eroded, plunging the common citizen into insecurity. The poor had brought to the notice of the Police about the disappearance of their children over a period of two years. But the First Information Report (FIR) was not filed by the Police. Under the carpet are the issues like transparency of law enforcement system, the constitutional binding of the judiciary, political patronage and corruption in high places. The sanctity of human life has been lost in its fullest sense. Such disappearance of human beings does happen in All Nations for various reasons. The answer to uplift human rights and human dignity is to develop a system of bioethical machinery to upload human moral values in all humans across cultures and geographical barriers.

Female Feticide and sanctity of life

Another closely connected issue with regard to the question of scant regard of the sanctity of life is the practice of female infanticide. With the advancement of science and technology, human civilization has advanced a step forward. Why wait for the infant to be born and then eliminate? If we can do it much earlier then let us do it! The stage has sifted from 'infanticide' to 'feticide'. According to Ms Renuka Chowdhury, Minister for Women and Child Development, the current estimate of 'murder of unborn children' is around 10 million in the last 20 years! These unfortunate girl children are eliminated merely due to economic reasons connected with the practice of dowry and other collateral expenses in bringing up a girl child. Two ELS issues arise: (1) In the continuum of human development, from conception to birth, when does a human being is a human being and when does human life start? Does it start right from conception or at birth? (2). The second ill effect related to the undesirable tilt in the male-female sex ration of a nation. The sex ratio for the world stands at for every 1000 males there are 1050 females. Whereas the Indian sex ratio is 1000: 933, and 927 under the age of six. The pattern changes from one State in India from another. The safest state is Kerala where the ratio is 1000: 1058 while for others for 1000 males the number of females in Delhi = 821; Haryana = 861 and Punjab = 876. Some states like Daman and Diu = 710, and Chandigarh is 777. The social consequence will be the unavailability of a bride to an eligible bachelor. Three out of ten boys in Chandigarh may face the notice saying "all sold out – Out of Stock – Try later". The next generation will be affected. Moreover, humanity stands in dire need of giving a clear guideline to the question 'When does human life start, at conception or later?' If it is later, then there is no need for anybody to be concerned about the social, ethical and legal issues due to foeticide. Killing an animal is NOT murder. But killing a human being is murder. If a foetus is not a human, then humans can have a jolly good time – sex is for pleasure and foetus is for elimination.

Some bio-political issues

- o Institutionalized injustice
- o The question of corruption in Government ministers down to the Police
- o The misuse of power vested on officials by the Constitution of India.
- o Abuse of power by officials in Power
- o Stress on transparency and accountability
- o Provision of protection to law enforcing authorities and prevention of political interference
- o To train young people right from the start through Bioethics education.

Viral out breaks and Health

Viral fever is deadly in many respects. We had common flu, influenza, dengue fever, bird flu and Chingunya. We are familiar with words like, incidence, prevalence, and epidemic but not to the word pandemic. It is

Ethical Issues in Post Disaster Clinical Interventions and Research

- Working Group on Disaster Research and Ethics (WGDRE) to be presented by Athula Sumathipala
Forum for Research and Development, Sri Lanka
Athula.Sumathipala@iop.kcl.ac.uk

Asia has witnessed quite a few large-scale disasters over the last 2 years in our regions. We have also experienced a large number of foreign organizations and individuals rushing to provide 'humanitarian aid' including therapeutic interventions but some without adequate understanding of the country or its culture. There were concerns that research has been carried out without proper scientific rigor or ethical standards given the vulnerability of the people affected by these disasters; be it intentional or unintentional. This is considerable, particularly given the possibility of ill planned exploitative international collaborations.

Even under normal circumstances informed consent alone is not protective enough, because of the asymmetry in knowledge and authority between researchers and participants, particularly in the developing world. When research is combined with aid, relief and at times clinical care, there is undue inducement for participation in this vulnerable population. Additional safeguards are needed to protect the vulnerable as well as to facilitate high quality research given the nature and the scale of the disaster and the complexities of the issues related to healthcare and research. International research community and ethicists should take this issue seriously as it has not been adequately addressed up to now.

The WGDRE met in Colombo on 15-16 January 2007 to draft a consensus statement agreed among the participants. We have decided to present this statement to the international research as well as ethics community for further discussion.

We believe that post-disaster research is important and should be promoted, as more and more evidence is needed for appropriate disaster planning and prevention. However, it has to be performed in an ethical manner, planned preferably well in advance. Specific research proposals should be carefully scrutinized for the level of risk, and the significance of the proposed research. Such scrutiny may result in the need for additional procedural safeguards. Participants should be made clear whether there is therapeutic intent or whether it is pure research project to reduce the likelihood of participants mistaking research for clinical services. These issues should be equally if not more important to the developing countries as the ethical review processes are yet to be developed adequately.

The draft statement covers areas such as relevance of proposed research to disaster situations, informed consent and voluntariness, community consultation and participation, exploitation, dignity, privacy and confidentiality, risk minimization, responsibilities of the sponsors and institutional arrangements, professional competence, public interest and distributive justice, dissemination of results, ethics review, and international collaborative research. Even though, most of these are applicable to research under normal circumstances, we argue the necessity of additional attention to these components during disaster related research.

WGDRE:

- Aamir Jafarey
Centre of Biomedical Ethics and Culture (CBEC), Sindh Institute of Urology and Transplantation & Consultant Surgeon, Aga Khan University, Karachi, Pakistan
- Aasim Ahmad
Chairperson, Bioethics Group, Hon. Senior Lecturer, Aga Khan University & Chief Nephrologist, The Kidney Centre, Karachi, Pakistan
- Athula Sumathipala
Institute of Psychiatry, Kings College, London, UK; & Director Institute of Research and Development, Sri Lanka
- Chandrani Jayasekera
Deputy Director, National Institute of Health, Sri Lanka
- Dananjaya Waidyaratne
Consultant Judicial Medical Officer, Ministry of Health, Sri Lanka
- Darryl Macer
Regional Adviser in Social and Human Sciences for Asia and the Pacific, RUSHSAP, UNESCO Bangkok
- Leonardo de Castro
Department of Philosophy; University of the Philippines; & Vice Chair of UNESCO International Bioethics Committee; Secretary, International Association of Bioethics
- Nandini Kumar
Deputy Director General, Indian Council of Medical Research, India
- Sandhya Siriniwasan
Executive Editor, Indian Journal of Medical Ethics, Mumbai, India
Sarath Edirisingha
Director of the Health Emergency Disaster Management Training Centre & Consultant Medical Parasitologist, University of Peradeniya, Sri Lanka
- Sisira Siribaddana
Consultant Physician & Project Leader Sri Lankan Twin Registry
- Slemam Sutaryo
Consultant in Pediatric Hematology – Oncology & Secretary of Indonesian Network on Bioethics and Health Humanities
- Sriyakanthi Beneragama
Epidemiologist, National HIV/STD campaign, Sri Lanka

Statement on Ethical Issues in Disaster-Related Research -- A Developing World Perspective (draft of 16 January, 2007)

- Working Group on Disaster Research & Ethics (WGDRE)

Faced with the aftermath of the Asian tsunami, earthquakes, volcanic eruptions, recurrent floods, cyclones, droughts, conflicts, and other disasters that devastate communities in the South and South-East Asian Region, we have come together as a multidisciplinary working group of persons involved in research ethics to draft this statement on the ethical management of disasters and research related to disasters.

Disasters result in damage, displacement, and death of large numbers of people with significant disruption of society. They can happen at any time, affect anyone any community and any state, be sporadic or regular in nature, and occur as a natural phenomenon or as a result of human design. Disasters create an imbalance between the capacity and resources of the society and the needs of the survivors and the affected.

The global divide and disparities that already exists within societies become even more exaggerated in disaster, especially in developing countries. During such calamities government policies (or their absence) and those of a wide variety of governmental and non-governmental organizations impact on mobilization of response to the disaster and provision of care of those affected. Disaster response needs to be integrated, appropriate and evidence-based. It also needs to flow along coordinated and well-managed governance systems. Prevention of exploitation and physical, sexual and psychological abuse of vulnerable survivors and their families need to be strictly enforced.

Therefore there is a need to systematically map existing and relevant evidence pertaining to disasters, their management and their impact on the communities. There may be gaps in the existing knowledge. There may also be gaps in the implementation of research recommendations and the development of evidence-based guidelines for proper management during the disasters and its immediate and long-term aftermath. Research is needed in such areas as disaster response and relief, health care, management and public health issues, and even the ethics of disaster management. Disaster anticipation and early warning systems, mitigation and preparedness are preferable to disaster response and needs research. Therefore, further evidence needs to be gathered through culturally appropriate research for more effective and compressive responses from all sectors of society in dealing with those affected populations. This research needs to be contextual, as well as culturally and regionally appropriate, in order to facilitate shaping of policies by the local management teams and the governments. It should also examine at what stage of the recovery process are appropriate for conducting research and what type of research should be done in such stages.

In fact, it may be unethical not to conduct research in such situations since ethical research that takes into account the needs and priorities of affected communities must be encouraged and promoted.

Disasters, by their very nature, results in vulnerability in individuals and in societal groups particularly in disadvantaged communities. Any process of research involving human participants requires a robust and on-going ethical review. Existing guidelines and norms pertaining to research on human participants may not be sufficient to address all situations that arise in disasters. Greater vigilance is necessary in disaster-related research to ensure that the general ethical principles are adhered to and participants are protected.

Research involving disaster-affected populations must adhere to universal humanitarian imperatives of alleviating human suffering, preserving human dignity as well as protecting and respecting human rights regardless of race, culture, creed, nationality or political belief. More specifically, work with such populations needs to place special emphasis on the unique needs and special concerns of survivors, thereby ensuring the services and opportunities for rehabilitation are appropriate and acceptable to these individuals.

Guidelines for disaster research

In addition to the accepted national and international ethical guidelines for the conduct of research, we urge researchers to pay particular attention to the following ethical principles when conducting research in disaster-affected situations. These guidelines are meant to supplement the relevant existing national and international documents and not to replace them. The areas, which these guidelines address, include the potential for harm resulting from the research process and its sociopolitical implications, the potential for the exploitation of the research participants as well as the affected community. They also look at conflicts of researchers' interest with that of the community being studied, and the process of recruitment of survivors as participants with a particular emphasis on obtaining a valid informed consent. These guidelines also emphasize on ensuring gender and cultural sensitivity, and the need for research to contribute to the healing and empowerment of the disaster-affected community.

1. Relevance to disaster situations

- Research planned to be conducted after a disaster should be essential and is not possible in non-disaster situations*
- The objectives of all potential research in disasters should be weighed very carefully for their potential contribution to the survivors, and for their value in future disaster situations*
- All phases of the research must be culturally sensitive and should involve those familiar with the community's situation and their cultural beliefs and practices.*

2. Informed consent and voluntariness

- Any research is only to be carried out with the prior, free and informed consent of the person concerned based on adequate information.*
- The research team must identify factors that serve as a barrier to the freedom of individual members of the participant population to give consent, and provide effective mechanisms to address them.*

- c. Survivors of disaster situations are particularly vulnerable and should not be subjected to inducement.
- d. Research should not be disguised as treatment, relief or humanitarian aid. Every effort must be made in the informed consent process to make research participants aware of the difference between participating in a study and receiving humanitarian aid. The different roles of the researchers, caregivers, and volunteer workers must always be clarified and the potential conflicts of interest declared.
- e. In cases of collection and storage of human biological materials during a disaster, the purposes of such collection and storage should be explicitly stated in the informed consent process and also that these materials gathered would not be used for any other purpose.
- f. The requirement for research on children affected by disasters cannot be ruled out. However, due to their greater vulnerability, the researcher will have to justify the need to use children as research participants. The informed consent process will have to incorporate mechanisms of proxy consent by their parents or guardians and include provision from permission by the child whenever applicable. The reviewers will look very carefully at the process of consent involving children who have lost one or both parents in the disaster

3. Community consultation and participation

- a. Community participation before and during the research is essential in disaster-affected communities
- b. The researchers and review process need to identify the communities that may be affected by the research and consult with them. The research team must describe a preliminary community mapping/scoping exercise to ensure familiarity with the community as well as identify local resources that will support ethical execution of the research.
- c. A community representative or advocate must be identified by a process, which is acceptable to the study population.
- d. Community representatives or advocates should be involved in conceptualization, review, research and dissemination of research involving disaster-affected populations.
- e. In no case should a collective community agreement or the consent of the community leader or other authority or advocate substitute for an individual's informed consent.

4. Non-exploitation

- a. The selection of research participants must be made on scientific reasons and not based on accessibility, cost, gender or malleability.
- b. The research should not impose additional burdens on people who are already traumatized, and on the local infrastructure.

5. Dignity, privacy and confidentiality

- a. Given the circumstances that survivors of a disaster face, extra care must be taken to protect the privacy and confidentiality of individuals and communities.
- b. In the collection of data and human biological material, human dignity must be respected for both survivors and the deceased.
- c. Similarly, stringent standards must be maintained for the storage and possible sharing of human biological material and data.
- d. Utmost attention must be paid to prevent stigmatization, ostracisation, and other harm to individuals and communities at all stages in the research process.

6. Risk minimization

- a. Since disaster-affected populations are particularly vulnerable it must be ensured that the conduct of research imposes the absolutely minimal risk.
- b. Risks that are acceptable under ordinary circumstances may not necessarily be acceptable in disaster situations. The research team must demonstrate the ability to anticipate adverse reactions and facilitate appropriate interventions.

7. Institutional arrangements

- a. Institutions that sponsor and conduct research should recognize that a stronger ethical obligation is required in disaster-related research.
- b. Research in disasters should be coordinated with other disaster relief activities
- c. Research should not disrupt or further burden the existing infrastructure

8. Professional Competence

- a. Ensure professional competence of all members of the research team for their specific tasks
- b. The highest standards of scientific research and peer review should be maintained through the entire process.

9. Public interest and distributive justice

- a. The research undertaken should provide direct or indirect benefits to the researched group, the disaster-affected community or future disaster-affected populations.
- b. Prior agreement should be reached, whenever possible, between the community and the researcher on what benefits could arise from the research, and how they would be shared.
- c. The actual benefits arising from research should be shared with society as a whole and with the international community with due consideration to the potential negative effects upon the participants and the communities involved, in consultation with the community.

10. Dissemination of results

- a. Transparency in dissemination of results should be a prior condition for the conduct of research in disasters.

- b. Research published in open access journals will ensure the widest dissemination of findings.
- c. Efforts should be made to use the results of research to influence the formulation and modification of policy.
- d. The presentation of the results of research to the community who participated in the research, and to the public, should be after a process of peer review has validated the conclusion reached.
- e. The relevant results need to be presented in understandable language to research participants and the participating community.

11. Ethics review

- a. Independent, multidisciplinary and pluralist ethics committees should assess all the relevant ethical, cultural, legal, scientific and social issues related to research projects. These should include representation or advocates from the disaster-affected community.
- b. All research should be subject to local ethics review that includes regular feedback from the researchers and community representatives.
- c. In addition, there should be a centralized mechanism (such as a national ethics review committee) for review and coordination of all research in the disaster-affected area to ensure a wide perspective on all the research and to prevent unjustified repetitive work.
- d. A central/national "clearing house" on an open web Site would be more effective in preventing duplication, as well as letting everyone know what topics have been covered, are currently being researched, and which ones are being planned
- e. Prior ethics review and approval may be taken before initiating research in an expected disaster situation of periodic or recurrent nature. However, the research may commence only after consultation with the actual disaster-affected community.
- f. Expedited review may be necessary in exceptional situations, but should be conducted with extreme caution. This expeditious review must follow the standard procedure considering the guidelines mentioned above, with a quorum agreed beforehand.
- g. In the case of research projects that commenced before a disaster, the investigators must go back to the ethics review board to consider – in consultation with the community, wherever or whenever possible – whether the research may continue or stop.
- h. Where applicable, the protocol should include provisions for aftercare, including appropriate mechanisms for continuation of essential services that were associated with the research protocol, and a proper referral mechanism to deal with the needs of participants and members of the research team.

12. International collaborative research

- a. All research in the disaster-affected area needs to be done with a local partner(s).
- b. Such collaborations should be based on mutual respect and partnership. Collaboration needs to be undertaken between national researchers, policy maker and the community, to share responsibility for determining the importance of the problem, assessing the value of the research, planning, conducting, and monitoring the research, and integrating that research into the social system.
- c. Contribute to developing the capacity for researchers, policy makers, and the community to become full and equal partners in the international research enterprise.
- d. Permission taken from local authorities does not exclude the requirement for ethics review at local level and at national level.
- e. Special consideration should be given to transfer of biological material, ownership of data and intellectual property rights issues. The export of biological materials from a disaster-affected area should be strictly regulated through a central mechanism.
- f. Benefits of the research if any financial or non-financial should be shared fairly with the community and decided a priori.

Informed Consent in Sri Lanka: Review of Research Conducted in Sri Lanka to Understand the Progress of Informed Consent Process

- Suwin Hewege, Athula Sumathipala, Sisira Siribaddana, Mnaura Lekamwattage, Manjula Athukorale, Joanna Murray, Martin Prince
Forum for Research and Development, Battaramulla, Sri Lanka
suwinhewege@yahoo.com

Consent is considered to be 'informed', when it is given by a person who understands the purpose and the nature, what participating in the study requires the person to do and to risk, and what benefits are intended to result from the study.

The issue of informed consent can be studied from two main angles; genuine efforts made by the researchers to adhere to good ethical practices by obtaining ethical clearance from a review committee, providing the required information to the participants and the process adopted to ensure 'freely given consent', and the capability of the research participant to comprehend the given information and to provide or refuse consent.

We present one of the three components of a larger project on informed consent in which particular attention was drawn to the issue of informed consent in contemporary Sri Lanka.

The objective was to carry out a compressive review of the documented evidence of informed consent practices and related ethical procedures, as featured in the research projects carried out in Sri Lanka. This was undertaken to provide a baseline so that any future intervention to improve consent procedures and ethical standards can be compared. All published research originating from Sri Lanka, between 01.01.1999 to 01.09.2004 that could be obtained from a Medline search carried out with MeSH major and minor heading; 'Sri Lanka', were scrutinized according to pre-agreed checklists to evaluate the ethical practices followed. All MD and MSc. thesis available at the Postgraduate Institute of Medicine (PGIM) library were also included.

Asian Bioethics Association

Website: eubios.info/ABA.htm

ABA Membership is open to all who share the goals of developing cross-cultural and international bioethics in their region of the world.

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Persons who want to confirm their membership of the ABA must send their completed membership form (pdf version can be [downloaded](#)) to the secretary, Darryl Macer, (by Email, fax or airmail).

Membership fees are payable at any time in the year, including at the time of renewal to *EJAIB*, the official journal of ABA. Why not pay your fees at ABC2007.

A three tier system exists for annual fees:

a) Regular price (US\$50 Euro 50 Yen 5000).

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b) Reduced contribution (the amount is up to the member, and is also suggested for students)

This includes the *EJAIB* journal subscription.

c) No fee, because the person is not in a position to pay the fee.

This does not include a hard copy of the *EJAIB* journal, but anyone can apply to Eubios Ethics Institute separately for a hard copy of the Journal, to be considered case by case.

The Asian Bioethics Association Constitution (adopted on 25 November, 2002 at ABC4)

Article 1 (Name)

The name of this academic organization shall be the: Asian Bioethics Association (ABA). Hereafter referred to as the Association.

Article 2 (Definitions)

In interpreting this Constitution the following definitions shall be used:

Bioethics is the interdisciplinary study of philosophical, ethical, social, legal, economic, medical, therapeutic, ethnological, religious, environmental, and other related issues arising from biological sciences and technologies, and their applications in human society and the biosphere. **Asia** is the regions, peoples, and cultures which constitute the geographically largest continent of the world.

Article 3 (Objectives)

The basic objective of the Association is to promote scientific research in bioethics in Asia through open and international exchanges of ideas among those working in bioethics in various fields of study and different regions of the world. In order to achieve this end the Association will encourage the following work and projects: (1) to organize and support international conferences in bioethics in Asia; (2) to assist the development and linkage of regional organizations for bioethics; (3) to encourage other academic and educational work or projects to accomplish their goals consistent with the objectives of the Association.

Article 4 (Membership)

4.1 Membership of the Association shall be open to any individuals and institutions sharing the objectives of the Association.

4.2 A member of the Association shall be in good standing. There will be a voluntary payment of annual dues. The Board of Directors may tentatively set the suggested annual dues at a different rate for members with different income.

4.3 Membership shall be valid unless and until they are rejected by the Board of Directors and/or by the majority vote of members.

Article 5 (the Board of Directors)

5.1 The Board of Directors shall be nominated from among the members of the Association.

5.2 Institutional or regional members may nominate delegate(s) for the Board, but the nominee, if elected, shall hold office in his or her own right, and not as a representative of the institution or the region.

5.3 The Board of Directors shall consist of no more than 15 members and no more than 3 members from any one nation state. The nation state of each member should be defined by the member on the basis of residence or nationality at the time of nomination for election.

5.4 The Board of Directors may appoint, or authorize the President to appoint, additional officers, sub-committees, executive staffs to carry out specific tasks of the Association. In particular a list of regional representatives will be maintained for promotion of the ABA.

Article 6 (the Officers)

6.1 Officers of the Association shall be the President, seven vice-presidents (one from each of China, India, Japan, Korea, South Asia (East of India), West Asia (West of India), and Asian Ethnic and Religious Minorities, and a General Secretary. They are nominated and/or elected by members of the Association. The President can serve a maximum of two years in office. The Other Officers should stand re-election every two years.

6.2 The Officers shall be responsible for the general management and the direction of business works of the Association. The President and/or Secretary shall have authority to execute, in the name of the Association, all authorized deeds, contracts, or other instruments.

6.3 The Vice-presidents shall provide secondary leadership for the Association, substituting for the President when needed.

6.4 A vice-president can be elected for a maximum of two successive terms as a vice president.

6.5 The General Secretary shall keep, or arrange to have kept, a true record of the minutes of all meetings.

6.6 The General Secretary shall have custody of the Association's funds, keep full and accurate accounts of the receipts and disbursements, and deposit all money in the name and to the credit of the Association in the depositories designated by the Board of Directors. The accounts shall be shared with all members of the Association every year.

Article 7 (Amendment of the Constitution)

This Constitution may not be amended, replaced, or annulled except by an affirmative vote of two-thirds of the members in secret ballot.

Supplementary Note 1

The principles of this Constitution were initially adopted at the Inaugural Meeting of the East Asian Association for Bioethics held in Beijing on the 5th of November, 1995, when the Officers of this Association were also nominated. At the UNESCO Asian Bioethics Conference, 4 Nov, 1997, the Association was broadened to become the Asian Bioethics Association, and several further members were nominated. This initial Board of Directors was replaced by a new Board in November, 2002, at the Fourth Asian Bioethics Conference in Seoul, and when the Constitution was formally adopted. The 2004 election was held on 10 November 2004.

Supplementary Provision 2

The business office of the Association was placed in the University Research Center, Nihon University, Tokyo, Japan, from 1998 to February, 2002. From February, 2002 to February 2005 the secretariat and office was: Prof. Darryl Macer, Institute of Biological Sciences, University of Tsukuba, Tsukuba Science City 305-8572, JAPAN. From February 2005 the secretary and office moved to Prof. Darryl Macer, RUSHSAP, UNESCO Bangkok, 920 Sukhumvit Rd, Prakanong, Bangkok 10110, Thailand [asianbioethics@yahoo.co.nz]. The website from 2005 is eubios.info/ABA.htm. (E-mail: asianbioethics@yahoo.co.nz).

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Shaping Genes: Ethics, Law and Science of Using Genetic Technology in Medicine and Agriculture

by Darryl Macer, Oct. 1990, 421pp.

Cost: US\$20 UK£10 NZ\$30 A\$25 C\$22 ¥2500 Others or credit card **NZ\$30****Equitable Patent Protection in the Developing World**

by William Lesser, May 1991, 150pp.

Cost: US\$15 UK£8 NZ\$20 A\$20 C\$17 ¥1500 **NZ\$25****Attitudes to Genetic Engineering: Japanese and International Comparisons (Bilingual)**

by Darryl Macer, May 1992 330pp.

Cost: US\$30 UK£15 NZ\$35 A\$30 C\$30 ¥3000 **NZ\$40****Human Genome Research & Society**

Eds: Norio Fujiki & Darryl R.J. Macer July 1992 ISBN 0-908897-03-0 (English),

230pp. ISBN 0-908897-04-9 (Japanese), 240pp. Cost: US\$20 UK£10 NZ\$30 A\$25 C\$22 ¥2000 **NZ\$30****Intractable Neurological Disorders, Human Genome Research and Society** Eds: N. Fujiki & D. Macer

Feb. 1994 ISBN 0-908897-06-5 (English), 320pp. ISBN 0-908897-07-3 (Japanese), 340pp.

Cost: US\$25 UK£12 NZ\$30 A\$30 C\$27 ¥3000 **NZ\$40****Bioethics for the People by the People**by Darryl Macer,... May 1994 ISBN 0-908897-05-7, 460pp. Cost: US\$30 UK£15 NZ\$35 A\$35 C\$32 ¥3000 **NZ\$50****Bioethics in High Schools in Australia, Japan and New Zealand,**

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