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As an undergraduate student, there is nothing more fulfilling than when separate courses start to intertwine and allow you to inspect a certain subject through many different lenses. I have been blessed with an education that has allowed me to ponder the ethical considerations of life as we know it. Everyday occurrences that once seemed so mundane can actually be situations that continue to perpetuate stereotypes or foster an uncomfortable environment for others. For example, my Bioethics course opened my eyes to the endless obstacles homeless individuals face, while my Ethics in Research course exposed me to the sheer vulnerability these humans possess when it comes to experimental research. In Bioethics, we read an article written by Dr. Carl Elliott that aimed to expose how pharmaceutical research centers were prying on homeless individuals in Philadelphia (Elliott, 2015). Ethics in Research introduced me to The Belmont Report, written in 1979 by the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, which provides basic ethical principles and guidelines that should assist in resolving the ethical problems that surround the conduct of research with human subjects. Some of the principles called for respect for persons, beneficence, justice, informed consent, and assessment of risks and benefits (Office for Human Research Protections (OHRP), 2018). I could not help but wonder about the stark contrast between the stories Elliott told and the guidelines The Belmont Report had supposedly pioneered. On one hand, we have a call to respect an individual's autonomy, protect them from harm, and provide justice for those that find themselves in systemically compromised positions. Yet, Elliott has offered us first-hand accounts of individuals joining risky drug trials because they need the money to survive. This leads to me question, why create a system of fairness in research when those that need it the most are still disregarded and exploited?

In order to understand the vulnerability of this population, one must realize that many people carry a prejudice against homeless individuals. Baumgartner et al. noted that many people have a tendency to blame the poor for their situations and even rebuke the government for fostering an environment of dependence with their support (Baumgartner et al., 2012). The researchers result exposed how people feel less sympathy towards homeless individuals because they believe the homeless are deserving of their situations (Baumgartner et al., 2012). This is an extremely dangerous, yet eye opening, conclusion. It is abundantly clear that many homeless individuals do not like the situation they are in, with many asking for help and seeking shelter wherever they are welcome. There are many reasons people end up homeless, whether it be because of the lack of affordable housing, unemployment, or mental illness. All of these reasons do not make a homeless individual less deserving of another person's respect, let alone make them deserving of their lack of shelter. In fact, when an individual has lost a stable home, they become more vulnerable than ever and should be protected from many situations, such as being scouted to participate in many dangerous clinical research studies.

From the outside, it is comfortable to assume that homeless individuals are able to maintain their full autonomy and make their own decisions regarding participation in research trials. It would be disrespectful to assume that finding themselves in a tough spot in life automatically equates a person as being mentally unfit. But when Elliott published the first-hand accounts as to why homeless individuals joined research studies, their reasoning sparked worry within me. One person claimed that a lot of the people who join the studies do so because the money is good, and they desperately need it. Automatically one needs to understand that we are dealing with a vulnerable population and extra protection is necessary when it comes to human research, yet these companies do not care as long as they have participants. This clearly violates

The Belmont Report's demand for justice as this group is specifically being targeted due to their easy availability, compromised position, and their manipulability, since the reasoning behind choosing this population does not directly relate to the problem being studied.

Another participant mentioned how the qualifications for a study can lead individuals to do harmful things in order to be chosen as a candidate. A specific trial had set up recruitment flyers asking for individuals with "cocaine dependency" to reach out. The participant mentioned how people will often start to take drugs a few days before being screened so that their blood work will allow them to partake and reap the potential benefits from an addiction study. When I first read this section, I was blown away by the measures individuals would take to qualify for a study. It was hard to believe that people would start taking a drug just so they could participate, but the real issue is much deeper than the superficial story we have been given. One must ponder why people feel as if their only hope is to qualify for a study, and a lot of the problem comes down to the stigma surrounding homelessness. It is a privileged notion that these individuals should "just get a job" since the hiring process often involves interviews that require a certain look and setting up payroll puts a heavy emphasis on needing a bank account, and therefore a home address. I would be lying if I told you that I understood even a fraction of what these individuals have been through. In many ways we have failed this vulnerable community and we continue to do so when we exploit their need for basic necessities to find research participants

It is easy for those blessed with all the basic necessities to boast about the amazing advancements pharmaceutical companies have made through their research. And do not get me wrong, amazing advances have been made. The life expectancy has climbed, and many medical conditions are better understood since research is more abundant, but we have to question the treatment of the participants that led us to these breakthroughs. One person that Elliott had

spoken to exposed his heartbreak over not being able to find housing for him and his wife while she was pregnant. They were homeless, hungry, and he was diagnosed with bipolar disorder and depression that led him to angry outbursts. During a short stay at a shelter, he was approached and told that the Veteran Affairs hospital had sent a representative to speak to him, but when he went outside, he was met with a research spokesperson from CRI Worldwide, a company dealing with clinical research. He recalled the woman saying that in 40 days he will make \$4,000, and that she made testing drugs sound like a vacation. At this point in his life, how was he supposed to say no? In many cases, such as the one mentioned above, homelessness and mental illness is a two-way street. This is due to cognitive and behavioral problems making it difficult to earn a stable income or to carry out daily activities that encourage stable housing (*Homelessness and Mental Illness* 2020). In fact, many of the people Elliott interviewed spoke about how they appreciated the comfort inpatient units extended to them, even if that meant long term side effects from experimental drugs.

The ethics of offering money for clinical research participation has been heavily scrutinized, especially since it tempts vulnerable subjects to risk their health. When you target people at their lowest, are you truly following the ethical principles put in place to protect them? It is very clear that the guidelines put forward by The Belmont Report are most often neglected by research studies that involve homeless people. Beneficence involves doing the least possible harm while also maximizing benefits. In my opinion, many of the studies mentioned in Elliott's article completely bypassed beneficence in order to fast track medical research. The pharmaceutical companies felt comfortable offering a few thousand dollars to potentially send a participant back to the streets with severe long term side effects while they continue to profit off of the information. The ethics of situations such as these are intensely complicated due to the

vulnerability of lacking a home, stable necessities, and the high probability of suffering from a mental illness. While I do not think it is plausible, or even necessary, to completely erase homeless individuals from participating in experimental research, I do believe that further protection is necessary and pharmaceutical companies should be held accountable to uphold ethical guidelines such as The Belmont Report. In the future I would love to feel as if anyone who participates in research does so because they truly believe in what they are doing, and not because they feel a form of coercion.

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