2017 SUMMER ETHICS INTERNSHIPS
INSTITUTE FOR PRACTICAL ETHICS & PUBLIC LIFE (IPE)

ABSTRACTS

For information about 2018 Summer Ethics Internships offered by the IPE with funds generously provided by the family of John Allen and Patricia Hollingsworth and other donors, please write to James Childress at jfc7c@virginia.edu or go to http://practicalethics.virginia.edu/programs/internship-program


This year I was accepted into the Summer Bioethics Internship Program at the Center for Biomedical Ethics and Humanities in the UVA Health System’s School of Medicine. As a bioethics intern, I encountered a plethora of ethical dilemmas within the UVA Health System and had the opportunity to work directly with a number of bioethics faculty and physicians, as well as attend weekly bioethics seminars and meetings of the Ethics Consultation Service. My research focused on two separate projects within reproductive ethics: fertility preservation for adolescent cancer patients and disparities in women’s health.

I first studied the individual experiences of adolescent cancer patients and their parents from transcribed interviews to better understand the process of broaching conversations about the option of preserving germ cells before undergoing aggressive chemotherapy and radiation treatments, which often results in future infertility. One of the biggest ethical dilemmas that arose for patients and their parents was conflict in decision-making, including whether or not to have discussions about the prospect of infertility as a result of aggressive cancer treatments. Recent advances in reproductive technology for adolescent cancer patients raises new sets of ethical questions, including how to maintain respect for patient autonomy when informed consent is often not required from patients who are minors. For instance, there was one parent who decided to withhold any discussion of fertility preservation from their adolescent, which was legally sound because the patient was a minor. Yet, what are the long-term implications for patient rights and the quality of life for cancer survivors if minors are not given the full scope of information about their fertility preservation and options?

The second project tried to understand why women living in poverty will experience greater numbers of unintended pregnancies, HIV/AIDS, forced C-sections, drug testing, cervical cancer, as well as restrictions on publicly-financed abortion than women with greater socioeconomic status. Illnesses associated with poverty are well known to be linked to the social determinants of health, such as early childhood development, location of residence, housing environment, diet, education, employment, and income. The social determinants of reproductive empowerment have similar poor outcomes for women affected by poverty. These determinants are often manifested in limited access to contraceptives, mistrust in health care providers, fatalistic beliefs, as well as a lack of personal agency and feelings of being unsafe in the clinical setting and at home. What are the roles and responsibilities of legislators and health care providers in addressing the social determinants of reproductive empowerment? What are the ethical implications of public policies that directly hinder or promote women's reproductive empowerment? Current medical, legal, and sociological literature was analyzed to find connections between health care, public policy, and poverty as they relate to disparities in women's health and reproductive empowerment.

Cifu, Isabelle [Major: Anthropology. Minor: Bioethics]: Demographic and Vision Analysis Intern

This summer, I worked as a demographic and vision analysis intern for three months at the Bald Head Island Conservancy, on Bald Head Island, North Carolina. The BHC is a nature conservancy, which “fosters community-based barrier island conservation, education, and preservation,” with a vision of “living in harmony with nature.” The purpose of my position was an assessment of current and future constituents for the Bald Head Island Conservancy, through the development and administration of surveys, and to make recommendations for adjustments in offerings based on the assessment and other borrowed data, taking the Conservancy Mission and
Vision into account, culminating in a report on my findings. All interns conducted nighttime “Turtle Walks,” in which we presented on sea turtles and the BHIC’s sea turtle protection program and led participants to the beach to hopefully witness sea turtles’ nesting or hatching. I also transported injured animals to wildlife sanctuaries, cared for ill or injured wild animals, and co-led a campaign for better treatment or release of the resident animals used for education at the BHIC. The ethical issues involved in my report center on the meaning and praxis of the BHIC’s vision of “living in harmony with nature,” asking specifically, “Which nature?” Moreover, I question the paternalistic attitude of the current manifestations of the BHIC’s “harmony,” and the sources of authority within their conservation work. I question the implicit speciesism of the organization, as well as the ethical and practical inconsistencies of their environmental education and vision. Within the conservation and research aspect of the BHIC, the ethical issues include harms and benefit, as well as the simultaneous fetishization and dehumanization of animals.

Draper, Margaret [Major: Political and Social Thought]: Anti-Slavery Program with the International Justice Mission

I have had the opportunity to serve as an intern for International Justice Mission (IJM)’s Southeast Asia regional team in their headquarters in Washington, DC this summer. IJM is the world’s largest international anti-slavery organization, operating locally and nationally out of 17 different field offices in South Asia, Southeast Asia, Latin America and Africa. In these four regions, IJM is invested in a number of different types of casework combatting violence against the poor, including child sex trafficking, labor trafficking, police abuse of power and citizenship rights abuse. As part of the Southeast Asia team, my work dealt with whatever was most urgent at the moment, which tended mostly to be research and investigations involving perpetrators of cybersex trafficking of children (OSEC) in the Philippines and labor trafficking of both children and adults in the Thai fishing industry. I also spent much of my time helping my team lay the legal and research groundwork for the organization’s next regional office and casework type, which should debut in the next year or so. We followed quite a few complicated long-term cases of victims through rescue, rehabilitation and restoration, and of their perpetrators through arrest, investigation, trial and conviction. These cases often take years in environments where they are unwelcome; I had the opportunity to see milestones reached in trials that had been going since I was a child and hear stories of how political will and law enforcement effectiveness in those areas have improved steadily since then.

I am endlessly thankful to the donors who made this possible for me; this opportunity has been one of the most formative of my life.


Definitely more than 40 hours/week. Definitely longer than 9:00 AM to 5:00 PM. Definitely, not a paid internship. Yet, I would definitely do it again. I spent my summer interning at the Public Defender Service for the District of Columbia. PDS is an independent, federally funded organization that provides legal representation to indigent adults and children who are charged for allegedly committing criminal acts. Besides currently providing the DC area with one of the best public defense systems in the nation, PDS is constantly investing time and resources to train potential future public defenders. The Criminal Law Internship Program (CLIP) is an investigative internship designed to expose students to the public defense field. The day to day at the office was never the same, each day you could expect to learn something new or be involved in a different project. We were assigned to specific attorneys and we would assist in the investigative part of the cases. Listening to jail calls, watching BWCs (body worn camera), interviewing and taking statements from potential witnesses, writing memos from what happened on the field, meeting with clients at the DC jail, requesting records, delivering subpoenas, and/or meeting with staff investigators and attorneys were some of the tasks that you could find yourself doing at different moments of the day. However, through my experience at PDS I was constantly asking myself whether I was the most appropriate person to do the assigned task. Had we all been through enough training? Do we all understand the magnitude of the situation? Do we know that one mistake could cause the attorneys to potentially lose their Bar license? Or even worse, do a poor investigative work and hinder a defendant’s chance to acquisition. Also, was 12 weeks enough? Am I just dipping my feet in the water for my own intellectual growth, while a staff investigator could be doing a better work? Will this constant change of interns cause an unintentional failure in the line of communication? Yet, if there is not enough funding or staff what other option should offices such as PDS rely on? Many questions arose, and many more remain. In personal terms, my experience at PDS was extremely valuable. It furthered my interest in understanding a criminal justice system which seems to pride in robbing people’s humanity and people’s dignity.
Megan Helbling [Major: English]: Charlottesville’s Most Vulnerable Find a Haven: Ethical Engagement with Homelessness

I spent this summer as an intern working alongside staff and volunteers at The Haven, a day shelter for individuals in Charlottesville, Virginia experiencing homelessness. The Haven seeks to address both critical needs of the homeless as well as partner with clients in order to seek long-term solutions to help each client on their own journey to productive, meaningful and self-sufficient lifestyles. I experienced every aspect of The Haven’s services, gaining a wide understanding of the organization’s structure and mission, as well as great insight into the problem of homelessness and the solutions available to ending it. I began the summer with one specific question in mind: How can every UVA student become more responsible and charismatic members of the Charlottesville community in regards to caring for our homeless population? In our society, the visibility and obvious neglect of our homeless neighbors necessitates an urgent discussion regarding ethics, and this discussion must precede ethical conversations surrounding the systemic causes of homelessness. Public interactions between individuals of privilege and individuals experiencing homelessness repeatedly result in the dehumanization and flagrant neglect of an entire portion of our population. The normalization of this cruelty suggests that this ethical critique must be discussed immediately in order to restore and uphold standards of human and social dignity. I use a framework of Christian ethics, both broadly conceived and as specifically articulated by the Christian ethicist Reinhold Niebuhr, to develop explanations and rationale for the treatment of the homeless in America. I conjecture that immoral interactions between the poor and the privileged result from fear and anxiety felt by both parties, and help perpetuate a distancing of moral responsibility for society to care for our most vulnerable individuals. Niebuhr constructs a theology where individuals attempt to comprehend morality both through reason and/or love: but both are insufficient to procure justice in the case of individuals whose proximity resembles that of the homeless population. The purity of our goodwill becomes distorted through our irrational modes of reasoning and our unequal methods for compassion. In this scenario, physical and perceived proximity to the homeless in America inspires fear within the financially privileged. I use these motivating factors to pinpoint specific steps that might directly counter the root of immoral behavior towards individuals experiencing homelessness.

Finally, I’d like to express my deep thanks to each of the donors, UVA faculty, and other collaborating partners who made this Internship in Practical Ethics a possibility. I am deeply grateful and humbled to be a part of this program, and my experience this summer was transformative in more ways than I can say. Thank you.

Kenny, Sarah [Majors: Government; Philosophy, Politics, Law. Minor: Women & Gender]: Shelter for Help in Emergency Internship Abstract

Over the course of two months this summer, I trained and interned with the Shelter for Help in Emergency (SHE), an interpersonal violence shelter that "provides comprehensive services to women and children who are victims of domestic violence" in Charlottesville/Albemarle and the five surrounding counties of Greene, Fluvanna, Orange, Louisa, and Nelson. My motivation to pursue this opportunity stemmed from a January term course entitled Gender-Based Violence that I had the privilege of taking this past January, where in which a representative from SHE spoke to my fellow students and me about the nonprofit's mission and efforts to reduce violence in the community. After securing the internship, I applied for this stipend with UVA's Center for Applied Ethics in the Public Life with the intention of investigating questions of applied ethics pertaining to the legal matters that victims of interpersonal violence navigate, primarily petitions for protective orders and custody.

As a student of political philosophy, policy, law, and gender studies, I hoped that this internship could both inspire and inform initial research for my thesis, which I plan to conduct on the intersection of gender and law/policy. Ms. Silver, SHE's volunteer coordinator, placed me in the physical shelter for the duration of my internship, where I encountered a plethora of ethical dilemmas as I interacted with families in their most vulnerable moments. Although my exposure to the legal matters I had initially hoped to investigate constituted a significantly smaller portion of my internship than I had anticipated, I gained a robust, holistic understanding of both the city and the state's social services landscape. In this paper, I grapple with the following primary ethical queries: a) qualifications for entrance to the shelter b) the extent to which SHE regulated client behavior and lifestyle and c) encouragement of self-determination and self-sufficiency. As regards my first major ethical query, I was initially perturbed by how we had to turn away a number of very vulnerable characters. Hearing that police had to escort a woman with mental illness out of the shelter and knowing that she would sleep on the street, afraid of getting raped as she had in the past, seemed wildly unethical to me at first. Where was the humanity in this situation? However, I came to realize that impartiality in such situations had to be the most just policy-allowing attachments to particular clients and breaking code hurt organizational integrity and was not sustainable. As regards my second major ethical inquiry, I initially found rules on client behavior quite paternalistic - one client asked to have a glass of red wine before bed, and wasn’t allowed. I had to check out and document passing out even the most benign painkillers, for
all medicine had to be turned over upon entry to the shelter. However, these rules undoubtedly emerged from previous issues, and again, exceptions to the rule out of favoritism or sympathy is not just. As regards my third major ethical inquiry, I don’t believe that the Shelter does enough to prepare women for self-determination. The social and caseworkers view their role as supporting whatever choices women seek to pursue, whether or not they agree, but there is such a thing as a bad choice that moral objectivity should not permit from the perspective of a professional. On my view, supporting a client also means providing direction, even when that advice might not be well taken or easy.

My time at the shelter has motivated me to pursue an independent study for this fall term in which I will explore the relationship between gender, social services, and state/community institutions. My time here challenged me in ways I did know I could emotionally withstand, and has inspired me to focus my thesis more on questions of policy and social services that include more ethical gray areas than the comparative legal analysis I initially sought to undertake. Questions of ethics are questions of humanity, and this immersive experience in the fragility and beauty of humanity gave me new insights on initial judgments I entered the shelter with.

Latif, Attiya [Major: Political & Social Thought. Minor: Middle Eastern Studies]: KARAMAH: Muslim Women Lawyers for Human Rights, Legal and Policy Intern

This summer I worked as a legal and policy intern at KARAMAH, which is an NGO of Muslim women lawyers who advocate for human rights. We take cases of domestic violence against Muslim women and adjudicate them, and aim to propagate an understanding of the egalitarian nature of Islam within the Muslim community. The organization promotes gender equity in the mosque, attempts to dismantle patriarchal legal systems that have no basis in religion, and empower women to do this by giving them a better understanding of their legal rights within their faith and their communities. This summer we’ve been doing research on FGM within the United States and the civil liberties and cultural sensitivity at stake when it comes to searching for cases. I also wrote a policy brief for the DOJ about hate crimes and the way they disproportionately affect Muslim women/the need for more detailed reporting statistics, and I've been a participant of KARAMAH’s legal scholars program, which brings women from around the world to discuss Muslim women's legal rights and the need for change and strong leadership. The NGO struggles with balancing various sects in Islam and the need to advocate for equity in each. We also struggle with the balance between personal liberties, a need to advocate for Muslims’ presence in the States as equal citizens, and the need to call out misogynistic tendencies in the Muslim community.

McCain, Kelly [Major: Human Biology. Minor: French]: Bioethical Quandaries in Evaluating the Effectiveness of Point-of-Use Water Treatment Technologies to Prevent Stunting

This summer, I worked on a randomized controlled trial of point-of-use water purification interventions in a group of villages in the Limpopo Province, South Africa to study health outcomes through reductions in stunting and pathogen load in stool of children under the age of 3 over a two-year period. We had multiple roles: to collect two different water samples from 100 random households to do membrane filtration to test for E. coli and total coliform, as well as to do PCR to determine which kinds of pathogens and their quantities in the water. We also installed SmartSpouts, spigots with hardware that will quantitatively track intervention use by participants.

There were various minor bioethical questions that came up this summer, including the use of fieldworkers who were perhaps overly trusted by participants to obtain consent for installation of the spigots, intentionally giving two groups in the study either basic buckets (which can increase pathogen load in water, as we discovered) or no intervention, instead of the MadiDrop or the filter, with the knowledge that having bacteria in the water can harm children by causing stunting, environmental enteropathy, and/or diarrhea.

Throughout the summer, a recurring question was whether or not the MadiDrops should be removed from the study or not because of slightly elevated silver levels in about 5% of household water samples. Is it justifiable to allow households to drink water with silver levels above the allowable limit, even though the health risks are essentially nil? Should those few households be investigated to determine if other factors are contributing to these elevated levels? This was the third iteration of actions taken in attempts to reduce silver levels. First, the MadiDrops were removed from the filter groups and the second MadiDrops were removed, then the MadiDrops were replaced with MadiDrops having 50% silver levels, and then most recently, a decision was made to remove the MadiDrop group from the study entirely. The principal investigators of the study eventually decided to remove the MadiDrops because of potential health problems, however slight, and because they had previously agreed to take this action in a protocol written for the Institutional Review Board. As an undergraduate researcher without any contribution to this decision, I learned about how decisions affecting human health are made in studies like this one and was able to see firsthand how the legacy of studies like the Tuskegee Syphilis Study has influenced health research to this day.
Mehra, Ashley [Majors: Politics Honors; Classics]: Recollections of a Retired District Court Judge on the Judicial Aspects of Alexandria, Virginia.

During my Institute for Practical Ethics internship, I assessed and wrote about the judicial aspects of the City of Alexandria as well as broader ethical issues of the legal profession, with perspectives sought from the oldest living retired judge, the Honorable Robert T.S. Colby. I prepared a list of questions for each of our interviews and transcribed all of the audio recordings. The recordings provide insights into Judge Colby’s childhood, upbringing, schooling, family life, and career as a practicing lawyer, District Court judge, and retired substitute judge. The transcriptions have been typed up into a document that is reflective of a biography. Information is organized chronologically, beginning with a timeline of Judge Colby’s life that started on May 13, 1928 until today.

Reflecting on his legal career, fifty years and counting, Judge Colby shared his experiences in the courtroom with me. I highlight a select number of stories in my narrative that serve as illustrative examples of the ethical issues that can arise under the discretionary role of a judge. Judge Colby touched upon a number of factors that can affect a judge’s decision-making, including his or her personality, caseload, experiential knowledge, geographical knowledge, personal relations, familial relations (otherwise called “brother-in-law” justice), among others. It is important to note that the cases I share are not standard but are the oddities; nonetheless, as Judge Colby said to me, “Ethics is about calling the odd ones right…”

Persily, Jesse [Major: Human Biology. Minor: Chemistry]: Doing Ethics: A Foray into the World of Ethics Consultation

Tucked within the brick walls of the West Complex, UVA’s Center for Biomedical Ethics and Humanities provided me resources and opportunities that allowed me to refine my understanding of the ethical underpinnings of modern medicine. By working with an interdisciplinary team of clinical ethics consultants, I was exposed to a wide range of challenging situations, from conflicts of opinion regarding end-of-life care, to the grey lines that differentiate altered states of consciousness. I attended liver transplant selection committee meetings, and paired this objective patient evaluation with real patient interaction in the transplant clinic. I wrestled with the nuances and inadequacies of the typical approach to advanced care planning and advance medical directives, and helped begin the assessment of UVA’s recent attempts to mitigate past pitfalls and forge a path forward. Specifically, we looked at UVA’s new Do Not Attempt Resuscitation, which attempts better reflect a patient’s desires in terms of escalation and de-escalation of care. I was even given the freedom to explore the benefits and burdens of establishing a research ethics consultation service, an advisory foil to the University’s well-established Institutional Review Board. This work resulted in a memo that will inform the University’s current efforts to expand as an institution committed to translational research. These various projects provided a practical lens through which I have learned to assess formal bioethical principles and ideas, including the interplay between a physician’s benevolent intentions and a patient’s autonomy. These ideas come to bare in situations at the end of life, where a physician’s proposed course of action can contrast with the desires of a family member. Physician must act in ways that help and do not harm, yet, must be careful not to unduly infringing on the autonomy of the patient. This is complicated by surrogate decision-making and by a culture that has shifted power into the hands of the patients and family, and away from the physicians. This shift has undoubtedly helped the patient-physician relationship become a true partnership, but it has complicated situations in which physicians believe a family’s desires will harm a patient. I also explored the implications and challenges of ensuring informed consent in both clinical and research settings. Especially in major medical research institutions, which have begun to focus on translating basic research findings into clinical practice, academic physicians must balance the responsibilities they have as caring clinicians with their efforts as curious researchers. This includes the interface between consent for clinical procedures and consent for participation in research, and is complicated by consent processes that may fail to clearly separate clinical benefit for the individual patient, and the more global benefit of biomedical research. Finally, I explored the political and physiological realities of considering a patient’s “right to die” through the lens of a Virginia court case surrounding the distinction between a minimally conscious state and a state of unresponsive wakefulness (commonly called a vegetative state). Through this exploration, I wrestled with the meaning and significance of consciousness, and saw rifts between clear patient wishes and the systems of documentation that are currently in place for individuals to formally and legally state those wishes, thus bridging the ethical implications with practical hurdles that I will continue to work to address.
I conducted my IPE summer internship with the UVA Center for Telehealth at the University Medical Center, where I acted as a telemedicine project coordinator for the development of a new program, Telemedicine Mediated Transfers (TMT). My work included completing a relevant literature review of telemedicine transfer projects, managing physician training and technology deployment, and documenting program progress. The TMT program seeks to improve the experience of patients and families while maximizing the effectiveness of health care systems through the use of innovative technological solutions in the process of evaluating the appropriateness of patient transfers. Ethical considerations of beneficence and utility were thus primary drivers for the development of the program.

The process of transferring patients between distant facilities is often fraught with misunderstanding regarding the patient status or the capabilities of the receiving facility to improve the patient’s care. Some transfers may be undertaken as an effort to appease a family’s desire to take any chance for their loved one’s recovery, even if their health is failing in the eyes of their doctors. In these cases, the family and patient face the difficulty of being even further from their home during an already difficult time. Other transfers may merely be an inappropriate use of health system resources and the energy of the patient if the receiving hospital is unable to offer any additional care to the patient beyond that offered by the transferring hospital. In these cases, the benefit of the patient and the maximization of health system resources may align if transfer decisions could be made with better communication and understanding between facilities. The TMT project will test whether telemedicine offers an effective solution to these communication barriers through offering visual communication between doctors at each sight, and also giving the doctor at the receptive site to see and communicate with the patient.

However, the requirements of beneficence may be more difficult to discern in some cases, and many doctors raised concerns on how extensively a doctor’s authority should govern some decisions when they appear to contradict patient preference. In this beginning stage of the program, physicians were not necessarily meant to stretch the boundaries of transfer decisions to refuse patients who might fall in a “gray area” of beneficence. Physicians could continue to take a cautionary approach with ambiguous transfer cases to respect the knowledge and autonomy of both patient and physician at the other facility. However, if the use of video could enable more apparent transfer cases to be decided with efficiency and accuracy, the TMT program would be a successful pilot and move forward to consider how to appropriately evaluate more challenging decisions.

My internship as a Product Manager and Data Analyst at an e-commerce startup called Urbanstems in Washington D.C. allowed me to learn about the ethical implications of commercial data collection. Tasked with understanding our customer profiles, I dug through demographic data, customer purchase data, and social platform audience data to form audience profiles that plugged into Google Adwords and Facebook advertising suites. This granular analysis of our customers allowed me to engage with the real-world ethics of invasive data collection.

In an age where everything about you is stored online and the platforms you use collect and sell your data to product marketers, a grey line begins to form between the data that should be available for targeting and the data that is too personal. On a basic and innocent level, customer demographics are useful information for marketers and consumers, as it helps identify what types of products are most useful to a particular person. But, as the data becomes more and more personal, we begin to see examples of advertising abuse. Should Facebook allow marketers to know when a user experiences a death in the family? Or even shows signs of depression? These ad targeting parameters, although clearly intrusive, are the types of metrics advertisers are beginning to use to capitalize on the plethora of personal data. And, working at the control panel of such ad platforms, I saw this first hand.

An extension of this problem is the consideration for what happens when social media and search – Facebook and Google, the essential information curation tools of the digital age – are driven my marketing engines. Because these engines run off of targetable audiences, the platform incentives encourage a granular understanding of users, encouraging Google search results and Facebook feed to be highly tailored to the user’s demographic and behavioral features. The goal of this is to further sub-classify users based on what they do and do not engage with within a filtered information channel. However, as we have seen with the emergence of filter bubble and echo chamber research, the implications of this platform incentive mean users are limited in their information diets, leading to political polarization and misinformation online.

All in all, this summer allowed me to experience the real world of data-driven digital advertising. These ecosystems create ethical concerns around the extent of information that should be available to advertisers, as well as the broader implications of information platforms as marketing engines. Although this subject’s exploration is still in its infancy, this exposure has given me the motivation to continue my own ethical investigations.

Rohrlich, Jordan [Majors: Political & Social Thought; Economics. Minor: Systems Engineering]:

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Pierce, Laura [Major: Human Biology. Minor: English]: Internship at the UVA Center for Telehealth

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Rostami, Nojan [Majors: Political & Social Thought; Foreign Affairs; Minor: History]:
Counterterrorism and Community Policing in London

I spent the summer in London researching Prevent, a community-oriented counterterrorism and policing program. Most of my research was ethnographic in nature; although I don’t think it’s appropriate to call it a fully immersive ethnography. I interviewed social workers, youth services directors, Prevent officials, counterterrorism police and academics in London to understand what Prevent looked like in practice.
I was concerned with whether or not community-oriented policing can work if the police aren’t representative of the ethnic diversity in the community. Prevent is also supposed to connect people, particularly underprivileged youth, to resources such as music programs or other after-school programs, to give them a more productive avenue for their passions. The idea is to give kids something to look forward to and something to be passionate about. Most of the boroughs I’ve visited have had their youth services crippled by severe austerity measures, so Prevent is more effective and less punishment-oriented in wealthier boroughs.

Said, Isir [Major: Political & Social Thought]: Internship at the Permanent Mission of Somalia to the UN

This summer, I worked as an intern at the Permanent Mission of Somalia to the United Nations. The internship was located in Geneva, Switzerland and I lived and worked in the city for approximately 6 weeks. I had a number of responsibilities at the Permanent Mission. I primarily focused on issues related to the World Trade Organization and the International Office of Migration. My placement at these organizations often involved attending and taking minutes at relevant WTO and IOM conferences and meetings, researching potential donor organizations, drafting reports, and working with members of the accession staff on logistical arrangements. The topic that I plan to explicate on further in my paper concerns ethical issues in trade policy.

Schmid, Emily [Major: Arts Administration. Minor: Spanish]: Discovery Theater Museum Theater and Education Intern

The Smithsonian Institution is the world’s largest museum complex comprised of nineteen museums, nine research facilities, and five education centers. The Smithsonian Associates operates as an educational and cultural outreach business which serves the public as the nation’s largest museum-based lifelong learning membership program. As a program within the Smithsonian Associates, Discovery Theater serves as a child’s gateway to the exhibitions, collections, and cultures contained in the museums on the National Mall and beyond. Throughout my time at Discovery theater I helped aid and advance the Smithsonian’s mission to “increase and diffuse knowledge” by generating brochure information to advertise the upcoming season of shows, creating learning guides and programs that supplemented curricular content in the shows, and assisting in research, rehearsals, and auditions for two different civil rights plays produced in collaboration with the National Museum of American History. Ethical issues encountered included those of identity, access, and inclusivity in regard to education. To put it simply, whose story matters? Do the stories presented on our stages and in our museums reflect the diverse identities of the children and adults in our audiences? Can a diverse range of people gain access to our educational material? Careful planning and consideration are necessary in order for the answers to these questions to be yes.

Schroeder, Philip [Major: Human Biology]: Internship at Albemarle Emergency Communications Center and UVA Medical Command Center

As an EMT at a local rescue squad and research assistant for the UVA Trauma Center and ICU, I have had two very different perspectives of UVA’s emergency and critical care system. This summer, I was able to build upon these experiences as an intern at the Albemarle Emergency Communications Center (ECC) and the UVA Medical Communication Center (MEDCOM). ECC processes all 911 calls within the county and facilitates the radio communication across all local Police, Fire, and Rescue. As an intern at ECC, I helped organize caller information and assisted the staff as they processed calls. MEDCOM facilitates communication and transfer of patient care between EMS providers and the UVA Emergency Department. As an intern at MEDCOM, I helped to monitor various radio frequencies and to coordinate the appropriate triage processing of incoming patients.

At both ECC and MEDCOM, the staff uses dozens of different data processing tools that collect, organize, and interpret enormous amounts of information within seconds. Whether it is selecting the optimal rescue unit for ECC to dispatch for a given 911 call or automatically activating hospital alert systems through MEDCOM, the algorithms can do more than just assist, they can make independent decisions. In certain cases, protocols prioritize the machine decision over that of the staff member. That is, if disagreement were to occur, the nonhuman decision would
override that of the human. With most of my research founded in systems engineering, I was intrigued by the ethical implications of allowing algorithms to heavily influence or even override the decisions made by these trained professionals. I then started to realize that this dynamic, or at least traces of it, could be found within the clinical settings of EMS and critical care. With the rise in big data methodologies and increase in computational capacity, algorithms are more powerful than ever, but are also more complex and less interpretable to humans than ever. Thus, when an ECC dispatcher, a MEDCOM coordinator, an EMS provider, or a physician must make a decision based on an algorithm’s output, they may not be able to entirely comprehend the logic of why or how the decision was made, even if it was the best decision possible. This emerging dynamic, in which insurance and administrative forces pressure clinicians to use data driven algorithms that no human can fully understand when diagnosing and treating patients, raises widespread ethical concerns. For instance, when is a provider, if ever, permitted to override an algorithm’s decision and what accountability do they assume when doing so? How can any provider ensure informed consent with their patient if even they cannot fully understand why the therapy is being recommended? To what extent does transparency in how such decisions are being made redefine, or perhaps threaten, the relationship between not just the physician and patient, but medicine and society as a whole? Questions such as these must be addressed with great urgency, as complex technological tools and clinical decision support systems become increasingly integrated into healthcare decision making.

Watson, Beth [Majors: Arts Administration; English]: Nonprofit Development Internship with Off-Broadway Second Stage Theater

Through my development internship with Second Stage Theater in the heart of Manhattan’s Theater District, I entered and tracked new gifts in Second Stage’s fundraising database; facilitated the acknowledgements of new gifts; and helped coordinate a major end of fiscal year gift solicitation campaign. Furthermore, I spent ample time outside of my internship discipline serving as an usher and house manager for Second Stage, assisting audience members with their seats and conducting ticket analysis after each performance. Through these dual experiences within a major Off-Broadway theater company, I recognized what I perceive to be significant ethical issues related to the cost of high-end theater. While many audience members pay steep box office prices for tickets, a not insignificant percentage of the audience attends completely free of charge through the use of complimentary industry tickets. These “comps” are essential for boosting official attendance records and making shows appear to be more successful than they actually are to unassuming audience members. My paper will examine how this common practice of “papering the house” can misrepresent the quality of theater to the theatergoing public and undermine their communal audience experience.

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