

Operationalizing the UNESCO Universal Declaration on
Bioethics and Human Rights Through a Trans-Cultural
Lens: A Qualitative Study with Students in South Korea
and the United States

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Abstract

The UNESCO Universal Declaration on Bioethics and Human Rights (UDBHR) was a well-intentioned but controversial document. Some scholars appreciated UNESCO's attempts at providing an internationally recognized set of ethical guidelines. Other critics maintained the UDBHR, in particular Article 12, was yet another representation of Western ideological hegemony and an ill-informed attempt at embracing universality at the expense of diversity. This paper acknowledges this debate but approaches the UDBHR in a trans-cultural manner, framing the UDBHR not as an imposing guideline, but as a seed around which dialogue can coalesce. Such dialogue might engage similarities, differences, and nuances between different ethical perspectives, and consider why these phenomena exist in a way that avoids excessive generalizations or dichotomizations. Using the UDBHR as a topical anchor, this paper explores and juxtaposes ethical perspectives from the United States and South Korea through qualitative, semi-structured interviews with American and Korean students involved in the health sector. Interview questions prompted participants to reflect on their ethical values and application of those values in difficult dilemmas. Responses were organized based on the UDBHR principles and examined further. The UDBHR principles all emerged in both Korean and American participant responses, although some responses embodied unique nuances. Although Korean and American perspectives on topics such as benefit, harm, and transparency were relatively comparable, discussions around individual ethics and solidarity had slightly different flavors: Koreans commonly considered individual ethics in the context of COVID-19, while solidarity was the main focus in American discussions around COVID-19. This paper concludes with a reflection on these observed nuances, and potential implications for future global ethics education.

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Introduction

The UNESCO Universal Declaration on Bioethics and Human Rights

In 2006, the United Nations Educational, Scientific, and Cultural Organization (UNESCO) published the *Universal Declaration on Bioethics and Human Rights (UDBHR)*, a 12-page document aiming to provide a universal framework of bioethical principles and procedures for the global health and research community (UNESCO, 2006). Fifteen articles detailing core ethical principles, ranging from respect for autonomy and confidentiality to the sharing of benefits and environmental protection are outlined in the declaration. Subsequent sections provide guidance for the application of such principles in a global setting; members of the international community, as well as local stakeholders and communities are encouraged to adopt and integrate these principles into domestic legislation and policy (UNESCO, 2006). However, since its publication the UDBHR has received vocal opposition from multiple parties. Critics vocalized concerns that UNESCO had infringed on the responsibilities of the WHO, attacked the document's vagueness and minimalist language and rhetoric, and questioned the overall usefulness of the Declaration in an environment already saturated by guidelines and normative documents (D. Benatar, 2005; Häyry & Takala, 2005; Williams, 2005).

Article 12: A Modern Relic of Western Hegemony?

One notable critique of the UDBHR focuses on the Declaration's ability or lack thereof to accommodate cultural diversity within global bioethics (Cherry, 2009; Macpherson, 2007) At the center of this debate is Article 12 of the Declaration, which states

“The importance of cultural diversity and pluralism should be given due regard. However, such considerations are not to be invoked to infringe upon human dignity, human rights and fundamental freedoms, nor upon the principles set out in this Declaration, nor to limit their scope.” (UNESCO, 2006).

The language and implied intent of Article 12 has elicited many instances of displeasure. In the eyes of some scholars, Article 12 acknowledges the importance of honoring cultural diversity and pluralism, but explicitly ranks human dignity, human rights, and fundamental freedoms in an order that implies greater importance of the latter (Bagheri, 2011). Under this assumption, Article 12 suggests that while the declaration recognizes the existence of cultural diversity, such diversity becomes invalidated and limited if it is in conflict with the declaration’s principles (Bagheri, 2011)

Lunstroth, 2017a builds upon this stance and interprets Article 12 as inconsistent, disrespecting both fundamental human rights and dignity as well as prohibiting multicultural arguments. According to Lunstroth, 2017a, the declaration and Article 12 intend to establish notions of human rights to supersede cultural diversity and pluralism, a hypocritical proposition given that the purpose of human rights is to protect such cultural diversity and pluralism. This contradictory and over restrictive language is an offshoot of the declaration’s inclination to follow the American bioethical model, one governed by the powerful normative order of science, naturalism, and empiricism (Lunstroth, 2017a).

Lunstroth, 2017b continues this discussion about the role of bioethics, science, and multiculturalism in the context of India. Lunstroth, 2017b begins by framing bioethics as the child of science, a western universalist strategy to extend colonialist and imperialist impulses.

This westernized universalism, represented by science and governed by neo-colonialist ambitions, are particularly salient in India, intervening and influencing Indian values and practices (Lunstroth, 2017b). These existing neo-colonial overtones negate the universality of bioethics and science and relevance in the Indian context. Lunstroth, 2017b proceeds to cite Article 12 from the UNESCO declaration, interpreting the Article as embodying the worst effects of globalization and seeking to destroy the critique of science that might emerge from India's diverse communities.

Other opponents, expanding upon the criticisms of Article 12, take issue with the universality of the declaration and its reference to rights, persons, and equality. Such critics argue that these concepts inherently derive from a Western context, more specifically Enlightenment philosophies of rationality and fraternity (Andorno, 2007). According to Rawlinson & Donchin, 2005, this derivation is explicitly male, white, and European, representing an unequal power dynamic that the declaration fails to address. Cultural diversity is necessary to generate adequate universal norms as cultural and experiential differences lead to different images of moral and ethical values, a concept in which the declaration is lacking (Rawlinson & Donchin, 2005).

Magnus, 2016 builds upon the aforementioned arguments by explaining that while the declaration acknowledges the existence of cultural diversity, the validity of the declaration is questionable. Similar to previously mentioned critiques, Magnus, 2016 argues that the notion of human rights that the declaration is centered on is a concept that originated from Western societies. Thus, considering its Western origin, human rights is faced with limited potential for applicability in the Asian context due to conflicting claims about human rights in Asia. One of these viewpoints claims there is zero possibility for human rights in Asian societies that view the

group and community as key, while the other viewpoint claims that human rights are in fact compatible and commensurable values in Asian societies (Magnus, 2016).

Chattopadhyay & De Vries, 2008 adds onto the debate, citing similar concerns about the Western origins of modern bioethics. The Western bioethical tradition seeks to utilize a set of one size fit all principles, largely unresponsive to diverse worldviews prevalent in cultures outside of the West. To impose the Western philosophical framework on these dynamic and varied values is an unethical conduct (Chattopadhyay & De Vries, 2008). Chattopadhyay & De Vries, 2008 continues by calling into question the universality of the UNESCO declaration, stating that the declaration contradicts cultural norms and values in various parts of the world, setting a dangerous precedent (Chattopadhyay & De Vries, 2008).

Universality: Illusion or Reality

The criticism of the UDBHR's contents and Article 12 in particular, can be summarized and broken down into three components.

- 1) UDBHR's principles favor and are derived primarily from the American and Western traditions of bioethics and science.
- 2) Despite a cursory acknowledgement of diversity, UDBHR's principles fail to include adequate viewpoints from other cultures and settings and thus cannot be deemed truly global.
- 3) Therefore, because UDBHR's principles do not accurately reflect the global setting, UDBHR's well-intentioned attempt to apply their Western-based principles in a universal manner to a world that is inherently culturally diverse and pluralist is misguided.

These critiques in some sense can be thought of as an extension and supplement to the ongoing debate between relativism and universalism in the discipline of bioethics. The essence of this debate can be summarized by the profound questions posed in Marshall & Koenig, 2004. Can there be a single, global bioethics? If so, how can the global bioethical framework account for a constantly evolving wealth of cultural differences and diversity? Is it possible to reconcile global bioethics with the spirit of cross-cultural dialogue (Marshall & Koenig, 2004)?

In the eyes of more conventional ethical and moral relativists, the possibility of a global bioethics is merely a utopian illusion. According to moral relativists, if a certain basic moral principle has been sincerely accepted by a particular culture, then members of that culture have a moral obligation to follow that moral principle. In other words, one's conduct in any cultural environ is fully determined by the ethical norms upheld in that setting (Bowie 2015). Engelhardt, 2005 approaches bioethics in a manner that evoke this atmosphere of conventional moral relativism. Engelhardt, 2005 begins by clarifying the American-centric position of bioethics and goes on to say that applying the American bioethical standards is impossible in practice, most especially in developing nations. The different moral perspectives and ordering of values in cultures across the world make the provision of a global bioethical standard impossible (Engelhardt, 2005).

Chukwuneke et al., 2014 uses an African perspective to argue against a global standard of bioethics, comparing the globally accepted ethical paradigm of autonomy, beneficence, nonmaleficence, and justice with values present in African ethics. Examining the concept of autonomy, Chukwuneke et al., 2014 contrasts the individual autonomy that persists in the Western world with the idea of community autonomy that exists in African settings. In the case

of beneficence and nonmaleficence, Chukwuneke et al., 2014 points out that while the philosophy of do good and cause no harm is also present in African bioethics, the interpretations of what harm and good are differ considerably from existing Western perspectives. These cultural differences are what makes a universal and acceptable bioethical framework untenable (Chukwuneke et al., 2014).

Inter-Cultural Dialogue and Trans-culturalism

Reflecting on the aforementioned viewpoints and critiques bring up new questions. How should ethics be utilized in the face of globalization? Should the dominant paradigm, full of overpowering Western and American influences, be secondary to local and societal diversity and pluralism? How would global health and international research operate in an environment directed by regional influences? Are declarations like UDBHR even necessary, or are such documents continued attempts by the West to exert control and soft influence?

Christakis, 1992 discusses different approaches and models that might be employed to address this dilemma. The first model eliminates global health research and hands over the reins to prevailing ethical frameworks in local cultural settings, an impossibility in the current climate of globalization. The second model suggests that global health work and research fulfill the ethical requirements of all societies and cultures involved. However, this model provides no solution to resolving potential ethical conflicts, as all ethical frameworks under this model are presumed to be legitimate. The third model proposes abstracting a universal ethics based on commonalities observed from local ethics and cultures. Christakis, 1992 discredits this model by pointing to the continued dominance of the West in research ethics and general lack of research tradition in non-Western cultures. The final model requires the assumption of Western ethics as

the universal governing framework, a problematic strategy that completely ignores the validity of ethics operating outside of the Western mindset (Christakis, 1992). Christakis, 1992 instead proposes interpreting ethical systems as a framework that serve to stimulate discourse between ethical systems, foster conversations about ethical conflicts, and serve as a backdrop for self-reflection and examination.

Hellsten 2008 shares some similar sentiments, expressing the need for a global “bio-democracy” and to think about ethics on both the local and global levels. Hellsten 2008 cautions against both asserting dominance of Western ideologies and embracing extreme cultural relativist positions. Rather, global bioethics should aim to engage in particularistic analysis of local situations in the global context to help different cultures and groups to understand and address underlying conflicts and problems (Hellsten, 2008)

Nie and Fitzgerald 2016 further develop these viewpoints by applying a trans-culturalist methodology in the field of bioethics. This methodology seeks to approach ethics and culture by shying away from harmful dichotomizations and overgeneralizations-such as local versus global, Asian versus Western, or individualistic versus communal-that commonly pervade discussions surrounding global ethics. Although neat and easy to interpret, these dichotomizations and assumed homogeneities of cultures tend to overlook existing commonalities and discourage meaningful trans-cultural dialogue (S. Benatar et al., 2016; Nie, 2005; Nie et al., 2015; Nie & Fitzgerald, 2016). Instead, ethical discourse should work to appreciate a culture’s internal diversity and tease out subtle differences and commonalities between different cultures that popular stereotypes fail to articulate.

A Second Trans-Cultural Look at the UDBHR

Revisiting UDBHR under the inter-cultural dialogue and trans-cultural frameworks reveals a very different perspective, one that perhaps aligns more closely with what the drafters of the UDBHR had in mind (Ten Have & Jean, 2009). Under the trans-cultural approach, UDBHR would instead act as a starting guideline around which inter-cultural dialogue and discourse can occur, rather than a dominant paradigm to be imposed upon all cultures and beliefs. Article 12, rather than an instrument asserting the importance of Western ethical values and ideology, acts a preventive measure against extreme cultural relativism and instances where cultural approval or disapproval take primacy in deciding what is right and wrong (Kopelman, 2005).

This paper will apply a transcultural approach to explore cross-cultural ethical perspectives and reflect on the ethical principles outlined in Articles 3-17 of UDBHR. Through qualitative interviews with students working in health-related disciplines from South Korea and the United States, the study will aim to discuss potential commonalities, examine anticipated differences, and relate emerging ethical values and principles to those put forth by the UDBHR.

Methods

Rationale for Sample Selection

The selection of South Korea and the United States as areas of interest was based on the frequent dichotomization and categorization of these two polities. Common generalizations involving the South Korea and the United States include comparisons such as Asian versus

Western and collective versus individualistic. This study's transcultural approach will attempt to soften this dichotomization and consider both ethical commonalities and differences that emerge in the interview process. Students, rather than established professionals or researchers, were selected for this particular study. Students represent the next generation of decision and change makers in global health and development; understanding their perspectives can bring insight into potential future directions as well as reveal implications for ethics education.

Rationale for sample sizes in qualitative research is diverse and disjointed (Marshall et al., 2013). Although common methodologies for determining sample size based on prior research or data saturation exist, concrete, universal guidelines are nonexistent. The sample size for this study was determined by the principal researcher (FY) based on a number of factors including constraints in resources, limited availability of participants, and theory. Access to participants was limited by COVID-19 restrictions as well as participants' academic schedules. The transcultural methodology which influenced this study also struggles to complement the concept of saturation, a common indicator used to determine qualitative sample size. Data saturation entails the recruitment of new participants until data becomes repetitive or redundant. This definition implies a finite amount of perspectives in a given group or setting, clashing with the transcultural notion of rich internal plurality (Marshall et al., 2013; Nie & Fitzgerald, 2016)

The UDBHR Framework

Articles 3-17 of the 2006 UNESCO Universal Declaration on Bioethics and Human Rights provide an outline to facilitate discourse and provide a foundation for reflection. The purpose of introducing the UDBHR principles in this study is not to assert the Declaration's primacy, but rather to serve as points of discussion and examination. The UDBHR describes a

total of 15 principles contained within Articles 3-17. In the context of this study, articles with similar scope are categorized into areas based on their relevance to specific issues. Article groupings are described in Table 1.

Table 1 (Categorization of UNESCO Declaration Articles)

Declaration Article(s)	Issue(s)
3,8	Human dignity, rights, freedoms
4	Benefit and harm
5,6,7	Autonomy and other consent issues
9	Privacy
10,11,12	Equality, non-discrimination, diversity
13,14	Social solidarity
15	Sharing benefits
16,17	Protect future and environment solidarity

Sampling and Recruiting

IRB exemption was obtained from Yale University's Institutional Review Board (Protocol ID: 2000030499) prior to study commencement. Snowball sampling was used for the sampling and recruitment framework of this study. Under this framework, initial contacts (or seeds) who fit the research criteria were first identified with the help of gatekeepers (Parker et al., 2019). In this study, professors and graduate students in South Korea and the United States served as gatekeepers. Participants must either identify as Korean or American, be involved as a student in the health sector in either a professional or research capacity and had to be able to verbalize their thoughts in either Korean or English. In this instance, involvement in the health sector encompasses a broad scope, including disciplines ranging from medicine and

epidemiology to environmental sciences and policy. Agreeable participants are then asked to refer other contacts who satisfy the aforementioned research criteria, who in turn recommend subsequent potential participants (Parker et al., 2019). Utilizing the snowball sampling strategy, a total of eleven students involved in the health sector from the United States and eleven students involved in the health sector from South Korea were recruited to participate in the study.

American students were generally based out of academic research institutions located in the Northeastern United States. South Korean students were recruited from academic research institutions located in the Seoul Capital Region. Prior to participation, individuals were provided with an informed consent explaining the purpose of the study, privacy protection measures, and their role in the study. Verbal consent to the study components was confirmed prior to the interview.

Qualitative Interviewing

A total of 22 semi-structured interviews were conducted, 11 with Korean participants and 11 with American participants. Interviews were conducted in either English or Korean, depending on the preference of the participant. A total of 20 English language interviews were carried out by the principal investigator (FY) and a total of 2 Korean language interviews were carried about by a trained, Korean-speaking research assistant (HO). Interviews generally lasted from 45 minutes to 1 hour and were audio recorded with the consent of the participant. Audio recordings were saved, encrypted, and password protected through Yale University's secure Zoom cloud database. Audio transcriptions of English interviews were obtained first through Zoom's automatic transcription feature, then edited manually to account for mistakes and clarity by FY. Korean interviews were simultaneously translated and transcribed manually by HO. All

personal, identifying information was removed during the transcription process. Anonymized participants were distinguished by their country code (KR or US) and an identifying number. Recordings and audio transcriptions were deleted from Zoom following the conclusion of the transcription process.

An abridged interview guide (Table 2) was created prior to interviews. Included interview questions were designed to allow participants to respond in a flexible and unrestricted manner. During the interview process, participants were encouraged to openly reflect and discuss their responses. Participants were probed to elaborate on certain parts of their responses or prompted to provide concrete examples when necessary. Interview questions were divided into three sections. The first section asked participants to think about their own ethical values, and how their values relate to their personal, academic, and professional backgrounds. The second section asked participants to recall meaningful experiences either abroad or involving interactions with diverse groups of people. Participants were then asked to consider how their ethical values manifested in these situations. The last section asked participants to think about their country's response to COVID-19 and their country's ideal role in the international sphere. Participants were encouraged to revisit and relate their ethical perspectives throughout the section. The UDBHR and its associated principles were not mentioned by the interviewer throughout the entire data collection process.

Table 2 (Interview Guide)

Group	Question
Individual	1) What does ethics mean for you, and why? (Clarify: ask for concrete examples)
	2) Can you describe your personal/cultural upbringing and background? How has your upbringing shaped the ethics you described before?

	3) Tell me about your academic background, and your motivations for choosing this path. What role has ethics played in your academic training and learning? Has your academic background shaped your view of ethics?
	4) Tell me about some significant professional experiences (i.e internships, volunteer work, paid employment) and/or your future professional aspirations. What role has ethics played in your professional experiences/aspirations? Have your experiences/aspirations shaped your view of ethics?
	5) Describe a time you were faced with an ethical dilemma. How did you deal with it?
Interaction	1) Can you describe a particularly meaningful experience that involved working/staying abroad? If none, can you tell me about a situation where you had to interact with diverse groups of people from different cultures?
	2) What were some positive takeaways from your experience? How about some areas of improvement?
	3) During your international experience, were there any situations that went against your ethical views? Were there any situations that aligned with your ethical views? How did you deal with these situations?
Global	1) COVID-19 Pandemic Policy: How do you feel about your country's response? Are there particular policies that align or go against your view on ethics?
	2) International Policy: What role should your country play in the international sphere? Are there particular policies or actions that align or against your view on ethics?

Qualitative Analysis

Results were obtained through directed content analysis (or deductive content analysis), using the UDBHR principles and categorizations outlined in Table 1 as a guide (Hsieh & Shannon, 2005). Transcribed interviews were reviewed by FY directly on Microsoft Word, and

quotes that either directly mention or are closely related to the content and description of UDBHR's 15 principles were coded and organized by associated article. For example, a quotation that includes the word "rights", or discusses individual rights would be coded as "Article 3, 8" and placed in the corresponding results section. A quotation that includes the word "solidarity" or similar words such as "unity" or "togetherness" would be coded as "Article 13, 14" and placed in the corresponding results section. Ethical values emerging from Korean and American participant responses were juxtaposed with one another and considered in tandem with the UDBHR framework. Differences and similarities for select principles were discussed in a broader historical and cultural context. Values and insights that focused on the application of UDBHR's principles were also discussed. Finally, the role of UDBHR is also considered, alongside potential implications for global ethics education.

While employing multiple coders and inter-rater reliability are prominent methodologies in qualitative research, this study employed the use of a single coder (FY). Agreement between multiple coders is especially useful in instances where results have to be described quantitatively or extensive interpretation is needed to code data. However, for research that takes a social, ethical, or political stance, such as this study, agreement may not be extremely meaningful as many insights and themes are generated by the participants themselves (McDonald et al., 2019).

Results

Background of Participants

Out of the 22 participant interviews, the majority (16) were female. Disciplines covered were diverse and included participants studying medicine, social work, biology, epidemiology, global health, environmental sciences, and social-behavioral sciences. Ethnicity was relatively

uniform. All 11 Korean participants identified as ethnic Koreans, while all 11 American participants identified as White Caucasian Americans. All participants at the time of the interview had completed at least 12 years of education. All Korean and American participants mentioned at least one international experience or discussed memorable interactions with diverse populations and groups of people.

Articles 3 and 8: Human Dignity, Rights, Freedoms, and Respect for Vulnerability

Article 3 and 8 of the UNESCO Declaration states a need to respect human rights, dignity, fundamental freedoms. This respect extends to vulnerable individuals and groups. Relevant quotes are included in Appendix A.

The topic of freedom and rights emerged for both American and Korean, though for Korean participants such topics were largely centered through dialogue around COVID-19 response. Korean participants discussed the potential implementation of a vaccine pass, worrying that such a policy would be an infringement on the individual rights and freedom of Koreans. Several American participants on the other hand discussed the need to sacrifice individual rights for the greater good in the context of COVID-19, approaching human rights from a broader lens. Both Korean and American groups had participants who expressed a desire to ensure human dignity, especially among vulnerable populations.

Article 4: Benefit and Harm

Article 4 states that benefits should aim to be maximized, and harms minimized. This principle emerged from both Korean and American participants. Relevant quotes are included in Appendix B.

Managing benefit and harms were central for both Korean and American participants. Korean participants discussed both clear cut harms and benefits, and also considered some challenging hypothetical situations. Many American responses focused on minimizing harm. The “do no harm” mantra in particular, was discussed by several American participants.

Articles 5, 6, 7: Autonomy, Responsibility, and Consent

Articles 5, 6, and 7 stress the necessity to respect the autonomy of persons, a person’s individual responsibility for their own decisions, and the importance of consent. Relevant quotes are included in Appendix C.

While the need for consent was a topic that both Korean and American participants mentioned, the domain of autonomy was a topic engaged mostly by American participants. Korean and American participants referenced professional procedures during discussion around consent.

Article 9: Privacy

Article 9 expresses the importance of protecting and respecting the private information and confidentiality of every person. Relevant quotes are included in Appendix D.

Privacy was discussed by American participants but did not emerge in dialogue with Korean participants. American participants explained the importance of confidentiality through the lenses of medicine, public health, and general research.

Articles 10, 11, 12: Equality, Equity, Justice, and Diversity

Articles 10, 11, and 12 emphasized the equality of all human beings, and the importance of just and equitable treatment for all. Cultural diversity is also acknowledged and framed within the scope of the outlined principles. Relevant quotes are included in Appendix E.

Equality, equity, and justice were powerful themes that both Korean and American participants discussed. Responses from both Korean and American participants considered social determinants leading to inequities, addressing marginalized populations, and combating discrimination. Diversity came up for both Korean and American groups but differed in scope. Korean participants appreciated the wider perspectives that diverse environments provided, but also noted a subsequent difficulty at the individual level with maintaining a coherent self-identity and fitting in. American participants on the other hand, approached diversity as a necessary tool for representation and an avenue to empower local voices in the wider community.

Article 13, 14: Social rights, Cooperation and Solidarity

Articles 13 and 14 detail a need for solidarity among humans and emphasized the promotion of health and social development. Relevant quotes are included in Appendix F.

Cooperation and solidarity came up in both Korean and American responses. For Korean participants, the concept of ethics was embedded closely with society, a type of promise that provides a guide on how to live with others. Concepts like respect and politeness are examples of such ethical promises. Several American reflections on cooperation and solidarity were mentioned in the context of COVID-19, and occasionally juxtaposed with individual rights.

Article 15: Sharing Benefits

Article 15 describes the ideal sharing of benefits with society as a whole, particularly with developing countries. Relevant quotes are included in Appendix G.

While both Korean and American participants supported the sharing of benefits, American participants were generally more hesitant. Korean participants took a reciprocal view, citing the help that South Korea received as a developing country and the importance of giving back in Korea's areas of strength. American participants expressed a need to share resources and knowledge but questioned the underlying motives behind such actions.

Article 16, 17: Protect future and environment solidarity

Article 16 and 17 discuss the need to consider future generations, and the interconnectedness of human beings with other forms of life and the environment as a whole. Relevant quotes are included in Appendix H.

Korean participants and American participants embraced different approaches for protecting the future and environment solidarity. Korean participants discussed the importance of

animal lives and treating animals as equals. American participants emphasized sustainability, particularly for initiatives and partnerships.

Application of the UDBHR Principles

In addition to outlining the core principles of bioethics in Articles 3-17, the UDBHR also includes guidance for applying the principles in real world contexts. In this section, UDBHR encourages the establishing of bioethics training and ethics committees. Values of professionalism, transparency, and honesty are also emphasized. Relevant quotes are included in Appendix I.

Both Korean and American participants stressed the need for trust, transparency, and conduct in research and professional settings. Discussion from both Korean and American groups considered the role of authorship, as well as the roles trust and transparency can play in emergency situations such as the COVID-19 pandemic.

Discussion

Similarities in Differences, Differences in Similarities

Aside from the principles of autonomy and privacy, the majority of ethical principles outlined by the UDBHR organically emerged in responses from both Korean and American student participants. Discussions and reflections on benefit and harm, the importance of consent, and equality, equity and justice were particularly similar in tone and scope between the two groups. Other ethical principles were recognized by both Korean and American participants but

bore slight differences in terms of approach and context. Conversations around freedom, rights, and solidarity for instance, were discussed by both Korean and American interviewees. For American participants however, the need for solidarity and togetherness arose as a response to the COVID-19 crisis. Korean participants on the other hand, considered the importance of individual freedom and debated responses to the pandemic that might infringe on these rights.

Breaking Down the Individual vs. the Collective in Ethics

How can these similarities and differences be explained? Some differences, such as the American focus on autonomy and Korean interpretation of ethics as a societal promise invite a relatively straightforward approach. The notion of autonomy refers to an extension of self-governance at the individual level, a state free from the burden of control and interferences by outside parties (Corrigan, 2003). Derived from the tradition of Western liberalism and emboldened by a culture of American constitutionalism, autonomy has steadily become the prevailing framework in American bioethics, a dominance reflected in American participant responses (Corrigan, 2003). The Korean perspective of ethics as a societal agreement can be related back to the strong presence of Confucianism that persists in Korea today. Confucian tenants highlight the roles of seniority, solidarity, and community values, principles which are present in the responses of Korean participants (Moon & Koo, 2011). It is important to note however, that the purpose of this analysis is not to dichotomize and generalize Americans as autonomous and Koreans as community oriented. In fact, as described before, the concept of the individual and the importance of solidarity both emerge in American and Korean responses.

The acknowledgement of individuality and community by both Korean and American participants is more complicated but can be clarified through a historical lens. The culture of

individual rights and freedoms is an integral component of American public life, guided by the tradition of American constitutionalism and reinforced by waves of nationalism (Keller, 1987). This culture continues to manifest in the present day and in multiple disciplines, as evidenced by American participant responses emphasizing the principles of equality and individuality generated from the interview process. However, the spirit of American constitutionalism has not remained confined to just the United States. American constitutionalism and the idea of individual rights have played a significant role in shaping international human rights discourse and helped directly shape the constitutions and systems of governance in dozens of countries (Keller, 1987).

One country greatly influenced by American constitutionalism's global reach was South Korea. At the end of the Second World War, the United States Military Government in Korea introduced the "Ordinance of the Rights of the Korean People," drawing from twelve major liberties contained in the American Bill of Rights. The impact of this Ordinance on Korean governance was great; the Korean Constitution embraced many characteristics found in the American Constitution, most notably a list of individual rights and freedoms (Ahn, 1997). Despite the inclusion of these rights in the constitution, considerable challenges prevented the constitution from being fully utilized immediately. Plagued by recurrent military coups, the presence of individual rights remained overshadowed by the continuous expansion of presidential powers under the guise of emergency management (Kim, 1978). Only after the 1988 Seoul Olympics did the Constitution and its listed rights reappear as an instrument for the people (Ahn, 1997).

The prevalence of American constitutionalism in American and South Korean legal and public life provides a possible explanation for the presence of discussions surrounding

individualism in both interview groups. South Korean participant discussions around individuality frequently revolved around COVID-19 policy. A historical trend of South Korea presidents overshadowing individual rights under the auspice of national emergencies may have led Korean respondents to question the ethics of some COVID-19 response measures in Korea.

The Korean focus on societal ethics, as mentioned above, can be associated with a strong tradition of Confucian principles that continues to this day. Similar emphasis on society, togetherness, and solidarity can also be seen in the American milieu, albeit without the Confucian influence. Instead, the collective nature of the American populace is highlighted by an aptitude for forming civil associations, a phenomenon well documented in Alexis de Tocqueville's *Democracy in America*.

Tocqueville visited the United States in the 1830's as an observer to an evolving political experiment, expecting the prominence of the individual to lead to the increasing isolation of the common American and ascension of a despotic government. Instead, what Tocqueville witnessed was "Americans of all ages, conditions and all dispositions constantly unite together... to hold fetes, found seminaries, build inns, construct churches, distribute books, dispatch missionaries to the antipodes. They establish hospitals, prisons, schools by the same method. Finally, if they wish to highlight a truth or develop an opinion by the encouragement of a great example, they form an association." The spirit of working together to solve collective problems rather than perish individually is still ingrained in the American psyche. Although individual rights still dominate the American ethical discourse, the importance of the collective is still very much in the minds of Americans. The rise of collective in solving problems was evident in American responses; the importance of solidarity and unity for Americans generally appeared in discussions around COVID-19.

Both Korean and American participant responses included the ethical principles of individual rights, freedoms, and solidarity. Instead of relying on predetermined dichotomizations such as individualist West versus collectivist East, this section utilized historical and cultural lenses to consider possible explanations for the similarities and differences in observed Korean and American responses.

Looking Deeper at Ethical Similarities: Scandals and Ethical Reform

Both Korean and American responses touched upon principles such as benefit, harm, transparency, and honesty. This section will discuss these principles in the context of two notable ethical scandals (The Tuskegee Syphilis Study and the Hwang Affair) in order to better understand the similarities in these responses.

The Tuskegee Syphilis Study is notorious for its blatant unethical conduct and frequently cited alongside Jewish Chronic Disease Hospital Case as galvanizing ethical reform in the United States (Nelson-Marten & Rich, 1999). Conducted from 1932 to 1972, the Tuskegee Syphilis Study examined the effects of untreated syphilis on impoverished African American males (Smolin, 2012). Participants were misinformed and misdiagnosed from the onset. Participants remained under the notion that they were receiving medical treatment when in actuality, treatment was actively withheld and instead participants were deliberately watched to examine the effects of untreated syphilis (Smolin, 2012).

The unethical nature of the study, publicly revealed in 1972, led to a significant change in the health and medical fields. Medicine and science, previously viewed as progressive forces advancing human well-being and thus given ethical free rein, were now subject to tight scrutiny and review. The National Commission for the Protection of Human Subjects of Biomedical and

Behavioral Research was created and subsequently released the Belmont Report, which emphasized key ethical principles such as respect for persons, beneficence, and justice in research and medicine (Smolin, 2012). The report's principles continue to be referenced to this day; consent, dignity, justice, and balancing harm were present in many American participant responses.

Over four decades after the Belmont Report was published, a revolutionary article emerged in *Science* magazine. The lead author, Woo-Suk Hwang, claimed the successful cloning of human stem cell lines, achieving world-wide fame and celebrity status in South Korea. However, fame soon turned to disgrace after a media-led investigation revealed numerous violations of conduct and ethics (Kim & Park, 2018). Data from Hwang's papers were found to be entirely fabricated. Authorship was shared with figures not involved in the research process itself, but with political figures and funders. Eggs were obtained from financially desperate women, including two women researchers of the Hwang lab, who were misinformed about the purpose and harms of the egg extraction procedure.

The Hwang Affair, similar to the Tuskegee Syphilis Study, led to a critical social reflection and overhaul of existing ethical frameworks; before the Affair, ethics had not gained any serious attention in the South Korean context. Korean scientific and academic communities worked to establish ethical guidelines, referring to and eventually combining American and European frameworks. The finalized ethical guideline addressed fabrication of data and falsification of results, plagiarism and inappropriate authorship, activities that interfere with ethics committees or harm whistleblowers, and activities that are beyond acceptable norms of the scientific community. Laws and orders were passed outlining the responsibilities and organization of research ethics committees, and ethics education programs created at various

universities and research institutions (Kim & Park, 2018). The proverbial ethical bomb dropped by the Hwang Affair truly reformed Korean society to engage with and consider the importance of ethics. The core tenants that emerged from this reform, such as consent, benefits, and appropriate research conduct are reflected in many Korean participant responses.

Looking at the Tuskegee Syphilis Study and Hwang Affair brings some clarity for some of the similarities in American and Korean responses, particularly around benefits, harms, and conduct. Although happening 40 years apart, both scandals upended a status quo that emphasized results over process. Both scandals resulted in widespread ethical reform, creation of educational initiatives, and ethics committees. New definitions of ethics emerged, with the Korean reform merging principles from both the American and European systems. The massive societal impact of the two scandals, coupled with the Korean integration of Western principles, provides some context behind the similarities behind the American and Korean responses.

Conclusion and Implications for Global Ethics Education

The 2005 UDBHR has been criticized by many scholars to be yet another figment of Western hegemony, scientific domination, and ethical imperialism. This paper rethinks these criticisms, and instead applies a trans-cultural approach to the UDBHR framework. In this approach, the UDBHR does not represent a universal framework to be imposed in different contexts. Rather, the UDBHR serves as a point of a reference, providing principles that can serve as the starting center of helpful dialogue and discourse. Through qualitative interviews with students from South Korea and the United States, the ethical principles outlined by the UDBHR were identified and discussed from the perspectives of both groups. Instead of relying on generic dichotomizations, potential explanations for similarities and differences between South Korean

and American participant viewpoints were examined by diving deeply into cultural and historical contexts and events.

The sample size of this study and decision to use a single coder have been previously elaborated in the methodology section. The sample size was determined based on a combination of participant availability and trans-cultural theory. A single coder was employed, noting that the bulk of analysis was generated during the interview process by the participants themselves. Reaching consensus between multiple coders risks generalizing responses and skipping over interesting nuances that may be present in participant answers. The ethnic homogeneity of the participants may also appear questionable. However, to assume ethnicity as the primary marker of diversity is simplified and mistaken. Participants hailed from various geographic settings and provided unique sets of insight and experiences gained during their formative years.

It is also necessary to acknowledge the standpoint from which this discussion is written. Perspectives and analyses of these perspectives were primarily collected and conducted from the viewpoint of an American-educated, first-generation East Asian immigrant. The English language served as the primary vessel for communicating and discussing emerging phenomena. However, to call these acknowledgements limitations would be inaccurate. Influences from an author's background and primary language are present in any context; to pursue neutrality would be an impossible proposition. Instead, the author's stance and linguistic nuances should be embraced and compared with other experiences to further generate healthy, trans-cultural dialogue and discourse.

The importance of ethics continues to grow, especially in the face of global health research's rising popularity. Accompanying this rise in popularity are various frameworks, not unlike the UDBHR, written to provide students and young professionals with guidelines on

ethical conduct in international settings (Crump et al., 2010; McDermott-Levy et al., 2018; Pinto & Upshur, 2009). However, merely following a predetermined framework may not be the most informative strategy for a student or young professional looking to break into the global health sector. Instead, applying a trans-cultural approach for these existing frameworks should be encouraged to provide a deeper understanding and appreciation for ethical conflicts and similarities.

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Appendix

Appendix A: Relevant Quotes for Articles 3 and 8

Freedom and Human Rights	
KR4	“the freedom to choose, Korea is also like kind of changing into, like regulating you know, like vaccine pass and all that but about that, I do understand you know vaccinations really important, and we have to get over COVID, but there should be still that freedom of choice, but I’m not sure.”
KR9	“I feel like it's not that right to do this vaccine thing, because they're blocking off so many rights of other people, like if you don't get a vaccine, you cannot meet people in a restaurant or, like, I think, they can't even go to the supermarket to buy groceries and like is that right, I don't think so because it's their right to get the vaccine right now and plus like without the rights, there can be other issues.”
KR6	“people were beginning to you know, beginning to feel like Korea is not doing the best, I think this is especially because you know other countries, they are you know, giving people freedom to gather or you know to go back to their life before COVID they have to, like other countries, they have to, they gave the choice.”
US6	“I feel like human rights are greater than my individual career and I knew that you know, like as a white person, like I knew, even if I got arrested or something like it wouldn't matter.”
US01	“I think that's an instance where the government needs to like take away some of our rights but it's really in the interest of the population.”
Dignity and Respect for the Vulnerable	
KR3	“for disability it's kind of a very cultural specific term in Korea so it's called, in Korea it's called so it's de-institutionalizing people with disabilities, because in

	<p>many cases, people with disabilities are put into institutions they're institutionalized in Korea.”</p>
KR7	<p>“but one thing that really bothered me in that trip was that the bed for those drug users was more like strapping those people into that place and just seeing that it was very shocking for me.”</p>
US6	<p>“I mean I don't know if that's like the best example but it's like the first one that comes to my head that like treating people like human beings, even when you're in the context of like research and academics like or really any context, but I think that also at first like that should be the first step of ethics, is just treating people like human beings.”</p>
US5	<p>“I was like Is this ethical to do because they're in a vulnerable state right now, we don't want to elicit any negative feelings, any negative sentiment, it's not like we're offering any resource that might be able to help this situation or plight, and so that's actually something where the students that I and the team decided that we shouldn't do that.”</p>

Appendix B: Relevant Quotes for Article 4

Benefit and Harm	
KR01	<p>“I think first of all, or as like, the making of some harm to others, is, I think that it is the representative action of the bad ethics and the good ethics, if something is good, helpful to others if I think it is a good example of good ethics.”</p>
KR4	<p>“where it says you're supposed to not only not steal but also like let's say, you're supposed to love your neighbors, you're supposed to do more of good and like, killing someone is a sin.”</p>
KR6	<p>“For example there's skills, or social welfare practices and there are steps to each practices, so I make sure to follow all those practices, and I think that also has to do with our ethical values and judgments, to make sure that we follow each step, so that we don't make mistakes, because social welfare has to do with you know it's really getting into the clients life you know, providing money or providing help so in order to not make mistake, and you know, give the best program to the clients, we have to really follow those steps that we learned or practice skills.”</p>
KR9	<p>“There's a new medication that can heal this kid but it costs, like a lot of money that their parents cannot afford then, but it can save that kid's lives and is it right for their country to pay for them or not? Thinking about the kid and if I was like his parents of course like it's right for them for it's like too expensive and only for one kid, it will be fine, but if we start for that one child we should do it for all that disease, all the people that have the disease, then, if I think in that way for in public health wise I think it's better for us to like give money for the disease that most people have I guess cancer will be good for more people but there's no right or wrong.”</p>
US4	<p>“it was the way that I saw it and going back to the idea of like you know, undoing past harms and that was like an active harm like not providing you know, a basic income level or like safe houses for people, that's an active harm that the US government's doing and you know not properly addressing the opiate crisis, that's like an active harm.”</p>

US5	<p>“when we're talking about you know is this ethical, so many times we're thinking of participants, will they be harmed by any direct or indirect consequences that might arise by our interference or our research and our program, and so I think that that's something that is kind of forefront on in my mind.”</p>
US6	<p>“making sure that everyone you're working with is safe everyone's happy and healthy, you know that kind of job, I think that that's kind of what first comes to mind when you say ethics...I think that, like you know there's always like the principle of like do no harm, and I think that if you're not aware of cultures that you're working with you are doing harm, so that is something that's important to me, definitely.”</p>
US10	<p>“I come from a Reformed Jewish community and I mean, I would say there's a lot to unpack in just kind of bringing up that, but in a very basic sense it's this idea of Tikkun Olam which is you know leave things better than how you found it and I feel like that is very in line with like a do no harm mentality.”</p> <p>“the first time, I think I was very conflicted and I didn't know what I was doing, I didn't want to mess anything up, you know, cause harm avoidable harm.”</p>
US9	<p>“I also knew that it felt a little bit questionable, because here I am with like no construction skills, looking back, I think the ethical issue lies in, was my benefit being there for my own personal growth or feeling good about myself, was that worth the amount of like effort and finances that went into me going to this rural community and helping, they could have probably just paid local construction workers to do this same work in many less days than it took me and would that have stimulated the local economy or would that have provided a greater benefits.”</p>

Appendix C: Relevant Quotes for Articles 5, 6, 7

Consent	
KR5	<p>“First, doctors must be transparent in explaining things to the patient. Then, we need to thoroughly check whether the patient has understood them or not. Then, we need to follow what the patient would want, to a certain extent.”</p>
KR7	<p>“when there's this patient who can't speak for themselves, and we have to make a critical decision, then what should we do to best help this person, and there are other cases where certain people have certain religions that inhibit us from performing such medical things and what will we be able to do for this person, so I think that, looking at these different cases and medicine has really touched on my original aspects of ethics.”</p>
US5	<p>“even though there's an immediate need, you can't talk ethics out the window like informed consent is informed consent, and that's you know, that's the ethical way to do this, you can't just kind of throw caution to the wind and hope for the best because an emergency has come up.”</p> <p>“so I think understanding how we ensure that, of course we're going to get parental consent, but I want to make sure that the children I'm working with understand what they're participating in, even though their parents said that it's fine I feel like it's kind of also our duty to make sure that, like the child's okay, with it, regardless of what the parent says, because if no matter if the parents signs a consent form, if the child doesn't feel comfortable or the child doesn't understand what's going on, first of all it's probably going to skew our data, but more importantly that's a huge ethical dilemma.”</p>
US7	<p>“what I believe ethics is, so what comes to mind immediately, is like IRB, is like informed consent and, like the process of getting a research project approved through the IRB and then that all like is very apprehensive but I'm not excited about that, it's not like a good feeling that I get when I think about IRB, but if I think about like the ideal of what ethics I think should be it's definitely more, it's less black and white.”</p>

Autonomy and Responsibility	
US00	“I think that's where global health needs to be is less of let us help you, and more of like let us help you so that you can help yourself, like let us start this process of your free agency and autonomy. In your own country, so that you don't need us to keep coming in and be relying on other people.”
US2	“I think if you're truly trying to support women, you need to support women to have every option in her toolbox, to take agency over her own reproductive and sexual health.”
US4	“there are people out there who really don't care about the things that you see as your own rights or your own autonomy and so that sticks out of salient to me into kind of my thinking about ethics.”

Appendix D: Relevant Quotes for Article 9

Privacy	
US10	“I was working as a disease intervention specialist contact tracing for STIs, and there was this you know the HIPAA privacy, you become very like acutely aware of how important it is to maintain confidentiality when you're talking to somebody's partner about like a syphilis exposure and the importance you know the ramifications of, if you do disclose a name you open someone up.”
US01	“I think one of the large ethical concerns that we ran into was just patient confidentiality and making sure that the volunteers weren't in the room, at the same time as the patient.”
US6	“working with all of their data, which is super confidential super like important to ethically not share that ethically make sure that you are making sure that you're keeping it de-identified all that sort of jazz but I, I think that it's just been so impactful for me like.”

Appendix E: Relevant quotes for Articles 10, 11, 12

Equality, equity, and justice	
KR4	“I saw these kinds of documentaries where let's say the doctors are staying in a good hotel, but then you know the refugees are in their camps. They feel that kind of dilemma like they feel bad because, like you know they're living a comfortable life in the same country while their patients are not, so I think that in that case ethics also plays a role.”
KR5	“non-wealthy individuals may be exposed to environments prone to contain different diseases. However, when these individuals are infected, they may not be able to afford to go to hospital. And, when they are sick, they are not able to work, and they could also infect their family members. This results in more people getting sick.”
KR8	“In Korea, characteristics like gender, class, and wealth could play a role in determining how healthy one may be considered to be, due to different resources they have access to...we must also recognize that people are born with different amounts of resources, and we should bear the responsibility of how to deal with such inequality.”
KR6	“Things that we talked about in class, for example, you know we shouldn't like discriminate on clients, depending on their religion or their age or their you know, beliefs, but it's not easy to always treat them treat all clients equally but it's the social welfare ethics to treat all clients equally.”
US2	“I think masking is one of the more equitable policies that we could have put in place, it's inexpensive, you can get masks for free pretty much anywhere now, it's relatively easy to do, you just kind of make it part of your normal daily life and it's highly effective.”
US4	“just like tracking how inequitable the distribution of COVID vaccines was, the US and Europe are more than 50% vaccinated and you would look at rates of vaccines in like sub Saharan Africa or in Latin America, and it would be like 2%, so, like that an equitable distribution of vaccines, I think, directly is a result of like I guess imperialism and colonialism.”

	<p>“I would think of like the golden rule, do unto others as you would do unto yourself, for example, like going back to imperialism and colonialism and capitalism like there just seems to be kind of this discrepancy of people who are willing to treat others poorly for their own personal gain and so I think that's kind of the core of it, it's just treat others the way that you wanted that you want to be treated.”</p>
US8	<p>“I also find that there's an important aspect of an equitable and fair share of those you know, whatever the cost or negative outcomes are because I do a lot of work with environmental justice and with social justice and so I work firsthand how certain policies and certain things can impact people disproportionately so I kind of try to find some combination that sees this utilitarian approach applied in as equitable way as possible.”</p>
US3	<p>“I guess the idea that, like you know everyone's equal, I think that has informed, a lot of my actions...the ethics of like treating each other with like mutual respect, having grown up in international community and being in that environment from early age is like mutual respect, like, no matter where you're from what you look like what your beliefs are...we treat everyone like we should treat everyone.”</p>

Appendix E cont.

Diversity	
KR9	“I guess I’ve met, like many Indonesians and also people from different cultures and I guess, I have also become a person from diverse cultures, I guess, I can't really define myself as one culture, like one cultural person.”
KR7	“I think overall growing up it has a positive impact because I'm not really afraid of being different or like going to other countries and starting something new I think the downside of it is that I had a difficult time In my forming my identity I didn't feel I actually fit into one type of culture or one type of group, so I was always constantly trying to find my way around like where do I fit in.”
KR4	“Living abroad definitely helped me have a wider perspective of life, I realized that when I came to Korea because I thought...I didn't really know that there are a lot of people who are not interested at all let alone want to work globally, that was a bit shocking to me.”
US3	“I think the US can easily occupy too much space...we have a lot of the biggest donors coming from the US, which I feel like gives us more power than maybe we should have and knowing that we're not the locals and, like most places where international policies are being implemented I think, because the US has such a loud voice it doesn't leave enough space for other local communities or even governments of other countries where work is being done.”
US10	“you have these big fundraiser, like funders for like massive nonprofits in the global health sphere that like have these objectives to continue funding, and I think sometimes I wonder how much of those goals fit with like the local community.”
US01	“medicine it's gotten pretty homogeneous in terms of like who the doctors are and who nurses are, and I think in that instance it's just really hard, if you don't have people who understand the culture to really be able to give quality care, yeah it's probably hard to get like a doctor in every single hospital for every single culture every single ethnicity that they would treat by and I don't know if they would be able to do training again for all of that, but I think even just training for how to handle situations where you're not sure of someone's ethical beliefs of cultures I think would be important.”

Appendix F: Relevant quotes for Article 13, 14

Cooperation and Solidarity	
KR00	“ethics is something people have to do at least, live in a society with other persons, that will be the least standard, that people have to do...those things require respect towards adults, and elderly, we have no choice but to use respect words in daily life, so I think those things are inside my conscious, you have to be polite to others.”
KR01	“we always think polite things are important in Korea, so it also affects me like, I can't tell elder people about my thoughts directly, I think it is really related to ethics.”
KR02	“a promise for me and people to make the world we can live better, so at first glance, ethics is something that we should think about and participate on so that we can live in places where we think about others, I think to make in one sentence, ethics is a promise for everyone to live together...in school we have to learn ethics of being together, as I mentioned before, promise between people, these we learn a lot from school, especially from teachers students relationship, we have to learn about ethics with young and old in Korea, which is more important.”
KR6	“I think ethics in Korea, they have specific class, like classes studying ethics, and usually those has to do with, following the discipline that our society has together came up with, and how to you know follow, along with the policy and those stuff.”
US00	“you're going to want to improve the health of everyone, or do something for the benefit of everyone, there is a consequence and one of the sacrifices or consequences you're taking is relinquishing some of your individual freedoms, that doesn't mean all of your freedoms are getting thrown in the trash that just means that you are taking In some ways, you are of your own volition, and own free will relinquishing some of your rights for the sake of another.”
US08	“the other thing that's so annoying, it's like our country is already so contentious, and the two-party system, and you know big businesses have us so divided, we really needed a voice of unity.”

US10	<p>“mask mandates, they just entertain this idea of like public health as it should be, which is like making sure that people are safe and like looking out for their neighbor, I really liked the messaging around flatten the curve. I thought it really engaged this like team sense and it's like you know war, of course, is bad, but it's nice when people feel a sense of a sense of responsibility in winning.”</p>
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Appendix G: Relevant quotes for Article 15

Sharing Benefits	
KR00	“country where we were helped, now we can help the developing countries who could have a lot of potential, and the globe is connected, if we help them, later it will influence us in a positive way.”
KR01	“I think at least we are human, we have to help each other and I don't know, someday Korean can get some help from that country, also we have to help each other, because before the country we are the human.”
KR2	“as a country that got helped from other countries, now we are one of the countries that can lead, the others, we also have to help people who cannot have these opportunities as a human being.”
KR3	“I think you know they will figure out what's best for South Korea, we are strong in medicine and I guess agriculture, but also very strong in agriculture, and we can maybe use that kind of knowledge to help people with similar situations.”
KR6	“we could provide you know support to those countries I think that's one role Korea could play because we experienced ourself, also one of my hope is that, since we also were very poor in the 1950s and became a fast developing country, we could provide aid to other undeveloped countries.”
US01	“we're not the only world leader and there are obviously other large countries, maybe who's viewpoints, wouldn't line exactly with us, but like it should not only be the US, but there are other countries that do have or maybe also like closer geographically to certain regions and would be able to offer and more extended support than the United States, so I think you actually have maybe like one, shouldn't be involved in the process.”
US4	“we need to continue giving money to people, but we need to stop your earmarking what funds go for you, and we also just generally need to stop trying to reform healthcare systems in other countries.”

US7	“helping these people in their own country and the other half of me says this is your country and you get to run it the way you want to run it because it's yours and that's what a democracy is so I don't know how you do that.”
US6	“I think it makes sense to support your allies, but I don't think it makes sense to go in and like change things, because he want another country to have a democracy like even if you think that, like democracy and capitalism is the best thing in the whole wide world like this, because you like it doesn't mean everyone else likes it and, like you have to respect that.”
US9	“it really is this matter of justice, I find that, like the globe, that the United States has a responsibility to be assisting other countries in the development of their health infrastructure in you know, improving health outcomes, because we are all of these great you know health programs and financing that we have is literally because of their resources so it's a matter of equity, I would say that we have to be involved actively.”

Appendix H: Relevant quotes for Articles 16, 17

Future and Environment	
KR00	“All lives are equal whether they are animal, other animals like dogs, cats also have feelings like us, so we do not treat them as a materials, and have to remember that they have feelings, so that is the ethics in life.”
KR10	“we deal with a lot of mice and that always that's always brings up the whole thing about animal ethics and I think I do feel for them, I do understand it, but also being in this major kind of makes me realize that we have to sacrifice, to a certain extent”
US00	“I think I really appreciated that because there was more of a sustainable initiative like there were clinics that individuals were able to go to and the team was not only working with the government and scouting out areas to put new clinics, but they're also supplementing and supporting the existing staffing that was there.”
US9	“something that I constantly am thinking about is the sustainability of what you're doing So if you're implementing a project or any type of research, I think that one of the most important considerations, is how are you going to carry out that like partnership or the benefit to a community that you're working in following your exit from wherever you are”
US8	“I'd say that it directly impact the health of not only our citizens, but citizens of countries around the world, especially the low income citizens where we source, some of these things from or that are impacted by our actions but also because our actions are unsustainable we you know we can't just keep ripping oil out of the earth and we can't just keep using all the silicon we can find it we can't just keep using all the rare earth metals we can find.”

Appendix I: Relevant quotes for application of UDBHR principles

Professionalism, transparency, honesty	
KR00	“when it comes to research ethics, we don’t have to lie about data, and we show the entire process, of how to process the data, those are important things, and the references, we must refer to research, when you refer, we write down their names, to do that you have to do a lot of research to find those researchers”
KR01	“When I write some papers, we have to speak about the writers, the first writer and second writer, third one, so we have to determine about who will be the second or third or first like that.”
KR3	“COVID 19 policies in South Korea is very much driven by politics as in any other country, I guess but I feel like as a medical student, it should be driven by facts and scientific information so for example, how people respond to the pandemic has more to do with the political situation and the economic situation than the actual health situation I guess that's kind of confusing for me, because for right now in South Korea, the cases are having record high numbers, but the policy is much less stringent than times before, and I guess that also has to do with vaccinations, but I feel like the messaging is very confusing for people to understand”
KR7	“so currently in Korea, there are people who become just suddenly went into a critical situation after getting vaccinated and I'm not sure if it's correct but, like the number of people who are vaccinated and they suddenly become into a critical situation, the numbers are way higher than people who actually died from getting COVID um so I feel like it's a really important situation that the government has to tackle it, but I feel like they're trying to neglect the fact that

	<p>the vaccine is actually having a very negative impact on some certain people and they are not willing to compensate for that”</p>
US9	<p>“I look at a lot of the partnerships that major organizations have with host institutions in other countries and sharing that authorship sharing I guess like staffing and responsibilities and creating these sustained partnerships that go on for years and years I think that's a really good step in the right direction.”</p>
US8	<p>“you couldn’t trust the administration what they were saying so it felt like you know where we should have been like world leaders It felt like at least you know what the movies have told us when these pandemics happen it felt like we lagged behind and it felt like we were a joke”</p>
US3	<p>“when I was trying to figure out like is ethical for me to do this in Mongolia like would it be okay for me to do in America, because if it's okay for me to do in America, if, like people would trust me there then maybe I do have that the background or experience I need to do it here”</p>