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Review of *For the Common Good: Philosophical Foundations of Research Ethics*

The principal goal of Alex John London's (2022, xvii) *For the Common Good* is to "articulate a new vision for the philosophical foundations of research ethics" which "moves issues of justice from the periphery of the field to the very center." At the core of this new vision is an understanding of research as a "collaborative social activity between free and equal persons," which aims to develop the knowledge public institutions require to establish and maintain a social order in which people may set and pursue their plans of life (London 2022, 3). Clinical and social scientific research are not therefore morally optional activities, in London's view, but rather the way public institutions acquire the knowledge they need to discharge their obligations to create the conditions under which people may enjoy reasonable life spans, develop literacy and numeracy skills, and enjoy their rights to liberty and security.

For the Common Good builds on London's prior work, with many chapters featuring revised content from previously published papers. However, it also weaves this work into a broader narrative. Readers familiar with London's work may be struck - as I was - by how well his various contributions of the past 20 years, on topics as diverse as international research ethics, learning health systems, and the purpose of prospective review, fit together into a systematic view. *For the Common Good*'s new vision of research ethics is thus wide-ranging in scope.

London's new book is a remarkable achievement. It offers a compelling and coherent vision of the philosophical foundations of research ethics, resituating the research enterprise within the broader activity of creating a just social order. By building the foundations of the field on justice, it provides an attractive, systematic alternative to prominent approaches which neglect this value in favor of the principles of beneficence and respect for persons. Despite his focus on the *philosophical*

foundations of research ethics, moreover, London's analysis is informed by his deep knowledge of the practices of research and ethics oversight. The foundations London establishes for the field are thus not only philosophically sound, but appropriate for the construction of norms, rules, and regulations to govern health and social scientific research.

In this review, I first provide an overview of London's project before offering several critical comments. Since London's book is incredibly rich and wide-ranging, my comments are necessarily limited in focus, and the issues I take up reflect my own scholarly interests and expertise. There is thus much of value in *For the Common Good* that I touch on only briefly, if at all.

Overview

For the Common Good contains a critical program and a positive program. The critical program outlines the philosophical foundations of "orthodox research ethics" and argues that these foundations are riven with fault lines that threaten to undermine the requirements they are supposed to support (London 2022, 4). Orthodox research ethics, London claims, has eight problematic commitments. First, research involves an inherent moral dilemma, whether between respect for the individual and the good of humanity, or between the clinician's fiduciary duty of care and utilitarian imperatives of the research enterprise (London 2022, 5). It is, second, a morally optional activity between private parties, in which, third, the two main stakeholders are researchers and participants – the "IRB triangle" (London 2022, 6-7). The activity of research is, fourth, defined functionally to involve procedures designed to produce generalizable knowledge which in turn informs a vision of research ethics wherein, fifth, the dueling role obligations of the clinician-researcher take center stage (London 2022, 9). The central aim of regulations is, sixth, to paternalistically protect participants from the potential abuse of researchers (London 2022, 10). Finally, because research is treated as a morally optional activity between private parties, to the extent that justice plays a role in

this view, it is, seventh, not treated as a value that governs social institutions (London 2022, 11-12), but is instead, eighth, reduced to the principles of respect for persons and beneficence, amounting to voluntary transactions that benefit both parties (London 2022, 12).

This view of research ethics and its dominance in the United States, London claims, is the result of three influences. First, early research scandals, including the Jewish Chronic Disease Hospital Case and the Tuskegee Syphilis Study, created the public perception that participants required protection against the potential abuse of researchers (London 2022, 46-52). Second, while the creation of the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research and its work in writing the *Belmont Report* constituted research ethics as a field of study, it also delimited its focus, thus creating "the scaffolding for subsequent theorizing (London 2022, 29)." Finally, the orthodox view reflects an intellectual influence, the view that research is a utilitarian enterprise which threatens the rights and welfare of individuals (London 2022, 29). The result of these influences, London (2022, 29) argues, is that:

> [R]esearch ethics is not like a modern city built from a blueprint that might provide a rationale for its layout and reflect a plan for accommodating future expansion…Instead, research ethics is more like an ancient city that begins with a central square and grows outward over time as the population expands and local stakeholders have to address particular needs on the ground. In this metaphor, the central square of orthodox research ethics is the IRB and the rules and regulations they consult and apply in evaluating research protocols.

The commitments of the orthodox view, London argues, have led to several significant problems. First, the emphasis on protecting certain groups from the risks of research and the treatment of research as a morally optional activity have meant in practice that many populations - e.g. pregnant women - have had their distinct medical needs neglected by researchers and sponsors

(London 2022, 59-60). Second, the definition of research in functional terms and the reduction of considerations of justice to respect for persons and beneficence has left stakeholders without the tools needed to address questions regarding the interaction of the research enterprise with broader social systems (London 2022, 53-59).

This latter problem, London claims, came to the fore with the heated discussions about the ethics of the zidovudine short-course trials in low-income countries in Asia and Africa during the mid-1990s. At issue in these trials was the permissibility of comparing an experimental short-course zidovudine intervention to prevent maternal-infant HIV transmission against placebo when a long-course zidovudine intervention was standard of care in high-income countries. On London's (2022, 60-71) reconstruction of these debates, due to orthodox research ethics' failure to think seriously about questions of justice, the international guidelines relevant to the design of these studies lacked the coherent moral foundation necessary to guide their interpretation, and the initial critics and defenders of these studies were left to apply the commitments of orthodox research ethics in counter-productive and unhelpful ways. As London (2022, 71) puts it:

> Arguments about international research challenged orthodox research ethics because its narrow focus on interactions within the IRB triangle rested on unstated presumptions about the relationship between research and a wide range of background conditions. Disconnected from the larger purposes of a just society, research is evaluated relative to role-related obligations of professionals without a clear sense of how those obligations relate to background considerations of justice within health systems, let alone justice across national boundaries.

London (2022, 76) shows that orthodox research ethics lacked the conceptual resources necessary to situate the questions of standard of care and equipoise within the broader social order wherein research is conducted and so failed to offer reasonable guidance to investigators and sponsors.

London's positive vision of the philosophical foundations of research ethics aims to avoid these problems. It starts with an understanding of the common good. In contrast to those who understand this idea with reference to the good of some group or community, London understands it as the shared interests of free and equal people. While individuals have differing *first-order* interests since they have distinct plans of life - i.e. goals and preferences - they also have a shared basic interest in being able to develop, revise, and pursue their plan of life, that is, "to develop and exercise their basic intellectual, affective, social, and physical capacities in order to be able to formulate, pursue, and revise a meaningful life plan, including forming and maintaining relationships of significance with others (London 2022, 133)." The common good is the set of basic *second-order* interests that all people share.

A central goal of a just political order is to secure the common good understood in this way. Governments must therefore establish institutions that ensure and preserve people's enjoyment of the fair value of their basic interests, that is, which equitably, effectively, and efficiently provide all with the health, intellectual and affective capacities, liberties, resources, and opportunities necessary to set and pursue a plan of life (London 2022, 149-151). While this understanding of justice is common among liberal egalitarian political philosophers, London makes the further, novel argument that *research* plays a necessary role in the building of a just society. Research, London (2022, 153) argues, generates "information that is necessary to close gaps in the ability of the basic social institutions of a community to secure and advance the basic interests of its members."

London's (2022, 149) view of the common good thus grounds the central idea of his book, the "egalitarian research imperative:"

> The Egalitarian Research Imperative: There is a strong social imperative to enable
> communities to create, sustain, and engage in research understood as a scheme of social
> cooperation that respects the status of stakeholders as free and equal and that functions to

generate information and interventions needed to enable their basic social systems to equitably, effectively, and efficiently safeguard and advance the basic interests of their constituent members.

This imperative obligates governments to fund, authorize, and conduct research to advance its ability to safeguard and promote people's basic interests, but also to ensure that these research activities respect participants as free and equal persons. London (2022, 249) thus describes his approach to research ethics as "*integrative*," reconciling or integrating the imperative to "support research that advances the common good with the imperative to respect the status of the stakeholders in that undertaking as free and equal persons."

As London illustrates, this imperative has several implications for issues in research ethics. In chapter 4, he shows that this broader understanding of the moral purpose of research implies that pharmaceutical trials should include participants who are representative of the patient population - even if this requires lengthening drug development timelines - and be evaluated at the portfolio level to minimize risks to participants and generate knowledge that is most useful to stakeholders. In chapter 6, London defends the integrative approach to risk assessment and management, showing how the egalitarian research imperative yields a social value requirement for research and a principle of equal concern mandating equal care for the basic interests of participants and those who stand to benefit from the research. In chapter 7, he shows how the system of prospective review can be defended on non-paternalistic grounds, as a mechanism for ensuring that stakeholders act to realize the egalitarian research imperative. Finally, in chapter 9, he appeals to this imperative to defend a view of just international research, the human development approach.

For the Common Good thus articulates a novel, compelling, wide-ranging, and conceptually coherent account of the philosophical foundations of research ethics, one which connects the research enterprise to the broader social order. While London (2022, xvii) acknowledges that his

book does not offer a "recipe for dealing with every thorny problem in research ethics," it yields

several principles and criteria to guide the activities of sponsors, investigators, and IRB members.

His development of a set of non-utilitarian principles, criteria, and tests to assess and evaluate risk

(London 2022, 249-265) demonstrates the ability of his justice-based approach to replace central

features of ethics regulation and oversight that have traditionally been grounded in either the

principle of beneficence or the duties of physicians. Similarly, while London says very little about fair

subject selection, the egalitarian research imperative has clear implications for this requirement. The

imperative to produce knowledge that enables institutions to effectively and equitably secure

residents' basic interests necessitates the fair inclusion of diverse populations in research; the

imperative to respect participants as free and equal people necessitates the fair sharing of research

opportunities and burdens (MacKay and Saylor 2020). Finally, as London emphasizes, the egalitarian

research imperative applies beyond health research, providing a foundation for the ethical conduct

of all forms of research that further institutions' ability to safeguard residents' basic interests, from

educational research to research on social safety net design.

In the following sections of the review, I turn to a critical discussion of London's view.

While I am largely persuaded that London's ideas of the common good and the egalitarian research

imperative offer a sound and productive basis for the field, I begin by questioning his rejection of

the principle of beneficence. I then explore the implications of London's approach in two areas: the

role of equipoise in the design of public policy experiments and the nature of research participation

once research is no longer a morally optional activity.

No Place for Beneficence?

London argues that orthodox research ethics rests on unstable conceptual foundations.

Indeed, the three principles of the *Belmont Report* which inform U.S. federal regulations and their

interpretation stem from competing ethical traditions. A central aim of *For the Common Good* is thus to articulate coherent philosophical foundations for research ethics, ones based on the idea of respect for free and equal persons.

While London (2022, 53) is no doubt correct that "justice is arguably the last virtue of research ethics," I think there is a positive side to the *Belmont Report's* arguably unstable conceptual foundations. The *Belmont Report* takes an ecumenical approach to moral theories, recognizing that principles from both consequentialist and non-consequentialist traditions have moral weight. This approach is appropriate in a pluralistic society where there are deep, reasonable disagreements about the moral principles which should inform public policy. The *Belmont Report* and the regulations informed by it thus recognize that the often-competing considerations of respect for persons, beneficence, and justice must be balanced in a defensible way, and much scholarship in research ethics is devoted to working out the appropriate balance.

London may argue that *For the Common Good* offers a non-consequentialist account of the philosophical grounds for research ethics that captures *all* the moral considerations that are relevant to the ethical conduct of research. Indeed, London's account is impressive in its degree of systematicity and ability to offer a non-consequentialist defense of requirements that are typically given a consequentialist grounding, including the imperative to conduct research, the social value requirement, and risk assessment. London (2022, 140-148) also demonstrates that his central idea of the common good is supported by multiple moral theories, from communitarianism to institutional utilitarianism. But while London's account offers a compelling view of the principle of justice, is ecumenical in its own right, and clearly has the resources to justify the principle of respect for persons, I worry that his account will not offer a completely satisfying approach to research ethics without appeal to a consequentialist principle – e.g. beneficence or prioritarianism.

As London (2022, 290) notes, many research ethicists have adopted the *Belmont Report*'s approach to risk assessment which grounds risk-benefit analysis in the principle of beneficence. On this approach, studies should only proceed if the risks to participants are outweighed by benefits to participants and future patients, and the study should be designed to maximize net benefits to these stakeholders. London sees two problems with this approach. The first is a familiar distribution problem with utilitarianism, namely that it permits the imposition of large risks on a small number of participants if doing so promises to yield large benefits for future patients (London 2022, 293). The second problem is that this form of risk-benefit analysis presupposes that it is possible to make interpersonal comparisons of welfare. This is a challenge, London (2022, 295) thinks, since the degree of goodness or badness of a particular health outcome depends on a person's life plan, and people differ in their life plans. While rough comparisons are no doubt possible, risk-benefit analyses require a type of precision that is not on offer.

In place of this utilitarian approach, London defends a convincing non-consequentialist account of risk assessment. But while his non-consequentialist approach is appropriate at the study-level, I worry that a fully non-consequentialist approach will not have the resources to develop a reasonable approach to priority setting among studies.

Sponsors of research have scarce resources and so must decide which studies and fields of research to prioritize. As London would no doubt grant, the egalitarian research imperative not only requires governments to fund research which enables institutions to fulfill gaps in their ability to secure people's basic interests, but also to prioritize those forms of research which address gaps that are particularly pressing. Now, London might object that such priority setting is not possible since interpersonal comparisons of wellbeing at the level of precision needed for risk-benefit assessments are not possible. But this seems too strong. Health economists have developed quality adjusted life years (QALYs) as a tool to evaluate health states, and policymakers have used QALYs for years to

compare the benefits of different treatments (Hausman 2015). There are of course problems with QALYs and there is disagreement over how to calculate them, for the various methods for doing so are often grounded in different views of wellbeing. But the widespread use of QALYs to evaluate clinical treatments and public health interventions suggests that it is possible to arrive at reasonable, interpersonal comparisons of health-related quality of life that are precise enough for priority-setting. If this is all correct, it's not a stretch to think that QALYs could be used to estimate the possible benefits of studies or fields of research. Indeed, in the last few years, several scholars have made significant contributions to the systematization of risk-benefit analysis and judgements of social value (see Rid and Roestenberg 2020; Barsdorf and Millum 2017).

So, assuming we have the tools to discriminate among different research programs and studies in terms of their ability to secure people's basic interests, I worry that London's non-consequentialist account of priority setting will face the same problems such accounts face in the domain of healthcare priority-setting, namely, that their strict focus on the worse off is too strict. For example, a Rawlsian approach to healthcare priority-setting would seem to support maximin, giving absolute priority to programs which benefit the worse off. The problem with these approaches is that the worse off are often incredibly expensive to help which then leaves very few resources for the rest of the population (DeGrazia and Millum 2021, 141-142). The principle of beneficence of course faces the opposite problem, namely, setting the interests of the worse off aside with the aim of producing the most good. But, in healthcare priority setting debates, the most prominent views either opt for a consequentialist prioritarian approach which gives extra weight to the interests of the worse off (Ottersen 2013), or a combination of non-consequentialist and consequentialist approaches (Voorhoeve 2014). Similarly, in the growing literature on health research priority setting, scholars have opted for a prioritarian view (Pierson and Millum 2018; Barsdorf and Millum 2017).

For the Common Good does not include a detailed discussion of research priority setting and so it may be that London's non-consequentialist approach has the resources to address this problem in a reasonable way. As someone who leans non-consequentialist, I hope this is the case; but if past debates regarding priority setting are any indication, it may prove a mistake to jettison consequentialist approaches completely.

Equipoise and Public Policy Experiments

London's focus in *For the Common Good* is health research. However, he is clear that the egalitarian research imperative applies to all forms of research that implicate people's basic interests, for example, research concerning education or social safety net design. As he puts it, "the same arguments that support the egalitarian research imperative in the sphere of health would apply to any other context in which a social system has a direct impact on the basic interests of community members (London 2022, 159)." In this section, I want to explore whether his integrative approach to risk assessment is appropriate for public policy experiments. I will focus on the practical test he develops for operationalizing his Special Concern for Basic Interests Criterion. While I argue that this test needs to be revised if it is to be appropriate for public policy experiments, the following analysis is not necessarily a critique of London's position. While London is clear that the egalitarian research imperative applies to all forms of research, the specific criteria and tests he discusses are often tailored to the context of health research.

London formulates a practical test for determining when it is permissible to assign a participant to a specific study. This test ensures that participants are not subject to substandard care, and so helps ensure that the principle of equal concern is satisfied:

Uncertainty Regarding Basic Interests: For each individual with a particular condition (e.g., a health problem), the care and protection afforded to that individual's basic interests satisfies

the condition of equal concern just in case every intervention to which that person might be

allocated in a research study is admissible. An intervention is admissible for an individual just

in case there is either uncertainty among, or conflict between, experts about whether it is

dominated by any other intervention as a means of safeguarding the basic interests of that

individual (London 2022, 264).

It is permissible to assign an individual to a study, then, if and only if there is uncertainty within the

expert community regarding which arm of the study is superior, where intervention A is superior to

interventions B and C if and only if A dominates B and C as a means for safeguarding that

individual's basic interests. This practical test thus offers an account of equipoise and holds that

equipoise is a necessary condition for studies involving random assignment and impacting people's

basic interests. As London (2022, 264-265) puts it, "when this condition is met, each individual who

participates in a clinical trial is assured of receiving a package of medical care that would be

recommended for them by at least a reasonable minority of expert clinicians."

Is this test appropriate for public policy experiments? Consider a case. In 2010, the Zambian

Ministry of Community Development, Mother and Child Health (MCDMCH) began rolling out the

Child Grant Program which offered poor households with a child under five an unconditional cash

grant of roughly $12 per month (Handa et al. 2016, 360-361). Households were randomized to

either an experimental group, which started receiving payments in January 2011, or a delayed entry

control group. Researchers studied the intervention's effect on consumption, food security,

children's material wellbeing, children's nutrition, productive investment, asset accumulation, and

child health (Handa et al. 2016, 358). Interestingly, the researchers did not justify the use of

randomization by appeal to uncertainty, instead acknowledging that cash transfers had been proven

to improve consumption, food security, and school enrollment. Instead, they argued that

randomization was "ethically feasible" on the grounds that the MCDMCH did not have sufficient resources or capacity to provide the intervention to all eligible households (Handa et al. 2016, 361).

I agree with the researchers that it is permissible to randomize households to the intervention and control in this case, but I don't think London's uncertainty test supports this judgment for the right reasons. If my judgment regarding this case is correct then, the uncertainty test requires revision for public policy experiments.

Consider first that this study satisfies the uncertainty test. While there is strong evidence that the intervention is superior to the control when it comes to consumption, food security, and school enrollment, there is uncertainty within the expert community regarding whether it is superior with respect to children's material wellbeing, children's nutrition, productive investment, asset accumulation, and child health. There is thus uncertainty regarding whether the intervention dominates the control as a means of safeguarding participants' basic interests.

But notice that because there is uncertainty regarding the dominance of the cash transfer, this analysis implies that random assignment of households to the intervention or control would be permissible on London's uncertainty test *even if the intervention was not scarce*. After all, if there is uncertainty regarding the dominance of the intervention and control, both are admissible. This seems wrong, for such a study would deprive poor households of an intervention that was proven to improve consumption, food security, and school enrollment, even if its broader effects were in doubt. Although most if not all of the outcomes in question relate to participants' basic interests, some seem more closely tied to the purpose of the intervention - i.e. to address deep poverty - and the fact that some of the broader effects of the intervention are uncertain shouldn't mean that it is permissible to withhold it. For these reasons, it seems wrong to withhold the intervention simply because of uncertainty regarding its effects on productive assessment or children's nutrition, say.

The broader point here is that because public policy experiments often have multiple

outcomes of interest for the interventions under study, and because London's condition for

admissibility is quite lax (requiring only that an intervention is not dominated by another), the

uncertainty test will permit studies which it ought not to. When it comes to public policy

experiments therefore, the admissibility test may need to be tightened to ensure that participants'

basic interests are protected.

If the admissibility test is tightened however, then London's uncertainty test faces another

problem, namely that it would prohibit studies like the Zambian cash grant RCT - a prima facie

permissible study. For random assignment to the intervention and control to be permissible, both

the intervention and control must be admissible. But, once the admissibility criterion is tightened,

the control will no longer be admissible, for it is sufficiently certain that the intervention is superior.

This is a problem since the study is prima facie permissible: it is socially valuable since some

important outcomes are in doubt, random assignment makes no one worse off since the

intervention is scarce, and a lottery is arguably a fair way to allocate the intervention.

One remedy to this problem is to revise the claim that uncertainty is a necessary condition

for random assignment in public policy experiments. In other work, I have defended the position

that equipoise is merely sufficient for permissible randomization, and that scarcity is an additional

sufficient condition (MacKay 2020, 333-348). The core intuition is that randomization is permissible

in cases of indeterminacy, that is, in cases where policymakers lack sufficiently strong reasons to

favor one option or another. While policymakers may be indeterminate regarding whether one

intervention is superior to another, they may also be indeterminate regarding *who* should access a

superior but scarce intervention. Random assignment is permissible in the Zambian cash grant RCT

therefore not because there is uncertainty regarding whether the intervention is superior to the

control, but instead because the intervention is scarce, and a lottery is a fair way to allocate access to it.

The Egalitarian Research Imperative and the Nature of Research Participation

The egalitarian research imperative holds that governments have a positive obligation to fund, authorize, and facilitate research aimed at ensuring institutions have the knowledge they require to secure and promote people's basic interests. It also envisions research as a voluntary scheme of social cooperation among free and equal people. In this final section of the review, I explore the implications of this imperative for how we should conceive of research participation, once research is no longer a morally optional activity.

In an influential paper, Lucas Stanczyk (2012, 144) raises and explores the question of productive justice: "[h]ow are the goods whose distribution justice governs to be produced in the first place?" Stanczyk is particularly interested in the question of the means governments may adopt to ensure that the goods and services it has a duty to provide are produced.

The dominant views that bear on these questions hold that justice does not constrain occupational choice, such that people have no duties of justice to work one job or another; and that governments may not forcibly assign jobs (Stanczyk 2012, 145). To ensure that the goods and services governments have a duty to provide are produced therefore, they must rely on incentives. London (2022, 3) does not discuss the nature of research participation at length in *For the Common Good*, but his emphasis on the need for research to be a voluntary scheme of social cooperation suggests he endorses one or both of these views when it comes to participation.

The problem for these views is that they are inconsistent with another view, namely, that governments have a duty of justice to ensure some level of welfare for residents, for example, to secure and promote people's basic interests. The problem is that there may be circumstances where

people are not willing to perform the work necessary for the government to discharge this obligation. Because this is a possibility, the following three claims are inconsistent:

Justice does not directly constrain occupational choice.

Justice forbids forcibly assigning jobs except where liberties are at risk.

Justice requires society to ensure more than merely liberties (Stanczyk 2012, 153).

As Stanczyk (2012, 151) puts it, "[i]f occupational choices cannot be unjust, and if justice forbids forcibly assigning welfare-improving jobs, then *there can be no injustice in any failure to bring about any state of affairs in which people fare well, whenever able people will not to do the necessary work without being forced.*"

Stanczyk (2012, 153) argues that either the first or second proposition (or both) must be rejected or pared back. The third proposition must not be pared back for it would imply, for example, that there would be no injustice in the failure to educate girls if there were no teachers willing to perform the work. Stanczyk (2012, 157-163) therefore accepts the view that it is sometimes permissible to restrict freedom of movement and/or freedom of occupational choice to promote people's welfare.

As Stanczyk (2012, 154) notes, the inconsistency of these three claims would only be of academic interest if people were willing to perform all forms of necessary work. Unfortunately, this is not the case in many low-income countries where medical professionals are scarce and frequently emigrate to richer countries (Stanczyk 2012, 154). Indeed, even high-income countries face problems incentivizing such professionals to work in rural areas (Stanczyk 2012, 154-155).

London's egalitarian research imperative, insofar as it places research alongside healthcare, education, and poverty alleviation as a way governments secure and promotes people's basic interests, brings this problem to the fore even in high-income countries. Various levels of government in the U.S. may struggle at times to ensure that all residents have access to adequate education and healthcare; but the difficulties in ensuring that research studies have enough

participants is a whole other story, for investigators and sponsors often struggle with recruitment efforts and many studies lack sufficient enrollment (Cheng, Dietrich, and Dilts 2010). If London wants to hold onto the claim that research is not a morally optional activity but instead a duty of justice, he must then claim either that people have a duty of justice to participate in research and/or that governments may force people to do so.

Even if London opts for the less contentious former claim moreover, governments will still likely face the problem of under-enrollment. London (2022, 139, footnote 19) expresses hesitancy regarding proposals that participation be conceived of as a form of paid work, favoring instead a model of participants as volunteers. But, to ensure adequate numbers of participants without resorting to coercion may require significantly greater incentives to participants. London does not rule out incentives but making research a duty of justice may require a reconceptualization of research participation as a form of labor, akin to other forms that must be performed if governments are to secure people's basic interests, for example, teaching or nursing. The ramifications of this could be large given that London's egalitarian research imperative applies to all forms of public policy research in addition to clinical research.

One worry with a reliance on incentives, moreover, is that only low-income residents will respond to them, leaving middle- and high-income residents with the option of benefitting from the system of research while flouting their duty to participate. A system of compulsory participation may be fairer and need not require a violation of people's basic liberties. Stanczyk favors this option for these reasons. In the U.S., for example, such a system of compulsory participation could involve denying residents access to Medicare unless they participate in research.

London is not alone in facing the problem Stanczyk identifies. All who hold, as I do, that governments have duties of justice to provide residents with something more than the basic liberties must confront it. But, to the extent that London envisions research as a duty of government (a claim

with which I agree) rather than a morally optional activity, it is far from a merely academic problem and may require further reflection on how we should think about research participation, and which means are permissible for addressing the problem of under-enrollment.

Conclusion

      For the Common Good makes a major contribution to the field of research ethics. Scholars have long recognized that clinical and social scientific research raise questions of justice and London's book offers the most sustained and systematic effort to address them. It's a testament to the strength of the book's arguments that my critical comments largely concern the downstream implications of the book's core commitments, rather than these commitments themselves. While *For the Common Good* does not aim to solve every problem in the field, it provides a fertile ground for future research, offering readers "an invitation to embark on the process of dealing with old problems and a wide range of new problems from a new starting place (London 2022, xviii)." In the years to come, I expect many research ethicists will accept this invitation, reorienting the field's approach.

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