

# Perspectives on Urban Bioethics: A Preliminary Overview

by Marco Menon\*

## Abstract

This paper offers a preliminary philosophical introduction to the concept of urban bioethics, tracing its origins, theoretical developments, and interdisciplinary implications. The analysis does not aim at exhaustiveness but serves as a conceptual groundwork for a broader and future study. Focusing on urban bioethics as a theoretical perspective rather than an applied discipline, the paper examines how the term “urban” reconfigures the scope and structure of bioethical inquiry, suggesting a transformation rather than a mere specification of general bioethics. The discussion is articulated in three sections: the first presents the initial formulation of urban bioethics in the United States, developed mainly through two New York conferences; the second explores its politicized reinterpretation by South American scholars; and the third highlights recent perspectives emerging from a European-Asian dialogue initiated at a Croatian conference. The conclusion synthesizes the transversal themes identified and outlines the key philosophical and interdisciplinary questions that remain open for future research within this emerging field.

## Keywords

Urban Bioethics, Bioethics, Ethics, Urban Health, Built Environment.

## 1. Introduction

**A**t the turn of the 1990s and 2000s, the concept of “urban bioethics” emerged in the U.S. bioethical debate. The principal motivation behind this initiative was the intent to engage with bioethical issues specifically pertaining to the urban environment. Of particular concern were the profound social and economic

disparities among different segments of the urban population, and the pivotal role these underlying conditions play in shaping individual health outcomes. At first glance, urban bioethics might appear to be a sub-discipline of bioethics; however, the history of its origins and subsequent development in Latin America and Europe suggests that the matter is far more complex.

The aim of this paper is to provide a preliminary overview of this emergence and evolution from a philosophical perspective. The characterization of this reconstruction as preliminary is due to two reasons, which also explain the absence of any claim to exhaustiveness.

First, the present reflection serves as a prelude to a broader and more comprehensive study that will, as will become evident, be necessarily inter-

\* UniCamillus International Medical University of Rome.

disciplinary in nature. Second, given the specific character of the philosophical approach adopted here, the focus will be directed exclusively toward the elaboration of urban bioethics as a theoretical field or perspective. Accordingly, based on a review of the existing literature, priority will be given to contributions that explicitly address the possibility and necessity of an urban bioethics. The central concern, in fact, is to understand how the distinction between a “general” bioethics and a bioethics qualified by the adjective “urban” has been justified; how the addition of this adjective may imply a structural transformation of bioethics rather than a mere specification; and in which directions such a transformation may guide future research. Consideration of more applied or specialized studies will therefore be confined to this latter aspect.

Regarding the methodological approach, this research does not employ a systematic or semi-systematic literature review; rather, it adopts a conceptual analysis. The aim is not to provide an exhaustive account of all existing literature on the subject, but to highlight the diversity of theoretical

perspectives and conceptual frameworks developed to give urban bioethics a coherent structure and a certain degree of disciplinary and methodological autonomy. For this purpose, the following indications are considered sufficient. The search focused on occurrences of “urban bioethics” in the titles and abstracts of scientific publications. Master’s theses and dissertations were excluded, though they may be considered in a future, more extensive study. In consulting the main databases (PubMed, Scopus, Google Scholar), no temporal or linguistic restrictions were applied. The results were then supplemented with bibliographical references found in the collected works, whenever these were deemed relevant to the aims of the study.

The reconstruction will be presented in three sections, followed by a conclusion. The first section outlines the initial theoretical formulation of the concept of urban bioethics, which originated in the United States, specifically through two conferences held in New York. The second section explores the development of this concept by South American scholars, who interpret urban bioethics

in a distinctly political sense. The third section examines the research perspectives that have emerged from scholarly dialogue between European and Asian researchers, stemming from a conference held in Croatia. The concluding section will summarize the overarching themes of urban bioethics and identify the theoretical questions that remain open, both from a philosophical standpoint and within the framework of interdisciplinary dialogue.

## 2. Bioethics and The City

The earliest known reference to “urban bioethics” appears in a *Foreword* written by Elizabeth B. Cooper and Benjamin C. Zipursky [1] for a special issue of the «*Fordham Urban Law Journal*» published in 1997. The volume brings together the papers presented at the conference *Urban Bioethics: A Symposium on Health Care, Poverty, and Autonomy*, held in February of the same year at the Fordham University School of Law. The event was structured around three panels corresponding to major areas of inquiry – “allocation of resources, mandatory HIV testing, and physician-assisted suicide” [1, p. 664]. These topics

were thus united under the heading of “urban bioethics”, described as “an attempt to merge [...] different fields: bioethics and healthcare policy, on the one hand, and the critical study of the legal rights of urban and disadvantaged populations, on the other” [1, p. 663].

This definition already conveys an awareness that the urban dimension possesses distinctive features which, although overlapping with areas explored by other disciplines, nonetheless warrant specific and interdisciplinary attention. In particular, the authors note that it is striking how the contributions “recognize that these issues are especially difficult framed within this context of widespread poverty, a difficulty that is only amplified by the enormous diversity of race, gender, class, age, and disability within urban communities” [1, p. 664]. Two characteristics, therefore, appear to distinguish the urban context from others: poverty – and, consequently, the extreme vulnerability of socially marginalized populations – and the profound diversity that fragments urban populations. Although the papers collected in the journal issue focus primarily on the topics mentioned above and do not

further elaborate on the concept of urban bioethics, several defining features nonetheless emerge from the *Foreword* with sufficient clarity.

However, it was an article published in 2000 by V. Ruth Cecire, Jeffrey Bulstein, and Alan R. Fleischman [2] that first introduced the concept of urban bioethics and outlined it systematically, explicitly contrasting it with traditional bioethics. According to the authors, traditional bioethics has been guilty of neglecting the urban context and the specific forms that bioethical issues assume within it. This neglect is not merely a matter of content – of addressing previously overlooked issues – but also of method: the urban environment demands that its problems be approached through a distinctive methodology. Consequently, urban bioethics cannot be understood as a simple extension of classical bioethics to questions beyond the clinical and laboratory domains. Three salient features, the authors note, distinguish the urban environment: “the magnitude of extant poverty; the multiplicity, urgency, and severity of related social problems; and the uneasy co-existence of citizens and immi-

grants across a wide economic and cultural spectrum” [2, p. 1]. The nature of these problems compels a reconsideration of the very philosophical and moral foundations of classical bioethics, traditionally rooted in liberal individualism – a critique that will recur throughout the broader debate on urban bioethics.

The authors therefore identify three tensions that characterize the urban condition: these oppose “the desire to be responsive to urban pluralism and the need for moral cohesion”, “the practices of democratic politics and the often conflicting demands of justice and equity”, and, finally, “the coercive potential of public health mandates and individual autonomy prerogatives” [2, p. 5]. In the first case, the role of urban bioethics is to mediate among diverse value claims, determining in each instance the extent of moral diversity a society can sustain while avoiding the twin dangers of oppression and anarchy. In the second, its task is to analyze issues of resource distribution, particularly in cities historically marked by immigration and the presence of vulnerable populations. In the third, urban bioethics is charged with

assessing public health measures that restrict individual freedom for the sake of the collective good. This final tension is especially acute at a structural level, precisely because in Western societies – and particularly in the American context – moral life is shaped by the primacy of individual liberty. It is within this framework that the principle of autonomy, otherwise central to classical bioethics, must be carefully qualified in light of the common good. The urban environment, by virtue of its density, is precisely where such public health dilemmas become most visible.

Cecire, Blustein, and Fleischman conclude their article by outlining the salient features of several major ethical frameworks, assessing the limitations and potential of each in relation to the concerns of urban bioethics. Among the frameworks analyzed – namely social contract theory, deliberative democracy, utilitarianism, communitarianism, and feminism – it is particularly the second and the last that most closely align with the aims of urban bioethics, although the authors refrain from assigning clear primacy to any single approach. The

contribution of deliberative democracy lies in its capacity to offer a means of managing disagreement that both values diversity and enhances the legitimacy of the collective deliberations reached by the community. Conversely, the feminist framework makes it possible to articulate aspects of urban life such as vulnerability and interconnectedness through its relational perspective, which sets it apart from the individualism characteristic of classical bioethics.

The themes discussed by Cecire, Blustein, and Fleischman were further developed in a special issue of the «Journal of Urban Health», which gathered the papers presented at a national conference held in December 1999 at the Center for Urban Bioethics, established the previous year by the New York Academy of Medicine. The introductory article to the issue, *Bioethics in the Urban Context*, authored by Alan R. Fleischman, Betti Wolder Levin, and Sharon Abele Meekin [3], begins by identifying density and diversity as the defining features that distinguish the urban environment from the rural one – an aspect that, according to the authors, gives rise to an “interplay of

extremes” in the coexistence of poverty and affluence within the same cities. This disparity affects not only the health of different social groups but also that of the population as a whole. It exemplifies one of the many socioeconomic dimensions neglected by traditional bioethics, which has often been criticized for its predominant focus on individual rights at the expense of the broader urban context. The specificity of urban life, by contrast, calls for close attention to the interactions and tensions among social groups and to the ways in which cultural, racial, and socioeconomic factors shape the health of individuals and communities alike.

Of the eight articles that follow, three focus explicitly on the concept of urban bioethics and on the type of theoretical framework within which it should be situated and further developed. Jeffrey Blustein’s *Setting the Agenda for Urban Bioethics* [4] seeks to establish the terms of discussion for urban bioethics and to clarify in detail what constitutes its distinctiveness, given that the mere addition of the adjective “urban” does not, as in other comparable cases, immediately imply a theoretical critique of

“classical” bioethics. Blustein contends that, on the contrary, urban bioethics entails a profound critique and transformation of traditional bioethics. In this respect, his comparison with feminist bioethics proves particularly illuminating: the aim is not merely to address previously neglected issues, but to fundamentally reshape the “philosophical and conceptual framework” underlying bioethics – beginning from the concrete realities of urban life.

Let us briefly revisit Blustein’s proposal, which largely refines and expands upon themes introduced in the 2000 article co-authored with Cecire and Fleischman, demonstrating how attention to specific problems of the urban condition entails, as noted, a transformation of bioethics itself. First, Blustein emphasizes that classical bioethics has focused almost exclusively on the right to medical care, neglecting the socioeconomic determinants of health. These determinants, however, account for the profound disparities in health status among different communities. Bioethics must therefore address them directly, abandoning the assumption that the sociopolitical dimension of health falls solely within the

domain of other social sciences. Second, bioethics is called upon to develop the philosophical and moral foundations of public health, freeing itself from the dominance of the liberal model centered on individual decision-making, which has consequently reduced the moral dimension to patient autonomy. Third, the extreme abstraction of the physician–patient relationship must be replaced by attention to its concrete conditions. In the urban context, this relationship is particularly affected by the transience of social bonds, which structurally impedes the formation of durable relationships of trust between doctor and patient. The fragmentary and often poverty-stricken character of urban social relations thus undermines the therapeutic alliance. Urban bioethics, in this respect, must evolve to assess the salient features of urban life in practical terms and formulate corresponding proposals. Fourth, the profound cultural diversity of the urban environment requires, as previously noted, that bioethics relinquish the falsely neutral character of its principles and actively engage with a multicultural context aimed at fostering strategies of

mediation. This entails balancing respect for the individual with respect for their community of belonging, avoiding both the imposition of a typically Western-American individualistic-liberal model and the subsumption of individual claims within a preconceived cultural identity.

In response to this final challenge, Blustein draws on an earlier insight, invoking the resources of deliberative democracy as an alternative to the “monologue” of traditional bioethics. To this, however, he adds another dimension, again drawing a parallel with feminist thought: the transformation of bioethical inquiry into a genuinely dialogical practice. This approach avoids the mere application of universal principles to particular cases without sufficient attention to the radical plurality of urban realities that bioethics must inevitably confront. A truly dialogical approach requires openness to “previously unseen perspectives” and calls for the cultivation of “virtues as responsibility, self-discipline, sensitivity, respect, and trust” [4, p. 19].

Albert R. Jonsen’s *Social Responsibilities of Bioethics* [5] similarly critiques the overly narrow scope of traditional

bioethics, explicitly calling for its integration into the broader domain of genuine social ethics and urging it to move beyond the confines of the clinical and individual moral universe. Jonsen traces the development of traditional bioethics, highlighting its neglect of the urban context and advocating for the formalization of urban bioethics within an ethical framework grounded in social responsibility. This integration forms the core of his proposal, which is more explicitly theoretical than Blustein's, who, as noted, addressed several specific applied domains of a transformed bioethics. Jonsen, by contrast, proposes a philosophical and moral framework capable of addressing the specificity of urban bioethical problems, grounding it in the notion of responsibility as developed by the theologian H. Richard Niebuhr. For Niebuhr, "the idea of responsibility was the most fundamental ethical notion"; he conceived of responsibility as the key to understanding human action as a response to an act that the agent, in turn, perceives as a call for a reply. Human action thus forms a web of reciprocal responsiveness, within which each person's moral task – or

vocation – is to sustain this responsive community. Commenting on this conception, Jonsen observes that "Persons who live in great cities are perpetual responders" [5, p. 27].

Responsiveness is therefore identified as the criterion of good action, insofar as it corresponds to conduct that perpetuates and nurtures responsiveness itself. As Jonsen notes, "Many moral problems of urban life arise from stifling of responsiveness" [5, p. 27]. This principle, while universal, aligns closely with the realities of urban life and proves highly relevant to the issues that define urban bioethics. A final, decisive aspect concerns the nature of the responsive community represented by the city, which is, in fact, a community of strangers. Herein lies the central challenge: sustaining and maintaining the "responsivity among strangers" [5, p. 28]. In attempting to connect the proposals of Blustein and Jonsen, one can observe that Niebuhr's ethical principle of responsibility or responsiveness provides the foundation for the dialogical practice advocated by Blustein, while simultaneously offering a coherent framework within which

to situate the various urban issues he examines.

Partly diverging from the theoretical proposals of Blustein and Jonsen, Bruce Jennings's *From the Urban to the Civic: The Moral Possibilities of the City* [6] offers a political reformulation of urban bioethics, proposing instead the term "civic bioethics". This divergence, however, represents a deepening rather than a rupture. For Jennings, an urban bioethics conceived merely as the application of classical bioethical categories to urban issues is neither sufficiently innovative nor genuinely radical. Such an approach would fall short of the rethinking already called for by other scholars – one that, in Jennings's view, must take a distinctly political direction. Jennings grounds his proposal for a civic bioethics in the classical distinction between *urbs* and *civitas*. The *urbs* traditionally denotes a space of commercial and economic exchange, whereas the *civitas* refers to the political and moral community formed by citizens living together in pursuit of the good life. By contrasting these two poles of classical political thought, Jennings effectively compares two moral universes: that of liberalism,

which reduces the city to a site of exchange and transaction, a means for the satisfaction of individual interests; and that of democratic republicanism, which conceives the city as the fullest expression of human moral realization – the locus of the common good and the good life.

Building on this fundamental distinction, Jennings explicitly critiques bioethics – and urban bioethics in particular – for remaining, even at the level of terminology, within the individualistic moral universe of liberalism. He instead proposes grounding civic bioethics in a theoretical framework informed by democratic and communitarian values. Within the liberal moral universe, primacy is given to the characteristics that distinguish individuals from one another – that is, to personal interests and capacities, which are realized through economic exchanges and transactions. Self-affirmation, in other words, occurs by means of social relations. By contrast, in the democratic moral universe – within which civic bioethics must be conceived – priority is given to what individuals share in common, to the features that unite them. Individuals realize

themselves within civic life, the only sphere in which they can achieve a full experience of humanity.

Jennings places particular emphasis on the notion of transformational agency, a theoretical move that renders the adoption of the conceptual tools of deliberative democracy, as proposed by Blustein, not merely a methodological choice but a new philosophical foundation for bioethics. This becomes especially evident when Jennings justifies his position in light of the moral demands of public health in the urban context. In such circumstances, responding through the categories of classical (liberal) bioethics – framed around the individual – proves insufficient; instead, it is necessary to mobilize conceptual resources capable of articulating the common good. The latter, in turn, would remain a purely abstract notion were it not embodied within a public and institutional space. In other words, no form of bioethics can adequately address the moral challenges of the city if the city is conceived and reproduced merely as *urbs* rather than understood and lived as *civitas*. One of Jennings's concluding statements captures

this idea with remarkable clarity: "Urban bioethics as I urge us to construe it, is about the justice of economic redistribution; it is about political deliberation concerning the ends of life and the nature of human flourishing, including health and well-being; it is about active, participatory citizenship that is a practice of civic responsibility as much as it is a stronghold of protective rights" [6, p. 102].

As a concluding act of the "North American moment" in urban bioethics, consider the 2004 article by Blustein and Fleischman, *Urban Bioethics: Adapting Bioethics to the Urban Context* [7]. While this contribution primarily serves to weave together the threads of earlier discussions, offering a synthesis of the various challenges to which urban bioethics is called to respond, it also introduces reflections that had previously remained more implicit. First, the authors expand the scope of urban bioethics to encompass environmental issues – specifically, the assessment of the consequences of urban development. In this context, the built environment and its impact on the health of urban populations assume central importance. They also

more clearly identify the key characteristics of the urban environment itself. Although, as they note, no two cities are alike, all share features that distinguish them from suburban or rural settings, and these features shape the particular bioethical problems that arise in urban contexts. These defining features are density, diversity, and disparity.

With respect to these three dimensions, Blustein and Fleischman largely reiterate positions articulated in their earlier works, maintaining that bioethics must adapt to the challenges emerging from urban realities and transform itself accordingly – though without emphasizing, as Jennings does, the deeply political implications of such a transformation. In this sense, it may be said that in offering a definition of urban bioethics that would become both influential and frequently cited in subsequent years [17, 45] – “Urban bioethics situates bioethical concerns in the urban context, adding a new dimension to the discipline of bioethics as traditionally conceived and practiced” [7, p. 1202] – they firmly situate it within the larger domain of ethics, albeit a public and urban ethics, while

simultaneously “neutralizing” its more radical implications. Indeed, it was against this form of disciplinary delimitation that Latin American scholars in the following decade would argue, further radicalizing Jennings’s position and situating urban bioethics within a theoretical framework that integrates biopolitics and de-coloniality.

### 3. *Bioética Urbana* from the Global South

The first contribution to introduce the concept of urban bioethics in the Latin American context is the 2012 article by the Brazilian scholar Erick Luiz Araujo de Assumpção, *Por uma bioética urbana. Reflexões sobre o desalojo da comunidade/bairro Pinheirinho* [9]. Although much of the article focuses on a specific case study, which cannot be examined in detail here, the theoretical framework it develops contains all the elements of a programmatic statement – making explicit the theoretical premises virtually implied in a previous article co-authored with Fermín Roland Schramm [8]. At a preliminary level, it is important to briefly outline the Brazilian bioethical debate, within which two main cur-

rents can be distinguished: the bioethics of protection and the bioethics of intervention. The former constructs the State as an agent of protection for susceptible or vulnerable populations; the latter addresses situations of conflict related to bioethical issues in contexts of poverty and exclusion, seeking more adequate responses [16]. Both, according to Araujo, “are founded on the claim for a legitimate State [...] as a defender of the interests of the most disadvantaged populations” [9, p. 42, my translation]. Araujo contests this premise. He does not view the State as a legitimate defender of vulnerable populations, but rather as an “agent of vulnerability” that inflicts nearly irreparable harm upon susceptible groups in the name of protecting private property and capital. From the outset, his version of urban bioethics is thus situated within urban conflicts between local communities and the State. In such a context, the categories elaborated by traditional Anglo-Saxon bioethics – whose limitations have already been noted – prove largely inadequate. Moreover, given Brazil’s cultural, social, economic, and political reality, the individualistic categories of Anglo-Saxon

bioethics and their claim to universality reveal an irreducibly colonial character. The limitation, therefore, is structural.

Araujo's theoretical move – only sketched here but later developed with greater force – consists in reclaiming the original idea of bioethics introduced by Van Rensselaer Potter in his pioneering work, which was soon set aside in favor of narrower biomedical concerns. Potter's project conceived bioethics as a "science of survival" – an approach that Araujo reformulates in urban terms, making urban bioethics the field devoted to studying urban conflicts that threaten the survival of specific communities and vulnerable collective forms of life. The crucial difference from North American urban bioethics lies in Araujo's view of the State as the principal agent of vulnerability, whose interventions often entail the active weakening or destruction of collective forms of life (the case study presented by Araujo provides an emblematic example of this phenomenon). In this context, any appeal to the protective role of the State proves futile. The authentic vocation of urban bioethics, he writes, is "to become an in-

strument at the service of legitimate urban resistance movements. This challenge takes shape as the search for possibilities of action beyond the State and the market". Urban bioethics, Araujo continues, "must be used within social movements to clarify conflicts and to contribute to a broader recognition of the legitimacy of their struggles" [9, 10, p. 50, my translation].

A second programmatic contribution from Latin America was published in 2014 by the Argentine scholars Laura Sarmiento and Diego Fonti, entitled *Bioética urbana: desafíos de un campo emergente* [10]. Their approach shares several points of contact with that of Araujo, whose main theses they develop primarily from a theoretical standpoint, resulting in a higher level of abstraction. Sarmiento and Fonti begin by noting that the holistic character of Potter's original bioethical project was not preserved in the subsequent development of Anglo-Saxon bioethics. Once again, the narrowness of its scope (limited to biomedical and research contexts) and its moral-philosophical framework (guided by liberal individualism) are criticized. Such a form of bio-

ethics proves inadequate when confronted with the urban dimension of life and the multiplicity of collective subjectivities that inhabit and shape it. The innovation introduced by Sarmiento and Fonti lies in the pronounced Foucauldian turn they give to the conceptual structuring of urban bioethics – a dimension that was implicit in Araujo's work but is here explicitly articulated. The crucial insight derived from Michel Foucault reveals how public health policies and urban planning function as forms of population control, organizing collective life through disciplinary dispositifs that regulate ways of living. In this sense, urban bioethics is constructed as a kind of graft onto the theoretical trunk of biopolitics, functioning as a specific development of it. Its vocation, once again, is to articulate the claims and perspectives of the plural and collective subjectivities that constitute urban life. As the authors write, "An Urban Bioethics that is aware of the interests and power relations implicit in various forms of intervention, while remaining attentive to the claims and subjectivities affected by them, will enable bioethics to broaden its scope of action – by

developing a shared platform for discussion, a framework for analyzing the legitimacy of claims, and a model of debate appropriate to an era of moral pluralism” [10, p. 112, my translation].

The dimension of urban bioethics is therefore both public and local, responding to the concrete issues that affect the material conditions of reproduction and survival of specific subjectivities in urban environments. Sarmiento and Fonti focus particularly on the effects of the dominant capitalist-extractivist model of development, which commodifies space and privatizes common areas, producing a forced homogenization that erases the plurality of life forms previously inhabiting those spaces and thereby generating impoverishment and marginalization. Urban bioethics, they argue, should give voice to the forms of resistance that persist in opposition to the extractive logic of capitalism, valuing them as collective forms of subjectivity. For this reason, it is necessary to rethink classical principles, moving beyond individualism and adapting them to the plural realities of urban life. The authors conclude by proposing four action-oriented concepts

that should characterize Latin American urban bioethics: autonomy, legitimacy, justice, and creative resistance.

In 2015, Araujo published a brief yet conceptually rich article of great relevance to the present discussion. In *Fragments of Urban Bioethics: An Essay on Power and Asymmetry* [11], the Brazilian scholar explicitly returns to Potter’s thought, systematically expanding what, in his 2012 article, had been only a preliminary and embryonic appropriation. He begins by observing that urbanization has become a planetary phenomenon and that urban transformations now affect and reshape human existence in all its dimensions – both material and immaterial. These processes are marked by a clear asymmetry of power between those who make decisions and those who suffer their often adverse consequences. From this asymmetry arise conflicts that cannot be contained within the narrow scope defined by traditional Anglo-American bioethics. Araujo seeks to expand both the concepts of ethics and health, drawing on the foundational threads of Potter’s original bioethical vision, in which the need to

develop an urban bioethics was already implicitly anticipated, even if not explicitly named. Referring to one of the earliest North American definitions of the field – specifically, that of Jonsen [5] – Araujo explains that the adjective *urban* is not intended to delineate a new subfield, but rather to “create an intrusion” [11, p. 99] that transforms the entire bioethical framework. Here, the first key Potterian concept reappears: bioethics as a bridge. Yet in this case, the bridge is not between disciplines, but between different forms of existence, their practices, and their knowledges. These forms of life themselves become the subjects of survival – survival being, in Potter’s view, the ultimate concern of bioethics as a “science”.

Thus, the domain of bioethics is simultaneously expanded and redefined: it no longer concerns only the clinic or the laboratory, but urban environments; it no longer pertains solely to health, but to urban forms of life and their entire material and immaterial worlds. At this point, Araujo introduces a second essential Potterian notion – that of wisdom, understood as the capacity to make good use of knowledge. Within the context

of urban bioethics, wisdom is directed toward the survival of plural collective forms of existence and toward their just and balanced coexistence. For this to be possible, the very forms of life endangered by knowledge must themselves participate in the decision-making process: the nature of wisdom in urban bioethics is thus collective, not individual or exclusionary. Whereas Sarmiento and Fonti drew on Potter primarily to highlight the limitations of North American bioethics – before rearticulating urban bioethics through the Foucauldian lens of biopolitics – Araujo performs a parallel theoretical operation, but one rooted firmly in Potter's conception of global bioethics. The latter is reinterpreted – or, one might say, applied – to the context of urban conflicts, in which the health and survival of multiple interdependent forms of life are at stake.

Since 2016, Sarmiento – this time as sole author – has returned to the topic with a substantial number of publications, including a doctoral dissertation [13, 14, 15, 16]. For reasons of space, it is not possible here to fully engage with her overall contribution to the debate; I will therefore focus

on one work, selected for its elaboration of the theoretical framework of urban bioethics. From this perspective, *Bioética Urbana al cuidado de la vitalidad colectiva de los territorios* [12] is particularly significant, as the ideas previously outlined in her joint work with Fonti receive here a broader and more systematic formulation. Sarmiento's discussion begins with an analysis of the negative consequences of capitalism – specifically, the extractivist model of development – which fall with particular severity on already vulnerable populations. These groups lack the means to mitigate the environmental damage caused by pollution, unlike the dominant social classes. As a result, the quality of life of vulnerable populations deteriorates further, thereby widening the gap between social classes. Sarmiento conceptualizes these territories as “sacrifice zones”, that is, places that extractivist capitalism accepts as degraded and “emptied out” in order to sustain its own model of development. The price paid by vulnerable populations is extremely high, for what is lost is not only territory but also the material and immaterial practices and values that emerge from it. In this sense, territo-

ries are stripped of their identity and flattened to conform to the homogenizing logic of global capitalism.

An intriguing consequence of the homogenization of territories brought about by capitalist development is the gradual blurring of the distinction between urban and non-urban areas. Sarmiento observes that this process gives rise to a hybrid formation, which she terms *rururbanidad* (rururbanity). This notion designates a new form of collective subjectivity that resists the extractivist model and emerges from the ongoing reconfiguration of “living territories” – dynamic spaces whose vitality cannot be reduced to the logic of homogenization and which, for that reason, pose a threat to capitalist development. The close interweaving of territoriality and the forms of life inhabiting it manifests as a process of co-determination, in which territory shapes life and life, in turn, shapes territory. Consequently, control over territory entails control over the bodies that inhabit it and, by extension, over the forms of life that emerge from it.

In Sarmiento's view, the connection between power and bioethics becomes almost

self-evident, grounded in an integral conception of health – not merely as the absence of disease, but as a condition inseparable from the vitality of territories and their inhabitants. In this sense, her approach aligns with Potter's bioethics, as already observed in Araujo's contributions: the “science of survival” does not concern the human species alone, but encompasses the multiple forms of life and collective subjectivities that arise within the territories they inhabit. Since capitalism admits only one viable form of life – flattening or annihilating all others that exceed its preconfigured model – it constitutes a genuine threat to survival itself. Urban bioethics, in turn, assumes the role of a critical reflection on this global conflict, articulated through the irreducible multiplicity of its local instantiations. In the spirit of Potter's bioethics – of which Sarmiento's proposal can now be seen as a continuation – the definition of urban bioethics as a rigidly delimited discipline becomes problematic. If urban bioethics is to serve as a bridge between collective and plural subjectivities, their diverse and locally grounded forms of knowledge, the territories they

inhabit, and the conflicts that traverse them, it cannot adequately meet these challenges by remaining confined within disciplinary boundaries – that is, by adhering to a self-contained and impermeable methodological framework. On the contrary, urban bioethics must constitute itself as a transdiscipline: it must open to dialogue among different forms of knowledge, cross disciplinary borders, engage in their mutual contamination, and thereby become a form of “open rationality”. To echo the title of another of Sarmiento's works, urban bioethics thus becomes *una transdisciplina militante*, a militant transdisciplinarity [14].

To confirm their key role in shaping Latin American urban bioethics, Araujo and Sarmiento edited in 2020 a collective volume bringing together twelve essays by South American scholars, significantly titled *Bioética Urbana desde el Sur Global. Territorialidades bioéticas emergentes* [23], a title intended to highlight a crucial feature shared by the perspectives gathered therein. It is not possible here to fully engage with the complexity and richness of the contributions collected in this volume; we can only offer a few considerations aligned

with the strategic purpose of the present discussion, which focuses on the construction of the theoretical framework of urban bioethics.

From this standpoint, the various authors in the volume appear to use the theoretical framework originally outlined by Araujo and Sarmiento as a platform from which to develop their respective arguments – whether more theoretical or more applied in nature. As noted, despite their differences, Araujo and Sarmiento share a significant convergence in situating urban bioethics within the broader context of Latin American bioethics, whose main currents (the bioethics of protection and the bioethics of intervention) have already been briefly outlined. Both radically politicize urban bioethics by placing it in direct continuity with biopolitics – especially Sarmiento, who has developed a distinctly Foucauldian version of urban bioethics. It is also noteworthy that Araujo and, later, Sarmiento sought to reconnect with an author who, although part of the Anglo-Saxon sphere, was never fully assimilated into the development of traditional bioethics: Potter and his “original” conception of

bioethics, which later evolved into global bioethics precisely to distinguish itself from the broader Anglo-American movement. The two South American scholars, by creatively appropriating key elements of Potter's project and combining them with their distinctive biopolitical interpretation, offer the broader Latin American research community a dynamic and generative theoretical platform. Evidence of this can be seen in the character of the contributions included in the volume they edited. Although diverse – and at times animated by a certain centrifugal force – these contributions reveal a strong underlying theoretical coherence grounded in a shared set of assumptions.

The various authors share a particular concern for the plurality of subjectivities, which cannot be reduced to the categories of traditional Anglo-Saxon bioethical thought. They also exhibit a pronounced anti-capitalist stance, accompanied by a commitment to articulating social conflicts in favor of vulnerable populations, thereby positioning urban bioethics as a tool in the service of urban social justice. For all of them, the forms of resistance that emerge from be-

low – however diverse in their expressions – are of paramount importance. This configuration of theoretical elements and political sensibilities renders the framework developed separately, yet in a spontaneously convergent manner, by Araujo and Sarmiento particularly fertile, both for the development of case studies [26, 27, 28, 30, 31, 32, 33] and for further theoretical expansion through dialogue with other schools of thought capable of contributing to the articulation of the complexities of urban life [24, 29, 34, 35].

We shall limit ourselves here to a single remark, as it concerns the theoretical framework of urban bioethics and represents an innovative point relative to what has been discussed so far. It refers to a thesis presented in the chapter co-authored by Araujo and Schramm, *Ética Médica, Bioética e Bioética Urbana: herança e variação* [25]. Revisiting the idea of bioethics as a bridge between disciplines, the two authors emphasize that its unique character lies precisely in this connective capacity, which entails a form of crossing with two key implications: first, making public the ethical issues that arise within specialized fields; and second, “preventing the mo-

nopolization of problematization” [25, p. 78, my translation]. Urban bioethics thus becomes an activity that pertains to the public dimension – no longer an exclusive or exclusionary domain – and one that can and should be practiced by the public itself, that is, by a collective subjectivity. This theoretical move makes evident a dynamic already implicit in previous discussions – namely, the intrinsically political dimension of urban bioethics – and disrupts traditional bioethics’ academic monopoly over the treatment of ethical issues, both in theory and in practice.

All things considered, the theoretical foundation derived from the “Araujo-Sarmiento convergence” appears to be already well consolidated. The particular sociopolitical and cultural conditions from which it emerged, as well as the autonomy and theoretical specificity it has acquired over a few years of development, suggest that it is legitimate to speak of a distinctly Latin American – or Global South – form of urban bioethics. This body of thought may appropriately be referred to simply by its original name, *Bioética Urbana*, in order to distinguish it from its Anglo-Saxon counterpart.

#### 4. Further Developments in Urban Bioethics

A third significant stage in the debate on urban bioethics took place in Europe. In 2019, the Department of Social Sciences and Medical Humanities at the Faculty of Medicine, University of Rijeka, hosted an international workshop entitled “Urban Bioethics: From Smart to Living Cities. Bioethical Debate, Reflections and Standards” [20, 21]. The papers presented on that occasion were subsequently published in 2020 in a monographic issue of the journal «Jahr – European Journal of Bioethics» (as in previous cases, the discussion here will focus exclusively on certain passages from these contributions that are particularly relevant to the theoretical development of urban bioethics). The journal itself takes its name from the German theologian Fritz Jahr, recognized as the first to have coined the term bioethics (in German: *Bio-Ethik*) in the 1920s. This detail is not incidental, as the Croatian research group led by Iva Rinčić, Amir Muzur, and others has for years been engaged in a project aimed at re-evaluating Jahr’s work within the broader context of recon-

structing a distinctly European bioethics [22]. Rinčić, however, appears to play a central role in the urban bioethical endeavor, as confirmed by an interview conducted with her by the Ukrainian scholar Hanna Hubenko in 2019 [19]. In that interview, Rinčić provides her definition of urban bioethics. We can immediately observe that, on one hand, her conception lacks the distinctly militant connotation characteristic of Latin American *Bioética Urbana*; yet, on the other, it remains oriented toward the civic approach already outlined by Jennings, while maintaining a strong focus on environmental issues: “Urban bioethics, as we see it, is [a] branch of general bioethics devoted to (bio)ethical research and applications related to city, including health and medicine, but also going broader in terms of themes and topics (energy, natural resources, traffic, architecture, safety...)” [19, p. 243]. Rinčić’s research group ideally continues the work undertaken in an earlier project, *European Bioethics in Action*, which developed a list of bioethical standards intended as guidelines for policymakers. Their current aim is to produce bio-

ethical standards specifically designed for the urban dimension.

A comprehensive and articulated overview of this initiative, and of the theoretical framework underpinning it, is provided in a programmatic contribution by Iva Rinčić, Robert Doričić, Sun-yong Byun, Chan Kyu Lee, and Amir Muzur, entitled *From mere Urbanity to Urban Bioethical Standards: An Invitation to a Broadening of Bioethics* [38]. The article offers a preliminary historical reconstruction of the development of urban bioethics, showing how it forms part of a broader movement aimed at expanding traditional bioethics. This movement intersects, among other things, with a renewed interest in the urban dimension and a widening of the scope of inquiry along the lines of the “forgotten founders” of bioethics: Fritz Jahr and Van Rensselaer Potter. The authors note that, despite occasional references and the sporadic engagement of moral philosophy with urban issues, bioethics as a field has remained largely deaf to this call. Their review of the existing urban bioethical literature – covering both the North American and Latin American

debates – nonetheless highlights the limited global impact of these otherwise valuable contributions, which have remained relatively isolated.

One of the defining features of the authors' proposal lies in their effort to construct urban bioethics on the theoretical foundation provided by Jahr's bioethical imperative. According to this quasi-Kantian principle, every living being should be respected and, whenever possible, treated as an end in itself [22]. This foundation is appropriately updated with new theoretical elements and reconsidered in light of phenomena such as environmental crises, climate change, emerging digital technologies, and artificial intelligence – factors notably absent from the approaches previously discussed, yet exerting a decisive impact on the health and life of not only human beings but all living forms. Indeed, it is from Jahr's thought that this attention to all forms of life derives – an aspect that makes this strand of urban bioethics a more ecological and environmentalist version of the perspectives examined so far, with the possible exception of Blustein and Fleischman [7]. Following Jahr's original

theoretical framework, while also drawing substantially on Potter's ideas and his notion of global bioethics, Rinčić *et alii* develop a vision "directed towards an ethical approach to all living beings, and more broadly, to space in general (as opposed to narrow human interrelationships in medical and health issues)" [38, p. 153]. Their research, which – as already noted – builds on the earlier *European Bioethics in Action* project, aims to elaborate a set of urban bioethical standards serving as "directives for the optimal relationship between *homo urbanus* and their own health and the well-being of other forms of life" [38, p. 154]. In this sense, it seems legitimate to speak of a distinctly "European" version of urban bioethics – one defined not so much by cultural or geographical belonging as by its theoretical lineage, which traces back to the European founder of bioethics, Fritz Jahr.

Building on this foundation, the remaining contributions to the journal's monographic issue extend and deepen the discussion by exploring various aspects within the scope of urban bioethics. Focusing on case studies from different urban contexts [37, 43], these works

demonstrate the fruitfulness of the conceptual framework of "European" urban bioethics – one attentive to the living and health conditions of all forms of life, not solely human life. These contributions broaden the domains of inquiry rather than the theoretical construct of urban bioethics itself. For this reason, it is appropriate here to limit ourselves to a few brief observations on what appear to be the most promising lines of research, particularly in light of the most recent technological developments.

First, as highlighted by Michael Cheng-tek Tai in his article *The Future is Urban – An Urban Bioethics Perspective* [39], urban bioethics must incorporate the issue of sustainable urban development. Urban planning thus becomes a central concern, with urban bioethics assuming the dual task of providing both a philosophical foundation and a critical stimulus. As Tai notes, "for a bioethically viable urban city, some particular measures in regard to human wellbeing and the ecological balance must be considered in urban planning such as the issue of land availability, infrastructures of a new city, ecosystem, cultural, hygienic, and edu-

cational domains" [39, p. 165]. Given that urbanization is a global phenomenon expected to affect at least two-thirds of the world's population by the middle of this century, the proposal advanced by Hanna Hubenko in her contribution *Urban Bioethics: The Architect of a Healthy City* [40] is particularly compelling. Among other suggestions, Hubenko argues that urban bioethics should engage with the notion of "terraforming", introduced by the North American theorist Benjamin H. Bratton. This concept involves "transforming the planet to the condition acceptable for human habitation. Bratton believes that in the context of the coming climate catastrophe, only a planetary scale change can prolong our life on Earth as we know it" [40, p. 180]. The term terraforming is usually applied to planets such as Mars, which must be adapted for human habitation before potential colonization. Paradoxically, in light of the current environmental crisis, it is our own planet that now requires terraforming, and, as Hubenko implies, this process must begin with cities. Bratton's proposal thus elevates the issue of (urban) design to a planetary level, and its ulti-

mate aim – "to prolong our life on Earth as we know it" – resonates with Potter's original idea of bioethics as a science of survival. Moreover, remaining faithful to Jahr's bioethical imperative, urban environments must be reimagined not only to suit human needs but also to accommodate all forms of life that must coexist with humanity in a state of balance.

This brings us to a second crucial point. As Jeffrey K. H. Chan argues in *The Urban Ethics of an AI-Powered Planetary Urbanization* [42], the process of global urbanization is occurring in parallel with the emergence of artificial intelligence. Consequently, the development of urban bioethical principles capable of critically overseeing and interrogating this convergence – one with profound economic, environmental, and therefore political and social implications – has become an urgent necessity. Yet this concern extends beyond health and well-being. What is at stake is the very agency of the human being. As Chan observes, "if urbanization can shape people's well-being and capabilities, and if such capabilities can be further enhanced or constrained by AI-powered technologies, then

the convergence of AI-powered technologies and planetary urbanization presents an unprecedented window to advance, or conversely to diminish the human condition in significant ways" [42, p. 213]. Crucial in this regard is the issue of data and privacy. Data can generate disparities and new forms of power and control; at the same time, they can provide a basis for citizen empowerment and serve as a precise guide for policy interventions aimed at enhancing sustainability, reducing emissions, and ultimately contributing to the overall well-being of all forms of life inhabiting the urban environment. In this respect, one of the key tasks of urban bioethics is to regulate and ethically justify the collection and management of data [41, 44]. The complexity of this operation can only be briefly alluded to here, as it entails a potential shift in the foundation of morality – from modern individual self-sovereignty to a collective subject, such as the population, or even the environment itself.

## 5. Conclusion

This contribution has provided a preliminary overview of the origins and development

of the concept of urban bioethics. The idea first emerged in the United States – unsurprisingly, perhaps, in the context of New York City (“The City”, as it is often called). Its emergence was motivated by a general dissatisfaction with traditional bioethics’ excessive focus on clinical and laboratory settings. Attention to the social and economic determinants of health led scholars to recognize the urban environment as deserving of specific ethical consideration. This shift in focus prompted a reconsideration of the very theoretical premises of bioethics. It soon became evident that the typically individualistic and liberal framework of classical bioethics was inadequate for understanding and articulating the issues that characterize urban environments and the ethical dilemmas that arise within them. The main attempts to give urban bioethics a coherent theoretical form have drawn on conceptual tools from various traditions, including feminist thought, deliberative democracy, and the Christian ethics of responsibility. One of the most significant theoretical moves in this regard has been the politicization of urban bioethics. As discussed, this politicization

may take the form of grounding bioethics within democratic theory, resulting in what has been called civic bioethics. In the South American context, however, such politicization assumes a more radical and distinctive character. Here, it is indeed appropriate to speak of *Bioética urbana* to refer to Latin American theoretical production. In that context, urban bioethics emerges from an explicitly anti-capitalist critique, structured along Foucauldian lines of biopolitics, while also creatively reappropriating key elements of Potter’s foundational conception of bioethics. Finally, in the European context, urban bioethics has been theorized through a renewed engagement with Fritz Jahr’s thought and his bioethical imperative, systematically broadening its scope to encompass all forms of life.

These are broad research and dialogue contexts, marked by internal complexity and tension, which have nonetheless been tentatively distinguished here according to the theoretical features that most clearly set them apart. The intention is by no means to reduce them to a lowest common denominator, as this would risk distorting the

actual substance of these contributions. However, by way of conclusion, it is possible to identify some trajectories that these three “currents” share – currents which, it must be emphasized, are far from monolithic or internally coherent. Their distinctive identity is, and remains, the result of an interpretative abstraction. That said, certain common traits do emerge. Chief among them is a shared, vocal dissatisfaction with traditional bioethics and its individualistic-liberal framework. This is a defining feature of both North American and Latin American urban bioethics and appears to be the implicit premise in the European variant. This dissatisfaction constitutes the critical dimension of urban bioethics’ very *raison d'être*. The constructive dimension, which unites all these strands, lies in the attention paid to the urban condition – understood in an integrated and global sense, encompassing both environmental and socioeconomic factors. It is urban life itself that is brought under bioethical scrutiny; and, as noted, the object of inquiry inevitably acts back upon the observer, rendering the adoption or development of a new theoretical

framework a recurring theme across all the authors considered. From this perspective, an interesting feature is the recovery of the two “forgotten founders” of bioethics – Potter and Jahr – respectively in the Latin American and European contexts. Both figures remain largely absent from the North American discussion (except for the occasional reference to Potter in footnotes).

There are many possible lines of inquiry that could emerge from further research in this field. It is important to note that such investigations will necessarily need to be interdisciplinary – or even transdisciplinary, to adopt Sarmiento’s suggestion. Urban bioethics, whatever its theoretical framework, must engage with the social sciences, environmental sciences, urban health, urban planning, urban design, and architecture. One task that must therefore be addressed concerns the development of ways to operationalize

urban bioethics within an interdisciplinary context. It must also take into account digital technologies and artificial intelligence, which, as noted earlier, not only have environmental and socioeconomic impacts but also possess the capacity to shape both human behavior and the urban environment itself. In connection with this, urban bioethics seems well positioned to make a promising contribution to the ongoing debate linking urban health to spatial resilience and spatial justice [46]. These are topics that exceed the limited scope of the present discussion but that undoubtedly warrant further investigation. Here, it is only possible to gesture toward this necessity, articulating it in the form of an inevitably incomplete list.

I will conclude with one final observation from a philosophical standpoint, which is the perspective from which this overview has been written. As has been shown, urban

bioethics engages in a transformative dialogue with various disciplines. Perhaps its greatest risk lies in being wholly absorbed by each of them in turn, thereby losing its substance and distinctive identity. While it is true that urban bioethics must be transdisciplinary and function as a bridge – thus remaining faithful to Potter’s original vision – it must also preserve a certain internal coherence at the theoretical level, so that one can meaningfully speak of “urban bioethics” rather than seeing it dissolve into political theory, environmental ethics, public ethics, and so on. Urban bioethics must remain inseparable from the city – which is never an abstract entity, but always a specific city – and must become a meta-theory of local, urban wisdom. This, inevitably, exposes it to the risk of relativism. Avoiding that risk is, in all likelihood, the most pressing philosophical challenge facing urban bioethics today.

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