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LOOKING INTO THE KALEIDOSCOPE OF ACTIVISM: THE ENGAGEMENT OF CARE ETHICS AND GLOBAL BIOETHICS FOR A REFINED HEALTH SECURITY

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uring public health crises, the United States utilizes a statist approach for securing its population's health, which places state structures at the center of a (mainly economic) health security. The fairness of this approach relies on a distribution of resources to "trickle down" from institutions to individuals. Yet, "fairness," in this regard, is determined a priori, that is, without reference to specific individuals who are receiving resources of health. This ignores contextual needs that arise from the disproportionate damage that epidemics and pandemics have on vulnerable populations. A statist approach can make a more equitable impact on global society if it integrates care ethics into its distributive justice.

In this paper, I demonstrate how an ethic of care can substantiate health security. First, I show how an ethic of care can be engaged anywhere embodiment is recognizable—not just in the one-on-one setting of the clinical encounter—but in the (inter)national contexts through which public health crises have a full effect on. Second, I provide a methodology for state institutions to recognize the social embodiment necessary to engage an ethic of care in these contexts, specifically engaging the social embodiment that manifests through the social activism of vulnerable populations during public health crises. Third, I demonstrate how

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the social embodiment that activism lives through forces an encounter with state institutions, mimicking in this manner a clinical encounter on a macrocosmic scale. Finally, I assign an ethic of care to this encounter, meshing caring values to the criteria of distribution.