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Ethical Dilemma and Technology Misuse in Medical Fiction of Rebecca Skloot's *The Immortal Life of Henrietta Lacks*

Malak Salam Jubair *

Tikrit University/ College of Education for Women

malaksalam.jubair35@st.tu.edu.iq

&

Prof. Lamiaa Ahmed Rasheed(Ph.D.)

Tikrit University/ College of Education for Women

Lamia.ahmed62@tu.edu.iq

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ABSTRACT

The rapid advancement of medical technology has introduced new ethical quandaries that are increasingly explored within medical fiction. To explore these ethical misconducts and implications of technology misuse, the study selects the medical novel Rebecca Skloot's *The Immortal Life of Henrietta Lacks*. This study uses the Neutralization Theory of Sykes and Matza to examine the moral arguments and ethical conundrums raised in Rebecca Skloot's *The Immortal Life of Henrietta Lacks*. In that, the novel investigates how authors use the medium of fiction to not only highlight the profound ethical questions surrounding the development and application of new technologies but also to expose the fragility of the systems and individuals tasked with wielding such power. This selected medical narrative serves as cautionary tales that force readers to confront the moral and philosophical implications of technological progress in

* Corresponding Author: Malak Salam, Email: malaksalam.jubair35@st.tu.edu.iq

Affiliation: Tikrit University - Iraq

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the medical field, calling doctors to consider the delicate balance between scientific advancement and preserving human dignity, autonomy, and the sanctity of life.

Keywords: Ethical Dilemma, Medical Fiction, Rebecca Skloot's *The Immortal Life of Henrietta Lacks*, Neutralization Theory.

المأزق الأخلاقي وأسائه استخدام التكنولوجيا في الرواية الطبية للكاتبة ريبيكا سكلوت (الحياة الخالدة ل هنريته لاكس)

ملاك سلام جبير

كلية التربية للبنات | جامعة تكريت

و

إ.د. لمياء احمد رشيد

كلية التربية للبنات | جامعة تكريت

المستخلص

يشهد التقدم السريع في التكنولوجيا الطبية ظهور تساؤلات أخلاقية جديدة يتم استكشافها بشكل متزايد في الأدب الطبي. لاستكشاف هذه المخالفات الأخلاقية وتداعيات إساءة استخدام التكنولوجيا، يختار هذا البحث الرواية الطبية "الحياة الخالدة لهنريتا لاكس" لريبيكا سكلوت. يعتمد هذا البحث على نظرية التحييد لسايكز وماتزا لدراسة الحجج الأخلاقية والمعضلات التي تثيرها رواية "الحياة الخالدة لهنريتا لاكس". تستكشف الرواية كيف يستخدم المؤلفون الأدب كوسيلة لتسليط الضوء على الأسئلة الأخلاقية العميقة المحيطة بتطوير وتطبيق التقنيات الجديدة، وأيضًا لكشف هشاشة الأنظمة والأفراد المسؤولين عن استخدام هذه القوة. هذه الرواية الطبية المختارة تعمل كحكاية تحذيرية تجبر القراء على مواجهة التداعيات الأخلاقية والفلسفية للتقدم التكنولوجي في المجال الطبي، وتدعو الأطباء إلى التفكير في التوازن الدقيق بين التقدم العلمي والحفاظ على كرامة الإنسان واستقلالته وقديسية الحياة.

الكلمات الدالة: المعضلة الأخلاقية، الأدب الطبي، "الحياة الخالدة لهنريتا لاكس" لريبيكا سكلوت، نظرية التحييد.

1. INTRODUCTION: MEDICAL FICTION

Medical fiction is a fiction that revolves around the events at a hospital involving medical staff or any other medical setting. It is widely shared on television, particularly in medical dramas and novels. The portrayal of healthcare organizations and their personnel in literature is deemed significant because of its impact on the impression of actual

healthcare facilities and its potential contribution to medical education. The audience's ability to connect with the scenarios portrayed in medical fiction is enhanced by their personal or shared encounters with certain illnesses, medical establishments, and healthcare practitioners, hence playing a significant role in the genre's triumph. The history of medical fiction is a diverse and intricate fabric that combines the intensity of human health challenges with the innate storytelling elements found in literature. This genre has substantially evolved throughout the centuries, mirroring broader societal transformations, medical science improvements, and changing medical ethics and expertise standards. Considering the significance of healing and physical changes in literature, the origins of medical fiction can be traced back to ancient Greek civilization with the figure of Asclepius, the Greek deity associated with medicine. The development of medical storytelling from classical myths to modern medical plays and science fiction allows for exploring this connection. To comprehend this correlation, one must explore Asclepius's characteristics, his importance in Greek mythology, and the subsequent impact of these ancient ideas on the recurring motifs in medical literature over time (Hart, 1965).

In medical fiction, chaotic human behavior can emerge when characters face unpredictable ethical dilemmas or technological misuse. The chaotic people welcome disorder as a way to express themselves and challenge social conventions. They behave destructively and impulsively; they can be motivated by a desire to overthrow authority figures or upend existing systems (Rasheed, 2024).

Medical ethics studies the moral standards that direct medical professionals' behavior. In addition to patient duties, medical ethics also entails obligations to fellow medical professionals. The word "bioethics" distinguishes moral dilemmas resulting from contemporary advances in biology and medicine from conventional medical ethics. Ethics that are pertinent to the planning, funding, and provision of healthcare services are covered under health policy ethics (Bankowski, 1989). One of the problems that discusses ethics is the trolley problem.

Regarding a decision, the **trolley problem** is usually set between making and unmaking it. According to Gabriel Andrade (2019), The Trolley Problem was first discussed by Philippa Foot in 1967 as a way to test moral instincts concerning the policy of double effect, Kantian principles, and utilitarianism. The problem created by Philippa Foot; the problem proposes that a trolley is meant to run over five people who are in chains, tied to the tracks. The driver decides whether to run the five people or divert the train onto another track where only one person is tied down. Foot wondered whether or not the driver should divert the trolley (Andrade, 2019).

To decide to act for the common good is difficult, but as for the driver, it is, according to Foot, okay to kill one to save five, but what if the scenario changes and instead of a train driver, a more demanding profession that includes being merciful and responsible, is put to the test. The trolley problem paved the way to another dilemma called the transplant dilemma; five patients are suffering in desperate need of an organ transplant, and a healthy person who comes for his yearly checkup appears to be a perfect match for the five patients, if they do not get the transplant, they all die. What should the surgeon do, either to let the five patients die or kill the healthy patient (Humbyrd, 2021). According to Foot's opinion, killing one healthy patient to save the other five is, of course, wrong. Thus, according to the ideology of Foot, saving five tied-down people on

the railway is permitted, while saving the five dying patients is prohibited; this is because of duties. As Foot explained, there are negative and positive duties. Foot believes that negative duties are more significant than positive duties and should be prioritized in the event of a conflict. A positive duty is to assist the five patients during the transplant procedure. However, there is a stronger negative duty not to injure healthy individuals (Andrade, 2019). These problems and dilemmas are used consistently to determine ethical behavior when making a decision.

Physicians must adhere to specific ethical guidelines when it comes to medicine, but above all, they must recognize that their patients come first. Several guidelines help to identify moral opportunities and dilemmas. The doctor must respect personal autonomy, work to benefit and protect the patient's health, and equal distribution of health care. In keeping with technological advancement, doctors need to behave to benefit their patients and not misuse technology to benefit themselves. Every new invention, technique, technology, or product will carry some risk. In actuality, innovation cannot exist at all in the absence of risk. Sometimes, these risks are ignored by some doctors; worse, doctors can abuse technology and authority for their benefit or personal development, either by exploiting the patient's ignorance and moving along with the risky procedures depending on the technology or not using technology when it is needed.

According to Rita Charon (2000), the novel and the medical chart depict how people age and develop over time, discovering significance in the seemingly random events that occur in their lives. Medical professionals who reflect on their practice can benefit from the frameworks provided by literary critics who write about the book (Charon, 2000). This means that medical fiction existed to transfer what was written in the medical charts to stories and narratives with all the struggles and suffering and what the doctors had to face from dilemmas and risks concerning their patients. When interpreted this way, literature and medicine are concerned with articulating a medical understanding of prevailing attitudes regarding life and death conditioned by culture. Because the characters in these literary works reflect identifiable kinds in their society suffering from the same ailments, the audience finds them "realistic" (Rousseau, 1981). This means that while medical fiction presents a realistic picture of a sick person with a common or well-known ailment in a fictitious story, it also reflects real life, where people sometimes face mortality and where professionals occasionally put their health or the health of their patients at risk when practicing medicine. This made the genre necessary for people to hear, see, or read about people facing death or people who recover from certain illnesses and escape death, or just simply see what it is like to be a doctor in an intense environment that is usually far away from their imagination. Thus, such as stories that frequently focus on medical settings and the constraints, opportunities, and risks associated with medicine. Show characters navigating the challenges and obstacles in surgical procedures, virology, immunology, and other medical specialties. Protagonists are medical professionals who use their expertise to overcome a crisis or other complex issue.

The complex connection between fiction and medicine is diverse, functioning as both a reflection of medical practices and a driving force for future advancements. Fiction's significance in influencing, questioning, and broadening the boundaries of medical science cannot be underestimated. With its strong storytelling qualities, fiction remains crucial in shaping public opinions and moral principles. This demonstrates that

literature may be as impactful as medical advancements in promoting understanding and empathy in healthcare.

Regarding medical fiction, Mary Shelley's 1818 novel *Frankenstein* is the cornerstone, as it is considered the first work that combines science fiction and medical fiction. From 1871 to 1872, *Middlemarch* by George Eliot is about a doctor who faces troubles in his professional and personal life. Around 1925, Sinclair Lewis published his Pulitzer Prize-winning novel *Arrowsmith*, which revolves around a medical researcher who deals with ethical dilemmas in medical science. In 1937, A. J. Cronin wrote his novel *The Citadel*, about an idealistic doctor disillusioned by the medical establishment's corruption. Many authors wrote in the same genre in the following years, like Michael Crichton (1968), *A Case of Need*, and the 1969 novel *The Andromeda Strain*: Robin Cook's 1977 novel *Coma* and Samuel Shem's *The House of God* in 1978. The following works were scattered between 1985 and 1990, like John Irving's *The Cider House Rules* in 1985 and Arthur Hailey's 1984 novel *Strong Medicine*.

Further contributions to the genre include Erich Segal's *Doctors* (1988), Robin Cook's *Outbreak* (1987), Robin Cook's *Harmful Intent* (1990), and Robin Cook's *Terminal* (1993). Samuel Shem's 1997 novel, *Mount Misery*, which he wrote after his famous novel, *The House of God*, Noah Gordon's *The Physician* (1986), Abraham Verghese's *Cutting for Stone* (2009), Rebecca Skloot's *The Immortal Life of Henrietta Lacks* (2010), and Paul Kalanithi's *When Breath Becomes Air* (2016) represent later milestones in the genre.

Recent works have significantly contributed to the medical fiction genre by exploring diverse aspects of medicine, ethics, and history. Chloe Benjamin's *The Anatomy of Dreams*, published in 2014, delves into the ethical complexities of psychological research, where the lines between reality and experimentation are blurred. In the same year, Thomas Goetz wrote *The Remedy*, which shed light on the race to cure tuberculosis and the scientific rivalries that shaped modern medicine; it revisits historical medical challenges. In 2017, Meredith Wadman published her novel *The Vaccine Race*, which looked at the ethical debates concerning the creation of vaccines, especially those involving human fetal tissue, which are relevant to today's medical ethics discussions. Jonathan D. Quick's published non-fiction book, *The End of Epidemics* in 2018, discusses the threat posed by infectious illnesses worldwide, highlighting the need for readiness and moral obligation to stop pandemics in the future. Emma Donoghue's *The Pull of the Stars*, published in 2020, Taking place during the 1918 influenza pandemic, emphasizes the fortitude and difficulties encountered by medical professionals during emergencies, a concept that holds significant relevance in contemporary pandemics. In 2022, Lindsey Fitzharris published *Facemaker*. Its objectives were to retrace the history of facial reconstruction, honor Dr. Harold Gillies' groundbreaking work, and consider the moral and practical difficulties associated with reconstructive surgery. These works broaden the scope of medical fiction by examining the confluence of history, ethics, and the human experience within the medical field.

Rebecca Skloot's *The Immortal Life of Henrietta Lacks* (2010) is a work that involves medical settings or medical technology. In her book *The Immortal Life of Henrietta Lacks*, Rebecca Skloot detailed the background to the tragic tale of a young African American woman who was diagnosed with cancer and whose tissue cells were harvested in the name of science in order to create the first human cells that were

immortal. After Henrietta's death, her family's life bears witness to the grief. Samuel Shem wrote about his experiences as a doctor and the treatment of patients there in his novel. The book follows a group of interns over a year in the early 1970s and focuses on the psychological trauma and dehumanization brought on by their residency training.

Research problem

The study intends to investigate how particular ethical dilemmas and instances of technological misuse occur in both narratives and how these issues affect patients and medical practice. With an emphasis on the implications of tackling ethical challenges in the field, this research seeks to provide insights into the psychological mechanisms underlying ethical decision-making in medicine in Rebecca Skloot's *The Immortal Life of Henrietta Lacks* (2010).

Research aims

It seeks to explore the actions of medical professionals towards their patients under the lens of neutralization theory, which causes patients and their loved ones to suffer psychologically and physically through the Denial of unethical conduct by medical professionals. It also uncovers technological misuse for doctors' gain and how it is justified in Rebecca Skloot's *The Immortal Life of Henrietta Lacks*.

Research questions

1. What is the meaning of bioethics, and what are the implications of technology misuse?
2. What is neutralization theory, and how is it used in medical fiction?
3. How do the doctors or medical professionals neutralize their actions in Rebecca Skloot's *The Immortal Life of Henrietta Lacks*?

Literature Review

In an article entitled, "Can Mary Shelley's *Frankenstein* be read as an Early Research Ethics Text," published in 2004 by Hugh Davies, claims that *Frankenstein* offers insights that are just as relevant today as they were when the novel was written, making it an early and fair work on the ethics of research involving human subjects. An article entitled "The novel *Arrowsmith*, Paul de Kruif (1890–1971) and Jacques Loeb (1859–1924): a literary portrait of "medical science" published in 2006 depicts the many ways that medical science is portrayed. In 2008, Ross Mckibbin published his article, "Politics and the Medical Hero: A.J. Cronin's *The Citadel* Get." It seeks to explain *The Citadel*'s extraordinary Appeal within the political milieu of the 1930s. It offers theories as to why Cronin failed, at least twice, to replicate that kind of success as a medical-political fiction. An article entitled "A Novel Approach to Public Health Crises Using Narrative Ethics" by Susan E. Zinner in 2022 aims to investigate several public health issues using the novels *The Stand* by Stephen King and *The Andromeda Strain* by Michael Crichton. In 2022, Aysheh Shawawreh and Baker Bani-Khair published their article entitled "Medical Ethics and Women's Role in Robin Cook's *Coma* and *Fatal Cure*," which highlights the part played by women in the medical field as well as the obstacles they must face to overcome these difficulties. In a 2023 article titled "Nurses, mothers, sisters: Relational Resilience and Healing Vulnerability in Emma Donoghue's *The Wonder* and *The Pull of the Stars*," MIRIAM BORHAM-PUYAL, The author challenges the individualistic understanding of vulnerability that was previously

discussed and examines how vulnerability, when viewed as a relational feature, might promote greater resilience.

The constantly changing field of medical literature has made it possible to explore the darker aspects of healthcare by focusing on the junction of ethical challenges and technical abuse. Regarding Rebecca Skloot's *The Immortal Life of Henrietta Lacks*, few literary studies are available. An article titled *The Immortal Life of Henrietta Lacks Reconsidered*, published in 2014 by Vanessa Northington Gamble, aimed to criticize how African Americans have been portrayed historically in medicine and bioethics, emphasizing the book's narrow focus on themes of victimization, exploitation, and helplessness. Another article written by Christian Dimaano and Clarence Spigner, published in 2017, entitled *Teaching from The Immortal Life of Henrietta Lacks: Student Perspectives on Health Disparities and Medical Ethics* proposed that *The Immortal Life of Henrietta Lacks* is valued for its potential as a valuable teaching resource and for its ability to help students in an academic setting comprehend morality, ethics, and reasoning around social and health disparities. In this study, researchers investigate the potential effects of incorporating Skloot's biography in graduate students' classroom instruction on their attitudes toward medical ethics, health care, and the social determinants of health.

A study by Susan Flynn published in 2018 titled *Medical Gazing and the Oprah Effect in The Immortal Life of Henrietta Lacks (2017)* seeks to examine the ways that movies can draw attention to systemic injustices, spur political action, and stand up for the rights of underrepresented communities. It explored how the 2017 movie "*The Immortal Life of Henrietta Lacks*" portrays racial surveillance and its success as a racial narrative, with particular attention to Oprah Winfrey's role as co-producer and star. In this chapter, it is questioned if the "Oprah effect" fosters institutional and political opposition to medical inequality or whether the movie reinforces social inequality and racist medical monitoring as legitimate aspects of life. Due to the lack of previous studies on neutralization theory, this work is considered the first to apply neutralization theory to fiction, which could serve as a doorway to other ambitious academics who might be interested in the effect of neutralization theory when it comes to fiction.

2. Theoretical Framework: Theory of Neutralization

Sykes and Matza's Neutralization Theory builds on Sutherland's *Differential Association Theory*. According to Sutherland, people pick up criminal conduct through social encounters, where they not only pick up the means of committing crimes but also the justifications for them. Throughout this learning process, people are exposed to views that either condone or condemn criminal activity, and the balance of these attitudes ultimately determines whether or not a person will commit crimes. Generally, neutralization theory is vital to explain juvenile delinquent behavior and as a measurable element of the "self-concept" factors, which are a central part of Reckless' containment theory. Neutralization theory occupies a middle-of-the-road position theoretically.

To begin with, neutralization is a critical element in the decision-making process of a juvenile considering engaging in delinquent behavior. It refers to the juvenile's capacity to rationalize or justify the moral disapproval typically linked to the act. Multiple forms of neutralization exist. Feelings of unfairness may catalyze their existence. However, neutralization is crucial in connecting emotional states with delinquent behavior. These neutralizations serve as explanations for engaging in delinquent behavior and rationalizations for engaging in delinquent behavior beforehand

(Shoemaker, 2010). This divergence presents a significant methodological concern since it undermines the credibility of criminals' testimonies on their involvement in criminal activities. Gresham Sykes and Matza (1957) focus on the rationales behind delinquency and put out five categories of *techniques of neutralization*.

First, *Denial of responsibility* refers to when a juvenile refuses to take personal responsibility for their actions and instead blames external factors such as having bad parents or living in poverty. This Denial reduces the effectiveness of self or societal disapproval as a deterrent against deviant behavior, as stated by Sykes and Matza in 1957. The second significant neutralization approach is *denial injury*, which focuses on the pain or damage caused by the delinquent behavior. Criminal law has long distinguished between crimes that are 'mala in se and mala prohibita,' that is, between acts that are wrong and illegal but not immoral. The delinquent can make the same kind of distinction when evaluating the wrongfulness of his behavior. The technique of neutralization, known as the Denial of injury, does not involve a direct debate. Instead, Sykes and Matza argue that delinquents often have a vague belief that their behavior does not cause significant harm, even though it goes against the law (Sykes & Matza, 1957). Third, *Denial of a Victim* refers to a technique of neutralization where the delinquent, despite acknowledging their responsibility for their deviant actions and recognizing that these actions cause harm or injury, manages to neutralize their own and others' moral outrage by arguing that the damage inflicted is justified given the circumstances. This refers to situations when the damage inflicted against someone is justified because the individual is perceived to have earned it, for instance, when stealing from a business owner who is considered dishonest. The offender's Denial of the victim's existence disregards the moral and legal wrongdoing of their illegal actions in the specific circumstances in which they occurred.

The fourth technique is the *Condemnation of Condemners*, which refers to the tendency to view others who disapprove of one's actions as hypocrites and secret wrongdoers. This perspective can sometimes lead to a cynical attitude towards authority figures like police and school officials. In this mindset, the person who has engaged in deviant behavior deflects attention away from their actions and instead focuses on criticizing the motives and behavior of those who disapprove of their actions, "the delinquent shifts the focus of attention from his own deviant acts to the motives and behavior of those who disapprove of his violations" (Sykes & Matza, 1957, p. 668). He may argue that those who denounce him are hypocrites, individuals pretending to be someone they are not, or driven by personal animosity. The fifth technique is *the Appeal to higher loyalties*, which is the last way to neutralize internal and external social restrictions by prioritizing the needs of smaller social groupings, such as sibling pairs, gangs, or friendship cliques, over the demands of the wider community. However, this means that the group's immediate needs are considered more important than the values and rules of the family, community, or society.

3. Ethical Reflections and Justifications for Autonomy Violation in *The Immortal Life of Henrietta Lacks*

The word neutralization is a mask that hides the truth so that the ugly would appear ordinary and sometimes necessary. This theory describes how society's standards can be broken regularly, allowing otherwise law-abiding juveniles to do so (Norris, 1976). Gresham M. Sykes David Matza (1957) explains that laws are flexible; they can

bend and reshape. The laws during wartime, the moral injunction against killing does not apply to the enemy, but a captured enemy is still prohibited. Similarly, taking and distributing scarce goods during acute social need is considered ethical, while private property is protected in other situations. If people can find a good or reasonable intent for their lacking criminal behavior, they can avoid any repercussions, thus avoiding negative societal sanctions. Sykes and Matza argue:

We argue that much delinquency is based on what is essentially an unrecognized extension of defenses to crimes in the form of justifications for deviance that are seen as valid by the delinquent but not by the legal system or society at large. (p. 666)

In their given definition of neutralization, Gresham M. Sykes and David Matza (1957) explain that:

We call these justifications of deviant behavior techniques of neutralization. It is by learning these techniques that the juvenile becomes delinquent, rather than by learning moral imperatives, values, or attitudes standing in direct contradiction to those of the dominant society. (p. 667)

They argue that juveniles can employ neutralization strategies to excuse their deviant behavior, but can doctors or medical professionals utilize these techniques? The answer can be debated and varies from one case to another. However, in Henrietta Lacks's case, the doctors can be said to have neutralized their wrongdoings by showing the bright side of harvesting Henrietta Lacks's cancer cells from surgically removed tissue. In the novel, *During Henrietta's operation to treat her cancer with radium, Dr. Lawrence Wharton Jr. looked inside, dilated her cervix, and planned to treat her tumor. However, before he did so, he first took some tissue from Henrietta's cervix:*

Though no one had told Henrietta that TeLinde was collecting samples or asked if she wanted to be a donor—Wharton picked up a sharp knife and shaved two dime-sized pieces of tissue from Henrietta's cervix: one from her tumor, and one from the healthy cervical tissue nearby. (Skloot, 2010, p.28)

The trust people give to doctors should be faced with truth and reliability, and taking responsibility is a requirement of the doctors' profession. Medical practice is based on sincerity towards the patient and not hurting the patient intentionally. Health workers must respect patient's rights, namely the right to be protected in terms of health services, as part of their sense of responsibility and as a manifestation of these two main behaviors.

The first technique written by Sykes and Matza is the Denial of responsibility, which states that people are supposed to be held responsible for a deviant act; if they justify their lack of responsibility, they become neutralizers. When taking her cells, the doctors' charge to remove her cells removal was not disclosed, and no one said anything about the source of the cells; they even named her cells using only her two first and last initials, Henrietta Lacks "HeLa." To justify this doing, it is assumed that it has to be done for the ordinary goodness of people since it would treat many patients sickened with carcinoma. Even if not directly addressing their violation, society was overjoyed with what her cells could do, and they would never object to using her cells to cure other people. However, the doctors, according to Laurie T. Baulig (2010), did not only use her cells intentionally without consent but also released her name and medical records to third parties without her or her family's permission. Such behavior would be against two federal laws that protect patients' rights to privacy about their medical records and other

personal information and their right to informed consent. The Federal Policy for Protection of Human Research Subjects is one of these statutes. Another thing that was hidden from Lacks is the fact that the doctors did not inform her that the radiation treatment would make her infertile and would prevent her from having any babies in the future. Even at Hopkins, it was a standard protocol to warn patients of the risk of the treatment, "Warning patients about fertility loss before cancer treatment was standard practice at Hopkins and something Howard Jones says he and TeLinde did with every patient" (Skloot 2010, p. 38).

Having all that test done to anyone with no prior and proper consent, at least should be acknowledged that all their experiment brought some injuries. As stated by Sykes and Matza (1957), Denial of injury, a second major technique of neutralization centers on the injury or harm involved in the delinquent act. For the delinquent, however, wrongfulness may turn on the question of whether or not his deviance has clearly hurt anyone, and this matter is open to a variety of interpretations.

We are arguing that the delinquent frequently feels that his behavior does not really cause any great harm despite the fact that it runs counter to the law. Just as the link between the individual and his acts may be broken by the Denial of responsibility, so may the link between acts and their consequences be broken by the Denial of injury. (pp. 667-668)

The doctors of Hopkins Hospital, especially the ones in charge of Lacks's cells unconsented extraction, only focused on the good side of her story when they published the research that led to the discovery of her cells; they did not mention anything about the actual state of Lacks's nor what she felt like during her illness; they removed any human factor of the equation and instead told people that her cells are good and even excellent. Focusing on only the positive side of her story means denying what she has gone through, how she and her family were violated in the name of science and progression, and how her medical records were released to the public and third parties for scientific developments.

It appears that the doctors at Hopkins have committed a lot of unethical actions when it comes to Henrietta Lacks, including not only harvesting her cells intentionally without her knowledge and disclosing confidential information to third parties but also following her autopsy, which, according to Day was not correctly written in a document. It represents a grey area that some jurisdictions accept and some do not; either way, doctors need to be respectful of the deceased family and respect their wishes. For Hopkins doctors, they cold-heartedly called Day at home, informed him that his wife was dead, and asked if they could perform an autopsy, which is the most straightforward way, a way that puts no consideration for giving the deceased family a time to decide. The doctors of Hopkins Hospital violated and exploited Lacks and her family, and more harmfully, they seem to deny their victimhood, considering that it is not an injury; it is more like a discovery and that the victim is not a victim rather a famous human being that their family should be proud of and celebrated, as informed by Sykes and Matza (1957) even if the delinquent admit that he harmed, it is possible to offset moral outrage toward oneself and other people by insisting that The damage is justified in light of the circumstances.

The world learned about Henrietta Lacks and her family's accurate tale for the first time when Mike Rogers' Rolling Stone piece debuted on newsstands on March 25, 1976.

It was also the first time that a black woman was the face of HeLa when there had been much speculation that a white woman was behind HeLa

Doctors must follow regulations and laws regarding how they practice their profession and interact with their patients. In the United States, several laws and regulations are in place to protect patient information's privacy and confidentiality. One of the primary laws governing this area is the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule, which was created to control seeking treatment, receiving care, and providing payment for medical conditions and ailments. Congress enacted the Health Insurance Portability and Accountability Act in 1996. The HIPAA Privacy Rule is an effort to protect data that has made its way to the public domain. The purpose of the Privacy Rules is to give effect to a person's right to privacy concerning personal health information (McKinstry, 2018). According to this rule, patients, as an entity, should not have any of their medical information published. When it comes to Henrietta Lacks's case, they did not only publish her name but also her medical records in all her carcinoma stages. Henrietta's family wanted to know the specifics of her death and how she was back then. A book about Walter Nelson-Rees's battle to stop HeLa contamination was released in 1985 by a university publisher and written by Michael Gold, a reporter for *Science* 85 magazine. The book was named "A Conspiracy of Cells: The Immortal Legacy of One Woman and the Medical Scandal It Caused." Deborah got a copy of the book, and she remembers how she found her mother's picture on the book cover and how the book mentions horrific details about her illness:

The dead woman's arms had been pulled up and back so that the pathologist could get at her chest ... the body had been split down the middle and opened wide ... greyish white tumor globules ... filled the corpse. It looked as if the inside of the body was studded with pearls. Strings of them ran over the surfaces of the liver, diaphragm, intestine, appendix, rectum, and heart. Thick clusters were heaped on top of the ovaries and fallopian tubes. The bladder area was the worst, covered by a solid mass of cancerous tissue. (Skloot, 2010, p. 151)

Gold was not prohibited from publishing any medical information given by a source (Johns Hopkins Hospital) because the Health Insurance Portability and Accountability Act (HIPAA) was not in the eighties. While there was no law at that time that dictates that patient privacy should be protected or published by a reporter, doing so, however, without getting in touch with the subject's family to find out more, confirm details, and tell them that such personal information was going public might have been viewed as a questionable decision.

When Skloot asked Gold where he had got Henrietta's records and information, he said that he made long calls with Victor McKusick and Howard Jones, but when Skloot asked John and McKusick, they both denied the fact they had ever given these records to Gold, while Gold on the other hand claim doing so. He also claims that he had contacted the Lacks family; he said that he could not get hold of their phone numbers, "I think I wrote some letters and made some calls, but the addresses and phone numbers never seemed to be current. And to be honest, the family wasn't really my focus " (p.154). Three types of neutralization are current here; from the doctor's perspective, it seems farfetched that the medical records could be obtained without the doctors' knowledge, but as a neutralization technique, they denied the responsibility of handing

them, basically saying that the records had been mysteriously given to Gold, while Gold on the other hand, which might have been telling the truth or the complete opposite of it, he denies the injury that he caused, claiming that when he published the book, the family was not his primary focus, "to be honest, the family wasn't really my focus. ... I just thought they might make some interesting color for the scientific story" (p.154). Denying their right to know and publishing private material about their mother without hesitation, defending his actions, claiming that he had not paid attention to the family, he was free to write anything he wanted, and he had contacted them to spice up the narrative. In summary, Gold adamantly denied any wrongdoing and denied that Henrietta and her family were victims by painfully disclosing her medical records. As a result, the family suffered, and Deborah had trauma from reading Gold's book.

Theories developed one by one, from different researchers and scientists, that HeLa cells were not even human anymore and that they should not be named after Henrietta because there is no human component in them; they mutated over the years since their DNA is no longer genetically identical to Henrietta. Doctor Stevenson, who worked on the HeLa's contamination problem, laughed when he heard this argument; according to Skloot, he explains that "Scientists don't like to think of HeLa cells as being little bits of Henrietta because it's much easier to do science when you disassociate your materials from the people they come from" (Skloot, 2010, p.158). Later on, Roland Pattillo, a scientist and postdoctoral fellow in George Gey's lab, asked John Hopkins to contribute in the form of an article recording his memories of diagnosing Henrietta's tumor. Jones wrote that it was the worst time for the Lacks family but the best time for science, "Scientific progress and indeed progress of all kinds is often made at great cost, such as the sacrifice made by Henrietta Lacks " (p. 161). Stealing her cells, back then, was interpreted as a donation, but now it is seen as a sacrifice, to justify their wrongdoings, John decides to put on a political move and address what they have done with Henrietta as a sacrifice of her part for science and its progression, which by neutralizing terms means Denial of injury and responsibility.

In their fourth neutralization technique, Sykes and Matza (1957) argue that sometimes delinquents shift the blame pointed to them by focusing on the intentions of those who blamed them and what are their motives or intentions, claiming they are deviant, hypocritical, and spiteful; this technique is called condemning the condemners. While Johns Hopkins Hospital, where Henrietta Lacks was treated, did not publicly condemn the Lacks family for their intentions, they addressed their claims that John Hopkins Hospital has not stolen their mother's cells without consent. A sociologist at Morgan State University named Barbara Wyche wrote to Johns Hopkins that Henrietta is "local heroin." She answered a number of questions in her three-page letter to John Hopkins. The first one concerned the likelihood that consent was obtained from the "donor" or her family for the "mass" or the "use" of HeLa globally, as well as for the commercial, production, distribution, and marketing of Mrs. Lacks ' cells. Second, Whether or not researchers, academics, government employees, and other individuals have behaved morally in these two domains or in their dealings with the family and other social issues concerning the fact that Mrs. Lacks was a black African American woman. John replied that the hospital did not gain any money from HeLa

; in keeping with traditions of academic research at the time, the cultures were shared freely, without compensation, and in good faith with scientists around the

world who requested them... As I'm sure we both know, many standards of practice in academic medicine have changed dramatically in recent years, and I hope and trust that there is increased sensitivity to, and awareness of, the wishes and interests of patients when they seek medical care or participate in research. (Skloot, 2010, p. 165)

Focusing on the periods when there was no need for approval for any medical experiments is saying that the Lacks family back then and now has no right to object since it was a standard practice to take cells or tissue from people before the privacy rule (HIPAA), arguing that they were following established practices within the medical community and that any criticism directed towards them was unwarranted and illogical.

The last principle and technique in neutralization is the Appeal to higher loyalties, which states that sacrifices are necessary in a dilemma or situation an individual is in or wants to solve. However, for it to be solved, laws must be violated:

Sacrificing the demands of the larger society for the demands of the smaller social groups to which the delinquent belongs, such as the sibling pair, the gang, or the friendship clique (Sykes & Matza, 1957, p.669)

Even though the doctors were not obligated by any law prohibiting them from taking any cell or tissue at that time, it was unethical to do so. The doctors saw it as a sacrifice necessary to be made, especially for medical progression. However, doctors kept Henrietta Lacks's name a secret not for fear of her privacy because if privacy was the aim, their family would have been entitled to know everything about their mother. Instead, Henrietta Lacks's cells were distributed among scientists, shipped, mailed, and flown to other cities and countries, and kept secret because they feared her family if they happened to know what they had done with their mother and how her autonomy was violated. Rebecca Skloot's *The Immortal Life of Henrietta Lacks* is categorized within the medical genre because of its emphasis on HeLa cells and their significance for medical science and its examination of significant ethical problems like informed consent and patient exploitation. Skloot skillfully incorporates a thorough historical background of medical procedures into the story, particularly as they relate to African American patients. The book thoroughly analyzes how medical progress and ethical issues meet by fusing science, history, and personal accounts.

Conclusions

When it comes to Rebecca Skloot's *The Immortal Life of Henrietta Lacks*, the paper analyzes the doctor's justification and deems them as tactical maneuvers of explicit use of neutralization techniques. First, the doctors denied that what they did was wrong. Instead, it was justified as going with the flow of medical norms and systematic medical practices. Thus denying their responsibility for their actions. The doctors also denied her injury and the hurt caused to Henrietta and her family, focusing instead on the type of medical advancement that resulted from their unethical actions. Third, the doctors denied her injury as well, explaining that it was not illegal to take her cells, which, even though it was not wholly illegal, was unethical, especially after giving conditional secret medical information to third parties and using her cells without her family's knowledge. As more and more people reached out to the Hamartia family, one of them was a lawyer who claimed to have a hugely advantageous arrangement with Hopkins Hospital to recover the money owed to them. However, the lawyer was dishonest and attempted to blackmail the

family by threatening to sue them if they did not respond to his request, so they denied him access to their mother's medical records. Using the fourth neutralizing strategy in this case, the attorney blames the Lacks family for preventing him from seeing their mother's medical records and condemns them for their reaction to his twisted ways.

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