

compromise the independence of an academic medical center with a large portfolio of government research grants and contracts? Probably not, but for individual investigators it could create a dependence on tobacco money, especially when other sources of funding become scarce. Is there *relevant* harm associated with Phillip Morris' continued marketing of tobacco products? The evidence for future harm seems incontrovertible in our view. Will the recipient of the funds be *identified* with the funder so that Phillip Morris might derive a public relations benefit from its support of university-based scientists? And could the scientists eventually be exposed to reputational risk if their names were associated with Phillip Morris? Our answer is yes to both questions. Finally, is the nature of the *link* between recipient and donor direct or indirect? In this case it is indirect, so it may not involve a major conflict of interest, and there are no limitations on publication imposed by the funder. To the extent that such a PERIL analysis could be used to raise personal and organizational awareness of moral jeopardy, it may enhance an individual's capacity to reach an informed judgment about the pursuit of funding from the tobacco industry. Even if an institution is too timid to take a stand, a thorough PERIL analysis may at least warn away individual investigators whose reputations, if not their science, may be influenced by association with a company such as Phillip Morris.

Much of the discussion of moral jeopardy focuses on individual and societal considerations. Institutional considerations and appropriate institutional responses are often a missing element, as illustrated in the above case. Even if a PERIL analysis proves to be unconvincing to an institutional research committee, where there may be a conflict of interest it could work in a more appropriate and sympathetic forum, such as an Institutional Ethics Committee, which often serves as the moral conscience of the entire institution. In conclusion, a moral jeopardy analysis along the lines recommended by Adams may be helpful in combating the perils of the slippery slope argument.

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## ETHICS OF AN UNREGULATED ALCOHOL MARKET

It is a complex world as far as the alcohol market is concerned. There are very regulated markets in most of the developed countries and an extremely unregulated market in the developing countries. In a regulated market population drinking patterns are stable, there is no significant growth in alcohol consumption and there is a tradition of alcohol policies focused on examining market characteristics and structure. In addition, a significant number of professionals and policy makers are involved in actions directed at controlling alcohol consumption and problems. On the other hand, unregulated markets expand almost continuously, sometimes, as in Brazil, around 10% each year [1]. Drinking patterns are changing all the time, and there are only a few isolated efforts from professionals or policy makers to understand the market's structure. The ethical dilemmas experienced by researchers and professionals living under these two different types of markets are different.

Adams' paper [2] is both informative and up to date in what concerns the current relationship between researchers and the alcohol industry in regulated markets. Being part of an unregulated market, Brazil's laws and enforcement are either lacking or feeble. Moreover, Brazil is a significant and promising target to the alcohol industry. Our population is young, virtually half the population abstains from alcohol (so there is room for growth) and alcohol is widely available—there are 1 million points of sale of alcohol in the country [1, 3]. Additionally, there is a widespread cultural belief among Brazilians that we are a relaxed people, by temperament not very fond of rules or prohibitions. Even a basic alcohol policy such as the prohibition of sales to minors is not enforced. This lack of policy enforcement makes Brazil and other countries with unregulated alcohol markets vulnerable to the interests of the alcohol industry.

However, and this is where Adams' paper [2] is important, there seems to be a growing concern in Brazilian society about the link between alcohol consumption and the public's health. For instance, the national press seems to be more attentive, and several sectors of the society have been joining forces to support restrictions on alcohol advertising (<http://www.propagandasembemida.org.br>). In recent years many bills have been proposed that recommend further restrictions in alcohol advertising. At the local level, cities have been developing and implementing regulations on limiting hours of sale for alcoholic beverages, based on the success achieved by the

city of Diadema, São Paulo, in reducing homicide rates [4].

Inevitably, the alcohol industry in Brazil has responded with a series of counteractions. Besides strengthening its close relationship with a number of national politicians (Folha de S. Paulo, Brasil, 20 November 2006), the industry has also begun recruiting alcohol researchers into its ranks by donating funds to an apparently independent university-based non-governmental organization (NGO) with the objective of 'being a source of information on the binomial alcohol and health' [5]. This last fact has posed a number of issues regarding the question raised by Adams [2].

In a country where, by far, the leading force developing alcohol policies is the alcohol industry, how does the continuum framework of moral jeopardy apply? Should there be negative repercussions, when the Health Ministry includes university-based researchers funded openly by the alcohol industry at national-level discussions of alcohol policies? Is it problematic that an addiction researcher funded by the alcohol industry works in projects sponsored by the World Health Organization in Brazil? What does this say about the real possibilities of developing effective alcohol public policies to reduce the high level of alcohol problems in Brazil? We believe that these facts cannot be overlooked and dismissed. The development of a national alcohol policy in Brazil, and perhaps in other unregulated markets, requires a strong position against the alcohol industry and its attempts to co-opt sectors of society and even some university-based researchers: without such a focus, a movement towards reducing alcohol problems in an unregulated market will not be taken seriously. In fact, we fear that any attempts to develop a concerted set of alcohol policies will be manipulated, fragmented and then disregarded by those not interested in regulating alcohol and changing the present scenario.

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### TRUSTING RESEARCHERS TO POLICE THEMSELVES?

I am grateful to *Addiction* for the opportunity to respond to the five commentaries [1–5] on my paper [6]. While my intention was to provide a helpful guide to all public good organizations [such as health non-governmental organizations (NGOs), community charities, etc.], the commentators have chosen to focus primarily on the extent to which these issues influence researchers and research organizations.

Researchers are arguably a special case. If we apply the PERIL analysis to researchers in the public good domain, the two subcontinuums alone cast immediate doubt on the wisdom of accepting any such funding: in terms of 'purpose' researchers have a critical role in generating the knowledge base that guides responses to harm, and this could easily be compromised by a direct or even a perceived connection with industry funding. In terms of extent of 'relevant harm', it is hard to imagine where the potential benefits from consumptions such as tobacco, alcohol and gambling might outweigh their production of harm. Similar already elevated levels of moral jeopardy apply to them with the other three subcontinuums. Accordingly, research institutions would be wise to adopt a default policy position of refusing all direct funding from dangerous consumption industries and permit only deviations following a well-defined and documented procedure of justification.

Thomas Babor [1] provided an excellent illustration by assessing the risks associated with an academic medical centre accepting support from Phillip Morris. His analysis highlighted why it is important in an institutional context to establish organized procedures for assessing moral jeopardy. For the academic specializing in the dangerous consumption arena the risks may already be apparent, but for colleagues who have had only episodic involvements (as in epidemiology, pharmacology and primary health), and for those in broader administrative roles, they are less likely to have had opportunities to develop an appreciation of these processes. Consequently, specialists