

# Alex B. Neitzke

Department of Philosophy  
Adelphi University  
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**Areas of Specialization:** Health Care Ethics, Social and Political Philosophy

**Areas of Competence:** Moral Philosophy, Applied Ethics, Feminist Philosophy, Critical Theory

## ACADEMIC POSITIONS

### Assistant Professor, Tenure Track

Adelphi University, Department of Philosophy, 2017-present

## EDUCATION

### Ph.D., Philosophy

Michigan State University, 2017

Dissertation Title: Health Care Capital: An Account of Health Care Production as a Critique of Health Care Ethics

Committee: Leonard Fleck (Chair), Christian Lotz, Todd Hedrick, Jamie Nelson

### B.A. in Philosophy, Bioethics minor, *cum laude*

Loyola University Chicago, 2011

## PUBLICATIONS

### Peer-Reviewed Articles:

“An Illness of Power: Gender and the Social Causes of Depression,” *Culture, Medicine, and Psychiatry* 40, no. 1 (2016): 59-73. doi: 10.1007/s11013-015-9466-3.

“On the Genetic Modification of Psychology, Personality, and Behavior,” *Kennedy Institute of Ethics Journal* 22, no. 4 (2012): 307-343.

“Globalizing Research Ethics: Justice and Biomedical Research in Developing Countries,” *Perspectives On Global Development and Technology* 11, no. 1 (2012): 145-153. doi: 10.1163/156914912X620798.

### Reviews and Short Pieces:

“On the Transformative Powers of Feminism,” A review of *The Feminist Transformation of Bioethics: An Analysis of Theoretical Perspectives and Practical Applications in Feminist Bioethics*, by Eeva Nyrövaara. Dissertationreviews.org (2014).

<http://dissertationreviews.org/archives/7499>

“Bringing a Critical Structural Frame to Person-Centered Care,” *American Journal of Bioethics* 13, no. 8 (2013): 57-58. doi: 10.1080/15265161.2013.802072.

## **PRESENTATIONS**

“Alienation and the Historical Narrative of Bioethics,” American Society for Bioethics and Humanities Annual Conference, Kansas City, MO, October 22, 2017

“Health Care Capital and the Commodity Question for Health Care in the United States,” American Society for Bioethics and Humanities Annual Conference, Washington, DC, October 7, 2016

“Graduate Student Teaching in Flux,” with Mark Balawender, Mladjo Ivanovic, and Anna Malavisi, Teaching Philosophy in the Michigan Area, Eastern Michigan University, Ypsilanti, MI, September 25, 2016

“Marxian Theory and the Commodity Question for Health Care in the United States,” Conference of the Western Michigan University Medical Humanities Workgroup, Western Michigan University, Kalamazoo, MI, September 25, 2015

“Some Cautions for Human Rights Arguments,” Canadian Bioethics Society Annual Conference, Winnipeg, Manitoba, Canada, May 29, 2015

“An Illness of Power: Depression, Gender, and Women,” Conference of the Western Michigan University Medical Humanities Workgroup, Western Michigan University, Kalamazoo, MI, September 26, 2013

“A Feminist Examination of Depression and Psychiatric Disorder,” Canadian Bioethics Society Conference, Banff, Alberta, Canada, May 30, 2013; also presented at EDGES Interdisciplinary Conference of the College of Arts and Letters, Michigan State University, East Lansing, MI, March 23, 2012

“Standpoint and Class Consciousness as a Philosophy of Praxis,” Philosophy Graduate Student Association Conference, University of Memphis, Memphis, TN, April 6, 2013

“Reorienting a Discourse: Selection, Disability, and Ethics,” EDGES Interdisciplinary Conference of the College of Arts and Letters, Michigan State University, East Lansing, MI, March 29, 2013

“Specialization (Generally Speaking): Ethics and Specialization in the American Medical Profession,” Conference of the Western Michigan University Medical Humanities Workgroup, Western Michigan University, Kalamazoo, MI, September 27, 2012

“Globalizing Research Ethics,” Global Studies Association North American Conference, Loyola University Chicago, Chicago, IL, May 22, 2011; also presented at the National Undergraduate Bioethics Conference, Duke University, Durham, NC, March 19, 2011

## **TEACHING EXPERIENCE**

### **Adelphi University:**

#### UPPER DIVISION COURSES

Bioethics, fall 2017

#### LOWER DIVISION COURSES

Ethics and Morality, fall 2017

Introduction to Philosophy, fall 2017

### **Michigan State University:**

#### **Instructor**

#### UPPER DIVISION COURSES

Ethical Issues in Health Care, spring 2017

Ethical Issues in Health Care, summer 2015

Ethical Issues in Health Care, summer 2013

#### OTHER COURSES

American Language and Culture reverse study abroad program, summer 2013 and 2014

#### **Teaching Assistant**

#### UPPER DIVISION COURSES

Philosophy of Law, spring 2015 (grader)

#### LOWER DIVISION COURSES

Introduction to Logic and Reasoning, spring 2016 (grader)

Integrative Studies in the Arts and Humanities

Ultimate Reality and Meaning of Life, fall 2016 (grader)

Ideas of Race and Identity, fall 2014 (discussion sections)

Ethical Dilemmas in Government Decision Making, spring 2014 (discussion sections)

Capitalism and Globalization, fall 2013 (grader)

Self, Society, and Technology, fall 2012 (discussion sections)

Self, Society, and Technology, spring 2012 (discussion sections)

Ultimate Reality and Meaning of Life, fall 2011 (grader)

## **PROFESSIONAL ACTIVITIES AND SERVICE**

Volunteer judge for Michigan High School Ethics Bowl, University of Michigan, Ann Arbor, MI, January 29, 2017

Participant in American Association of Philosophy Teachers (AAPT) Workshop: Teaching & Learning in Philosophy (led by David W. Concepción, Alida Liberman, W. John Koolage, and Adam Thompson), University of Michigan, Ann Arbor, MI, January 21, 2017

Comments on Beth Hupfer, "Global Distributive Justice: Coercion, Cooperation, and Structures," Michigan State University Graduate Student Philosophy Conference, 2016

Comments on Lorena De Frias, “Foucault and the Civilized Body: Techniques of Discipline and the Boarding School Era,” Michigan State University Graduate Student Philosophy Conference, 2015

Co-organizer (one of three) of Michigan State University Graduate Student Philosophy Conference, Spring 2014

Health care practicum with Ingham County Health Department and Michigan Public Health Institute, supervised by Ann Mongoven, Michigan State University, 2013-2014

Member of Graduate Committee, Michigan State University Philosophy Department, 2013-2014

Member of Academic Environment Committee, Michigan State University Philosophy Department, 2012-2013

Comments on Yi Deng, “Active World Citizenship for Kant’s Cosmopolitan Right,” Michigan State University Graduate Student Philosophy Conference, 2012

### **HONORS AND AWARDS**

American Society for Bioethics and Humanities Student Paper Award 2<sup>nd</sup> place winner, 2016  
Paper Title: “Health Care Capital and the Commodity Question for Health Care in the United States”

Departmental Honors in Philosophy, Loyola University Chicago, 2011  
Thesis Title: “On the Genetic Modification of Personality and Behavior”

Outstanding Senior in Philosophy Award, Loyola University Chicago, 2011

### **LANGUAGES**

**German.** Five years of study total, including two semesters of advanced college courses. Can read, write, and speak German at an intermediate level.

### **LIST OF GRADUATE COURSES**

All courses listed were taken at Michigan State University with instructors in parenthesis.

#### **Ethics and Philosophy of Health Care**

Seminar in Philosophy of Health Care: Disability, 2012 (Fred Gifford)

Seminar in Medical Anthropology, 2012 (Linda Hunt, Department of Anthropology)

Seminar in Philosophy of Health Care: Gender, Death, and Enhancement, 2013 (Jamie Nelson)

Practicum in Philosophy of Health Care: Moral Practices of Community Health Workers, 2013-2014 (supervised by Ann Mongoven)

Seminar in Philosophy of Health Care: Justice and Health Care Policy, 2014 (Leonard Fleck) †

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† Audited course

**Ethics**

Feminist Ethics and Epistemology (on transcript as “Independent Study”), 2011 (Hilde Lindemann)

Proseminar in Philosophy: Wittgensteinian Philosophy and Ethics, 2011 (Jamie Nelson)

**Social and Political Philosophy**

Seminar in Social and Political Philosophy: Advanced Survey of Critical Theory, 2012 (Todd Hedrick)

Seminar in Value Theory: Environmental Justice, 2012 (Kyle Whyte)

Seminar in Social and Political Philosophy: *Capital* Volume One, 2012 (Christian Lotz)<sup>†</sup>

Seminar in Social and Political Philosophy: Feminism, Political Theory, and Methodology, 2013 (Lisa Schwartzman)

Seminar in Social and Political Philosophy: Philosophical Conversations About Rights, 2013 (Kyle Whyte)

Seminar in Continental Philosophy: Foucault (and Marx), 2016 (Christian Lotz)<sup>†</sup>

**Logic, Epistemology, and Philosophy of Science**

Seminar in Philosophy of Science: Evidence and the Environment, 2011 (Daniel Steele)

Seminar in Epistemology: Philosophical Investigations into Testimony, 2012 (Kristie Dotson)

Seminar in Continental Philosophy: Phenomenology of Husserl and Levinas, 2012 (Christian Lotz)

Logic and its Metatheory, 2013 (Matthew McKeon)

**Professionalization**

Seminar in Teaching Philosophy, 2013 (Emily Katz)

**History of Philosophy**

Seminar in History of Philosophy: Plato’s Dialogues on Friendship and Erotic Love, 2013 (Debra Nails)

**REFERENCES****Leonard Fleck**

*Professor*

Center for Ethics and Humanities in the Life Sciences

Michigan State University

**Christian Lotz**

*Professor*

Department of Philosophy

Michigan State University

**Jamie Nelson**

*Professor*

Department of Philosophy

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<sup>†</sup> Audited course

Michigan State University

**Todd Hedrick**

*Associate Professor*

Department of Philosophy

Michigan State University

**Hilde Lindemann**

*Professor Emeritus*

Department of Philosophy

Michigan State University

**Sean A. Valles**

*Associate Professor*

Lyman Briggs College

Michigan State University

My dissertation is foremost a critique of traditional normative approaches to health care ethics. I argue that many health care ethicists presuppose an idealized conceptual schema where moral values, justifications, or principles are the primary driving force in health care practices and thus should be the primary focus for normative consideration. On the contrary, social and economic structures shape and constrain health care practices and in many instances undermine or preclude attempts to alter practices by altering moral justifications or normative stances.

In my dissertation I argue that accounting for the functions of capitalist social structures in health care helps reveal the ways that individual concepts, moral dilemmas, or actions are *mediated* by their relations to those social and economic structures. Examining social practices and the actual functions of profit-driven health care production is necessary for health care ethics because those social functions help constitute moral concepts and practices. Marxian social theory contributes to addressing this problem in that it accounts for the role of social relations in determining conceptual categories and related practices. By accounting for the social relations and economic practices that produce health care, health care ethicists can theorize from a better starting point and offer better normative argument for social change.

The first chapter details and defends my overall methodology and critique of what I call “idealized moral frameworks” in health care ethics, arguing that an explanatory model of social relational structures is a necessary contextual grounding for stronger, more informed moral and political theorizing. The chapter grapples with the role of symbolic discourse in influencing social, political, and economic changes to deeply rooted structures. The chapter also situates my project amid existing literature—pulling together three intersecting authors in Seyla Benhabib, Iris Marion Young, and Charles W. Mills—and contrasting my methods with generally liberal contemporary thinkers. In this chapter especially, I draw connections between a Marxian approach and other critical theories like feminism, critical race, and disability.

The second chapter analyzes the concept of the commodity as it relates to health care ethics. Many authors, including Edmund Pellegrino, address whether health care *is* a commodity by considering its moral properties and whether it *ought* to be one. Yet health care’s commodity status should be determined by whether current health care interactions fit the commodity form, and thus how they fit into a larger system of social relations. I argue that health care functions as a commodity in the United States in that it is subject to the value form through ideational and actual exchange. Further, health care fits the commodity form in that it functions as a vehicle for the production of surplus value and profit—despite the fact that the earnest motivating ethos of individual practitioners and regulators is likely health promotion.

In the third chapter I turn to medical labor and its relation to profit production. Health care ethicists tend to depict physicians and medical practitioners in a largely separate sphere from ordinary economic, “market,” or “commercial” relations. I claim that such depictions interfere with considering medical labor as a part of the process of economic production as a whole. I explicate Marx’s account of labor and value-production in order to explain how capitalist production creates value and surplus value by manipulating labor power, time, and wages. I contend that health care and medical labor contributes to the overall process of production through these same mechanisms. Even though the content of a physician’s interactions with patients can be characterized by its special moral character, physicians stand in a set of economic relations that are increasingly productive and should be accounted for in ethics.

In the fourth and final chapter, I return to frameworks constructed in the first in order to offer more explicit directions in translating my project into health care ethics. I argue for the

politicization of health care and its framing in health care ethics. Instances where an agent like a physician or patient is limited by social and economic structures can be understood to be instances of a variety of political disempowerment. I call to construct political identities around diverse health care experiences that make clear in each instance how care is subordinated to productivity. This becomes a radical politics (intended in a positive sense) by connecting widespread experiences of dissatisfaction and disempowerment in relation to health and health care with broader mechanisms of capitalism and oppression. These identities, then, become a basis for political organization—potentially aligning with other movements against sexism, racism, and ableism as they interact with health and biomedicine.