

# Introduction to Practical Ethics for Public Health

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for Healthy Public Policy



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sur les politiques publiques et la santé  
National Collaborating Centre  
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# National Collaborating Centre for Healthy Public Policy (NCCHPP)

## Our mandate

- Support public health actors in their efforts to promote healthy public policies

## Our areas of expertise

- The effects of public policies on health
- Generating and using knowledge about policies
- Intersectoral actors and mechanisms
- Strategies to influence policy making



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# Just checking in....

How familiar are you with public health ethics?

**Not much**


**Somewhat  
familiar**

**Expert**



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# What we would like to discuss this morning

- What is public health (PH) ethics?
- Does PH ethics matter?
- How does it work? How can we get started?



# 'Typical' case

10 infected patients (5 adults, 5 children)  
2 infected adults are care workers (volunteers)  
10 doses of antiviral available  
Adults need 2 doses, children 1 dose

do

→ Descriptive ethics

should

→ Normative ethics

What  you do?

- 1 dose to everyone?
- 1 dose to each child,  
2 doses to 2 adults?
- Lottery?
- Most disadvantaged first?
- Care workers first?

(strict egalitarianism)

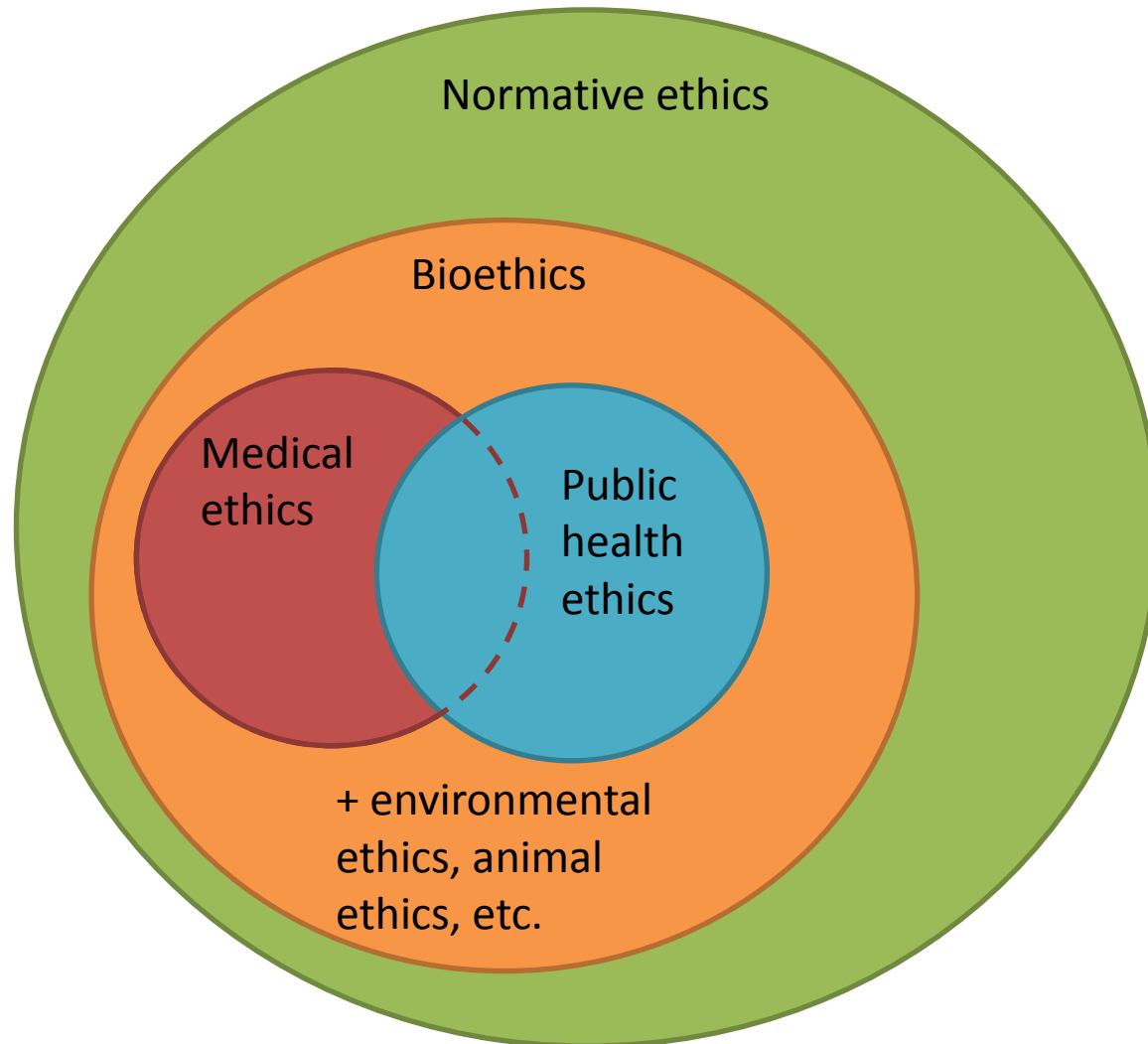
(utilitarianism)

(fair opportunity)

(social justice)

(social utility)

# What is public health ethics?

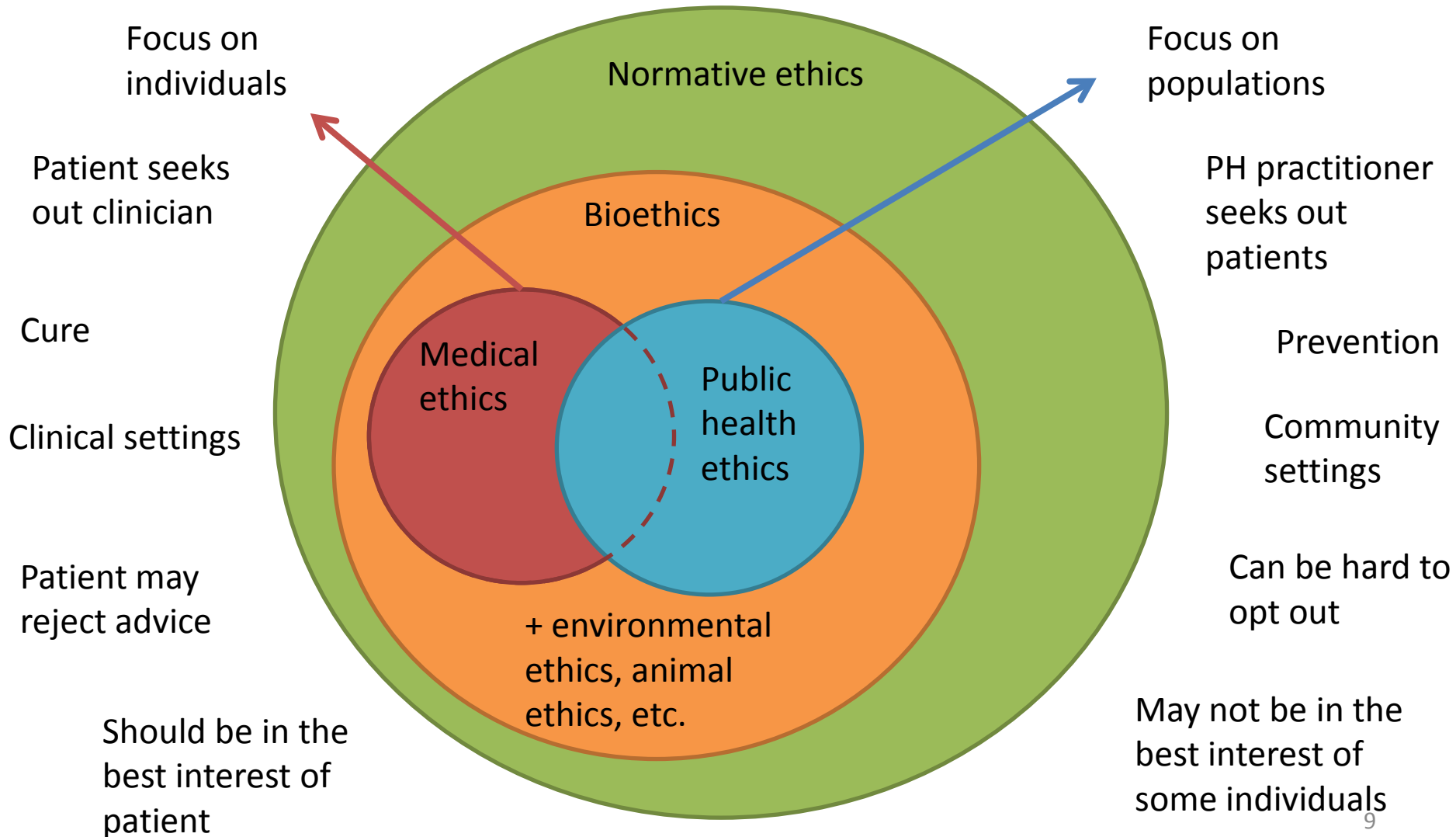


# Other public health cases

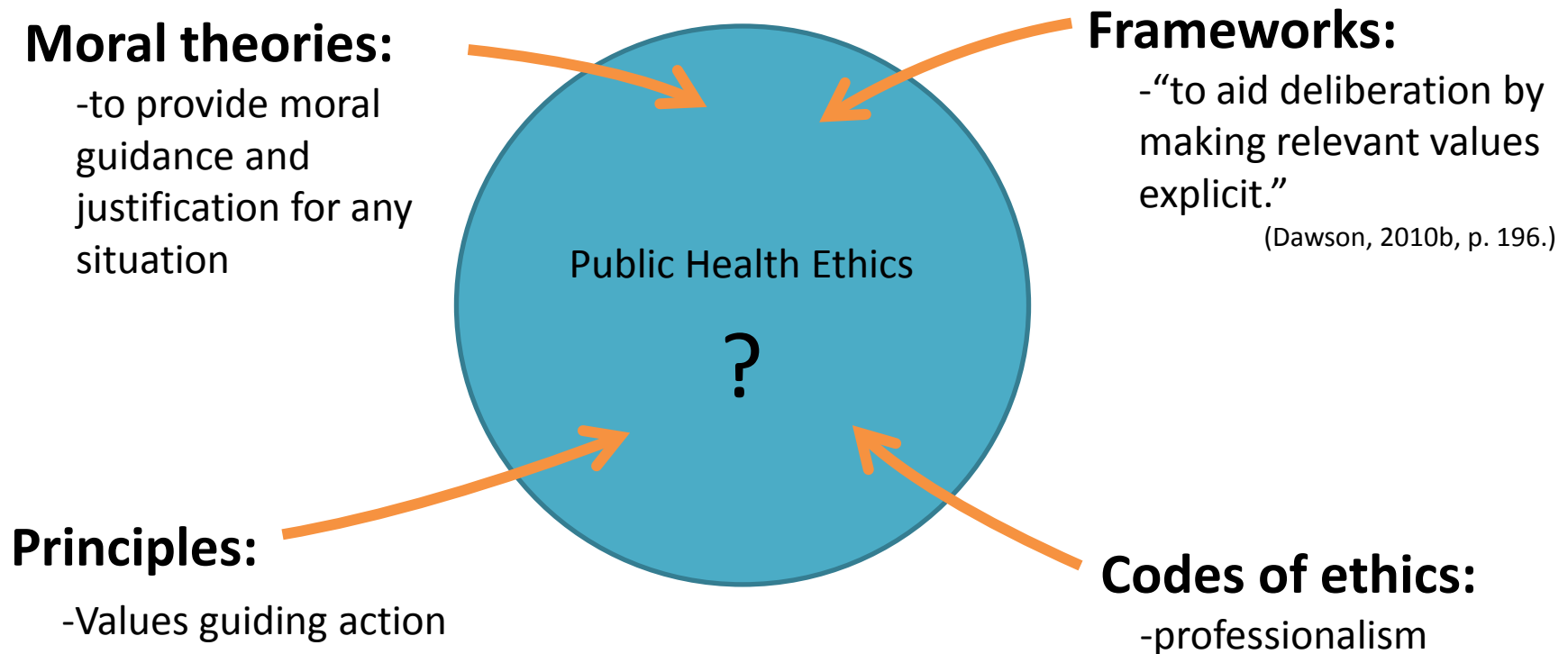
- Water fluoridation
- Smoking ban
- Traffic-calming policy
- Affordable housing
- Menu labelling
- Soda tax
- HPV vaccination
- ...



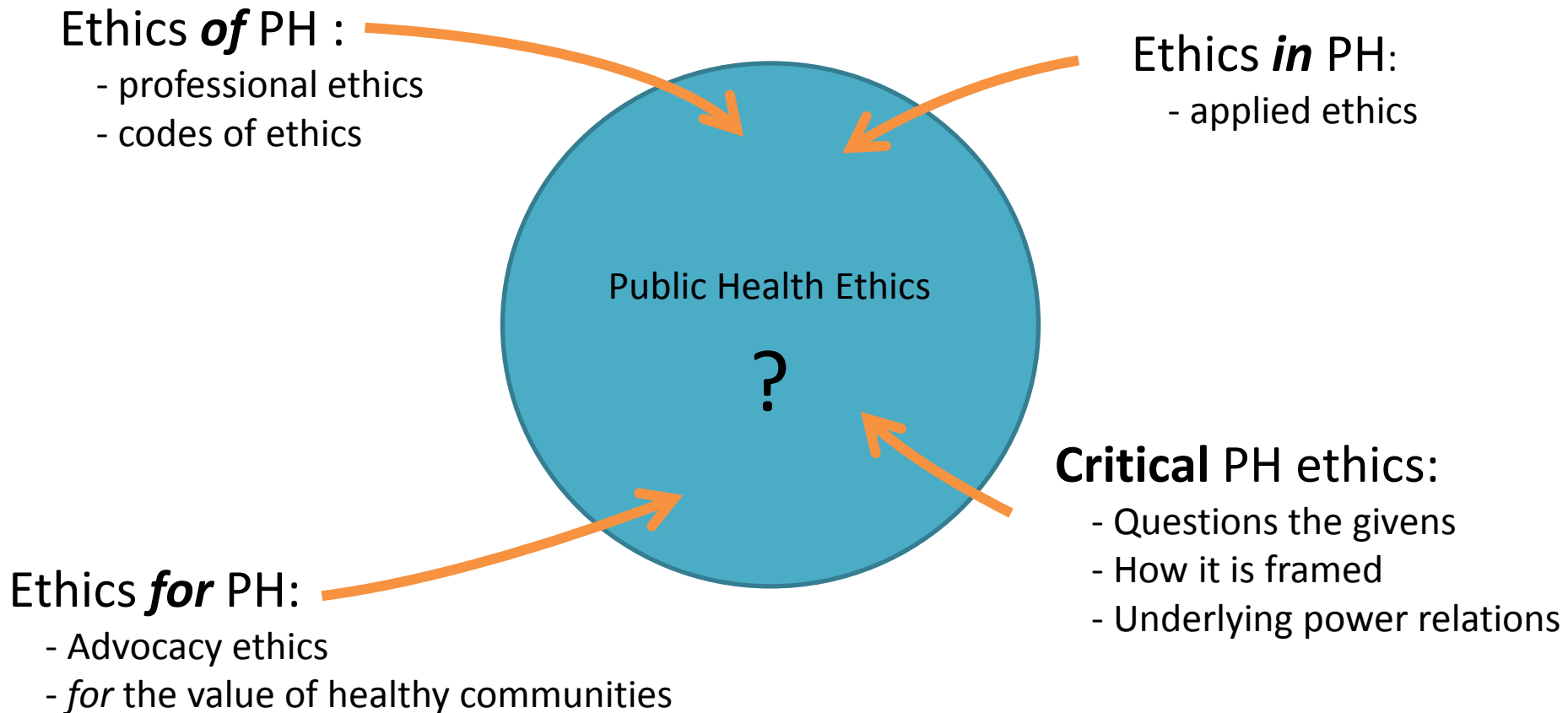
# Medical ethics vs public health ethics



# Mapping public health ethics (1)



# Mapping public health ethics (2)



# Ethics in PH vs. critical PH ethics

10 infected patients (5 adults, 5 children)  
2 infected adults are care workers (volunteers)  
10 doses of antiviral available  
Adults need 2 doses, children 1 dose

## Ethics in PH

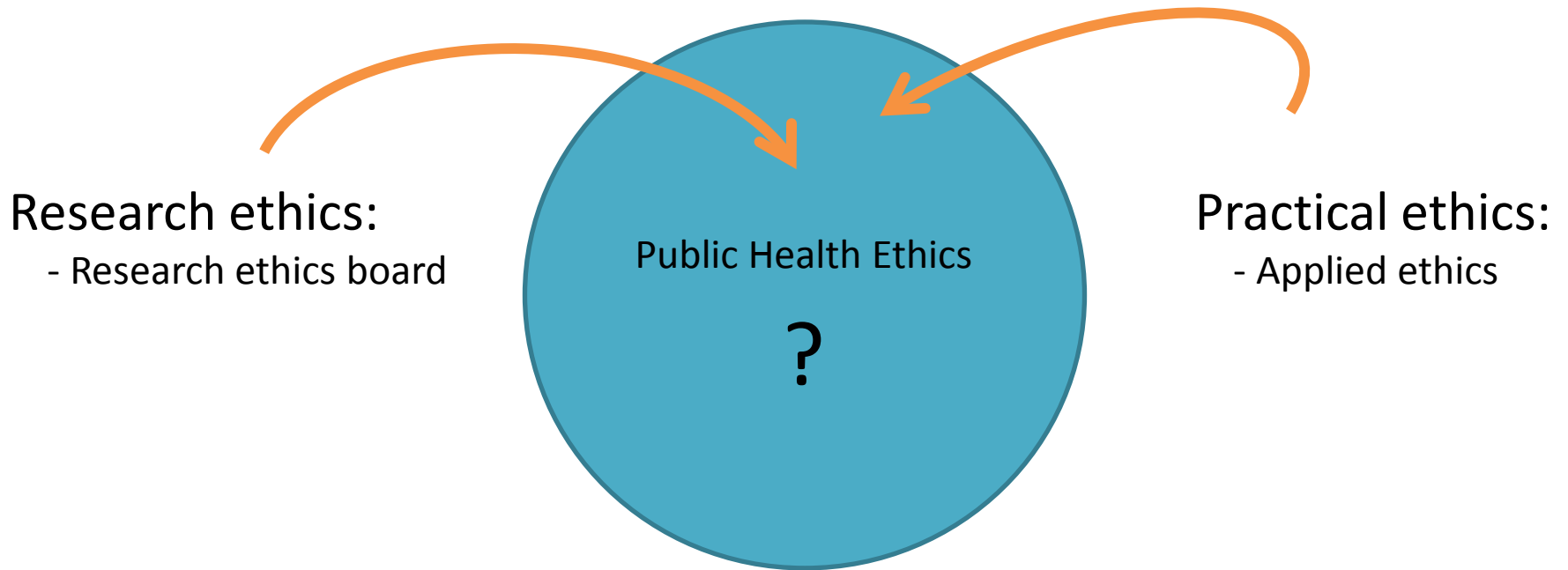
What should you do?

- 1 dose to everyone?
- 1 dose to each child, 2 doses to 2 adults?
- Lottery?
- Most disadvantaged first?
- Care workers first?

## Critical PH ethics

- Why do I have only 10 doses of an experimental antiviral after 38 years of Ebola?
- What social structures produced this situation?
- Would this situation be treated differently if it were in North America?

# Mapping public health ethics (3)



# What is public health ethics?

PH ethics is mostly about what **should** and **shouldn't** be done

- **collectively**
- to protect and promote the health of **communities.**



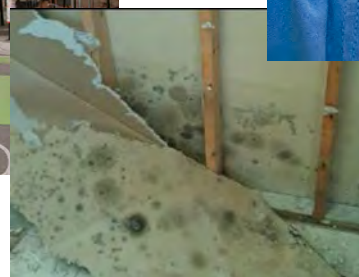
'New Big Hill Playground #1' Photo credit: OldOnliner. Image cropped. Flickr.com



'Dunsmuir Separated Bike Lanes 175' Photo credit: Paul Krueger. Flickr.com



'Flu Shot' Photo credit: WFIU Public Radio. Flickr.com



'mold-testing-water-damage-inspection-mold-removal-sarasota-fl-5' Photo credit: Darryl Snyder. Flickr.com

Next... Why PH ethics?

# Why PH ethics?

10 infected patients (5 adults, 5 children)  
2 infected adults are care workers (volunteers)  
10 doses of antiviral available  
Adults need 2 doses, children 1 dose

## What do you do?

- 1 dose to everyone?
- 1 dose to each child, 2 doses to 2 adults?
- Lottery?
- Most disadvantaged first?
- Care workers first?

**Does it matter?**

**If yes, then PH ethics matters.**

# Why PH ethics?

PH practice is sufficiently different from clinical practice to require its own ethics...

...in order to help:

- **See ethical issues**
- **Deliberate about options**
- **Make decisions**
- **Justify them**



# Questions, comments... ?



Next... How does it work?

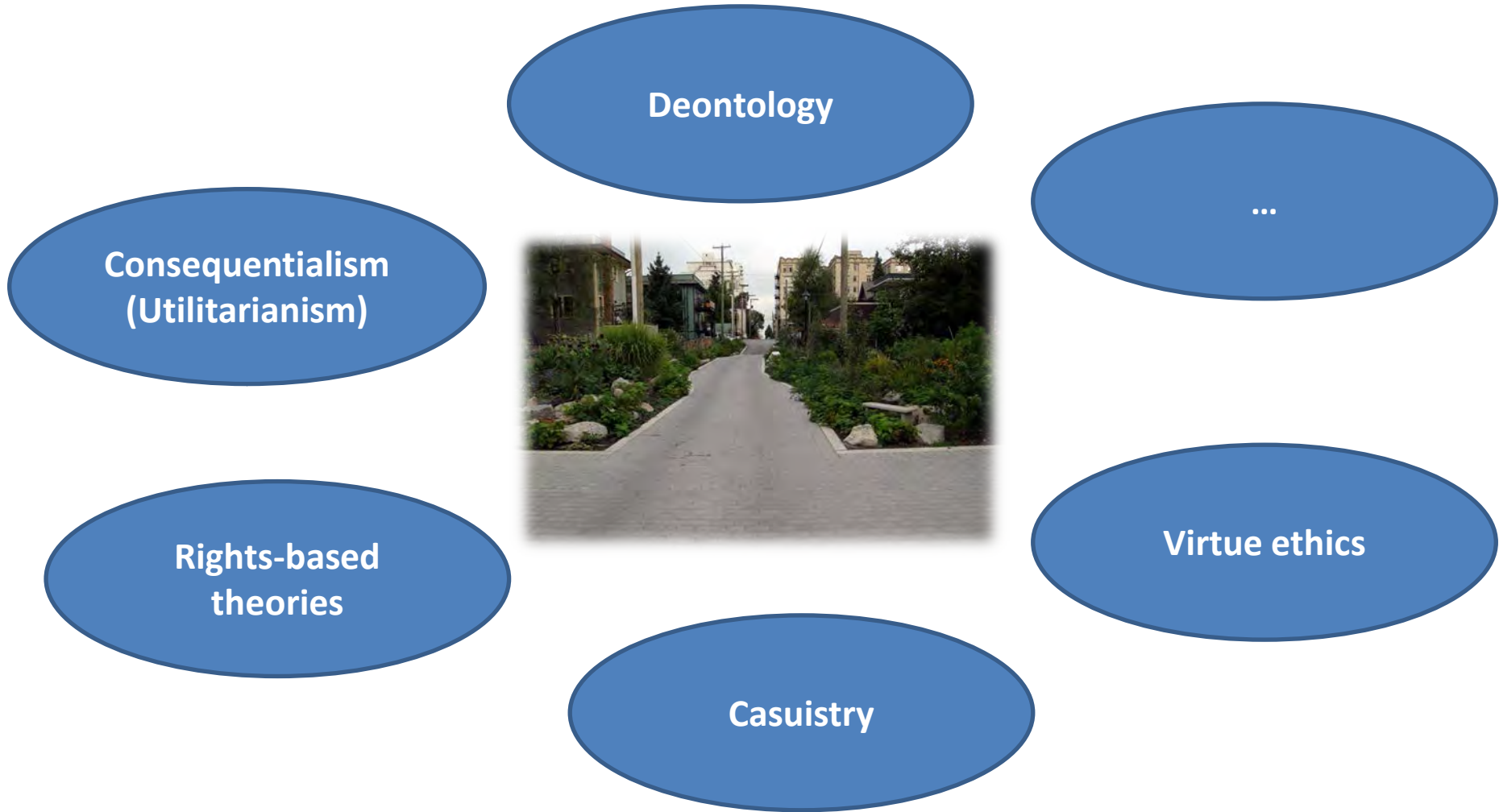
# How does it work?

## Case study: Neighbourhood-wide traffic-calming

After public consultations and recommendations from public health, the city of Wideroads has decided to implement a neighbourhood-wide traffic-calming scheme to slow motorized traffic on residential streets and redirect through traffic to arterial roads. There is significant opposition from outside of the neighbourhood, especially from drivers who are afraid their daily commute will take longer. A few neighbourhood residents are against the project, with opposition coming mostly from those living along arterial roads.



# What can ethical theories tell us?



# Utilitarianism

Do that which produces the greatest good for the greatest number of people

- It is consequentialist – i.e., more focused on outcomes (ends), less focused on the means by which they are achieved
- Good equals maximizing happiness / utility / health (e.g., DALYs/QALYs)

“Traffic calming measures [... are] crucial to decreasing the entirely preventable toll of road injuries. [...] With an overburdened healthcare system and the high economic and human toll of road injuries, we should take advantage of tested measures for safer streets.”

# Utilitarianism applied to our traffic-calming case...

+

- Less collision-related injuries
- More walking and cycling with associated health benefits
- Etc.

-

- Small increase in travel time for commuters
- More noise for the residents of arterials
- Etc.



# Deontology

Never treat people “simply as a means, but always at the same time as an end” - Kant

- Deontological approaches focus more on the means than the ends.... deon = ‘duty’
- Despite various roots and theories, a family of approaches based on following rules, duties, respecting rights and other persons.

“Some of those [who gave people ‘what we know they need’ ] [...] were decent people trying to do good. But I prefer people who want to just leave me alone and not social engineer my life in the direction they think I need.”

# Deontology applied to our traffic-calming case...



– Shouldn't the right to live in a safe environment trump the pleasure of/the time lost by commuters?

– Shouldn't the minority living along arterial roads have more of a say on what will happen to their local environment?



# One problem with ethical theories...

- ...is that it is difficult to cover every case and every intuition we have with one unified theory.
- The result is that there are many theories to choose from, each with its strengths and weaknesses which are revealed by specific cases.
- And their strengths cannot be combined in ONE coherent theory (2,500 years and counting...).

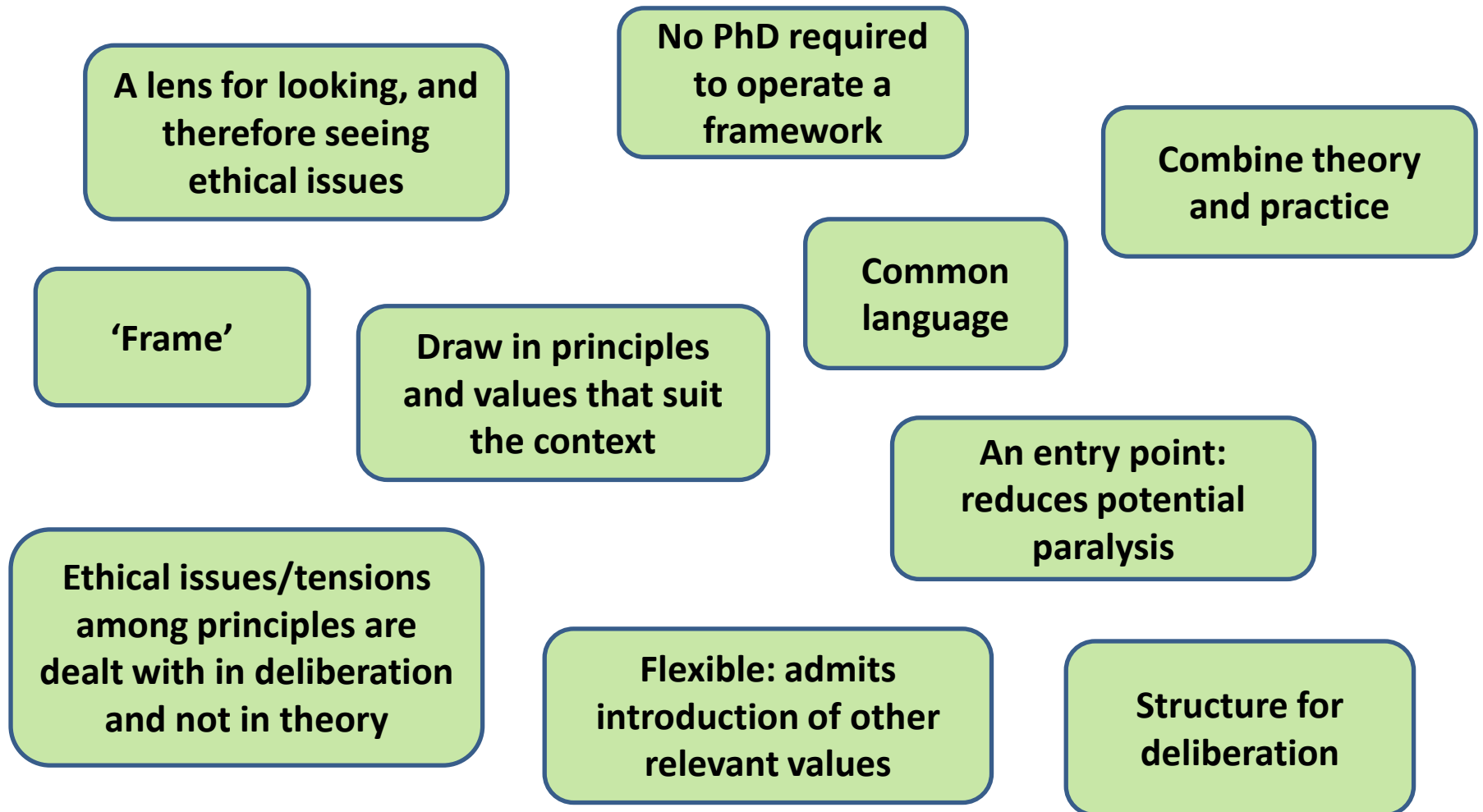


# Principle-based approaches

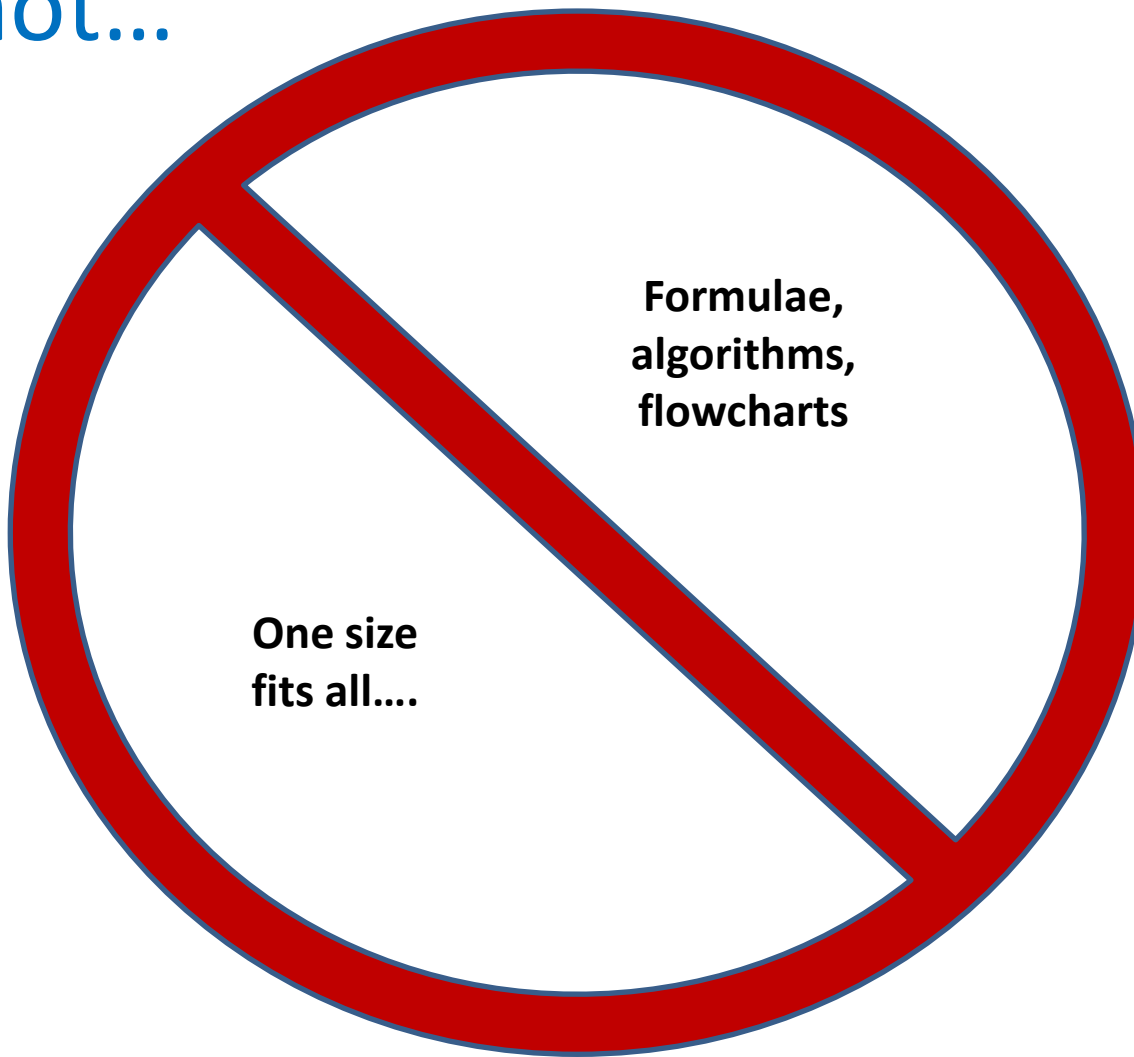
They provide a selection of values and principles, and a means of putting them into application

- A well-known example: Beauchamp and Childress' four principles, a.k.a. 'principlism.'
    - autonomy
    - beneficence
    - non-maleficence
    - justice
- Medical ethics: focus on individuals**
- In public health: **frameworks**

# Frameworks for public health ethics: some positive features



# Frameworks are not...



# Several frameworks in PHE

- **Principle-based:**
  - Provide a series of principles for consideration,
  - Ideally they provide guidance about how to contextualize them for application in different situations, and how to balance them when they conflict.
  - E.g. Upshur (2002); Childress et al., (2002).
- **Question-based:**
  - These pose a series of questions with issues to consider attached to each question,
  - There are principles/values underlying and elicited by the questions.
  - E.g., Kass (2001); Public Health Ontario (2012).
- As they have evolved, frameworks have tended to provide more and clearer guidance about how they are to be applied.

# We'll use two frameworks today

**A) *Ethics and the Practice of Public Health.***

Bernheim, R. G., Nieburg, P., & Bonnie, R. J. (2009).

**B) *Looking Ahead: Addressing Ethical Challenges in Public Health Practice.***

Baum, N. M., Gollust, S. E., Gool, S. D., & Jacobson, P. D. (2007).

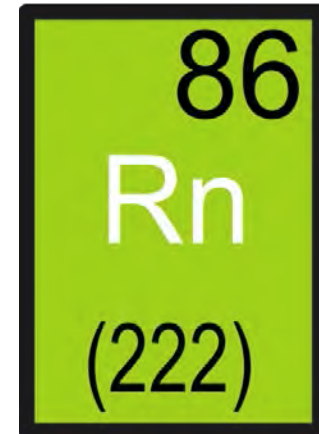
- We have adapted and summarized these frameworks. The versions included in your handouts represent the general structure of the original frameworks, highlight the key principles identified by the authors and include questions to help guide your discussions.
- There are many other frameworks out there for PHE; we have provided links to several at the end of this PPT.

# Applying an ethics framework to a case

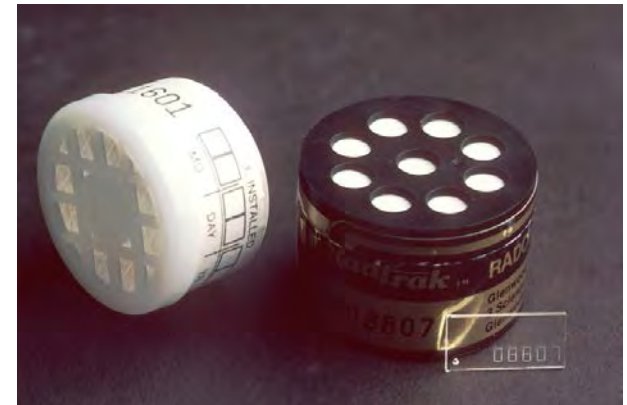
## Case - “RadonSmart 2020 Program”

Use the framework in your handout to guide discussion

1. After an ethical examination of the program, would you approve it? For what reasons?
2. Would the program have to be modified to make it ethically acceptable? Why?
3. What was most helpful in the framework you used?
4. Did the framework fail to highlight anything important?



‘Radon’ <http://commons.wikimedia.org/wiki/File%3ARadon.svg>  
Photo credit: SA 2.5 Licence: <http://creativecommons.org/licenses/by-sa/2.5>



‘Radon Kit.’ Photo credit: National Cancer Institute. Public Domain:  
<https://visualsonline.cancer.gov/details.cfm?imageid=2344>

**30 minutes:** deliberation and decision-making in small groups.

**10-15 minutes:** reporting and discussion among the larger group.

# Case – “RadonSmart 2020 Program”

Your public health unit has been asked to comment on and participate in implementing some aspects of the provincial RadonSmart 2020 program. Initiatives include an information campaign and easier access to test kits to increase the number of households testing for radon. The target is to have half the buildings in BC tested by 2020. Your health unit would be responsible for informing all residents in your region about the risks of radon and how to access kits. \$28 million has been allocated over five years for information, administration and subsidies for test kits.

Some facts about radon...

Risks to smokers are multiplied

Landlords not required to test or to remedy buildings tested by occupants

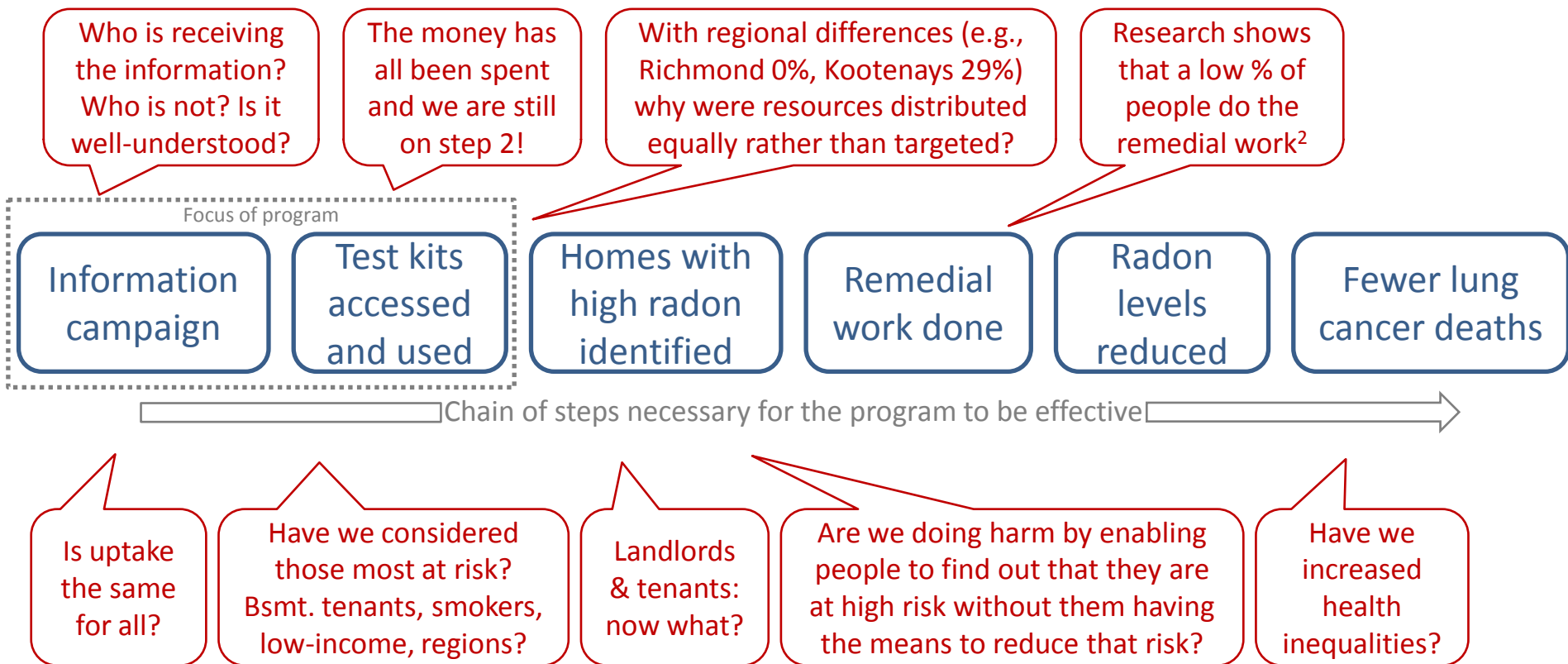
3000 deaths per year, nationwide

6.9% of Cdn. homes have unsafe levels

96% of Cdn. homes have not been tested

\$1500-\$3000 cost to repair

# What is the program aiming to do: unpacking its logic<sup>1</sup>...



... and using ethics frameworks to help ask questions about where the weak connections are, who is left out, etc...

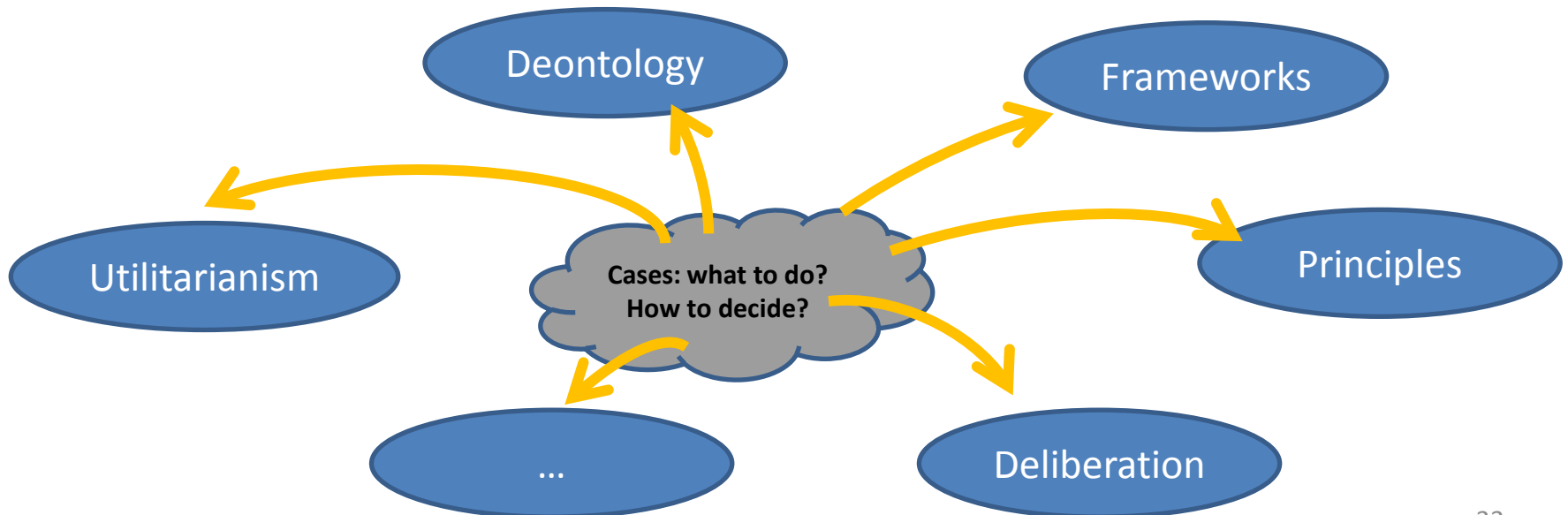
1. To learn more about making logic models to show the assumed steps between an intervention and its ultimate health effects, see Morestin & Castonguay, (2013), *Constructing a logic model for a healthy public policy: Why and how?*

2. NCEH, (2008). *Radon testing and remediation programs: What works.*



# Now what?

- We have only taken a brief look, but see that:
  - There are many theories, approaches, frameworks and principles in ethics, and more specifically in PH ethics.
  - They offer different perspectives for looking at cases.
  - They can have distinct, sometimes contradictory or conflicting, ethical implications.



# Now what?

- We have only taken a brief look, but see that:
  - There are many theories, approaches, frameworks and principles in ethics, and more specifically in PH ethics.
  - They offer different perspectives for looking at cases.
  - They can have distinct, sometimes contradictory or conflicting, ethical implications.
- Despite this diversity:
  - They can help to clarify issues, to deliberate and to make better decisions.
- Next steps:
  - Take a look at the other frameworks listed at the end of our presentation and discuss them with your colleagues.
  - For more about how to interpret and evaluate frameworks, see: *Introduction to Public Health Ethics 3 - Frameworks for Public Health Ethics* [http://www.ncchpp.ca/127/Publications.ccnpps?id\\_article=1426](http://www.ncchpp.ca/127/Publications.ccnpps?id_article=1426)
  - Send us a note: perhaps we could help you to find or to develop resources that are suited to your particular workplace and interests in PH.

# Questions and discussion




Image: *Two men contemplating the Moon*, by Caspar David Friedrich, ca. 1825-30.  
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<http://www.metmuseum.org/collection/the-collection-online/search/438417>

# Resources



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# Here are a few principles that are commonly used in public health ethics frameworks:

Substantive		Procedural
<ul style="list-style-type: none"><li>• Duty to provide care</li><li>• Effectiveness</li><li>• Equity / social justice</li><li>• Harm principle</li><li>• Least restrictive means</li><li>• Necessity</li><li>• Precautionary principle</li></ul>	<ul style="list-style-type: none"><li>• Proportionality</li><li>• Protection of the public</li><li>• Reciprocity</li><li>• Respect</li><li>• Solidarity</li><li>• Sustainability</li><li>• Stewardship</li></ul>	<ul style="list-style-type: none"><li>• Accountability</li><li>• Inclusiveness</li><li>• Participation</li><li>• Reasonableness</li><li>• Responsibleness</li><li>• Responsiveness</li><li>• Transparency</li></ul>

**Substantive:** these can help to reveal ethical issues and to make and justify decisions in specific contexts.

**Procedural:** these can help in making ethical choices concerning the processes by which programs, policies etc. are realized.

For further information: Please send us an email and we can refer you to several interesting resources. Or, you can find these by consulting the frameworks that are listed on the next three slides.

# Links to selected frameworks for public health ethics

(these are also a good source for learning about normative principles)

- Baum, N. M., Gollust, S. E., Goold, S. D., & Jacobson, P. D. (2007). Looking ahead: Addressing ethical challenges in public health practice. *Global Health Law, Ethics and Policy*, Winter 2007, 657-667. Available at: <http://deepblue.lib.umich.edu/bitstream/handle/2027.42/75478/j.1748-720X.2007.00188.x.pdf?sequence=1&isAllowed=y>
- Baylis, F., Kenny, N. P., & Sherwin, S. (2008). A relational account of public health ethics. *Public Health Ethics*, 2008, 1-14. Available at: <http://noveltechethics.ca/files/pdf/259.pdf>
- Bernheim, R. Gaare, Nieburg, P., & Bonnie, R. J. (2007). Ethics and the practice of public health. In R. A. Goodman, R. E. Hoffman, W. Lopez, G. W. Matthews, M. Rothstein, & K. Foster (Eds.), *Law in public health practice*, pp. 110-135. Oxford: Oxford University Press. For information (paywall): <http://www.oxfordscholarship.com/view/10.1093/acprof:oso/9780195301489.001.0001/acprof-9780195301489>
- Canadian Nurses Association. (2006). Public health nursing practice and ethical challenges. *Ethics in Practice for Registered Nurses*, February 2006, 12 pp. Ottawa: Canadian Nurses Association. Available at: [http://cna-aiic.ca/~media/cna/page-content/pdf-en/ethics\\_in\\_practice\\_jan\\_06\\_e.pdf](http://cna-aiic.ca/~media/cna/page-content/pdf-en/ethics_in_practice_jan_06_e.pdf)
- Childress, J. F., Faden, R. R., Gaare, R. D., Gostin, L. O., Kahn, J., Bonnie, R. J., Kass, N. E., Mastroianni, A. C., Moreno, J. D., & Nieburg, P. (2002). Public Health Ethics: Mapping the Terrain. *Journal of Law, Medicine & Ethics*, 30 (2), 169–177. Available at: [http://www.virginia.edu/ipe/docs/Childress\\_article.pdf](http://www.virginia.edu/ipe/docs/Childress_article.pdf)

# Selected frameworks (cont.)

- Fry, C. (2007). *Making values and ethics explicit: a new code of ethics for the Australian alcohol and other drugs field*. Canberra: Alcohol and other Drugs Council of Australia. Available at: [http://www.adca.org.au/wp-content/uploads/ethics\\_code.pdf](http://www.adca.org.au/wp-content/uploads/ethics_code.pdf)
- Kass, N. E. (2001). An ethics framework for public health. *American Journal of Public Health*, 91(11), 1776–1782. Available at: <http://ajph.aphapublications.org/doi/pdf/10.2105/AJPH.91.11.1776>
- Marckmann, G., Schmidt, H., Sofaer, N., & Strech, D. (2015). Putting public health ethics into practice: A systematic framework. *Frontiers in Public Health*, February 2015, 3(23), 8 pp. Available at: <http://journal.frontiersin.org/article/10.3389/fpubh.2015.00023/full>
- New Zealand Ethics Advisory Committee. (2007). *Getting through together: Ethical values for a pandemic*. Wellington: Ministry of Health. Available at: <http://neac.health.govt.nz/system/files/documents/publications/getting-through-together-jul07.pdf>
- Public Health Leadership Society. (2002). *Principles of the ethical practice of public health*. Available at: <http://www.phls.org/home/section/3-26/>
- Selgelid, M. J. (2009). A moderate pluralist approach to public health policy and ethics. *Public Health Ethics*, 2 (2), 195–205. Available at: <http://phe.oxfordjournals.org/content/2/2/195.full.pdf+html>

# Selected frameworks (cont.)

- Tannahill, A. (2008). Beyond evidence—to ethics: a decision-making framework for health promotion, public health and health improvement. *Health Promotion International*, 23 (4), 380-390. Available at: <http://heapro.oxfordjournals.org/content/23/4/380.full.pdf+html>
- ten Have, M., van der Heide, A., Mackenbach, J., & de Beaufort, I. D. (2012). An ethical framework for the prevention of overweight and obesity: A tool for thinking through a programme's ethical aspects. *European Journal of Public Health*, 23(2), 299-305. Available at: <http://ejournals.ebsco.com/Direct.asp?AccessToken=46BYKY58K92PJ5PC2PB125J5YJK181CB6&Show=Object&msid=604035520>
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- Willison, D., Ondrusek, N., Dawson, A., Emerson, C., Ferris, L., Saginur, R., Sampson, H., & Upshur, R. E. G. (2012). *A framework for the ethical conduct of public health initiatives*. Public Health Ontario. Available at: <http://www.publichealthontario.ca/en/eRepository/PHO%20%20Framework%20for%20Ethical%20Conduct%20of%20Public%20Health%20Initiatives%20April%202012.pdf>



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- CBC News. (2014). *Bike route construction closes Point Grey Road to traffic*. (Quotation drawn from readers' comments section following the article.) CBC News British Columbia, January 17, 2014. Retrieved on May 19, 2015 from: <http://www.cbc.ca/news/canada/british-columbia/bike-route-construction-closes-point-grey-road-to-traffic-1.2500799>
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- Gostin, L. (2001). Public health, ethics, and human rights: A tribute to the late Jonathan Mann. *Journal of Law, Medicine & Ethics*, 29, 121-130.
- Health Canada. (2012). *Cross-Canada survey of radon concentrations in homes*. Retrieved from: <http://www.hc-sc.gc.ca/ewh-semt/radiation/radon/survey-sondage-eng.php>
- Health Canada. (2015). *Radon frequently asked questions*. Retrieved on May 11, 2015 from: [http://www.hc-sc.gc.ca/ewh-semt/radiation/radon/faq\\_fq-eng.php](http://www.hc-sc.gc.ca/ewh-semt/radiation/radon/faq_fq-eng.php)
- McDougall, C. & Gauvin, F.-P. (2010). Public engagement to inform ethically challenging public health policies: Approaches, evidence and insights. Montréal: National Collaborating Centre for Healthy Public Policy. Retrieved from: [http://www.ncchpp.ca/128/Presentations.ccnpps?id\\_article=449](http://www.ncchpp.ca/128/Presentations.ccnpps?id_article=449)
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- Schwandt, M. (2015). *Reduce speed in residential areas*. (Quotation drawn from readers' comments section following the article.) The StarPhoenix, April 23, 2015. Retrieved on May 19, 2015 from: <http://www.thestarphoenix.com/news/Reduce+speed+residential+areas/10996611/story.html>



# NCCHPP Publications in Ethics

## Recent publications:

Introduction to Public Health Ethics 1: Background  
[http://www.ncchpp.ca/127/Publications.ccnpps?id\\_article=977](http://www.ncchpp.ca/127/Publications.ccnpps?id_article=977)

An Introduction to the Ethical Implications of  
Economic Evaluations for Healthy Public Policy  
[http://www.ncchpp.ca/144/Publications.ccnpps?id\\_article=962](http://www.ncchpp.ca/144/Publications.ccnpps?id_article=962)

Methods of Economic Evaluation: What are the  
Ethical Implications for Healthy Public Policy?  
[http://www.ncchpp.ca/144/Publications.ccnpps?id\\_article=1369](http://www.ncchpp.ca/144/Publications.ccnpps?id_article=1369)

The Principle of Reciprocity: How Can it Inform Public  
Health and Healthy Public Policies?  
[http://www.ncchpp.ca/127/Publications.ccnpps?id\\_article=1340](http://www.ncchpp.ca/127/Publications.ccnpps?id_article=1340)

## Just out this spring:

Introduction to Public Health Ethics 2:  
Philosophical and Theoretical Underpinnings  
[http://www.ncchpp.ca/127/publications.ccnpps?id\\_article=1424](http://www.ncchpp.ca/127/publications.ccnpps?id_article=1424)

Introduction to Public Health Ethics 3:  
Frameworks for Public Health Ethics  
[http://www.ncchpp.ca/127/Publications.ccnpps?id\\_article=1426](http://www.ncchpp.ca/127/Publications.ccnpps?id_article=1426)

## To come in 2015:

Solidarity in the Ethics and Practice of Public  
Health: Conceptions, Uses, and Implications

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