



PUBLIC HEALTH ETHICS

ETHICS ISSUE QUICK REFERENCE GUIDE

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The Issue

Ethical tensions arise when matters of personal freedom of choice could result in harm to the public. In public health, this happens when an individual contracts an infectious disease and must change their behaviour in order to prevent the spread of the illness. *The Public Health Act* allows for the restriction of individual liberty, up to and including apprehension and forced treatment when there is a significant threat to public health or safety, but it is a very difficult decision and considered a last resort. Some people with conditions like tuberculosis or HIV may find limitations on freedom difficult, and restrictions can be especially shocking to affected individuals when extreme measures are required to contain new or virulent illnesses like SARS or Ebola. This said, *The Public Health Act* also states that “if the exercise of a power under this Act restricts rights or freedoms, the restriction **must** be no greater than is reasonably necessary, in the circumstances, to respond to a health hazard, a communicable disease, a public health emergency or any other threat to public health”.

Ethical Considerations

Some considerations that might help to clearly identify the issue and facilitate a satisfactory resolution include:

Values

As a society, we value liberty, protection of the public from harm, proportionality, privacy, duty to provide care, reciprocity, equity, trust, solidarity, stewardship. These need to be balanced against the values of the individual patient and their family who is affected.

Ethical Principles

Autonomy: The element of how much of the client’s choice can be accommodated while their choices constitute a threat to public health or safety;

Beneficence: What constitutes a benefit or good for the patient; the good of society; respect for the health care provider’s personal safety;

Non-maleficence: The avoidance of physical or emotional harm to the patient, public, and staff;

Justice: appropriate application of health care resources; consideration of the health equity issues that result in disproportionate levels of illness in some disadvantaged populations; fairness, transparency and accountability in decision-making processes and applications of *The Public Health Act*.

Quick summary

- Decisions are difficult in situations where a balance between individual and collective rights must be struck.
- Many ethical dilemmas in public health concern this balance.



For more information, see the reference list on page 3.



Ethics Issue Quick Reference: Public Health Ethics

Ethical Theories

Ensure your discussions account for the following ethical theories:

Virtues: Sensitivity, dignified care, safety, inclusiveness, prudence

Duties and Obligations: Duty to care, respect for personal choices and self-determination, protection of the public from harm (Public Health Act)

Consequences: Staff safety, patient safety, public health and safety, utilitarianism (greatest good for the greatest number, ends justify the means)

Relational Ethics: Preserving relationships, trust, emotional connections, mutual respect

Ethical Frameworks

Pandemic preparedness

The Public Health literature, including research on pandemic planning provides guidance in ethically navigating or resolving these tensions at a practical, applicable level. The University of Toronto's Joint Centre for Bioethics has several publications describing the ethical considerations of pandemic planning. Although the exemplars in these resources are influenza and SARS, all principles apply equally well to TB and other less virulent infectious diseases.

Relational ethics

A relational approach to client-provider interactions will enable the provider to hear and understand the client's strengths and challenges, and in cooperation with the client, to develop plans and supports to enhance strengths and address challenges. This must be an individualized process as the factors affecting each client will be different, and if successful, might prevent the need for invoking the full powers conferred by *The Public Health Act*.

Decision-Making Frameworks

There are a number of ethical decision-making frameworks available to help you work through a difficult situation. Check your organization's ethics policy or process, or use the Winnipeg Regional Health Authority's Ethical Decision Guides (<http://www.wrha.mb.ca/about/ethics/framework.php>) to help you work through the situation.

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Questions for Exploring the Issue

1. What is the nature of the issue? What values are in conflict?
2. How can the conflicting values be weighed or balanced?
3. Are there organizational policies or professional codes of ethics that could provide some guidance on the conflict?
4. What are the available options? What supports are in place for facilitating each?
5. What are the ramifications of each option?
6. Is it consistent with the provision of safe, dignified care?
7. Have all possible culturally appropriate non-coercive supports been exhausted before considering use of legislated powers?
8. How does the organization ensure trust is maintained when there is a need to take action to prevent possible or probable harm, especially when the evidence is uncertain? For example, what is necessary to maintain the public's trust when urgent measures are needed to control a new or emerging virus whose transmissibility is not known?
9. How can we prevent the stigmatization of people affected with conditions like TB, HIV, sexually transmitted infections or mental health conditions?

References

The following is a brief list of resources that may be helpful in considering this issue. It is not an exhaustive list, but identifies some sources that may help when discussing the major themes.

- Amon, J.J., Girard, F., Keshavjee, S. (2009). Limitations on human rights in the context of drug-resistant tuberculosis: a reply to Boggio et al. *Health and Human Rights: An International Journal*, 11/1, Perspectives. Available at <http://hhrjournal.org/blog/wp-content/uploads/2009/10/amon.pdf>
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- Lee, L. (2012). Public Health Ethics Theory: Review and Path to Convergence. *Journal of Law, Medicine and Ethics*, Spring. Pp. 86-98.
- Sherwin, S. (2004). A Relational Approach to Autonomy in Health Care. In *Health Care Ethics in Canada* (2nd ed.), F. Baylis, J. Downie, B. Hoffmaster & S. Sherwin, eds. Thomson Nelson: Toronto.
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- Upshur, R. (2002) Principles for the justification of public health intervention. *Canadian Journal of Public Health* 93(2). Pp. 101-103.



For more information on any of the points in this document, please contact us, or talk with your library about the resources on this list.

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WRHA ETHICS SERVICES

Phone: 204-926-7124

E-mail: ethics@wrha.mb.ca

<http://www.wrha.mb.ca/about/ethics/index.php>



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