Ethical Decision Making in Pandemic Planning
Dr. Rick Singleton, Memorial University of St. John’s
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What is ethics in action?
• It’s about doing the right thing and the thing right!
• It’s the answer we get when we ask the question “What are we doing when we do what we do?”

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Levels of Planning and Decision-making
- Macro
- Meso
- Micro

What are the issues at each level?
Micro? Meso? Macro?

A few things that come to my mind
Micro
- Survival
- Protection
- Self and loved ones
- Access to care and medicines
- Personal and professional responsibilities
- Freedom
- Livelihood

A few things that come to my mind
Meso
- Planning and preparation
- Providing care
- Infection control
- Safety
- Managing access to care and medications
- Operational logistics: schedules, essential services, crisis response, communications
- Resources
- Employee relations
- Breaking point

A few things that come to my mind
Macro
- Public interest
- Preparedness
- Safety
- Protection
- Fairness
- Who will access care and medications
- Competing interest groups
- Legislation, Regulations, Enforcement
- Borders
- Economic impacts

Ethics Components
- Values
- Principles
- Concepts

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The Context for Ethics Analysis
re Public Health and Pandemic Planning

• Challenges
  – Typical individual focus
  – Principle (GIM) focuses on individual – evolved
    for clinical cases analysis and research
    • Autonomy
    • Beneficence
    • Non-maleficence
    • Justice
  – Parable farmer and bridge

Focus shift

Individual
• My health
• My risks and benefits
• My choice
• My best interest

Common good
• Populations
• Reduce inequities
• Protect the vulnerable
• Collaborative action
• Community engagement

Values

• Terminal Values
  – End purpose / overall goal
  – Protect & enhance the health status of the population &
    communities
  – Reduce health inequalities (inequities)
  – Minimize social disruption

• Substantive Values: criteria in decision-making to do the right
  thing.
  – Individual liberty, protection of the public from harm,
  proportionality, privacy, duty to provide care, reciprocity,
  equity, trust, solidarity, and
  stewardship.

• Procedural Values: guide the process to do the thing right
  fair, open and transparent, inclusive, reasonable, accountable

Key Ethical Issues (1)
Health Care Workers responsibility and
obligation to provide care during the
time of a communicable illness crisis.
• Duty to provide care to those is need.
• Obligations to family, friends, and self.
• Codes of ethics.

Key Ethical Issues (2)
Restricting liberty in the interest of infection
prevention and control.
• Limitation to mobility, assembly, and privacy.
• Reciprocity: proportional support to burden.
• Balance individual freedoms and good of society.
• Authorities exercising public health powers should do so
  in a way that is relevant, legitimate, legal, proportional,
  and necessary.

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Key Ethical Issues (3)
Priority setting, including the allocation of scarce resources, such as vaccines and antivirals.
- The human and material resources of health care will be rapidly overwhelmed.
- There will be scarcities of medicines, equipment and health care workers in all countries.
- Less-developed nations facing some of the greatest scarcities.
- Cases of people who will have to forego medical care for other ailments, such as cancer and heart disease.
- Decision makers will seek to maximize benefits for society while balancing obligations to individuals and individual needs.
- Rationale for distribution of limited resources. Who will get vaccine and treatment? Health care workers, children, those at high risk?

Key Ethical Issues (4)
Global governance implications, such as travel advisories.
- Effort to control spread of infection
- Impact on economy
- Information exchange within nations and between nations

Other Ethical Issues
- Research during threat
- Treatment of animals, especially culling.
- Fairness to victims such as farmers forced out of business.

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References

Joint Centre for Bioethics, STAND ON GUARD FOR THEE: Ethical considerations in preparedness planning for pandemic influenza, University of Toronto, November 2005


Thank you!

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