

Summary of the Ethics Framework by Kass (2001): An Ethics Framework for Public Health

This short document presents an adapted summary of the framework proposed by Nancy Kass in 2001 “designed to help public health professionals consider the ethics implications of proposed interventions, policy proposals, research initiatives, and programs” (p. 1777)¹. This document concludes by referring to examples of the application of Kass’s framework in practice.

Please discuss and respond to the six main questions as well as the secondary questions:

1- What are the public health goals of the proposed program?

- This calls for identifying the ultimate health goal(s), i.e., the reduction of morbidity and mortality, not just intermediate or process goals.

2- How effective is the program in achieving its stated goals?

- What are the supposed intermediate steps towards meeting the goals?
- What evidence supports the claim that each of those intermediate steps achieves its goal? Explain the logic model.

“The greater the burdens posed by a program—for example, in terms of cost, constraints on liberty, or targeting particular, already vulnerable segments of the population—the stronger the evidence must be to demonstrate that the program will achieve its goals” (p. 1779).

3- What are the known or potential burdens of the program?

- What are the risks:
 - To privacy or confidentiality?
 - To autonomy and liberty?
 - To justice?
 - To the health of individuals?

4- Can burdens be minimized? Are there alternative approaches?

“If 2 options exist to address a public health problem, we are required, ethically, to choose the approach that poses fewer risks to other moral claims, such as liberty, privacy, opportunity, and justice, assuming benefits are not significantly reduced” (p. 1780).

¹ Kass, N. E. (2001). An ethics framework for public health. *American Journal of Public Health*, 91(11), 1776-1782. Retrieved from: <http://ajph.aphapublications.org/doi/pdf/10.2105/AJPH.91.11.1776>



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5- Is the program implemented fairly?

- Is the distribution of benefits and burdens equitable?
- Does one group receive the benefits and another the burdens?
- Will the program increase or decrease inequalities?
- Should the program be universal?
- Should certain populations or groups be targeted?
- Is there a risk of creating or perpetuating stereotypes or of stigmatizing some groups?

“That programs be implemented fairly is even more important if restrictive measures are proposed” (p. 1780).

6- How can the benefits and burdens of a program be fairly balanced?

- Have you planned for a democratic process or a form of procedural justice to determine if the balance between benefits and burdens is equitable?

“[T]he greater the burden imposed by a program, the greater must be the expected public health benefit”

The more that “burdens are imposed on one group to protect the health of another... the greater must be the expected benefit” (p. 1781).

Examples of the application of Kass’s (2001) framework in practice:

Kass, N. E. (2005). An ethics framework for public health and avian influenza pandemic preparedness. *Yale Journal of Biology and Medicine*, 78, 235-250. Retrieved from: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2259154/pdf/17132331.pdf>

Omer, S. B. (2013). Applying Kass’s public health ethics framework to mandatory health care worker immunization: The devil is in the details. *American Journal of Bioethics*, 13 (9), 55-57. DOI: 10.1080/15265161.2013.825122. Retrieved from: <http://dx.doi.org/10.1080/15265161.2013.825122>

Paquin, L. J. (2007). Was WHO SARS-related travel advisory for Toronto ethical? *Canadian Journal of Public Health*, 98 (3), 209-211. Retrieved from: <http://journal.cpha.ca/index.php/cjph/article/download/814/814>

