

# Adapted Summary of a Public Health Ethics Framework

Baum et al. (2007)

## Looking Ahead: Addressing Ethical Challenges in Public Health Practice

January 2016

This short document presents an adapted summary of the framework proposed by Baum et al. in 2007. We originally produced this summary for use during a workshop offered at the Canadian Public Health Association Conference in May 2015.<sup>1</sup> We have adapted this and other summaries of frameworks and republished them together so that they might be used in combination with the very brief public health ethics cases that we have produced to date. They are intended to give public health practitioners some material for practice in ethical deliberation.

Baum and colleagues set out to produce a comprehensive framework for public health ethics that can “address the varied types of ethical challenges that policymakers and practitioners face in their work,” with its primary focus not on “theoretical ethical principles” but rather on “daily public health practice” (Baum et al., 2007, pp. 657-8). This document presents the three parts of the framework, each offering a series of considerations and questions to inform deliberation. It concludes by referring to a selection of resources for further reading.

### 1. Six primary dimensions to consider

#### POPULATION-LEVEL UTILITY

Does the program generally advance the well being of those in affected communities, according to *their* conception of well being? By how much?

Does the program respond to the expectations, values and needs of the community?

#### EVIDENCE

Is the program’s effectiveness supported by the best available evidence?

#### JUSTICE/FAIRNESS

Will the expected benefits and burdens of the program be equitably distributed in the community?

#### ACCOUNTABILITY

Will the assumptions, justifications, and reasoning behind the program be made public?

Within the context of this program, are the funds being used responsibly?

#### COST/EFFICIENCIES

What are the costs associated with the implementation and with the maintenance of the program?

Could this money be used more efficiently on another public health program?

#### POLITICAL FEASIBILITY

Is the program politically feasible?

What is the community’s degree of acceptance of the program?

“Incorporating political feasibility into decisions does not, however, mean limiting options to popular ones” (Baum et al., 2007, p. 662).

### 2. Three principles from medical ethics to consider

#### AUTONOMY (INDIVIDUAL)

Does the program limit individual liberties?

#### NON-MALEFICENCE

Does the program do harm to any individuals or groups?

#### BENEFICENCE

Does the program improve the well being of the affected individuals?

<sup>1</sup> The PowerPoint and handouts are available online at: [http://www.nchpp.ca/128/Presentations.ccnpps?id\\_article=1408](http://www.nchpp.ca/128/Presentations.ccnpps?id_article=1408)



### 3. Resolving the ethical issues

Are there any tensions or conflicts among the various considerations that have arisen?

How will you balance the tensions? Should, for example, one dimension or principle take precedence over another?

Is there some way that you could improve the program to resolve these tensions? Would a different program better achieve this?

### Resources and additional reading

#### Adapted summaries of public health ethics frameworks and cases:

[http://www.ncchpp.ca/127/Publications.ccnpps?id\\_article=1525](http://www.ncchpp.ca/127/Publications.ccnpps?id_article=1525)

#### A repertoire of ethics frameworks for public health (with links to the documents):

[http://www.ncchpp.ca/708/Repertoire\\_of\\_Frameworks.ccnpps](http://www.ncchpp.ca/708/Repertoire_of_Frameworks.ccnpps)

#### Population and Public Health Ethics: Cases from research, policy, and practice

[http://www.ncchpp.ca/127/publications.ccnpps?id\\_article=720](http://www.ncchpp.ca/127/publications.ccnpps?id_article=720)

#### Example of the application of Baum et al.'s (2007) framework in practice:

Haddad, L. B., Philpott-Jones, S., & Schonfeld, T. (2014). Contraception and prevention of HIV transmission: a potential conflict of public health principles. *Journal of Family Planning & Reproductive Health Care*, 41, 20-23. doi: 10.1136/jfprhc-2013-100844. Retrieved from: <http://jfprhc.bmj.com/content/41/1/20.long#xref-ref-11-1>

### Reference

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*, 35(4), 657-667. Retrieved from: [http://www.ccnpps.ca/121/Presentations.ccnpps?id\\_article=1409](http://www.ccnpps.ca/121/Presentations.ccnpps?id_article=1409)

### Questions or comments?

Michael Keeling: [michael.keeling@inspq.qc.ca](mailto:michael.keeling@inspq.qc.ca)

Olivier Bellefleur: [olivier.bellefleur@inspq.qc.ca](mailto:olivier.bellefleur@inspq.qc.ca)

The National Collaborating Centre for Healthy Public Policy (NCCHPP) seeks to increase the expertise of public health actors across Canada in healthy public policy through the development, sharing and use of knowledge. The NCCHPP is one of six centres financed by the Public Health Agency of Canada. The six centres form a network across Canada, each hosted by a different institution and each focusing on a specific topic linked to public health. In addition to the Centres' individual contributions, the network of Collaborating Centres provides focal points for the exchange and common production of knowledge relating to these topics. The National Collaborating Centre for Healthy Public Policy is hosted by the Institut national de santé publique du Québec (INSPQ), a leading centre in public health in Canada.

Production of this document has been made possible through a financial contribution from the Public Health Agency of Canada through funding for the National Collaborating Centre for Healthy Public Policy (NCCHPP). The views expressed herein do not necessarily represent the views of the Public Health Agency of Canada.

*Information contained in the document may be cited provided that the source is mentioned.*