

# Adapted Summary of a Public Health Ethics Framework Kass (2001) An Ethics Framework for Public Health

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This short document presents an adapted summary of the framework proposed by Nancy Kass in 2001. We originally produced this summary for use during a webinar offered in October 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.

Nancy Kass set out to produce a framework “designed to help public health professionals consider the ethics implications of proposed interventions, policy proposals, research initiatives, and programs” (2001, p. 1777). This document presents the six main questions around which the framework is organized and secondary questions to inform deliberation. It concludes by referring to a selection of resources for further reading.

## The framework

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

### 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.

### 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” (Kass, 2001, p. 1779).

### 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?

### 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” (Kass, 2001, p. 1780).

### 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?

<sup>1</sup> The PowerPoint and recording of the webinar are available online at: [http://www.ncchpp.ca/128/presentations.ccnpps?id\\_article=1491](http://www.ncchpp.ca/128/presentations.ccnpps?id_article=1491)



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” (Kass, 2001, p. 1780).

#### 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” (Kass, 2001, p. 1781).

## 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)

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

Kass, N. E. (2005). An ethics framework for public health and avian influence 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>

## Reference

Kass, N. E. (2001). An ethics framework for public health. *American Journal of Public Health*, 91(11), 1776-1782. Retrieved from: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1446875/pdf/0911776.pdf>

## Questions or comments?

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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.

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