

# Adapted Summary of a Public Health Ethics Framework Upshur (2002) Principles for the Justification of Public Health Intervention

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This short document presents an adapted summary of the framework proposed by Ross Upshur in 2002. We originally produced this summary for 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.

Ross Upshur set out to produce a framework “to bring clarity to some of the ethical aspects of public health decision making in practice” and to determine when a public health action that infringes upon individual freedom is justified. It has a limited field of application: it does not “for example, cover screening and prevention programs, health promotion programs or public health research” (2002, p. 102). This document presents the four principles around which the framework is organized as well as questions to inform deliberation. It concludes by referring to a selection of resources for further reading.

## The framework

The framework proposes four principles along with questions and orientation to guide deliberation and to shed light on ethical issues.

### HARM PRINCIPLE

Does the action limit the liberty or autonomy of any individuals or groups?

Does the action set out to:

- Prevent harm to individuals or groups other than those who are being restricted?
- Improve the well-being of individuals or groups other than those who are being restricted?
- Prevent individuals or groups from doing harm to others by constraining them?
- Improve the well-being of individuals or groups by constraining them?

<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)

“The only purpose for which power can be rightfully exercised over any member of a civilized community, against his will, is to prevent harm to others” (Mill, 1869 [1859], cited by Upshur, p. 102).

### LEAST RESTRICTIVE OR COERCIVE MEANS

Can the same ends be achieved in a way that is less restrictive of the liberty of individuals or groups?

“[M]ore coercive methods should be employed only when less coercive methods have failed. Education, facilitation and discussion should precede interdiction, regulation or incarceration.”

“Furthermore, there should be no discrimination in their application” (Upshur, 2002, p. 102).

### RECIPROCITY PRINCIPLE

Does the action impose ethical duties or burdens on certain individuals or groups?

If yes, will they be helped or compensated?

If ethical duties are imposed, society is obliged “to facilitate individuals and communities in their efforts to discharge their duties.”

If one imposes burdens on individuals or groups, “these should be compensated” (Upshur, 2002, p. 102).



## TRANSPARENCY PRINCIPLE

Did all stakeholders participate in the decision-making process?

Was the decision-making process dominated by one group?

Was there any political interference?

“All legitimate stakeholders should be involved in the decision-making process, have equal input into deliberations, and the manner in which decision-making is made should be as clear and accountable as possible” (Upshur, 2002, p. 102).

## 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 Upshur's (2002) framework in practice:

Canadian Nurses Association. (2006). *Public health nursing practice and ethical challenges*. Ottawa. Retrieved from: [http://cna-aiic.ca/~media/cna/page-content/pdf-en/ethics\\_in\\_practice\\_jan\\_06\\_e.pdf](http://cna-aiic.ca/~media/cna/page-content/pdf-en/ethics_in_practice_jan_06_e.pdf)

## References

Mill, J. S. (1869) [1859]. *On liberty*. London: Longman, Roberts & Green. Retrieved from: <http://www.bartleby.com/130/>

Upshur, R. E. G. (2002). Principles for the justification of public health intervention. *Canadian Journal of Public Health*, 93(2), 101-103. Retrieved from: <http://journal.cpha.ca/index.php/cjph/article/download/217/217>

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