Purpose

This document presents a preliminary, graphic summary of results from a survey of university directors of population and public health programs, or professors responsible for ethics teaching, within population and public health schools or programs in Canadian universities on the subject of teaching ethics in public health in their institutions. A research team from the Université de Montréal’s School of Public Health partnered with the National Collaborating Centre for Healthy Public Policy (NCCHPP) in launching this survey. The goal was to add to current knowledge of the extent to which public health ethics figures into postsecondary population and public health training in Canada, and if so, what that entails. In particular, we wanted to learn about the use of ethics resources, what is taught, who is teaching, and how. We also set out to identify barriers and opportunities for implementing ethics training programs for public health. This is a picture that we want to share as part of a collective effort to support ethics in public health practice.

Target participants and outreach

We were seeking feedback from Canadian university directors and professors responsible for public health ethics education. Our efforts focused on outreach to schools of population and public health training in Canada. In May 2017, we sent 401 email invitations to participate to directors and professors of schools of population and public health at 32 Canadian universities. We encouraged potential respondents to forward our email invitation to others in their departments. The survey was open from May 16 to June 23, 2017. A total of 49 responses were received: 35 in English and 14 in French, representing 20 universities and 7 provinces.

The project

Following a review of Canadian and international public health and bioethics literatures with respect to public health ethics education by a team at the Université de Montréal, resulting in the article, Ethics education in public health: where are we now and where are we going?1 (Doudenkova, Bélisle-Pipon, Ringuette, Ravitsky, & Williams-Jones, 2017), two surveys were conducted. This first survey was undertaken by the team at the Université de Montréal and the NCCHPP. The second survey focused on the practices and needs of Canadian public health practitioners with regard to public health ethics. It was led by the NCCHPP with the help of graduate students from the Université de Montréal. More information about the second survey is available here http://www.ncchpp.ca/127/Publications.ccnpps?id_article=1776.

Ethics approval

Ethics approvals of the Ethics Committee of Health Research of the Université de Montréal (15-057-CERES-D, March 23, 2017) and the Comité d’éthique de la recherche en Dépendances, Inégalités sociales et Santé publique (CER-DIS) of the Centre intégré universitaire de santé et de services sociaux du Centre-Sud-de-l’Île-de-Montréal (DIS-1617-29, May 9, 2017). Responses were depersonalized and security measures are in place to ensure confidentiality.

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Presenting the preliminary analysis

This document offers a quick, graphic overview of the results. As the survey was offered in both English and French, we have combined the results from French and English respondents in each graph. We have not included every question in this summary, and some response fields have been summarized for clarity in presentation. The survey results will be further analyzed by the research team, notably by considering them in light of the findings from the literature review. This is a preliminary analysis, and further analysis may lead to minor variations from the results presented here based on how the data are interpreted.

For further questions or to share comments, please contact:

Project Coordinator: Louise Ringuette
louise.ringuette@umontreal.ca,

Principal Investigator: Bryn Williams-Jones
bryn.williams-jones@umontreal.ca,

Co-investigator: Michael Keeling
michael.keeling@inspq.qc.ca,

Co-investigator: Olivier Bellefleur
olivier.bellefleur@inspq.qc.ca.
Highlights and key points drawn from the survey responses

49 respondents (14 Francophones; 35 Anglophones) representing 20 universities in 7 Canadian provinces participated.

When asked to identify the most important issues that will face practitioners of the future, respondents clearly identified equity issues, highlighting social inequalities, protection of vulnerable populations and equitable access to care. (Question 3.3)

When asked what they do teach, respondents identified research ethics, codes of ethics and ethics frameworks, among others. When asked what they thought should be part of the curriculum, they identified feminist ethics and ethics frameworks. (Question 2.12)

The most commonly-used teaching methods included:
- Lectures,
- Case-based learning,
- Small group teaching,
- Problem-based learning,
- Distance learning. (Question 2.8)

Respondents identified the main barriers to teaching ethics as:
- Lack of time/full curriculum
- Lack of clarity as to who is responsible for developing the ethical component,
- Lack of qualified teaching staff,
- Lack of ethics training tools for public health. (Question 2.11.1)

More than three quarters of respondents think that the postsecondary training of public health practitioners should include a minimum number of hours and basic material in public health ethics. (Question 4.3)
Are there any bioethics education programs within your institution (including, medical ethics, clinical ethics, public health ethics, research ethics, etc.)? (Q 1.9) [41 respondents]

- Yes (28)
- No (7)
- I don't know (6)

Is ethics teaching integrated into your public health training curricula? (Q 1.10) [41 respondents]

- Yes (26)
- No (6)
- I don't know (9)
To your knowledge, in which public health program(s) is ethics being taught? (Select all that apply) (Q 2.1)
[26 respondents]

In your public health programs, ethics training is: (Q 2.7)
[25 respondents]

Note: Of the 25 respondents, 4 indicated that it is a mix between some mandatory, some optional. Given that this means that there is some mandatory ethics training, we classified these 4 in mandatory. One respondent was not teaching in a specific program in public health—as such, this response was not included in mandatory or optional.
What are the pedagogical methods used to teach ethics in your program? (Select all that apply) (Q 2.8) [25 respondents]

- Lectures (20)
- Case-based learning (14)
- Small group teaching (11)
- Problem-based learning (10)
- Distance learning (9)
- Assigned readings (8)
- Practicum opportunities (7)
- Self-directed learning (6)
- Community visits (1)

Are there gaps or areas for improvement with the current ethics training in your program? (Q 2.11) [25 respondents]

- Yes (22)
- No (3)
What are the three main barriers to teaching ethics in your public health programs? (Q 2.11.1) [22 respondents]
Which of these approaches (theoretical or practical) is taught in your programs? In your opinion, which should be part of a basic curriculum in public health ethics? (Select all that apply) (Q 2.12 in 16 sub-questions) [25 respondents]

**Principle-based**

- Taught in our programs: [Graph]
- Should be part of basic curriculum: [Graph]
- I don't know: [Graph]
- Not relevant/not applicable: [Graph]

**Deontological**

- Taught in our programs: [Graph]
- Should be part of basic curriculum: [Graph]
- I don't know: [Graph]
- Not relevant/not applicable: [Graph]

**Human rights**

- Taught in our programs: [Graph]
- Should be part of basic curriculum: [Graph]
- I don't know: [Graph]
- Not relevant/not applicable: [Graph]
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**Research ethics**

- Taught in our programs: 14
- Should be part of basic curriculum: 12
- I don't know: 8
- Not relevant/not applicable: 2

**Ethics of care**

- Taught in our programs: 8
- Should be part of basic curriculum: 10
- I don't know: 6
- Not relevant/not applicable: 2

**Critical ethics**

- Taught in our programs: 6
- Should be part of basic curriculum: 8
- I don't know: 12
- Not relevant/not applicable: 2
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Organizational ethics

Advocacy ethics

Utilitarianism
Briefing Note
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- Theories of justice
- Public health codes of ethics
- Ethics frameworks for public health
- Precautionary principle
In your opinion, ethics includes: (Select all that apply) (Q 3.1) [38 respondents]
What are the major challenges that will confront today's public health students in their future practice? (Q 3.3) (5-very important; 1-Not at all important) [38 respondents]

Note: The bars represent weighted averages.
Within your institution, are there any plans to develop future courses in public health ethics? (Q 4.1) [38 respondents]

- Yes (3)
- No (7)
- I don't know (28)

Do you think that there are enough practical tools (e.g., guides, books, etc.) to support schools of public health in developing their ethics curriculum? (Q 4.2) [38 respondents]

- Yes (8)
- No (12)
- I don't know (18)
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Which tools would you need to create or enhance the ethics curriculum in your institution? (Select all that apply)  
(Q 4.2.1) [12 respondents]

- Collections of articles (10)
- List of reference persons (10)
- Handbooks or guides (9)
- References to practicum opportunities (7)
- Websites (7)
- Online courses or modules (7)
- Books (6)
- Other, please specify (2)

Do you believe that a basic curriculum (with a minimum number of hours and content) in public health ethics would be desirable within schools of public health in Canada? (Q 4.3)  
[38 respondents]

- Yes (29)
- No (4)
- I prefer not to answer (5)
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Authors: Michael Keeling (National Collaborating Centre for Healthy Public Policy), Louise Ringuette (Université de Montréal), Olivier Bellefleur (National Collaborating Centre for Healthy Public Policy), Jean-Christophe Bélisle-Pipon (Petrie-Flom Center, Harvard University), Bryn Williams-Jones (Université de Montréal), Victoria Doudenkova (Université de Montréal), Vardit Ravitsky (Université de Montréal), Stanislav Birko (Université de Montréal), and Hazar Haidar (Université de Montréal).

SUGGESTED CITATION


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