Ethics of Tuberculosis Prevention, Care and Control

MODULE 3: OVERARCHING GOALS AND ETHICAL VALUES

[INSERT SPEAKER NAME DATE & LOCATION HERE]

Insert country/ministry logo here



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Objectives

Upon completion of this module, you will be able to:

- Explain what ethical values are
- Describe the relationship between ethical goals and TB prevention, care and control

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Ethics and ethical values

- Ethics
 - Deals with right and wrong conduct, with what we ought to do and what we should refrain from doing
- Medical ethics
 - How to handle moral problems arising out of the care of patients; often clinical decisions must consider more than just the patient's medical condition
- Ethical Values
 - Way we ought to live our lives, including:
- Actions, intentions, ehaviour

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Ethics in public health

- Focuses on design and implementation of measures to monitor and improve the health of populations
- Considers structural conditions that promote or inhibit development of healthy societies
- The protection and promotion of health in communities

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Human rights

- Legal guarantees that protect individuals and groups against actions that interfere with fundamental freedoms and human dignity
- Encompass the following:
- Civil
- Cultural
- Economic
- Political
- Social

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United Nations Universal Declaration on Human Rights

'Has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and **medical care** and necessary social services.'

United Nations Human Rights. General Assembly Resolution 217 A (III): Universal Declaration on Human Rights. 194

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Link between ethical values and human rights principles

- Intimately interlinked in a dynamic way
- Human rights form the concrete legal expression of ethical values
- Human rights provide overarching ethical framework that should be respected

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Important ethical values in TB care and control

- Social justice/equity
- Solidarity
- Common good
- Autonomy
- Reciprocity
- Effectiveness
- Subsidiarity
- Participation
- Transparency and accountability

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Social justice/equity

- Highlights:
- Underlying root causes
- Societal inequalities
- May include redistribution of resources to compensate for existing inequalities
- Address socio-economic factors that increase risk of TB

Health equity is achieved when every person has the opportunity to 'attain his or her full health potential' and no one is 'disadvantaged from achieving this potential because of social position or other socially determined circumstances.'

Health inequities are reflected in differences in life expectancy; quality of life; rates of disease, disability, and death; severity of disease; and access to treatment.

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Solidarity

- Standing together (group, community, nation)
- Strong community ties, resulting in cooperative action

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Common good

- Infectious diseases threaten health of individuals and whole populations
- Removal or reduction of threat of infection benefits society
- Important to consider:
- Mechanisms for transmission of TB
- Prevention of TB
- Community empowerment in the prevention, care and control of TB

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Autonomy

- Individuals guaranteed right to make decisions about their own lives, including health care
- Informed consent
- Patients generally should have right to choose among treatment options

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Share your experience..... PLENARY • What ethical dilemmas or questions have you faced related to autonomy? • How have you addressed them: At District level At Facility level For example What do you do when a patient tells you that the traditional health practitioner has recommended that the patient stop treatment? USAIDTB CARE II PROIECT Reciprocity • Individuals who put themselves at greater risk of harm for the sake of others deserve benefits in exchange for running such risks Obligation exists to: Minimise risks through appropriate infection control measures: Provide appropriate treatment Compensate when harm occurs USAID TB CARE II PROJECT Effectiveness Duty to avoid actions that are not working Obligation to implement proven measures that are likely to succeed • Linked to efficiency (use of limited resources for

maximum benefit)

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Subsidiarity

- Decisions to be made as close to individuals and communities as possible
- Community participation paramount to ensuring local interests, concerns, beliefs reflected

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Participation

- Community should have meaningful involvement in all steps of the decision-making process
- Community should be invited and encouraged to work with policy makers to help drive the decisionmaking

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Transparency and accountability

- Decisions made in open manner
- Decision-making process is fair, responsive to community needs and evidence-based

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Patient-centred care

Involves viewing health care from the patient's perspective and then adapting care to more closely meet the needs and expectations of patients

"Patient-centered care reflects a partnership among practitioners and patients to ensure that decisions respect patients' wants, needs, and preferences and that patients have the education and support they need to make decisions and participate in their own care. Patient-centered approaches recognize that care is provided along a continuum of services"

O'Doved MP, Datlary AD, Fack N, Harp-Neumen Y, Amico KR, Seellingham M, Work A, Meccalis AZ, Seakides P, Davis L, Bard LSM, Nelson N, Cambrido M, Servicia S, Blaughand D, Pelabyand N, Germén G. Conscious autémantico behalf of the attendess of the Revincering schierence patient centred care for drug-resistant TB and HWY, March 19, 20, 2015, Columbia Maliman School of Public Health. Colombia University New York, NY, USA.

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Approach to person-centred care

- Many groups face risks from failure to diagnose and treat TB
- Person-centred approach promotes concept that it is equally important consider individuals infected with and affected by condition
- Individual who is sick and receiving care
- Individual who is sick and not receiving care
- Family members and contacts
- Community at large

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Shared responsibility for the care of the patient Government and international community Community Family Patient USAIDTB CARE II PROJECT



