



Ethics of Tuberculosis Prevention, Care and Control

MODULE 9: INVOLUNTARY ISOLATION AND DETENTION AS LAST RESORT MEASURES

[INSERT SPEAKER NAME
DATE &
LOCATION HERE]

Insert
country/ministry
logo here

Objectives

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

- Describe how a person-centred approach will help patients understand the benefits of TB treatment to themselves, their families and communities
- Discuss the specific ethical principles and criteria to be utilised in situations where involuntary isolation is being considered

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Let's discuss...

INDIVIDUAL

Instructions	Think about
<ul style="list-style-type: none"> • Read through the information provided in the section titled 'Setting the Scene' in the Involuntary Isolation and Detention as a Last-Resort Measure; Activity 5 Delegate Hand-out • Spend 5 minutes thinking about and writing down your answers to the questions in the space provided in the Delegate Hand-out • Hand over your completed Hand-out to the facilitator 	<ul style="list-style-type: none"> • Is involuntary detention of patients ever acceptable? • If so, under what conditions?

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Engaging the patient about treatment decisions

- TB treatment should be provided on a voluntary basis, with the patient's informed consent and cooperation
- Utilising a person-centred approach, incorporating education, counselling and support:
 - Shows respect
 - Promotes autonomy
 - Improves likelihood of adherence

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Community-based care and treatment - 1

- Treating TB patients at home with appropriate infection measures generally imposes no substantial risk to other household members
 - When diagnosis is made, household contacts have already been exposed
 - Risk of infection is reduced once effective treatment is initiated

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Community-based care and treatment - 2

- Successfully implemented in a number of different settings, including for patients with MDR- and XDR-TB
- Important to institute services and support structures to ensure that community-based care is as widely available as possible

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Ethical acceptability of involuntary isolation and detention

- Detention should NEVER be a routine component of TB programmes
- Interests of community members may justify efforts to isolate or detain patient involuntarily if patients:
 - Do not adhere to the prescribed course of treatment
 - Are unwilling or unable to comply with infection control measures
- Involuntary isolation and detention must be carefully limited and used only as very last resort, in certain specific conditions only after all voluntary measures to isolate such a patient have failed

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Ethical acceptability of involuntary isolation and detention -2

- Safeguards should be applied to the manner in which involuntary isolation or detention is implemented
- Applicable ethical and human rights principles must be considered and applied in the very rare cases where involuntary isolation and detention is being considered
- Siracusa Principles on the Limitation and Derogation of Provisions in the International Covenant on Civil and Political Rights, 1985
 - Should be used to examine whether the necessary protections exist to restrict individual rights (i.e. detention)

United Nations Economic and Social Council. Siracusa principles on the limitation and derogation of provisions in the International Covenant on Civil and Political Rights. U.N. Doc. E/CN.4/1985/4, Annex. 1985

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Siracusa Principles

- Restriction is provided for and carried out in accordance with the law
- Restriction is in the interest of a legitimate objective of general interest
- Restriction is strictly necessary in a democratic society to achieve the objective
- There are no less intrusive and restrictive means available to reach the same objective
- Restriction is based on scientific evidence and not drafted or imposed arbitrarily i.e. in an unreasonable or otherwise discriminatory manner

Each of these criteria must be met and restrictions should be of a limited duration and subject to review and appeal

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Summary: Applying ethical principles in involuntary isolation or detention -1

Limited to exceptional circumstances when an individual:

- Is **known** to be **contagious**, **refuses treatment**, and all reasonable measures to ensure adherence have been attempted and proven **unsuccessful**
- Is **known** to be **contagious**, has **agreed to ambulatory treatment**, but **lacks capacity to institute infection control** in home
- Is **highly likely** to be **contagious** (based on symptoms and evidence of epidemiological risk factors) but **refuses** to undergo **assessment** of his/her infectious status

Summary: Applying ethical principles in involuntary isolation or detention - 2

- Follow ethical and human rights principles (Siracusa Principles)
- Limit scope of government authority
- Provide due process protections for individuals whose liberty may be restricted
- Develop clear criteria and procedures for the use of non-voluntary measures, with involvement from TB patients and civil society

Summary: Applying ethical principles in involuntary isolation or detention - 3

- In rare event that isolation or detention is to be used:
 - Ensure adequate settings (other rights, eg health, food, housing must be maintained)
 - Apply appropriate infection control measures
 - Provide reasonable social supports to isolated patients and their dependents

Compelling treatment over patient objections

- NEVER appropriate to compel treatment
 - Violates ethical principal of autonomy
- Address risks to public through isolation
- Informed refusal of treatment in isolated patients should be respected

Practically, not possible to provide effective treatment without the patient's cooperation

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