

# Public Health Ethics 2

**The Worshipful Society of Apothecaries, Philosophy of Medicine**

19<sup>th</sup> November, 2022

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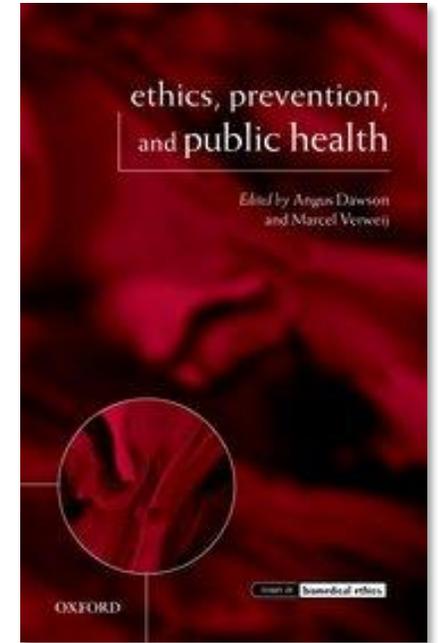
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# Looking to ‘the Public’ in Public Health...

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- A focus on “**public** health” means:
  - Protecting and promoting **population** health
  - Collective activities/interventions: **governments, health systems, society as a whole**
- Contrast with focus of ‘mainstream bioethics’

Marcel Verweij and Angus Dawson, “The Meaning of ‘Public’ in ‘Public Health,’” in Angus Dawson and Marcel Verweij (eds), *Ethics, Prevention, and Public Health* (Oxford University Press, 2007)



# Public Health Ethics as Political Theory

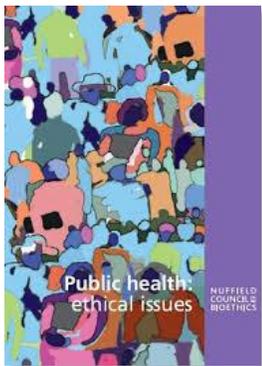
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“The central issue in public health is the extent to which it is acceptable for the state to establish policies that will influence population health.”

Nuffield Council on Bioethics, *Public Health – Ethical Issues*, (London, 2007), pp. xv and xvi

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# Public Health Ethics as Political Theory

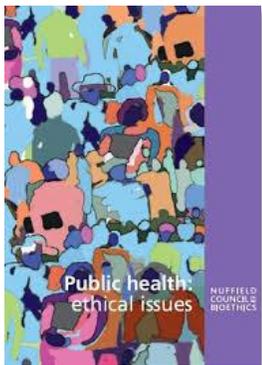
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## Public Health Ethics as Political Theory

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“Equity means social justice or fairness; it is an ethical concept, grounded in principles of distributive justice. Equity in health can be—and has widely been—defined as the absence of socially unjust or unfair health disparities. However, because social justice and fairness can be interpreted differently by different people in different settings, a definition is needed that can be operationalised based on measurable criteria.”

Paula Braveman and Sophia Gruskin, ‘Defining Equity in Health,’  
*Journal of Epidemiology and Community Health* (2003) 57, 254-258, p. 254.

## THEORY AND METHODS

### Defining equity in health

P Braveman, S Gruskin

*J Epidemiol Community Health* 2003;57:254-258

See end of article for  
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Accepted for publication  
21 October 2002

**Study objective:** To propose a definition of health equity to guide operationalisation and measurement, and to discuss the practical importance of clarity in defining this concept.

**Design:** Conceptual discussion.

**Setting, Patients/Participants, and Main results:** not applicable.

**Conclusions:** For the purposes of measurement and operationalisation, equity in health is the absence of systematic disparities in health (or in the major social determinants of health) between groups with different levels of underlying social advantage/disadvantage—that is, wealth, power, or prestige. Inequities in health systematically put groups of people who are already socially disadvantaged (for example, by virtue of being poor, female, and/or members of a disenfranchised racial, ethnic, or religious group) at further disadvantage with respect to their health; health is essential to wellbeing and to overcoming other effects of social disadvantage. Equity is an ethical principle; it also is consonant with and closely related to human rights principles. The proposed definition of equity supports operationalisation of the right to the highest attainable standard of health as indicated by the health status of the most socially advantaged group. Assessing health equity requires comparing health and its social determinants between more and less advantaged social groups. These comparisons are essential to assess whether national and international policies are leading toward or away from greater social justice in health.

## A Libertarian Challenge to Public Health Policy

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“The ways of implementing healthist politics include the substitution of health *education* by health-promotion *propaganda*; the introduction of regular ‘health’ screening for all citizens; the coercion of general practitioners, through financial incentives, to act as agents of the state; the presentation of the politically corrupt science of healthism as objective knowledge; the taxation of goods deemed to be ‘unhealthy’; interference with the advertising of legal products; and introducing legislation which is ‘nothing better than the hurried botching of short-sighted interests and blind passions’.”

Petr Skrabanek, *The Death of Humane Medicine and the Rise of Coercive Healthism* (1994), 138-9

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# From Epidemiology to Ethics to Justice

Sridhar Venkatapuram argues that epidemiological evidence provides an ethical basis for social action:

“If social factors are identified as determining such significant aspects of human well-being as mortality and morbidity, the moral responsibility for ill health and health inequalities expands beyond the individual to include social institutions and processes....”

“[W]here one has the power to prevent or mitigate injustice, one has sufficient reason to consider doing so.”

Sridhar Venkatapuram, ‘Global Justice and the Social Determinants of Health’ (2010) *Ethics and International Affairs* 24:2, 119-130, pp. 127-8



# Equity and the Idea of Justice

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‘Three Children and a Flute’: who should get it?

- Anne: the only child who can play it
- Bob: has no toys, and can afford none
- Carla: made the flute, through several months’ labour
  - A: favoured by utilitarian (though balance of good in each)
  - B: favoured by economic egalitarian
  - C: favoured by libertarian

Amartya Sen, *The Idea of Justice*, (Penguin, 2009), pp 12-15

