Skills for the Ethical Practice of Public Health

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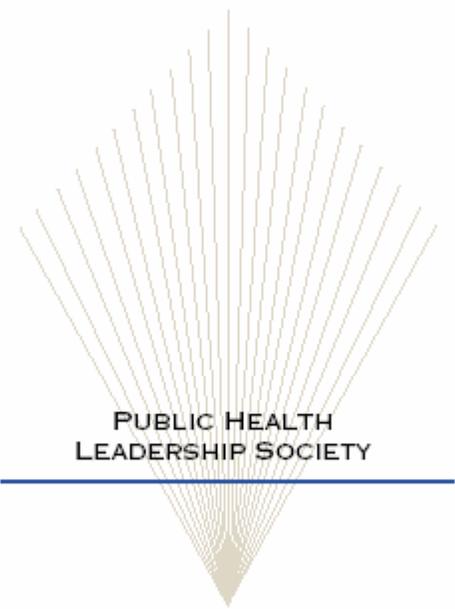
PUBLIC HEALTH
LEADERSHIP SOCIETY

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Skills in Public Health Ethics

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Background

What are skills and who cares?

Topics increasingly prominent in discussions of public health are ethics and the preparation of an ethical workforce, including field personnel, administrators, and academicians. For example, the Institute of Medicine's report on *Who Will Keep the Public Healthy*? released in 2003, suggests the inclusion of ethics in the curricula of schools of public health. While there is a growing consensus that teaching ethics is important, there is little available to guide schools and agencies in the essential aspects of ethics that should be taught to their students and employees.

The list of skills that we present here begins to fill that void. It is intended to provide guidance to faculty in schools of public health and administrators in public health agencies on what to teach about ethics in their curricula and training programs. A skill is a fairly specific task, and one's facility with the skill can be assessed through a performance review or an exam. Thus, for example, a supervisor can assess one's ability to design a process of informed consent.

The road leading to the development of skills in public health ethics

In the 1988 Institute of Medicine report entitled *The Future of Public Health,*, the core functions of public health institutions were identified as assessment, policy development, and assurance. This was an early step in better defining public health in order to better ensure that it is done well. The next step, taken by a group of national public health agencies called the Public Health Functions Steering Committee, was the identification of ten *Essential Public Health Services.* (Example services are: monitor health status to identify community health problems; mobilize community partnerships to identify and solve health problems; and research for new insights and innovative solutions to health problems. The *Council on Linkages Between Academia and Public Health Practice* then translated the Essential Services into eight Core Competencies and itemized component skills under each. This list is intended to guide the education of public health students and practitioners.

Meanwhile, the *Public Health Leadership Society*, with financial assistance from the Centers for Disease Control and Prevention embarked on an effort to create a code of ethics for public health. The desire for a code came out of growing recognition of the inadequacies of medical ethics for guiding public health decisions. The *Public Health Code of Ethics* was finalized in 2001 and was adopted by the American Public Health Association in 2002. Other national public health organizations have also endorsed the Code.

The 2003 Institute of Medicine report entitled *Who Will Keep the Public Healthy?* recognized and valued the development of competencies and skills in public health and the Code of Ethics and suggested the identification of skills in public health ethics. The Greenwall Foundation then funded the University of North Carolina School of Public Health to address this task.

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      │ Essential Services of Public │
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          │ Core Competencies and Skills │   │ Public Health Code of Ethics │
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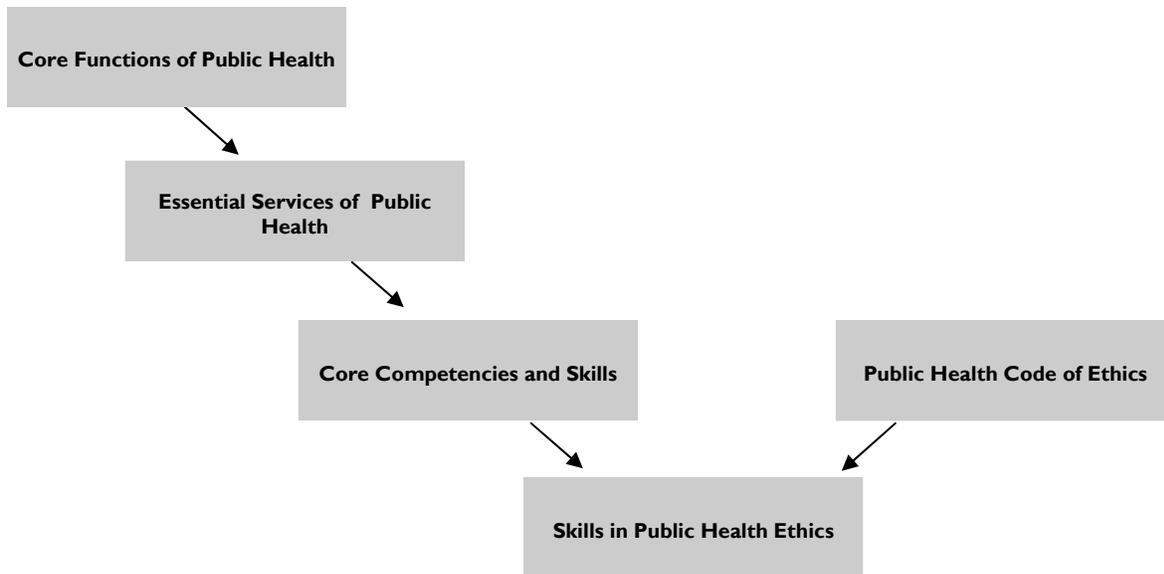
Figure 1. Components leading to the development of skills in public health ethics.

The process of identifying skills in public health ethics

The UNC group felt the list of skills should build on the work already represented by the Public Health Core Competencies. Therefore, the first draft of the skills in public health ethics was simply a list of skills taken from the Core Competencies that were either explicitly ethical or could be made ethical with editing. The skills were presented in two formats: one organized around the eight Core Competencies; the other organized around the 12 principles in the Public Health Code of Ethics.

The skills were then discussed by several representatives of national public health agencies and experts in public health ethics during a two-day meeting. (The group members are listed in an appendix to this document.) They preferred to organize the skills according to the principles of the Code of Ethics because that arrangement highlighted the ethical nature of the task. The group identified several additional skills under each of the principles and some foundational skills that applied to essentially every principle.

The product of the meeting was presented for public discussion at the annual meeting of the American Public Health Association in November, 2003. Following comments from the meeting and discussion among the group of national representatives and ethicists, the skills were finalized. There will be a mechanism for suggesting improvements to the list for future revisions, as well as lists of existing and needed resources for teaching the skills.

Organization of the list of ethical skills

The source tools for the list of ethical skills were the Core Competencies and the Code of Ethics. One of the places these two most clearly overlap is the principle of the Code of Ethics stating the importance of

the competence of public health practitioners. In other words, it is unethical to be incompetent at the job for which one is hired. From this perspective, the skills under the core competencies are inherently ethical. However, we did not include each of the skills in the Core Competencies in the list of ethical skills; we concentrated on those skills where the link to a particular ethical principle was most direct. Ethical skills not listed in the Core Competencies were added to the ethical skills list. In some cases to add an ethical skill we simply added wording to an existing skill from the Core Competencies.

The ethical skills are listed under the individual principles of the Code of Ethics. Some skills apply directly to more than one principle and are thus listed in this arrangement more than once. Whether a particular skill is listed in every place it belongs is less important than whether a skill is ever listed. To identify relevant skills, the group found it helpful to read the background notes for each principle in the Code (part of the Code of Ethics package) and to identify the essence of the principle. A table of the 12 principles and their respective essences is included in the appendices to this document.

The Code of Ethics was written for public health agencies while the Core Competencies are predominantly for individual public health practitioners. The ethical skills we list include skills for both individuals and agencies. There are also skills for both practitioners and academicians. Some skills necessary for academicians may not be essential for practitioners, and vice versa. We have not made this differentiation among the listed skills. We have also not added the levels of skill (aware, knowledgeable, proficient) according to roles (front line staff, senior level staff, supervisory and management staff) that are presented in the Core Competencies. The simplicity of the list of ethical skills is principally a function of the relatively modest amount of time and money available for generating the list. Individual schools and agencies may find it profitable to refine the list according to levels of proficiency for various roles.

Foundational Ethical Skills

A number of skills are foundational to public health ethics. Essentially all of the principles of the Code of Ethics assume or rely upon these skills. Rather than list them repeatedly under each principle, we have separated them out to highlight them as foundational skills. They are as follows:

1. The ability to identify an ethical issue.

2. Ethical decision-making. This is a skill both for individuals and agencies (where it would be a group process). One component of the decision-making process is an identification and weighing of harms and benefits of the potential actions. In economics this is a cost-benefit analysis, but in ethics harms that defy financial quantification must also be included among the costs.

3. Understanding the full spectrum of the determinants of health. This understanding is necessary to identify the best means of prevention. Thus a biologist needs to understand social factors affecting health and a sociologist needs to have a basic understanding of biological processes.

4. Understanding basic ethical concepts such as justice, virtue, and human rights.

5. Building and maintaining public trust. Public health agencies cannot function well in the absence of public trust. Many of the individual ethical skills function to maintain that trust. Yet, in some instances, one may be ethically justified to take a particular course of action that won't build public trust. Thus, what a person or agency ethically *can* do may be different from what it *should* do to cultivate trust.

Resources for teaching the skills

The list of skills is an instrument that most students or employees are unlikely to ever see. Rather it is meant to guide decisions in what they do see, hear, or experience when teachers or supervisors are planning what will be taught about ethics in public health. What, then, are the study aids for teaching the ethics skills? We provide along with the skills an annotated list of resources. In contrast to the list of skills, the resources are organized according the public health competencies. This was done because when presented by the principals in the Code of Ethics, some skills appear under more than one principal; but when organized by the competencies, each skill appears only once. However, we needed to add another competency focusing expressly on public health ethics, which you will find towards the end of the resources document. This new competency category is composed of skills that did not apply directly to the other competencies.

Skills for the Ethical Practice of Public Health

1. Public health should address principally the fundamental causes of disease and requirements for health, aiming to prevent adverse health outcomes.

    * ❖ Recognizes the ethical value the public health community gives to prevention.
    * ❖ Considers the full spectrum of the determinants of health.
    * ❖ Identifies the range of options for interventions that correspond to the full spectrum of determinants of health.

2. Public Health should achieve community health in a way that respects the rights of individuals in the community.

    * ❖ Recognizes the tension between community health and rights of individuals.
    * ❖ Identifies the various conceptions of human rights, including those of the community.
    * ❖ Defines the legal authority of public health agencies.

    * ⭘ Articulates the health, fiscal, administrative, legal, social and political implications of each policy for *vulnerable populations.*

3. Public health policies, programs and priorities should be developed and evaluated through processes that ensure an opportunity for input from community members.

    * ❖ Considers the values of diverse stakeholders when conducting needs assessments and evaluations.

    * • Utilizes appropriate methods for interacting sensitively, effectively, and professionally with persons from diverse cultural, socioeconomic, educational, racial, ethnic and professional backgrounds, and person of all ages and lifestyle preference.
    * • Solicits input from individuals and organizations.
    * • Attitude: Understands the dynamic forces contributing to cultural diversity.
    * • Identifies the role of cultural, social and behavioral factors in determining the delivery of public health services.

4. Public health should advocate and work for the empowerment of disenfranchised community members, aiming to ensure that the basic resources and conditions necessary for health are accessible to all.

    * ❖ Recognizes the ways that advocacy and empowerment can be done.
    * ❖ Represents the needs and perspectives of all relative stakeholders with particular attention to the disenfranchised.

* ❖ A new skill
* ⭘ An edited skill from the Core Competencies (edits in italics)
* • A skill from the Core Competencies

- ❖ Describes issues of access and barriers to public health services.
- ❖ Recognizes the ethical priority the Public Health community gives to the health of the disen-franchised.

- • Solicits input from individuals and organizations.
- • Partners with communities to attach meaning to collected quantitative and qualitative data.
- • Collaborates with community partners to promote the health of the population.
- • Advocates for public health programs and resources.
- • Identifies community assets and available resources.

5. Public health should seek the information needed to implement effective policies and programs that protect and promote health.

- ❖ Determines research priorities with an understanding of areas of the community that have been underserved.

- ⊙ Articulates the health, fiscal, administrative, legal, social and political implications of each policy *for vulnerable populations.*

- • Collects, summarizes, and interprets information relevant to an issue.
- • Develops mechanisms to monitor and evaluate programs for their effectiveness and quality.
- • Defines, assesses, and understands the health status of populations, determinants of health and illness, factors contributing to health promotion and disease prevention, and factors influencing the use of health services.
- • Identifies and applies basic research methods used in public health.
- • Applies the basic public health sciences including behavioral and social sciences, biostatistics, epidemiology, environmental public health and prevention of chronic and infectious diseases and injuries.
- • Identifies and retrieves current relevant scientific evidence.
- • Identifies the limitations of research and the importance of observation and interrelationships.

6. Public health institutions should provide communities with the information they have that is needed for decisions on policies or programs and should obtain the community's consent for their implementation.

- ❖ Specifies the meaning of consent at the individual and group level.
- ❖ Identifies the range of options for obtaining consent at the individual and group level.
- ❖ Recalls historical abuses of informed consent.

- ❖ A new skill
- ⊙ An edited skill from the Core Competencies (edits in italics)
- • A skill from the Core Competencies

- ⭕ Articulates the health, fiscal, administrative, legal, social and political implications of each policy *for vulnerable populations.*

- States policy options and writes clear and concise policy statements.
- Leads and participates in groups to address specific issues.
- Describes the role of government in the delivery of community health services.
- Effectively discusses government role in community service delivery to community members
- Uses the media, advanced technologies, and community networks to communicate information.
- Effectively presents accurate demographic, statistical, programmatic, and scientific information for professionals and lay audiences.
- Develops and presents a budget.

7. Public health institutions should act in a timely manner on the information they have within the resources and the mandate given to them by the public.

- ❖ Discerns the risk and benefits of not acting quickly or not acting at all.
- ❖ Identifies the range of options for responding to unethical practices observed outside of one's realm of responsibility.
- ❖ Recognizes that legal rules can fall short of the ethically required action.

- Prepares and implements emergency response plans.
- Identifies, interprets, and implements public health laws, regulations, and policies related to specific programs.

8.   Public health programs and policies should incorporate a variety of approaches that anticipate and respect diverse values, beliefs and cultures in the community.

- ⭕ Uses the media, advanced technologies, and community networks to communicate information *in a culturally diverse way.*
- ⭕ Identifies the role of cultural, social, *political*, and behavioral factors in determining the delivery of public health services.

- Recognizes the diversity of views driven by the various cultures/subpopulations.
- Identifies issues of access and barriers to public health services.
- Understands the dynamic forces contributing to cultural diversity.
- Utilizes appropriate methods for interacting sensitively, effectively, and professionally with persons from diverse cultural, socioeconomic, educational, racial, ethnic and professional backgrounds, and person of all ages and lifestyle preference.

- ❖ A new skill
- ⭕ An edited skill from the Core Competencies (edits in italics)
- A skill from the Core Competencies

9. Public health programs and policies should be implemented in a manner that most enhances the physical and social environment.

   ❖ Describes the full spectrum of the determinants of health.
   ❖ Identifies best practices for achieving a particular health objective.

   ⬤ Articulates the health, fiscal, administrative, legal, social and political implications of each policy *for vulnerable populations.*

10. Public health institutions should protect the confidentiality of information that can bring harm to an individual or community if made public. Exceptions must be justified based on the high likelihood of significant harm to the individual or others.

   ❖ Discerns and applies different methods of maintaining confidentiality.
   ❖ Describes the potential harms and benefits of giving information about individuals and communities while maintaining confidentiality.
   ❖ Identifies specific circumstances when maintaining trust may justify with holding or delaying the communication of information.

   ⬤ Articulates the health, fiscal, administrative, legal, social and political implications of each policy *for vulnerable populations.*

11. Public health institutions should ensure the professional competence of their employees.

   ❖ Identifies best practices for one's areas of responsibility and action.
   ❖ Determines the range of appropriate actions for addressing unethical behavior.

   ⬤ Helps create *and maintain* key values and shared vision and uses these principles to guide action.
   ⬤ Contributes to the development, implementation and monitoring of organizational *and individual* performance standards *in a timely manner*.
   ⬤ Promotes *individual and* organizational learning.

   ● Creates a culture of ethical standards within organizations and communities.

12. Public health institutions and their employees should engage in collaborations and affiliations in ways that build the public's trust and the institution's effectiveness.

   ❖ Identifies interests and conflicts of interest between potential partners.
   ❖ Articulates how public trust is built or undermined by partner collaboration.
   ❖ Establishes transparency about collaborations to maintain public accountability.

❖ A new skill
⬤ An edited skill from the Core Competencies (edits in italics)
● A skill from the Core Competencies

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- Requests for further information about public health ethics or the Public Health Leadership Society

- Public Health Leadership Society Contact information

Acknowledgements