



Ethics in Epidemics and Disasters: Rights & Obligations of Healthcare Workers

Authors: Andreas Reis
Submitted: 30. August 2015
Published: 30. August 2015
Volume: 2
Issue: 5
Keywords: Health care workers, disasters, epidemics, obligations of governments, obligations of health care workers, ethics, world health organization, WHO
DOI: 10.17160/josha.2.5.53

JOSHA

josha.org

**Journal of Science,
Humanities and Arts**

JOSHA is a service that helps scholars, researchers, and students discover, use, and build upon a wide range of content

Ethics in Epidemics and Disasters: Rights & Obligations of Healthcare Workers



Andreas Reis, MD, MSc
Global Health Ethics Unit



World Health
Organization

Outline

- Background
- Historical Record and Empirical Data
- Arguments
- Conclusion



Source: WHO

Background

- Human resources are the foundation to an effective response to humanitarian crises
- The WHO report "A universal truth: No health without a workforce" - revealed an estimated shortage of almost 7.2 million doctors, midwives, nurses and support workers worldwide (WHO, 2013)
- SARS and Ebola have shown that health care workers (HCW) are at increased risk of infection and death



Background



Basic Questions

- Do health care workers have a duty to care during humanitarian crises? If so, is it unlimited?
- Should health care workers receive priority treatment, prophylaxis or vaccine?
- Which persons are included ("professionals" or others)?
- How and by whom should obligations be formulated and enforced?
- What are the obligations of governments?

Background

- Perspectives on the extent of an HCW's duty of care have not remained constant. Over time, they have become less categorical and more nuanced.



Employees of Stewart & Holmes
Wholesale Drug Co. Seattle, 1918

Courtesy of Grace Loudon Mc Adam

- Considerations of the HCW's personal welfare today play a bigger role.

Historical Record and Empirical Data

"Neither were the physicians at first of any service, ignorant of the proper way to treat it, but they died themselves the most thickly, as they visited the sick most often; nor did any human art succeed any better. Supplications in the temples, divinations, and so forth were found equally futile, till the overwhelming nature of the disaster at last put a stop to them altogether."

Thucydides, History of the Peloponnesian war
(431–404 BC)

Historical Record and Empirical Data

- Galen is reported to have fled from Rome during a plague in 166.
- Defoe indicates in *A Journal of the Plague Year* that most physicians were called "deserters" (1722).
- In the mid-19th century, professional organizations first articulate ethical obligations to provide care during an epidemic.
- For example, the concept was formally introduced in 1847 by the American Medical Association, in absolute terms: "When pestilence prevails, it is a [physician's] duty to face the danger,...even at the jeopardy of their [his/her] own life" (AMA Code of Ethics, 1847).

Historical Record and Empirical Data

- HIV/AIDS in 1980s:
 - vigorous debate about duty to care.
 - both nurses' and doctors' associations firm in reiterating obligation to care for those with HIV/AIDS.
- SARS, Pandemic Influenza, Ebola:
 - Triggered renewed discussions about scope of duties.
 - Risk of morbidity and mortality greater.
 - Statements by professional organisations

Historical Record and Empirical Data

Several empirical studies about HCWs' attitudes

- Taiwan, China:
 - About 57% of the nurses indicated that they were willing to care for patients infected with avian influenza (Tzeng, 2006).
- USA:
 - Nearly half of local health department staff would not report for duty.
 - Perception of the importance of one's role was most influential factor (Balicer, 2006).



Ebola treatment center, Yaba Lagos. WHO

Historical Record and Empirical Data

- Germany:

- Of 644 respondents, 28% agreed that it would be professionally acceptable for HCW to abandon their workplace in order to protect themselves and their families.

- 58% did not believe that the decision to report to work during a pandemic should be left to the individual HCW.

- 77% disagreed with the statement that HCW should be dismissed for not reporting to work during a pandemic (Ehrenstein, 2006).

- Canada:

- Doctors who wanted to abandon posts during the 2003 SARs pandemic in Toronto faced ostracism threats (Sokol, 2014).

2014 Ebola Outbreak Revives Debate

healthydebate

News / World

Use of untested Ebola drugs ethical, says WHO

The statement comes following a meeting Monday of an expert panel asked to assess the ethics of using untested medical interventions in the outbreak.



Tweet

13



1

reddit this!

OPINION: Do health care workers have a duty to treat Ebola victims?

IMPACT ETHICS

Making a Difference in Bioethics

BEYOND THE DUTY TO CARE: EBOLA AND HEALTHCARE WORKER OBLIGATIONS



The ethics of Ebola: 'An opportunity right a wrong of history'

GEOFFREY YORK
JOHANNESBURG — The Globe and Mail
Published Tuesday, Aug. 12 2014, 8:47 PM EDT
Last updated Tuesday, Aug. 12 2014, 9:47 PM EDT

Ebola: When health workers' duty to treat is trumped

Do Doctors Have a Duty to Treat Patients With Ebola?

Stephen G. Post
Professor of Preventive Medicine, Stony Brook University
School of Medicine

Posted: 10/21/2014 12:51 pm EDT | Updated: 12/21/2014 5:59 am EST

FROM OUR PARTNERS

FOLLOW HUFFPOST

ABOUT

SUBS

Search this site

SUBSCRIBE!

Enter your email:

Follow Impact



Types of Obligations

- **Moral** obligations: "right" and "wrong" behaviour, what people "should" do.
- **Professional** obligations: often articulated in codes of ethics.
- **Contractual** obligations: to employer, voluntary.
- **Legal** obligations: imposed regardless of whether it was voluntarily assumed.
- Not mutually exclusive or interdependent.

Obligations and Limits

Arguments for a moral obligation of HCW

- Ability to provide care is greater than of public
- By freely choosing profession, HCWs assumed risks
- Existence of a social contract (Clark, 2005).

Limits/conflicts

- Plurality of roles: Duty to care for oneself and one's family (Obligations of patients?)
- Balance of immediate benefits to individual patients with ability to care for patients in the future (AMA 2004).

Reciprocal Obligations of Governments and Employers

● Minimize risks to HCWs

- Ensure that adequate infection control systems are in place in hospitals and other health care organizations
- Provide preventive measures (e.g. pharmaceuticals, PPE) to HCWs
- Give HCW priority access to medical and psychosocial treatment and support
- These measures are sometimes controversial:
Should HCWs have access to experimental drugs that are not otherwise available to patients in affected countries?

Reciprocal Obligations of Governments and Employers

- Provide adequate education and information
 - Risks associated with taking care of affected patients
 - Protective measures
 - Expectations regarding the duty to provide care and information about consequences of failing to work
 - Information about special benefits



Ebola. Democratic Republic of the Congo, 2007.

Source: WHO

Reciprocal Obligations of Governments and Employers

- Develop benefit systems
 - Medical and social benefits in the case of related illness or disability
 - Death benefits to family members who die as a result of performing their duties during humanitarian crises



Haiti: Earthquake January 12, 2010 - Jimani Dor Hospital El Buen Samaritano

WHO's work on Ethics & Epidemics

- Pandemic influenza, Ebola and epidemic response
- Guidance documents
- Training manual
- Country workshops



Conclusion

- Clear policies specifying obligations during humanitarian crises can be influential, even if they do not create legal obligations, in promoting the compliance of HCWs
- Development of policies in a transparent, equitable, and accountable process will increase acceptability and legitimacy
- Public health policy-makers, employers, and professional associations should engage in dialogue and joint planning

Resources for Further Reading

Recent Academic Literature

- Bensimon, Cécile M., Maxwell J. Smith, Dmitri Pisartchik, Sachin Sahni, and Ross E.g. Upshur. "The Duty to Care in an Influenza Pandemic: A Qualitative Study of Canadian Public Perspectives." *Social Science & Medicine* 75.12 (2012): 2425-430.
- Sokol, Daniel K. "Virulent Epidemics and Scope of Healthcare Workers' Duty of Care." *Emerging Infectious Diseases* 12.8 (2006): 1238-241.
- Upshur, Ross, Dr. "Ebola Virus in West Africa: Waiting for the Owl of Minerva." *Journal of Bioethical Inquiry* (2014): 421-23.
- Venkat, A., and L. Wolf. "Ethical Issues in the Response to Ebola Virus Disease in US Emergency Departments: A Position Paper of the American College of Emergency Physicians, the Emergency Nurses Association and the Society for Academic Emergency Medicine." *Journal of Emergency Nursing* (2015): n. pag. PubMed. Web.
- Yakubu, A., M. O. Folayan, N. Sani-Gwarzo, P. Nguku, K. Peterson, and B. Brown. "The Ebola Outbreak in Western Africa: Ethical Obligations for Care." *Journal of Medical Ethics* (2014): PubMed.

Resources for Further Reading

Newspaper Articles 2014/2015

- "Use of Untested Ebola Drugs Ethical, Says WHO | **Toronto Star**.
- "Do Doctors Have a Duty to Treat Patients With Ebola?" **The Huffington Post**.
- "Beyond the Duty to Care: Ebola and Healthcare Worker Obligations." **Impact Ethics**.
- "Ebola: When Health Workers' Duty to Treat Is Trumped." **BBC News**.
- Taylor, Maureen. "OPINION: Do Health Care Workers Have a Duty to Treat Ebola Victims?" **Healthydebate**
- "The Ethics of Ebola: 'An Opportunity to Right a Wrong of History'" **The Globe and Mail**.

Thank You!

Contact: reisa@who.int

Acknowledgements:

Maryam Shahid, Intern,
Global Health Ethics,
WHO Geneva



World Medical Association: Statement on Avian and Pandemic Influenza

- Adopted by the WMA General Assembly, South Africa, October 2006
- Provides guidance to National Medical Associations and physicians on how they should be involved in their respective country's pandemic planning process
- Encourages governments to involve their National Medical Associations when planning for pandemic influenza

American Nurses Association (2006): "Risk and Responsibility in Providing Nursing Care"

- Acknowledges that some patients' health problems "may raise questions for the nurse regarding personal risk and responsibility for care of the patient".
- To resolve this, "nurses must engage in critical thinking and ethical analysis".
- Describes criteria for a moral duty to provide care.