



Public Health Ethics: Perspectives in Nepal

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ABSTRACT

Public health ethics in Nepal involves navigating the balance between individual rights and the collective good, especially in settings with limited resources. Nepal's distinct socio-economic conditions, cultural diversity, and unequal access to healthcare create significant ethical challenges. This review article delves into these ethical considerations, focusing on cultural sensitivity, equitable access, and the need to balance public health priorities with individual autonomy. Ethical dilemmas frequently arise when allocating scarce resources, particularly in preventive measures like vaccination campaigns, where the needs of the many may outweigh the rights of the few.

Cultural beliefs and practices play a vital role in public health ethics in Nepal. Ethical dilemmas often surface when public health interventions, such as vaccination programs, conflict with deeply rooted cultural beliefs, sometimes fueled by rumors. Addressing these issues ethically requires a culturally sensitive approach that respects local traditions while advancing public health goals.

The COVID-19 pandemic has amplified the ethical challenges within Nepal's public health system. Measures like lockdowns, mandatory use of face mask, vaccination drives, and quarantine protocols raised important questions about individual freedoms versus the collective good. The ethical management of scarce resources, such as ICU beds and oxygen supplies, emerged as a critical issue, demanding transparent and equitable decision-making processes.

Overall, public health ethics in Nepal is shaped by the imperative to balance individual rights with community welfare within a context of resource limitations and cultural diversity. Tackling these ethical challenges is essential for advancing public health and ensuring the well-being of the population.

Keywords: Public health, autonomy, collective good, justice, equity.

BACKGROUND

Public health ethics is a field of study and practice that examines ethical issues arising in public health policies and practices. It involves applying ethical principles and values to decision-making in public health at various levels, from local communities to global populations. It guides policymakers, healthcare professionals, researchers, and communities in navigating complex ethical challenges to promote health and well-being

effectively and equitably. It draws on principles from bioethics, political philosophy, and human rights to inform decision-making that impacts populations at large.

Public health ethics, while critical, has often been a neglected or underemphasized area within healthcare compared to clinical ethics or medical research ethics. This neglect can have significant implications for the effectiveness and fairness of public health interventions.

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Public health ethics has firmly established as an area of lively academic activity with a growing list of engaged participants across the globe. [1] The COVID pandemic has further emphasized that public health is part of everyone's lives.

Public health ethics applies the healthcare principles through professional ethics to foster care and build strong relationships. [2] Public health ethics including the concept of mutuality which is specified by the notions of interdependent concern and care. [3] The mutuality emphasizes shared responsibility, concern, and care between individuals and the community, recognizing that everyone's well-being is interconnected.

Principle based domains – clinical care versus public health

Principle-based domains in ethics refer to frameworks or categories that guide ethical decision-making based on core principles that are consistent and justifiable. These principles help to structure and navigate complex ethical dilemmas by providing a foundational approach to evaluating and resolving moral issues. In public health and healthcare ethics, these domains typically include:

1. **Respect for Autonomy:** This principle recognizes and honors individuals' right to make their own decisions and to be self-governing. In clinical care, this involves ensuring informed consent, respecting patient choices, respecting cultural and religious beliefs and providing the necessary information for decision-making. In public health, it requires balancing individual rights with the collective well-being of the community with community health measures. It addresses conflicts between individual autonomy and public health measures, such as quarantine, use of masks or vaccination mandates, where public health benefits may sometimes outweigh individual preferences. [4]

Public health deals with extensive data and therefore, it is important to protect individuals' private information and ensure that it is not disclosed without consent. Furthermore, anonymity must be maintained as far as possible. In public health, it involves balancing the need for data collection with privacy concerns and ensuring that sensitive information is handled appropriately.

2. **Beneficence:** The obligation to promote the well-being and best interests of individuals and communities. This principle involves taking actions that benefit others, such as providing effective treatments and interventions in clinical care settings but in public health, implementing effective and appropriate policies results in improved outcomes in population health. Public health interventions

often involve trade-offs between individual freedoms and collective benefit. Ethicists consider how to achieve the greatest good for the greatest number while respecting individual rights.

Ethical decision-making in public health requires accountability to stakeholders and transparency in communication. This helps maintain public trust and legitimacy in health interventions.

3. **Non-Maleficence:** The duty to avoid causing harm or injury. Healthcare professionals must avoid causing harm to patients through negligent care or ineffective treatments. In public health, it involves minimizing risks and harm associated with health interventions and policies. Public health ethics promote proactive measures to prevent harm and protect populations from health risks. This includes ethical considerations in vaccination policies, disease surveillance, and environmental health regulations.
4. **Justice:** Justice is the principle of fairness and equity in distributing benefits and burdens. In clinical settings, this involves ensuring fair access to medical care and resources. Ethical frameworks in public health emphasize the fair distribution of resources and interventions across populations. This includes addressing health disparities and ensuring equitable access to healthcare services.

Given the interconnected nature of health across borders, global health ethics addresses ethical dilemmas in international collaborations, resource allocation, and responding to global health crises.

PUBLIC HEALTH ETHICS IN NEPAL

Public health ethics in Nepal emphasize the need to improve health and well-being while respecting people's rights, promoting fairness, and being accountable in public health decisions. Similar to other countries, it deals with various ethical issues and challenges unique to Nepal's healthcare system and context.

1. **Cultural sensitivity:** Cultural sensitivity in public health ethics goes beyond simply respecting diversity; it involves actively integrating cultural understanding into public health practices to enhance health outcomes and promote equity.[5] It is a crucial component of public health ethics, particularly in diverse and culturally rich countries like Nepal. Understanding and integrating cultural perspectives into public health practices can enhance effectiveness, respect, and equity in health interventions. Health, illness, and treatment beliefs are often deeply embedded in cultural and religious traditions, shaping how individuals perceive and react to health interventions.



Health interventions should be tailored to fit cultural practices and values, ensuring they are both respectful and relevant. For instance, vaccination campaigns may need to take local health customs into account. Furthermore, informed consent should be obtained in a way that aligns with cultural norms and communication styles, respecting the local context.

In Nepal, public health initiatives are both ethically sound and effective, gaining acceptance from the communities they serve. Public health ethics emphasizes the need to respect cultural norms, beliefs, and practices when implementing health interventions. This involves ensuring that healthcare services are culturally sensitive and tailored to local contexts, enhancing their acceptability and effectiveness.

2. **Equity and Access to Healthcare:** Nepal faces considerable challenges in ensuring equitable access to healthcare, particularly in rural and remote areas. Public health ethics in Nepal emphasize the importance of developing policies and interventions that tackle disparities stemming from geographic, economic, or social factors, ensuring that all populations, including marginalized communities and ethnic minorities, have access to essential health services. Resource allocation should be conducted in a way that respects cultural values and fairly prioritizes the needs of diverse communities, particularly vulnerable populations. [6] Special situations like disasters and pandemics need special consideration on equity and access.
3. **Community Engagement:** Involving local leaders and community members in decision-making processes to ensure that public health strategies are culturally sensitive and more effectively address community needs. Furthermore, establishing mechanisms for communities to provide feedback and voice their concerns about health interventions promotes participation and collaboration. For example - collaborating with traditional healers or local religious leaders to promote vaccine acceptance.
4. **Ethical practices on public health research:** It is essential to conduct research involving local populations with cultural sensitivity, ensuring that consent is obtained appropriately and local practices are respected. In a public health emergency, when multiple ethics reviews of clinical and vaccine trials are conducted, transparent communication between the Ethical Review Board (ERB) or Institutional Review Committees involved in the process is crucial. [7] In addition, it should be ensured that the benefits of research are shared with the communities involved, and that research findings are disseminated and utilized to address local health needs.
5. **Public Health Messaging:** Crafting of health messages should be linguistically appropriate and culturally relevant. This might involve using local languages and respecting cultural norms in public health campaigns. Stigma associated with certain health conditions should be addressed and overcome through culturally sensitive education and communication strategies. For example - Integrating traditional practices with modern healthcare in maternal and child health programs like birthing center, ensuring that cultural beliefs about childbirth and child-rearing are respected while providing essential medical care.
6. **Infectious Disease Control:** Nepal faces challenges from infectious diseases like tuberculosis, malaria, dengue fever, cholera, and emerging threats such as COVID-19. Public health ethics should guide decisions on disease surveillance, prevention strategies, vaccination programs, and treatment protocols, ensuring a balance between public health objectives and individual rights and privacy.
7. **Healthcare Governance and Policy:** Public health ethics plays a crucial role in shaping healthcare governance and policy formulation in resource constrained countries like Nepal. Ethical principles such as transparency, accountability, and fairness guide decisions on healthcare financing, resource allocation, and regulatory frameworks to ensure that health systems are responsive and equitable.

DISASTER ETHICS IN NEPAL

Nepal's distinct geographical and socio-economic context presents particular challenges and ethical considerations in disaster response. The country is highly vulnerable to natural hazards such as earthquakes, floods, landslides, and glacial lake outburst floods, which necessitate careful ethical deliberation across various domains, from emergency response to long-term recovery.

Ethical Response to Vulnerable Groups: Addressing the needs of vulnerable populations—such as children, the elderly, individuals with disabilities, and those with pre-existing health conditions—is a critical aspect of ethical disaster response. It is also essential to protect these groups from exploitation or abuse during the chaos of disaster situations.

Distributive Justice: Ethical decision-making in disaster scenarios involves triaging and prioritizing care, particularly when allocating scarce medical resources. This requires balancing the urgent needs of immediate disaster relief with planning for long-term recovery and maintaining flexibility in resource allocation.

The response to the 2015 Nepal earthquake underscored ethical challenges related to resource distribution, as some regions received more aid than others. Ensuring equitable distribution of assistance was a major concern. While efforts were made to respect local customs in rebuilding, aligning international aid with local needs and practices posed difficulties. [8]

In flood-prone areas, integrating local knowledge about flood patterns and traditional coping mechanisms into disaster preparedness plans is crucial for enhancing resilience. It is important to ensure that evacuation plans and relief efforts are conducted with careful consideration of vulnerable populations, upholding ethical standards of fairness and respect.

PUBLIC HEALTH ETHICS DURING COVID-19

Public health ethics during the COVID-19 pandemic presented complex and often challenging issues. Balancing individual rights with community welfare, ensuring equitable access to resources, and maintaining transparency were central concerns. [8] Some of the key ethical considerations that emerged during COVID-19 are discussed here.

1. **Balancing Individual Rights and Public Safety:** Implementing restrictions on movement and social interactions measures like quarantines and lockdowns raised questions about the extent to which individual freedoms could be restricted for the sake of public health. This was an important component of public health ethics. After the availability of vaccines, debates arose over whether governments could or should mandate vaccines, balancing public safety with personal autonomy. In the absence of a vaccine or adequate treatments, societies fall back upon some of the oldest and simplest forms of infectious disease control like quarantine, isolation, physical distancing, the creation of barriers at borders. [9]
2. **Resource Allocation:** With limited healthcare resources particularly ICU beds, ventilators, and other critical resources, ethical decisions were needed about how to allocate these resources fairly and effectively. Similarly, deciding who gets priority for vaccination - healthcare workers, high-risk populations, or the public - required ethical considerations about equity and justice.
3. **Equity and Access:** The pandemic highlighted and often exacerbated existing inequalities in healthcare access. Addressing these disparities was crucial in ensuring fair treatment and outcomes for all populations. The economic consequences from lockdowns and other restrictive measures disproportionately affected marginalized communities, raising ethical concerns about how to support those most affected.

Patients and their contacts, people on quarantine and even hospital staff dealing with testing or working in hospitals, isolation wards or quarantine centers were stigmatized as 'possibly infected' and even denied food and accommodation [10]. In the context of COVID-19, the stigmatization and shaming of Japanese healthcare providers persisted as human rights issues that impact the safety and well-being of everyone. [11]

4. **Transparency and Communication:** Effective public health responses required clear, honest communication about the risks and uncertainties associated with COVID-19. Misinformation and lack of transparency could undermine public trust and compliance with health guidelines. The use of contact tracing and other surveillance tools raised concerns about privacy and the potential misuse of personal data.
5. **Global Solidarity:** The pandemic underscored the need for global solidarity and cooperation, with ethical considerations about sharing resources including vaccines, and information across borders. Ensuring that low-income countries had access to vaccines and treatments was a significant ethical issue, emphasizing the need for equitable global health strategies.
6. **Ethical Research Practices:** The rapid development of vaccines and treatments required balancing speed with rigorous scientific evaluation to ensure safety and efficacy. While obtaining informed consent, ensuring that participants in vaccine clinical trials were fully informed and understood the risks was a critical ethical consideration.

Navigating these ethical challenges required careful consideration of values such as justice, equity, and the common good, and often involved making difficult trade-offs in the face of exceptional circumstances.

THE WAY FORWARD

Contemporary issues in public health ethics are diverse and complex, reflecting evolving societal values, advancements in technology, and ongoing challenges in health equity.

1. **Integration into Education:** Incorporating public health ethics into healthcare and public health education and training programs to ensure that professionals are well-prepared to handle ethical challenges. Health equity and social determinants of health such as socioeconomic status, education, and access to healthcare reducing health disparities need to be emphasized.
2. **Development of Guidelines:** Creating and disseminating standardized ethical guidelines and frameworks specifically for public health practice to



provide clarity and consistency. Examples include equitable health policy guidelines, data privacy guidelines etc. The rise of digital health tools and electronic health records causes ethical concerns about the privacy and security of personal health data.

3. **Promoting Research:** There is a scope to promote research focused on ethical issues in public health to develop evidence-based approaches and solutions. Priority areas of research include the health impacts of climate change, the effects of extreme weather events, air pollution, and changing disease patterns.
4. **Public Engagement:** Enhancing public awareness and engagement with public health issues and the ethical considerations involved to foster informed discussions and support. To ensure public engagement, strategies should be developed for transparent and effective communication to tackle public concerns. For example - addressing misinformation and disinformation like rumors about vaccines and other health measures is critical for maintaining public trust and promoting vaccine uptake. Similarly, integrating the policies on environmental sustainability into public health facilitates mitigation of potential adverse effects on health.
5. **Policy Emphasis:** Ensuring that ethical considerations are integrated into public health policy development and implementation to promote fair and equitable health interventions. For example - ethical issues related to advances in genetic editing, fertility treatments, and reproductive technologies, including concerns about equity, consent, and potential societal impacts. This incorporates the ethics of collecting, storing, and using biological samples for research, including issues of consent and data privacy. Another example can be evaluating the ethical implications of resource allocation policy on different populations and ensuring that it does not affect vulnerable groups disproportionately.

These issues reflect the dynamic nature of public health ethics as new challenges and technologies emerge, requiring ongoing dialogue and adaptation to ensure that public health practices uphold ethical principles and promote health equity.

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