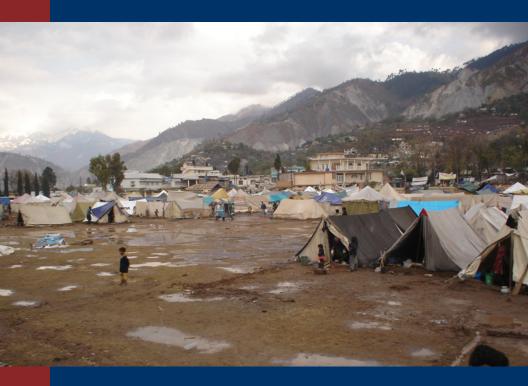
HUMANITARIAN HEALTH ETHICS ANALYSIS TOOL

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HHEAT Handbook July 2014

http://www.humanitarianhealthethics.net

For more information or to provide feedback on this tool, please write to **humethnet@gmail.com**.

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EXECUTIVE SUMMARY

The HHEAT is an ethical analysis tool designed to help humanitarian healthcare workers make ethical decisions. It consists of 3 components: (1) a summary card highlighting key questions, (2) a handbook providing an overview of the tool, and (3) a worksheet for recording the decision-making process. The tool was inspired by research examining ethical challenges and moral distress experienced by humanitarian workers. The HHEAT has been tested and validated by humanitarian workers and experts from the fields of humanitarian medicine and nursing, as well as applied ethics.

OBJECTIVES

By providing a step-by-step approach to complex ethical decision-making, the HHEAT ensures that the process is more comprehensive and transparent. It helps structure and support individual as well as group deliberation by promoting rational discussion and moral justification. The tool can be used in pre-departure training to work through common cases and scenarios, in the field when ethical issues arise, or in debriefing sessions after particularly difficult decisions. Ultimately, the tool supports and promotes moral justification of difficult decisions, a critical consideration for humanitarianism in the 21st century.

HHEAT: AN OVERVIEW

The HHEAT consists of a 6-step process summarized below. A more detailed account can be found in the handbook.

1. Identify/Clarify the Ethical Issue

Determine whether an ethical issue exists and summarize it clearly and concisely. This summary should highlight pertinent features of the situation as well as principles and moral values in an objective manner.

2. Gather Information

Collect data and consider 3 sources of information that are especially relevant in humanitarian aid contexts:

a) Resource Allocation and Clinical Features

In all healthcare contexts, ethical decisions relating to the care of individual patients require a comprehensive understanding of relevant clinical features. This analysis should include data gathering on diagnosis, prognosis, treatment options and patient and family preferences on goals of care. In humanitarian contexts, data gathering might extend to considerations of public health concerns and the allocation of scarce resources. Determining what resources are available, and how resources ought to be allocated merits considerable attention and may demand critical thinking and a creative approach.

b) Participation, Perspectives and Power

Humanitarian healthcare aid occurs in contexts where socioeconomic inequalities, colonial histories and violence and oppression may operate on a variety of different levels. This step of analysis involves consideration of how multiple perspectives are integrated into the decision-making process. This includes considering the position, relationships and participation of various stakeholders.

c) Community, Projects and Policies

In humanitarian contexts it is important to question how cultural frameworks and personal and collective histories affect how the issue is understood. Analysis could also include exploration of the impact of staff turnover, organizational culture, clarity of program and organizational objectives, and structures of accountability and responsibility.

3. Review the Ethical Issue

Assess all the information that has been gathered, identify important knowledge gaps as well as obstacles or impediments that may hinder or make potential courses of action difficult or impossible. If necessary, reformulate or re-articulate the ethical issue in light of these emerging considerations.

4. Explore Ethics Resources

A variety of ethical resources are available to help support ethical decision making in humanitarian contexts. This step of analysis promotes consideration of ethical arguments in greater detail and facilitates more robust ethical justification. Ethical resources include: (a) professional moral norms and guidelines for healthcare practice; (b) human rights and international law; (c) ethical theory; and (d) local norms, values and customs.

5. Evaluate and Select the Best Option

Generate as many options as possible to respond to the ethical issue and identify the positive and negative consequences that may result from each course of action. The values, principles and moral arguments justifying each course of action should be analyzed and compared. In light of this analysis, options should be weighed, and the 'best' option, or cluster of options, selected. An implementation plan should be formulated.

6. Follow-up

Follow-up on the decision taken so that ethical choices can be evaluated in light of outcomes. It is important to ascertain whether the anticipated outcome occurred, whether it was satisfactory, and whether or not a debriefing might be helpful. Reflecting on the decision-making process may prompt proactive approaches to avoid similar ethical issues in the future, or may be helpful in informing future approaches.

CONCLUSION

The HHEAT is intended to facilitate discussion and deliberation so that teams can implement decisions for which ethically important features have been considered and values and consequences have been weighed. Using the tool can also help individuals and teams structure their reflection and deliberation. This process should promote well-considered and ethically defensible responses to particular situations of ethical uncertainty in humanitarian healthcare.

INTRODUCTION

1. Supporting Ethical Practice in Humanitarian Healthcare

Humanitarian healthcare workers are trusted to provide support and assistance to vulnerable groups and populations. This relationship means that humanitarians have a responsibility towards those to whom they provide care and assistance, and an obligation to consider how and why they make choices. The Humanitarian Health Ethics Analysis Tool (HHEAT) was designed to provide humanitarian workers with a readily accessible, quide ethical decision-making. The Health and the statement of the support of

Humanitarian Health Ethics Analysis Tool

1. Identify/Clarify the Ethical Issue:
What is st stake and for whom?

2. Gather Information.

3. Review the Ethical Issue:
Does information gathered lead us to reformative the survey of the state of the survey of the survey of the state of the survey of the survey

Full-scale version of the HHEAT cards is available on page 33.

workers with a readily accessible, action-oriented resource to help guide ethical decision-making. The HHEAT was inspired by stories told by humanitarian healthcare workers about the ethical challenges they had experienced in the field.^{1,2} The tool responds to some of the key themes emerging from these narratives and draws attention to ethical features of humanitarian aid contexts.

The HHEAT is intended to promote:

- a systematic, step by step, approach to complex ethical decision making
- a more comprehensive decision-making process
- group deliberation which is rational and less prone to emotionally charged arguments
- debriefing sessions after particularly difficult decisions
- documentation of the process and rationales for difficult decisions

The aim of ethical deliberation is not necessarily to claim that there is one "right" answer to many vexing ethical issues, but to enrich discussion of what makes something right or wrong by considering multiple perspectives and justifying why you (and/or your team) decide to take one course of action over another. Moral justification is an important part of assuming moral responsibility and accountability, both of which are essential to humanitarianism. The HHEAT, combined with a variety of other approaches, such as: international and human rights law, professional moral norms, humanitarian policy guidelines, and ethical theory, amongst others, can help foster a more comprehensive and systematic approach to ethical analysis and help generate recommendations.

2. The Moral Context of Humanitarian Aid

Over the past few decades there has been increasing discussion of the ethics of humanitarian healthcare aid. Some of the more common topics examined have included whether aid results in unintended harms,³ the roles the fundamental humanitarian principles should play in guiding relief work,⁴ the nature of relationships between militaries and humanitarian organizations,⁵ best strategies for accountability of humanitarian actors,⁶ and resource allocation within organizations,⁷ amongst others. This broad level of discussion has led to reflection and debate among members of the humanitarian community, and by academics and other commentators, regarding the identity and value of humanitarianism.⁸ It has also prompted a number of international initiatives intended to improve standards of best practice, promote evaluation of outcomes, and increase accountability of aid organizations.^{9,10}

The ethical issues faced by humanitarian healthcare workers have also received attention. 11-14 In one study, interviews with humanitarian workers identified four key sources of ethical challenges: resource allocation and scarcity; inequalities associated with historical, social, political and commercial structures; aid agency policies and agendas; and norms around health professional roles and interactions. 10 While many ethical issues encountered in the field are resolved on a daily basis, others present challenges that can lead to moral distress and uncertainty which sometimes lingers long after the situation has ended. 15

Four sources of ethical challenges

Resource scarcity

"....going as a doctor you know people expect you to look in their throats and listen to their chests but if you don't have medicines to treat whatever you find, it puts you in an awkward situation right?"

Historical, political, social and commercial structures

"....to be living in a nice house in a gated community in rural Africa where you step outside the door and there are people living in huts... And every morning the nice white vehicle would come and pick us up and bring us to the district hospital."

Aid agency policies and agendas

"....from the point of view... of the mother who's got a sick child... this guy marching in with an armload of drugs and a clipboard to just treat some patients and then walk and leave these other patients was inexcusable."

Professional norms

"....if a woman is in obstructed labour and there is nobody else to help, I'll do a casearean section but you know, I prefer not to because I'm not an obstetrician and I'm not very comfortable doing it."

3. How to use the Tool, Worksheet and Handbook

a) What are the components of the HHEAT?



- Summary card highlighting key questions for consideration of ethical issues.
- Handbook providing a detailed overview of the HHEAT, including explanations of the decision-making process.
- Worksheet outlining key elements of the decision-making processes and providing space for recording the deliberative process.

b) How is the HHEAT used?

To use the HHEAT effectively you may want to spend more time on certain steps, skip over subsections or questions which are not relevant to a particular case (though the six major sections should be completed), revisit questions as new information becomes available and approach the overall analysis in a manner which is flexible and adaptable. The HHEAT is not intended to be used like a recipe or a checklist. Increased familiarity with humanitarian ethics, and other ethics resources (described on page 19), will enhance the usefulness of the HHEAT.

HOW?

- Not as a recipe or a checklist.
- Spend time on most relevant steps. Revisit questions as information becomes available or situation changes.
- Document decision and rationale.
- In combination with other approaches to address ethical issues.

c) When should the HHEAT be used?

The HHEAT is useful for group decision making, especially when there is the potential for conflict between team members, or when people are emotionally invested in an issue and feelings are running high. The HHEAT can also be used in debriefing sessions; review of cases can be helpful when moral issues reoccur or when the outcome of a process or decision was unsatisfactory. Going through this process in a structured and comprehensive manner may help address feelings of guilt or uncertainty arising from difficult ethical decisions. The HHEAT may also prove useful in times of crisis, or when decisions have potentially grave consequences and the discussion might benefit from a more systematic, comprehensive and structured approach.

WHEN?

- Analysis of ethical issues.
- Team based decisions.
- Pre-departure training courses.
- Retrospective debriefing sessions.
- Opening or closing projects.
- · Decisions with significant consequences.
- Recurrent ethical issues or when outcomes proved unsatisfactory.
- Decisions that are emotionally charged.
- Contexts of frequent staff turnover.

The best time for ethical thinking might not be in the heat of the moment, but in an atmosphere of relative calm. Moreover, in acute and emergent scenarios, there may simply not be enough time to use the HHEAT. Thinking about the ethical issues you are likely to encounter in advance, such as during pre-departure training, or before beginning a particular project, means that you are not starting at zero when you find yourself confronted with an ethical issue in the field. For further reading, including case studies, on commonly encountered ethical issues in humanitarian aid, see: http://www.humanitarianhealthethics.net.

The middle of an acute crisis might not be the ideal time for thoughtful ethical discussion and reflection

- ▶ Anticipate and consider the types of ethical issues you might encounter *before* you enter the field
- Revisit decisions after they have been made:
 - Was the right outcome achieved?
 - How should similar situations be handled in the future?

d) Who should use the HHEAT?

The HHEAT was designed to help guide ethical deliberation by a range of people.

WHO?

- Field workers
- · Participants in pre-departure training
- Students
- Policy makers
- Organizational leaders

PHOTO: JOHN PRINGLE

HHEAT: AN OVERVIEW

1. Identifying/Clarify the Ethical Issue



The first step of the HHEAT requires briefly summarizing the elements of the situation that present an ethical issue. It may be helpful to proceed as though you are explaining the case to someone who is unfamiliar with it. This summary should highlight pertinent features of the situation and associated values in an objective manner. Sometimes

it may be helpful to formulate an ethical issue in terms of a "versus" statement: for instance, impartiality versus access; or respecting local values versus avoiding harm. Because ethical issues often arise when there is disagreement between people, it is equally important to consider how the ethical issue has the potential to impact and implicate different actors (more on this in step 2 b).

Identify the ethical issue

- a) Is it really an ethical issue?
- b) What is at stake and for whom?
- c) How is the issue perceived from different perspectives?
- d) What practical concerns need to be identified?

a) Is it really an ethical issue?

Ethical issues arise when the ethically defensible response is unclear or contested, when the ethical response is clear but cannot be enacted, or when what seems to be the "right thing to do" also appears wrong in some important way. Serious ethical issues are sometimes called ethical dilemmas; referring to instances where you are confronted by a choice in which each course of action is wrong in some important way. In a true ethical dilemma, each potential course of action will violate an important moral principle. Sometimes, decision making in these cases may be challenging, and even distressing. However, the difficulty of resolving ethical dilemmas is not a reason to give up trying to understand the right thing to do. 16 As troubling as these decisions might be, they also present an opportunity to contemplate the best thing to do under the circumstances.

Questions to consider in determining whether an ethical issue is present

- Could this decision or situation be damaging to someone or to some group?
- Does this decision involve a choice between two "goods" or between two "bads"?
- Is the right decision apparent, but cannot be implemented due to features of the situation?
- Is this issue more than about what is legal, efficient or acceptable? If so, how?

b) What is at stake and for whom?

Often, ethical issues arise when it is difficult to prioritize, or accommodate and reconcile, between different principles, values, and/or moral beliefs. Ethical issues may also arise when principles and values conflict with one another.

You might experience:

- Tension between commitments/values/duties
- Conflict between your values/approaches and those of others
- Background conditions which impinge on your values
- Feeling unable to act on your commitments/values/duties
- Uncertainty about which values are more relevant
- Difficulty prioritizing between values, or determining how all relevant values can be accommodated

Questions to help determine the scope of the ethical issue

- What ethical values, principles or norms are relevant to the issue?
- Are they in tension?
- Who will be affected by the outcomes of the decision and in what ways? Who for the better and who for the worse?
- Amongst those affected, will vulnerable or marginalized groups or individuals be burdened by the decision?
- How can burdens be diminished?

c) How is the issue perceived from different perspectives?

An ethical issue is often perceived differently by those involved. Ethics is composed of various moral theories and values which may differ from one society to the next and often varies even within a given society or group. In addition, people of the same cultural background and with the same worldview, might perceive a problem differently depending on their proximity and involvement in the situation. It is realistic to expect that ethics will be something about which reasonable people might disagree. Tonsidering how the issue might be understood from different perspectives, as well as the possibility of divergent goals, is

essential. Depending on the nature of the issue, this step can include considering perspectives of local communities, patients/families and colleagues, as well as other organizations or stakeholders.

Questions to consider in order to evaluate multiple ethical perspectives

- Are there different views on the issue and/or different goals for resolving it?
- How is the issue experienced/understood by different stakeholders?

d) In summarizing the ethical issue, consider what practical concerns need to be identified:

- When must a decision be made?
- Who is responsible for making a decision?
- What has been done so far to address this issue?

2. Gather Information



The second step of the HHEAT highlights three specific data gathering categories:

- a) Resource Allocation and Clinical Features,
- b) Participation, Perspectives and Power, and
- c) Community, Projects and Policies.

These categories reflect various

domains of information that are especially relevant when deliberating on ethical issues in humanitarian healthcare contexts.

a) Resource Allocation and Clinical Features

If the ethical issue relates to the care of a specific patient, the relevant clinical features of the case should be explored. It is important to

Resource Allocation and Clinical Features

- Are human/material resources in short supply?
- How have resources been allocated?
- What is the rationale for this approach?
- What limits and opportunities exist for increasing access to resources?
- What are the relevant clinical features (diagnosis, treatment options, prognosis)?
- What are patient/family preferences/goals/expectations?
- How do the needs of specific patients relate to the needs of the broader community?

consider the diagnosis, all possible treatment options, and the risks, benefits and prognosis associated with each treatment option. Patient and family perceptions and values surrounding goals of care must be established. Instances in which duties to the individual patient conflict with larger public health goals deserve special consideration (for examples of how to approach instances where duty to an individual patient may conflict with other obligations, see: Schwartz et al., 2012;¹⁸ Physicians for Human Rights, 2003.¹⁹)

The fair distribution of scarce resource is an important and frequently encountered issue in humanitarian healthcare, where the severity and magnitude of need may be coupled with inadequate or insufficient resources. In one qualitative study, a humanitarian worker described how the team's only oxygen machine generated "100 ethical discussions". Analogous situations are commonplace. Determining what resources are available, how resources ought to be allocated, and how resource limitations should be approached in the short and long term merits considerable attention and may demand critical thinking and a creative approach.

b) Participation, Perspectives and Power

Humanitarian healthcare aid occurs in contexts where socio-economic inequalities, exploitive commercial industries, colonial histories, and violence between social groups or between nations operate on a variety of levels. Humanitarian workers often report feeling moral distress and ethical tension when confronted with situations arising

Participation, Perspectives and Power

- Have we involved all who should be involved?
- What is the impact of the professional, social and moral norms of our home countries on how we understand the issue?
- What impact do personal biases, goals and values have on our understanding of the situation and how do these relate to those of the community and others involved?
- How does our response relate to our motivation and purpose for our work in the community?
- Are people being treated unequally? Is the rationale for doing so sound?
- Are there opportunities to promote (individual or collective) decision making and contribute to the development of local capacity?
- How are asymmetries of power relevant?

in these challenging contexts. For instance, healthcare workers have reported feeling distress when confronted by gender inequality;¹ and unfair differences in the treatment of national and expatriate staff with regards to the division of labour, remuneration and security.^{1,21} Being attentive to the perspectives of different stakeholders as well as the degree to which these perspectives are included in decision making is important. In addition, attention to power dynamics related to the issue may help generate a clearer understanding of features underpinning an ethical decision, which might otherwise remain hidden.

To promote inclusion of these perspectives, all relevant stakeholders should be invited to participate in ethical deliberations. At the very least, rationales for who is included in discussion should be carefully considered and justified. In addition, there may be colleagues within the organization, perhaps in a neighbouring project or at headquarters, who can provide insight into the issue. When considering seeking outside input, considerations related to confidentiality should be carefully evaluated. In addition, it is pertinent to question how cultural frameworks and personal and collective histories affect how an issue is understood.

c) Community, Projects and Policies

Organizational policies, project mandates and community characteristics impact ethical decisions. These influences should be clarified. For instance, healthcare professionals are part of a medical community, and norms surrounding professional hierarchies, roles and interactions may

Community, Projects and Policy

- What local cultural, social, economical and political features are relevant to the issue? Are there features that are not sufficiently undertood?
- What is the impact of this issue on collaboration between different actors and on trust in these relationships?
- How do legal and professional parameters of practice (local and international) relate to the issue?
- What are the project's goals? Do they match the goals of the community partners?
- Are there security issues?
- What organizational policies relate to this issue?
- Are policies sufficiently clear and responsive to the issue at hand?
- What is the influence of organizational structures, mandates and cultures?

be different in humanitarian contexts.¹³ However, health professionals providing aid in humanitarian crises might consider performing clinical tasks that would exceed scope of practice due to a lack of human resources, a scenario raising legal and ethical concerns.

Exploring how community features and values align with project policies, goals and procedures is also an important source of information. Project mandates may not always fit perfectly with the needs of a community, raising concerns about the quality and types of care being provided; for instance, vertical programs may be excellent at targeting a specific disease, while failing to adequately address other pressing health needs in the population. Coordination and communication between humanitarian actors can also impact the quality and comprehensiveness of care provided. Further considerations include: the impact of staff turnover, organizational culture, clarity of program and organizational objectives and policies, and structures of accountability and responsibility.

3. Review the Ethical Issue



This step allows you to review and assess all information that has been gathered so far, identify important knowledge gaps (if any), and reformulate or reframe the ethical issue in light of new facts and discussion.

It is also helpful to identify any obstacles or impediments that may hinder outcomes, or make potential courses of action difficult or impossible.

Questions to consider when reviewing and, if necessary, reformulating the ethical issue in light of new information

- Does the process so far reveal new aspects of the ethical issue or suggest the need to reformulate or redefine the issue (from step 2 a)?
- What information is missing from our data gathering and how can we account for these information gaps in decision-making process?
- Do any features act as impediments or constraints to the situation and contribute to the ethical issue?
- Are any obstacles related to agencies policies and agendas?
- Have our biases/interests affected how we perceive the issue?

4. Explore Ethics Resources



draws This step attention the ethical approaches which available are in humanitarian healthcare aid including: professional moral norms and guidelines for healthcare practice: b) human rights and international law; c) ethical theory; and, d) local norms, values and customs. Each of these approaches provides insight on how to approach ethical

issues, though none may be sufficient on its own to respond to the complexity of any one ethical issue.²² It may thus be helpful to draw on a variety of different sources in order to arrive at a more comprehensive response.

a) Professional Moral Norms and Guidelines for Healthcare Practice

Many humanitarian organizations expect their staff to look to **professional codes of ethics and professional moral norms** for guidance in the field. Most healthcare professionals are members of professional organizations with ethical codes of conduct and standards for professional practice. Clinicians rely on these parameters, grounded in national law, and social and professional consensus, to determine ethical action.²² However, application of professional codes of conduct and professional norms may be limited in humanitarian contexts where expectations, standards of care, and clinical realities may differ.¹⁸

International professional agencies offer guidelines to orient healthcare professionals with respect to their individual duties and obligations.^{23,24} In recent years, humanitarian guidelines have been developed to improve recognition of ethical principles and promote accountability in humanitarian healthcare work.⁸ The Sphere Project

International Professional Guidelines	Available at:
Code of Ethics for Nurses (ICN, 2006)	http://www.icn.ch/about-icn/code-of-ethics-for-nurses/
International Code of Medical Ethics (WMA, 2006)	http://www.wma.net/en/30publications/10policies/c8/
Statement on Medical Ethics in the Event of Disasters (WMA, 2006)	http://www.wma.net/en/30publications/10policies/d7/
National Professional Guidelines	
Codes of ethics of home and host countries	(See healthcare professional websites)
Humanitarian Guidelines	
The Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere Project, 2011)	http://www.sphereproject.org/handbook/
The Code of Conduct for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief (IFRC, 1994)	http://www.ifrc.org/en/publications-and-reports/code-of-conduct/
The Mohonk Criteria for Humanitarian Assistance in Complex Emergencies (1994)	http://repository.forcedmigration.org/show_metadata.jsp?pid=fm o:2934

represents one of the most widely recognized efforts to establish common principles and minimum standards in humanitarian response. The Humanitarian Charter and Minimum Standards in Disaster Response emphasize the right of disaster-affected populations to a life with dignity and the humanitarian duty to provide protection and assistance. It also stresses the importance of the active participation of affected populations. The Code of Conduct for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief (1994) is a voluntary code of conduct with over 500 NGOs as signatories. The IFRC Code of Conduct is aimed at maintaining standards of ethical conduct and describes 10 principles humanitarians should abide by in disaster response.

b) Human Rights and International Law

Humanitarianism has increasingly turned to the language of human rights for ethical justification. Rights based approaches to health emphasize the duty and obligations we owe others based on a shared and universal human dignity. Rights to health are embedded in several UN declarations, many of which assume some minimum standard of health as a precondition for ensuring human dignity. Special attention has been given to the rights of children and women to freedom from suffering and the freedom to exercise health choices.

The ideas of a right to life and essential human dignity are captured in humanitarian principles and in international humanitarian and human rights law. **International humanitarian law** provides a set of rules to guide and limit the effects of armed conflict. In contrast to international humanitarian law, **human rights law** is more complex and includes regional treaties. Human rights law applies in peacetime, and provisions may be suspended during an armed conflict.²⁵ There is

Want to know more about human rights and humanitarian action?

- Inter-Agency Standing Committee (2002).
 Growing the Sheltering Tree Protecting Rights Through Humanitatian Action.
 - Available at: http://www.unicef.org/publications/index_4397.html
- Inter-Agency Standing Committee (2011).
 IASC Operational Guidelines on the Protection of Persons in Situations of Natural Disasters.

Available at:

https://docs.unocha.org/sites/dms/Documents/Operational%20Guidelines.pdf

TO: LYNDA REDWOOD-CAMPBELL

considerable debate surrounding the nature, scope and applicability of human rights and international law and considering how best to honour human rights can at times be complex. However, basic familiarity with human rights and international humanitarian law is important because it familiarizes you with legal standards of right and wrong conduct, and can be important for advocacy and negotiation efforts.

Some examples of Laws, Treaties and Conventions			
Human Rights Declarations Available at:			
Universal Declaration of Human Rights (1948)	http://www.un.org/en/documents/udhr/		
International Convention on Economic, Social and Cultural Rights (1966)	http://www.un.org/Pubs/CyberSchoolBus/treaties/economic.asp		
International Covenant on Civil and Political Rights (1966)	http://www.un.org/Pubs/CyberSchoolBus/treaties/civil.asp		
Convention on the Rights of the Child (1989)	http://www.un.org/cyberschoolbus/treaties/child.asp		
International Humanitarian Law			
The Geneva Conventions of 1949 and their Additional Protocols relating to the protection of victims of armed conflict	http://www.icrc.org/eng/war-and-law/treaties-customary- law/geneva-conventions/index.jsp		

c) Ethical Theory

The following is a snapshot of the ethical theories which have been the most widely used in discussions of humanitarian healthcare aid. Considering an issue with these theories in mind might help you to justify why you think a particular action is good, or the best thing to do, under the circumstances. It might also help you think through some potential limitations or objections to your approach and allow you to respond to them. Please note that many ethical theories exist and not all are covered here. Furthermore, the summary of theories given here may leave you with more questions than answers. A bibliography with references can be found at: http://www.humanitarianhealthethics.net.

Deontology:

Deontological theories – sometimes referred to as duty-based ethics – focus on duties and rules as a basis for ethical action. A duty is an obligation to always act a certain way, regardless of consequence, because to act in that way is the right thing to do.

For example, health care professionals have a "fiduciary" duty towards their patients. This simply means that they are trusted by patients to provide care and support. A deontologist would argue that health care professionals have a duty to always tell the truth, because if they don't—suppose they only told the truth sometimes— it would undermine the trust patients place in them and compromise an important part of the clinician-patient relationship: trust. In this view, for a duty or obligation to hold, it needs to apply to everyone, always. Another important aspect of duty based theories, is that they recognize the fundamental worth

of all human beings; one human life counts just as much as any other. Humanitarian workers often draw on this idea of duty, in which actions are considered right or wrong, no matter what consequences they produce. For instance, humanitarian workers who refuse to participate in any local practice of female genital cutting²⁶ often adopt a duty based response favouring the dignity of human beings over an approach weighing the risks and benefits of harm reduction. Professional guidelines and codes of ethics, one of the main ethical resources available to healthcare professionals practicing in humanitarian healthcare contexts, consist of duty based statements in which professionals are provided with a set of universal rules about what behaviour is right or wrong, good or bad.

Limitations to Deontology: A significant problem confronting deontology is that duties often come into conflict with one another, and it is difficult to know what to do when this happens. For example, Sheather and Shah (2011) describe an ethical dilemma encountered by humanitarian workers who must decide whether to disclose HIV positive status to individuals in contexts where antiretroviral treatment is unavailable. The dilemma: the duty to tell the truth versus a duty to "do no harm" (disclosure of HIV status might do more harm than good in a community in which HIV/AIDS stigma is high and treatment unavailable) occurs between two duties. Duty based theories provide little clear guidance on how to resolve this type of conflict. Secondly, deontology does not consider the actual consequences resulting from an action to be important in evaluating whether the choice is good or bad. For example, the duty to "tell the truth" means that we should always do so, even if this might do more harm than good. Deontologists respond to this by stating that we can't know, or reliably predict the future, and therefore, we must honour those rules and duties that make the most sense in the present.

Consequentialism:

Consequentialism focuses primarily on consequences and outcomes. One of the most important types of consequentialism is utilitarianism. Utilitarians believe we should try to generate the greatest overall good for a group or population, and that this can be predicted by measuring and calculating the benefits and burdens which result from an action.²⁷

Utilitarianism informs decision making in humanitarian healthcare in a variety of ways, for example, consider triage and resource allocation decisions where needs vastly exceed available resources.⁶ In such instances, a consequentialist would argue that an approach which maximizes health by meeting the needs of the greatest number of people is the right thing to do (achieves greater good for a greater

number of people), even if achieving this goal means not treating certain individuals who are sick and require care. For similar reasons, utilitarian calculations also serve as the justification for many decisions prioritizing public health interventions. For example, many humanitarian NGOs have refused to provide tuberculosis (TB) treatment in areas of instability and conflict, where there is doubt that the full course of treatment can be sustainably completed. Concerns about the development of drug-resistant TB (burden) and promoting the greater good of the population (benefit) are seen as overriding concerns for the welfare of individuals living with the disease.¹⁸

Limitations to Consequentialism: Outcomes of an action may be difficult to predict, especially in humanitarian aid contexts where the situation can change rapidly and is often characterized by considerable uncertainty. In addition, the outcomes we evaluate depend on deeper values and moral commitments, and may make risk:benefit calculations more difficult. For instance, is the utility (good) of saving 100 lives worth the risk of prolonging a conflict by a month?²⁸ Ought we to spend resources on people who are in need today, or on people who are at risk of being in need tomorrow?³ Another important objection is that consequentialism does not always yield answers which agree with our moral values and intuitions. For example, Schwartz et al. (2012)18 recount how humanitarian healthcare workers who were told not to provide TB treatment felt deep moral distress. Although they understood the rationale behind the decision, they nonetheless felt it difficult to reconcile utilitarian policy with the deontological duty of care they felt they owed to individual patients. The possibility within consequentialism for sacrificing the rights of the few for the good of the many is one of the most frequently cited objections to consequentialism.

Want to know more about balancing the duty to individual patients versus the duty to society as a whole?

- Physicians for Human Rights (2002).
 Dual Loyalty and Human Rights in Professional Practice.
 Available at: http://www.physiciansforhumanrights.org
- Schwartz, L. Hunt, M., Sinding, C. et al. (2012).

 Models for Humanitarian Health Care Ethics.

 Public Health Ethics, 5(1), 81-90.

Available at: http://www.phe.oxfordjournals.org/content/5/1/81.abstract

PHOTO: JOHN PRINGLE

• Principlism:

Principles are rules or benchmarks and they inform codes of ethics, international guidelines and codes of conduct. Principlism can take on different moral emphases.

Principlism can be deontologically oriented – for instance, some might argue that the principle of humanity is always binding and must be protected at all costs. Others might adopt a more consequentialist approach, and argue that the principle of humanity might be overridden in certain circumstances when burdens outweigh benefits. Principlism provides a useful vocabulary to identify the most important ethical features at stake in a situation, which in turn might help clarify discussion and deliberation. Principlism presents a framework that is familiar to healthcare professionals who are often trained in the principles of biomedical ethics.²⁹

Humanitarian Principles ³⁰			
Humanity	To prevent and alleviate suffering wherever it is found.		
Impartiality	To provide assistance based on need, with no discrimination based on nationality, race, religious beliefs, class or political opinions.		
Neutrality	To abstain from taking sides or engage in controversies of a political, racial, religious or ideological nature.		
Independence	To act autonomously and in accordance with the other core principles.		
Bioethical Principle	es ^{29,31}		
Autonomy	The right of an individual to make his or her free and informed choice.		
Beneficence	The duty to act in the best interest of others.		
Non-maleficence	The duty to "above all, do no harm."		
Justice	The fair and just distribution of resources.		
Public Health Values ³²			
Accountability	Humanitarian organizations should be held responsible by other stakeholders (including donors and local communities), as well as taking responsibility for their actions		
Inclusiveness	Decisions should be made with stakeholders in mind, and stakeholders should be engaged in decision-making.		
Openness & Transparency	Decisions should be publicly defensible; deliberation processes should be open to scrutiny and publicly accessible.		
Reasonableness	Decisions should be based upon valid rationales (values, evidence, principles) that stakeholders agree are important, and decisions should be made by people who are credible and accountable.		
Responsiveness	Opportunities must be made available to revise and revisit decisions as new information becomes available. There should also be mechanisms to address disputes and complaints.		

Limitations to Principlism: A general criticism against principlism is that it provides little in the way of guidance as to how to balance or rank principles that come into conflict with one another. For example, should human rights abuses be exposed (principle of neutrality) at the risk of sacrificing access to those in greatest need (principle of humanity)? Another important concern is how to apply a general principle in a specific circumstance. Do the principle of humanity and the duty to alleviate suffering apply only to those with present needs, or should it

take into account future needs as well? Finally, how are we supposed to navigate situations in which principles have the potential to become counterproductive?²⁸ For instance, is the principle of neutrality still relevant in the face of genocide or crimes against humanity?⁸

Virtue Ethics:

Virtue ethics is less concerned with what we should do, and more concerned with the kind of people we should be. Virtue is a type of practical wisdom in which good intentions (thought) and the right outcome (action) come together. It is learned from past experience.

Virtue ethics places emphasis on moral character and is often used in humanitarian healthcare. For instance, humanitarians are expected to display certain qualities or virtues that we admire. The World Health Organization defines a humanitarian as someone who is: "Humane. benevolent, beneficent, kind, good..."33 Virtues, in essence, are character traits which make a person good and enable good deeds. For virtue ethicists, the motivation behind an action is important because it is the motivation combined with the outcome that leads to an action which has been done well. For example, many would agree that there is an important ethical difference between aid which is given by a multinational corporation, a humanitarian NGO, or a military group.²⁸ Part of the moral difference lies in the motivation prompting these groups to act. We value aid because it is driven by the virtues of kindness, compassion, altruism, solidarity and respect- and not because it is driven by profit or other strategic objectives. We learn to be virtuous by growing from past moral experiences and by learning from moral mentors or role models

Want to know more about virtue and humanitarianism?

▶ Slim, H. (1997).

Doing the Right Thing: Relief Agencies, Moral Dilemmas and Moral Responsibility in Political Emergencies and War.

Disasters, 21(3), 244-257.

Available at:

http://onlinelibrary.wiley.com/doi/10.1111/1467-7717.00059/abstract

Learn more about what you think defines virtuous conduct in humanitarian aid by reading books written by humanitarian workers and members of communities affected by humanitarian crisis, or by watching movies and documentaries.

For suggestions see: http://www.humanitarianhealthethics.net

PHOTO: VERONIQUE FRASER

Limitations to Virtue Ethics: Virtue ethics may be less practical as a theory to engage with ethical issues on a policy or systems level. Because virtue ethics emphasizes the development of individual moral character, it provides little response to questions such as: "How should triage priority be established?" In addition, some critique virtue ethics as setting an impossibly high moral standard. Becoming virtuous demands an ability to act rightly, for the right reasons, with the right

Theory	Strengths	Limits	Applicability
Deontology	Emphasizes duties and obligations. What makes an action right or wrong is not the outcome it produces, but the fact that an action conforms to a moral rule. E.g., if there is a rule to alleviate suffering, and you are able to save a life, then you must do so, no matter what the consequences are.	Difficult to determine what to do when different duties or obligations are in conflict, or how to prioritize between them. Does not consider the consequences or outcomes of an action.	Professional codes of ethics and guidelines Human rights and international law codify the duties and obligations we owe to others. Humanitarian workers often feel a sense of duty and obligation to care for, treat and relieve the suffering of individual patients.
Consequentialism	Emphasizes consequences and outcomes. What makes an action morally right is doing that which will generate the best overall consequences. E.g., it is morally permissible to refuse to come to the rescue of one individual, if doing so could save the lives of many others.	Outcomes of an action may be difficult to predict. Evaluation of outcomes depends on deeper values that make determining "good" consequences less obvious. May go against our moral intuitions (it may feel wrong to sacrifice one life in order to save 100).	Triage, resource allocation decisions, pandemic planning, and public health. Since the early 1990s, humanitarianism has increasingly turned to consequentialism in an effort to ensure greater accountability and better outcomes for humanitarian projects.
Principlism	Principles serve as rules or benchmarks to guide ethical action. Principles can be humanitarian (humanity, impartiality, neutrality and independence), bioethical and/or related to public health, amongst others. Principles need to be balanced and weighed against each other.	It may be difficult to balance or prioritize between competing principles. Principles may become counterproductive. E.g., some have questioned the value of the principle of neutrality in the face of genocide or crimes against humanity. It may be difficult to be difficult to balance or principles. Principles may become counterproductive.	Humanitarian principles shape the identity and morality of modern humanitarianism. Humanitarian principles are often used in mission statements and international codes and charters. Principles provide benchmarks for evaluating operational actions and outcomes.
Virtue	Emphasizes what kind of people we should be. Virtue requires the development of wisdom gained from past experience. To behave virtuously is to do the right thing, for the right reasons, with the right feelings and producing the right outcome. 34 Virtue requires the alignment of intentions (thought) and outcomes (action).	Provides little guidance for ethical issues that are more systemic. Virtue ethics sets a high moral standard; to do the right thing, with the right feelings, and producing the right outcome is difficult.	Humanitarians are often described in terms of core humanitarian virtues: "Humane, benevolent, beneficent." Hugo Slim argues that humanitarians can learn a lot about virtuous conduct by looking to role models from amongst the local population. 16

feelings and producing the right outcomes, even when one is faced by new and difficult scenarios, a very challenging prospect! Some argue that deontology and consequentialism are more practical moral philosophies in the sense that by asking us either to "do the right thing" or "evaluate the right outcome", they don't expect us to become a person it might be impossible for us to be.²⁷

d) Ethics Expanded: Local Values, Principles and Customs

Values, beliefs and moral norms are shaped by cultural and religious practices/traditions and informed by different worldviews. For instance, individuals and communities may have diverse views regarding the scope, nature and values related to healthcare including: decisionmaking autonomy, privacy and control of confidential information, the role of the individual/family/community, and truth telling, amongst others. Respecting the culture, beliefs and practices of others is essential and requires an open and thoughtful engagement with local cultural, religious, social and community insights and practices. This type of engagement may reveal that moral practices and beliefs that appear distinct on the surface are not in fact indicative of fundamental or irreconcilable ethical differences. Where substantial and significant differences in moral norms and principles do occur, it is important to identify and engage with them in a fair and balanced manner. From an ethical standpoint, respecting cultural difference is not incompatible with reasoned criticism about why some beliefs or values might be more justifiable than others. Moral justification requires this investment in understanding and discussion, which is a sign of mutual respect.²⁷

5. Evaluate and Select the Best Option



Generate as many options as possible by trying to think 'outside the box' and avoiding binary 'either/or' thinking. As a rule, try to generate at least 3 or more courses of action. Potential positive and negative consequences of each course of action should be identified, along with implications of different options for the obligations

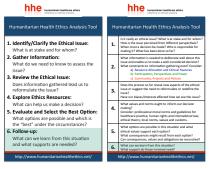
and duties of those involved. The values, principles and moral arguments justifying each course of action should be analyzed and compared. The possibility of reconciling consequences, obligations and norms should be evaluated. Options supported by less important rationales should be set aside or given low priority. In light of this analysis, options should be weighed, and the 'best' option, or cluster of options, selected.

Effort should be devoted to building consensus amongst those involved. It is also important to ensure that there is an implementation plan in which ethical rationale is intentionally expressed and roles and responsibilities relating to the decision assigned. Describe and document the reasons for choosing a particular course of action. Clearly summarize in a few sentences the moral justification for the decision taken.

Questions to consider when evaluating potential courses of action and their outcomes

- What options are possible in this situation and what ethical values/principles support each option?
- What consequences might result from each option?
- How do these options relate to obligations and duties of different people involved?
- Can consequences, values and obligations be reconciled? What might be lost if particular options are selected?
- What steps are required to implement the selected option?
- Who needs to be informed and included?

6. Follow-up



As a final step, it is important to follow up on the decision taken so that ethical choices can be evaluated in light of outcomes. Reflecting on the decision-making process may prompt proactive approaches to avoid similar ethical issues in the future, or may be helpful in informing future approaches when comparable situations arise. It may be useful to organize formal venues

for follow-up such as: follow-up debriefings, continuing education sessions, and/or changes in policy and procedures.

Questions to consider when following up on an ethical decision

- Did the anticipated outcome actually take place?
- Are there things that we missed or did not account for in our analysis?
- Is there a need for debriefing for those involved or affected?
- Does this process suggest that there might be benefit in re-examining particular policies or structures? If so, at what level does this need to take place and how can it be accomplished?

CONCLUSION

Humanitarian healthcare work is often practiced in contexts where the provision of healthcare is complicated by heightened resource scarcity, political and social instability, and the rapidly changing needs of the population. This can lead to tough choices and ethical dilemmas among humanitarian healthcare workers. The HHEAT provides you with a resource to work through these real world ethical challenges by providing a step-by-step, systematic approach to decision making which may ultimately lead to more robust and justified recommendations. Promoting structured ethical debriefing with the HHEAT, after a decision has been made, may also help address feelings of moral distress and ensure that there is an opportunity to learn from past decisions. At heart, making ethical decisions is about addressing the tension between what is and what ought to be. Thoughtful reflection and careful consideration of how, why and by whom decisions are made is an essential part of honoring the humanitarian commitment to relieve human suffering and promote human dignity, health and well-being.

Please help us improve the HHEAT. Send your comments and suggestions to: humethnet@gmail.com

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HHEAT Summary Cards

Is it really an ethical issue? What is at stake and for whom?

How is the issue perceived from different perspectives?

Humanitarian Health Ethics Analysis Tool



Humanitarian Health Ethics Analysis Tool

Identify/Clarify the Ethical Issue: What is at stake and for whom?

2. Gather Information:

What do we need to know to assess the issue?

3. Review the Ethical Issue:

Does information gathered lead us to reformulate the issue?

4. Explore Ethics Resources:

What can help us make a decision?

5. Evaluate and Select the Best Option: What options are possible and which is the "best" under the circumstances?

6. Follow-up:

What can we learn from this situation and what supports are needed? http://www.humanitarianhealthethics.net/

humanitarian healthcare ethics reflecting on ethical practice hhe

What constraints to information gathering exist? Consider: Have our biases/interests affected how we see the issue? What information is needed to deliberate well about this Can consequences, values and obligations be reconciled? ssue and enable us to make a well-considered decision? Does the process so far reveal new aspects of the ethical issue or suggest the need to reformulate or redefine the healthcare practice; human rights and international law; When must a decision be made? Who is responsible for Consider: professional moral norms and guidelines for http://www.humanitarianhealthethics.net/ What values and norms ought to inform our decision What consequences might result from each option? What options are possible in this situation and what a) Resource Allocation and Clinical Features b) Participation, Perspectives and Power ethical theory; local norms, values and customs. c) Community, Projects and Policies making it? What has been done so far? What support do those involved need? What can we learn from this situation? ethical values support each option? 6 4 'n 4 'n.

HHEAT Worksheet

Humanitarian Health Ethics Analysis Tool (HHEAT) worksheet
1. Identify/clarify the ethical issue: What is at stake and for whom?
• Ethical issue:
Values/principles/responsibilities in tension:
2. Gather information: What do we need to know to assess the issue?
Resource allocation and Clinical Features:
Participation, Perspectives and Power
Out of Policy of Policy
Community, Projects and Policies
3. Review ethical issue: Does this information lead us to reformulate the issue?

Humanitarian Health Ethics Analysis Tool (HHEAT) worksheet

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4. Explore ethics resources: What can help us mak	e a decision?		
Sources of ethical guidance			
5. Evaluate options and select best option: What options are possible and which is the 'best	" under the circumstances?		
Potential consequences	Norms supporting/opposing option		
Option:			
Option:			
Option:			
Option:			
6. Follow-up: How can we learn from this and what supports are needed?			

