



The importance of communities of ethical practice during times of crisis and conflict

Recent weeks have seen considerable discussion of humanitarian responses to epidemic and war. Especially in the context of Ebola, ethical questions have been at the center of this discussion - and a focus of heated debate. We note with appreciation the participation of several HumEthNet members in efforts to support ethically sound policy-making and to provide ethical guidance to those involved in the response to the crisis. These events further reinforce the importance of our shared goal of expanding reflection, knowledge and expertise in the field of humanitarian health ethics.

There are several developments within our network that we would like to draw your attention to with this newsletter. First, we are happy to report that a 'research agenda for humanitarian health ethics' was published in PLoS Currents Disasters. You can access it here:

<http://currents.plos.org/disasters/article/a-research-agenda-for-humanitarian-health-ethics/>. Work on this agenda was initiated during the Humanitarian Health Ethics Forum in Hamilton in November 2012, at the same time that the HumEthNet was launched. Congratulations to all who took part in crafting and revising the research agenda. We hope that it will be an important tool for inspiring and guiding research activities. It will be fascinating to return to this agenda in a few years time to look back at the evolution of humanitarian health ethics as a field of inquiry and practice.

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In
Focus



HumEthNet Member:
Lisa Eckenwiler

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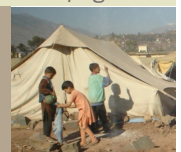
Film
Review



Dirty Wars

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Research
Studies



Two new studies.

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From the Humanitarian Healthcare Ethics website:

HumEthNet member, Dr. Lisa Schwartz was interviewed by CBC-Hamilton about the ethics of unproven intervention in the ongoing Ebola outbreak.

New Case Studies have been added. A specific section has been created that focuses on student international electives.

New studies led by members of HumEthNet have begun this summer (See pages 6-7 of this issue for more details):

- Ethics in Humanitarian Healthcare Practice and Policy During Acute Crisis Response in Lower and Middle Income Countries

- Researchers' experiences of ethics during disaster research in low-resource settings

Editorial continued from page 1

New resources have been added to humanitarianhealthethics.net. Nancy Johnson and Robert Puckrin have led efforts to develop a series of 17 case studies (<http://bit.ly/1qzYq88>) for use in teaching and pre-departure training, or to spark individual reflection. The case studies are presented in a way that integrates with the Humanitarian Health Ethics Analysis Tool (HHEAT). The other important addition to the website (<http://bit.ly/1IKdRc1>) is also related to the HHEAT: the publication of a new online handbook to support the tool's use by practitioners (authored by V Fraser, M Hunt, L Schwartz and S deLaat). Please check out these resources and feel very welcome to send along your feedback and suggestions, including ideas for new case studies.

We hope you enjoy reading this edition of *Reflections*.

Warm regards,

Matthew Hunt,
McGill University Humanitarian Healthcare
Ethics Research Group
co-director for the *Reflections* editorial team

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Contribute to *REFLECTIONS*:

If you have comments on newsletter content, are interested in submitting relevant article, book, resource announcement or other news to an upcoming newsletter, please contact: humethnet@gmail.com

Meeting Report

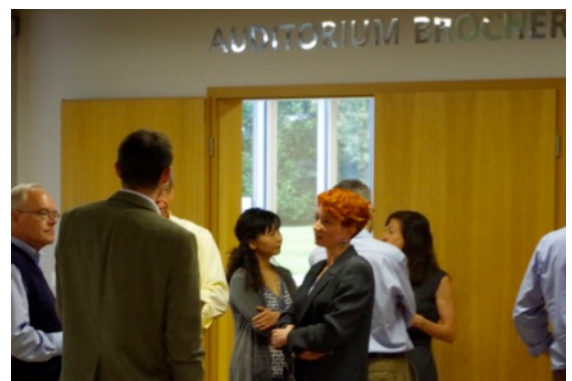
Counterterrorism, Ethics, and Global Health Workshop



Brocher Foundation, Geneva Switzerland, May 21-23, 2014

In May, HumEthNet members Lisa Eckenwiler and Matthew Hunt organized a workshop at the Brocher Foundation in Geneva that examined the complex terrain at the intersections of global health, counter-terrorism and ethics. Several HumEthNet members took part in this event.

The workshop covered a range of topics that are relevant to humanitarian health ethics and attention was extended to how counter-terrorism laws, policies and practices impact the provision of humanitarian assistance to populations affected by war and disaster. Counterterrorism frameworks have had significant ramifications for humanitarian organization funding, financing and hiring practices. These laws also have implications for security. Where material support to terrorists is interpreted as including the provision of healthcare, carrying out basic tasks of humanitarian healthcare may, in some circumstances, be considered criminal acts. In a range of contexts - from the use of a vaccination campaign in the search for Bin Laden, to tapping the phones of humanitarian workers to collect information - counterterrorism officials have instrumentalized healthcare



programs. Such initiatives have contributed to distrust and insecurity. Finally, harms to population health associated with the use of drones, including displacement, mental health impacts, and rupture of social and cultural practices, were also discussed.



For more information about these topics, please see the article Lisa and Matthew published in advance of the Brocher meeting: <http://onlinelibrary.wiley.com/doi/10.1002/hast.308/abstract>

Ethics in Action: A case snapshot

To promote discussion and interest in various ethical issues, *Reflections* will periodically publish Case Snapshots. These brief ethical cases are best suited for personal reflection and professional discussion. Visit the hhe website for suggestions on enhancing discussion of these Snapshots for training and education. The web version includes reflection questions, optional outcomes, and the Humanitarian Health Ethics Analysis Tool, (HHEAT), to facilitate discussion.

CASE: Relations between Western Military Forces and NGOs

Setting: Refugee camp located in a South Asian country.

Actors: An international medical NGO is supporting several rural health clinics in a country where Western military forces are engaged in active combat.

Scenario: The expatriate staff of the NGO are responsible for ensuring the distribution of medicines and equipment to these clinics. A dispute breaks out amongst the staff about how closely the NGO should work with the Western military forces and the provisional government. Two points are raised in favour of closer cooperation. First, it is suggested that requesting a military escort would allow the NGO to transport supplies more securely and efficiently to remote clinic sites, thus minimizing the chance of interruptions in patient treatment. Second, the NGO could contribute to the rebuilding of the country's healthcare system by collaborating with the provisional government by providing advice and reporting the problems and needs of the population that they have identified during their project. However, there is significant concern amongst the staff that the neutrality of the NGO would be comprised by working too closely with the military. Worries are also voiced that a perceived link to the occupying forces could lead to the NGO's staff and clinics becoming the target of attack by opposing militias.

Analysis: Apply this case to the [Humanitarian Healthcare Ethics Analysis Tool \(HHEAT\)](#). The HHEAT is intended to facilitate discussion and deliberation for those involved in ethically challenging situations and will assist humanitarian healthcare workers in implementing well-considered decisions. The six steps are designed to help you or your team structure reflection and deliberation on the ethical dilemma presented in the case study. You may skip questions that appear less relevant to the issue or explore dimensions pertinent to the context but not listed in the tool.

HHEAT HANDBOOK: A [handbook](#) expanding the HHEAT and a worksheet to facilitate application of the tool are available online. (<http://t.co/cQQosSJytc>)

Do you have an ethical challenge, dilemma, or concern you would like to share?

Contribute a CASE SNAPSHOT for posting in *Reflections* and on the hhe website.

Use the format of this case as a template. For inclusion on the website, please include reflection questions and/or possible outcome options to enhance discussion.

Email submissions to: humethnet@gmail.com

in focus

A spotlight on HumEthNet members.



Lisa Eckenwiler is Associate Professor of Philosophy in the Departments of Philosophy and Health Administration and Policy at George Mason University. She served as Director of Health Care Ethics at George Mason from 2007 – 2012. She teaches courses in Bioethics, Public Health Ethics, Global Health Ethics, and Research Ethics.

Eckenwiler's research interests are broad. She has published widely on research ethics, and currently, serves, with Matthew Hunt and others, as a co-investigator on a project funded by the Canadian Institutes for Health Research examining research ethics in low resource disaster settings. One work in progress proposes the ideal and practice of "real time responsiveness" for ethical oversight in disaster research. She also chaired the Committee on the Declaration of Helsinki for the

International Network for Feminist Approaches to Bioethics, which submitted proposed revisions of this internationally renowned research ethics code to the World Medical Association in 2007-08.

Her first book, ***The Ethics of Bioethics: Mapping the Moral Landscape*** (co edited with Felicia Cohn), was published by Johns Hopkins University Press in 2007. In her current research, Eckenwiler focuses on ethical issues at the intersection of long-term care, health worker migration, especially nurses and care workers, and global health inequities. Her second book, *Long Term Care, Globalization, and Justice* (Johns Hopkins University Press, 2012) addresses these issues. She is also a co-investigator on another CIHR funded project examining the root causes of health worker migration and the implications for so-called source countries.

Writing about the moral links between immigration policies and elder-care in the United States, Eckenwiler has written also for more general audience including the *Huffington Post* of which this is an excerpt: "We might be said to be responsible for addressing harms migrant care workers

"We owe migrant care workers immigration reform that shows them respect and promises them fair treatment."

(and their countries' health systems and ill and aging populations) suffer because of our shared humanity, or our participation in processes that generate injustice. Another way of thinking about this is in terms of their intimate and crucial contribution to our identities. The care provided by migrant workers -- nannies, nurses, home care aides and others -- is now an increasingly integral part of who are - as beneficiaries of care, members of families and elder-care support systems, and citizens of an affluent country who benefit from economic and labor policies that rely on low wage workers.

Continues on page 10...

FILM REVIEW: ***DIRTY WARS*** by Sonya de Laat

DIRTY WARS, 2013, Richard Rowley, dir. 86 mins.

In this documentary film, investigative reporter Jeremy Scahill surveys the current state of warfare as perpetrated by his own country. We follow along as he learns from informants and their families in the Middle East and North Africa about the impact of American special-forces actions and drone warfare on civilians and local security personnel in countries deemed "terrorist" centres by the United States government. Countries, that in most instances, are not US-declared war zones.

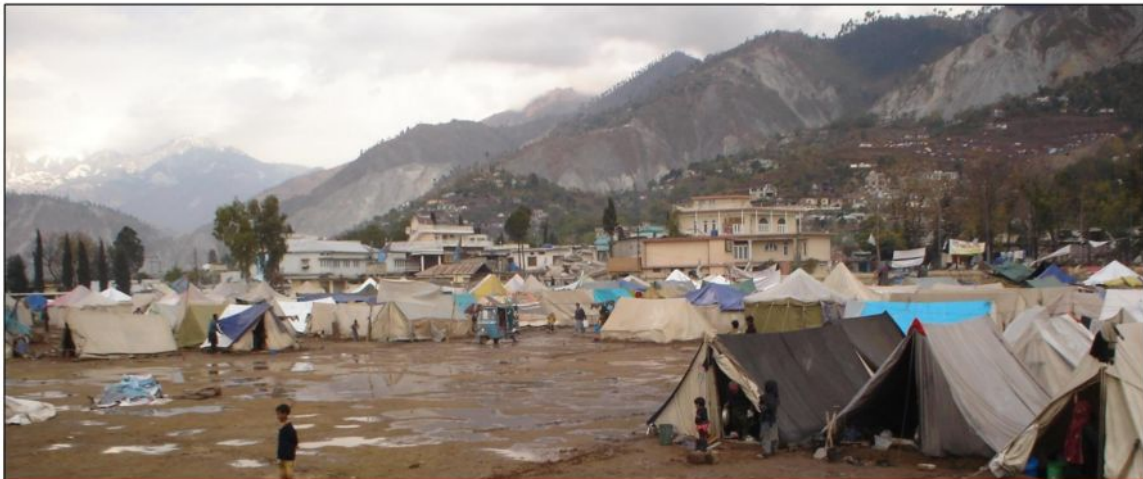
Critically acclaimed crime writer John Le Carré credits the film as being "gripping, compelling and totally convincing," thus providing a sense of the slick production value of this film built on carefully presented characters and plot development. However well structured the film (and it is), this hardly detracts from the important and essential message from Scahill: the actions by his government are leading to untold physical and psychological casualties on the ground. The American government's actions, with particular attention here to night raids, drone surveillance, and remote warfare has led to increased fears and distrust resulting even, in some cases, in American citizens turning against their own country to then become an enemy of the state. Stories such as that of Anwar Al-Alwadi, an American citizen 'sentenced' in absentia (without trial) to assassination by the Joint Special Operations Command, a unit accountable only to the US President, for unknown crimes (for being overtly critical of US foreign policy?).

For Scahill, the film is about his uncovering this most secret of US army units, JSOC, and a disillusioning of his country's counter-terrorist tactics. The film also contrasts the intensity of the sophisticated, surreptitious and often highly technologized nature of US operations with the vulnerability of the human body - particularly those at the receiving end (legitimacy here is not relevant especially when considering the imbalanced proportion of force).

Along with the ominous central message -- that the US is making its own enemies, thus indefinitely prolonging the war on terror -- the film reveals the physical and psychological impacts of warfare. Healthcare practitioners (military or not) and ethicists alike will find in this film evidence of the early stage of this impact that will be felt for decades if not generations to come on local environments and on the human health of those affected. The personal stories add resonance to the academic knowledge that anxieties grow in the face of counter-terrorist actions. The stories also highlight the importance of perception. Though not a central theme of the film, the long-term impacts (health, social, environmental, etc.) echo many of the elements of the German documentary "The Doctor, The Depleted Uranium and The Dying Children" in which the use of depleted uranium munitions is called a war crime. But when US military actions take place throughout the globe, particularly in states where no war has been declared, what are these actions to be called? And how do those actions translate on the ground for foreign healthcare professionals working in those parts of the world where the US military unapologetically calls the deaths of civilians 'collateral damage' or when children are targeted as legitimate threats to national security because -- through "a twisted logic, a logic with not end" -- there is fear in what these children might become. Dirty wars indeed.



New Research Study Seeking Participant



Researchers' experiences of ethics during disaster research in low-resource settings

We are conducting a study in order to understand:

- 1) What the moral experience of researchers operating in post-disaster settings is
- 2) How researchers operating in post-disaster settings use existing ethics guidelines
- 3) To what extent existing resources help researchers work through the uncertainty they face while conducting research in post-disaster settings

We are seeking members of research teams who have experience conducting disaster research in low-resource settings who would be willing to participate in a 45-90 minute interview.

Fonds de recherche
Santé

Québec



McGill

For more information, please contact Mr. Renaud Boulanger, M.Sc. candidate
renaud.boulanger@mail.mcgill.ca



www.humanitarianhealthethics.net
reflecting on ethical practice



Photo courtesy of
Lynda Redwood-Campbell

Humanitarian

NGO Volunteer Crisis
Policy Emergency
Ethics

A New Study!

Ethics in Humanitarian Healthcare Practice and Policy During Acute Crisis Response in Lower and Middle Income Countries

To better understand ethical issues arising from health-related humanitarian aid in settings of disaster, conflict, or complex emergencies.

We seek participants for interviews!

Interviews will be conducted by phone, by Skype, or in person at a time convenient for you, and will take approximately 45-90 minutes.

Confidentiality: All personal information will be removed from the data. Participants will receive a small honorarium.

1. Policy personnel: Individuals with experience in writing, implementing or evaluating policies in acute humanitarian emergencies.
2. Healthcare fieldwork: Individuals with experience as part of the humanitarian healthcare team during acute humanitarian emergencies.

For more information please contact:

Policy personnel: Leigh-Anne Gillespie (gilleslb@mcmaster.ca)

Health care fieldwork: John Pringle (john.pringle@mcgill.ca)

New publications...

* Authored by Network member(s)



Bashir, Shahzad and Robert D. Crews, Editors. *Under the drones: modern lives in the Afghanistan–Pakistan borderlands*. Cambridge, MA: Harvard University Press. 2012. 294pp. Index. isbn 978 0 67406 561 1. Available as e-book.

Brković, Čarna (2014), "Scaling Humanitarianism: Humanitarian Actions in a Bosnian Town", *Ethnos: Journal of Anthropology*, DOI: 10.1080/00141844.2014.912246
To link to this article: <http://dx.doi.org/10.1080/00141844.2014.912246>

Caplan, A L, and David R Curry, "Refugees, humanitarian aid and the right to decline vaccinations" *J Med Ethics* published online August 18, 2014

Dewachi, Omar, Mac Skelton, Vinh-Kim Nguyen, Fouad M Fouad, Ghassan Abu Sitta, Zeina Maasri, Rita Giacaman. "Health in the Arab world: a view from within 4 Changing therapeutic geographies of the Iraqi and Syrian wars." *Lancet* 2014; 383: 449–57
Published Online January 20, 2014 [http://dx.doi.org/10.1016/S0140-6736\(13\)62299-0](http://dx.doi.org/10.1016/S0140-6736(13)62299-0)
www.thelancet.com Vol 383 February 1, 2014.

DeCamp, Matthew, Samuel Enumah, Daniel O'Neill & Jeremy Sugarman
(2014) "Perceptions of a short-term medical programme in the Dominican Republic: Voices of care recipients", *Global Public Health: An International Journal for Research, Policy and Practice*, 9:4, 411-425, DOI: 10.1080/17441692.2014.893368. To link to this article:
<http://dx.doi.org/10.1080/17441692.2014.893368>

Fast, Larissa. (2014) *Aid In Danger: The perils and promise of humanitarianism*. University of Pennsylvania Press.

Fraser V, Hunt MR, Schwartz L, and de Laat S. (2014). *Humanitarian Health Ethics Analysis Tool: HHEAT Handbook**. ISBN: 978-0-9938354-0-7. Accessed from
www.humanitarianhealthethics.net.

Graham, Aubrey, "One hundred years of suffering? 'Humanitarian crisis photography' and self-representation in the Democratic Republic of the Congo." *Journal: Social Dynamics* Volume 40, Issue 1, January 2014, pages 140-163.

Hunt M, Schwartz L, Pringle J, Boulanger R, Nouvet E, O'Mathúna D, Participants of the Humanitarian Healthcare Ethics Forum "A Research Agenda for Humanitarian Health Ethics*". *PLOS Currents Disasters*. 2014 Aug 12. Edition 1. doi: 10.1371/currents.dis.8b3c24217d80f3975618fc9d9228a144

Pringle, John D.* (2014). *The Unprecedented Lead-Poisoning Outbreak: Ethical Issues in a Troubling Broader Context*. *Public Health Ethics*. doi: 10.1093/phe/phu029 First published online: September 11, 2014

Scheid, D. E. (2014). *The ethics of armed humanitarian intervention*. New York: Cambridge University Press.

Online Films:

The Doctor, the Depleted Uranium and The Dying Children. 2004. Freider Wagner and Valentin Thurn, dirs.

A documentary for German TV about the environmental and health effects of depleted uranium munitions (DUM) from Allied and NATO interventions in Iraq, Kosovo and Bosnia. The film follows German doctor Siegwart-Horst Gunther and Canadian Tedd Weyman, of the Uranium Medical Research Center, who reveal – despite imprisonment, death threats and attempts on their lives – the impact of Allied and NATO DUMs. They highlight that countries and organizations continue to deny the risks associated with such weapons even after being deployed. Describing DUMs as a 'war crime' points to a possible reason why no nation involved in the conflicts has taken responsibility for environmental cleanup or healthcare interventions. The hope for remedial action is slim considering the fact that Allied soldiers have had to go to court to fight for recognition. The fate of the Iraqi families shown in the film who will be exposed to the contaminants for "10,30, 100 years", is pretty clear: take your children home to die.

Films by the UN Counter-Terrorism Implementation Task Force:

- The Terrorist Who Came Home
- Second Chance

Ebola: Plague Fighters. 1996. NOVA. Ric Esther Bienstock, dir. 54 mins.

In Focus continued from page 5...

Responsible policy making, then, calls for seeing the connections between immigration and the quality care of the elderly and dependent, not just here but also abroad. We owe migrant care workers immigration reform that shows them respect and promises them fair treatment. And we owe source countries suffering under shortages a commitment to taking concrete steps to manage health worker migration in a way that neither threatens opportunity for migrants nor deepens global health inequities." [<http://www.huffingtonpost.com/lisa-eckenwiler/>]

She has recently initiated a project on counter-terrorism, ethics and global health with the collaboration of Matthew Hunt, a fellow HumEthNet member. Together they hosted the Brocher Foundation workshop reported about in this edition. She and Professor Hunt recently published an article, "Counterterrorism, Ethics, and Global Health," in the *Hastings Center Report* (vol. 44, no. 3 (May-June 2014): 12-13).

Eckenwiler earned her B.A. from the University of Wisconsin-Madison and her Ph.D. in philosophy with a concentration in bioethics from the University of Tennessee-Knoxville. Prior to joining the faculty at George Mason University she was Associate Professor of Philosophy and Co Director of the Institute for Ethics and Public Affairs at Old Dominion University. She also taught in the medical humanities program at Loyola University's Stritch School of Medicine. From 2002-2003, she served as Director for the Consortium to Examine Clinical Research Ethics at the Center for the Study of Medical Ethics and Humanities at Duke University. In 2006 she was a Visiting Fellow at the Center for American Progress in Washington, D.C. In 2008 she was a Visiting Senior Fellow at the Universite de Montreal's Centre de Recherche en Éthique (CRÉUM).

PICTURING HUMANITARIAN HEALTHCARE

A component of the
<http://www.humanitarianhealthethics.net> website.



VISIT - REFLECT - CONTRIBUTE

Upcoming events:

The 26th Annual Conference and Meeting of the Canadian Bioethics Society (CBS)

Winnipeg, May 27-30, 2015. Theme - Shadows and Light: Bioethics and Human Rights. Abstracts due: November 1, 2014.

Canadian
Bioethics
Society



Société
canadienne
de bioéthique

19th World Congress on Disaster and Emergency Medicine (WCDEM), 21-24 April 2015, Cape Town, South Africa. Abstracts due: November 28, 2014.



30th ALNAP Annual Meeting Working together in the field for effective humanitarian response 3-4 March 2015, Berlin

Global Forum on Improving Humanitarian Action, 4-5 June 2015, New York: ALNAP, in partnership with the WHS Secretariat and USAID, will convene a Global Forum on Improving Humanitarian Action.

HUMETHNET IS A COMMUNITY OF PRACTICE COMMITTED TO DEVELOPING & USING RESEARCH, EDUCATION, POLICY, AND/OR TOOLS TO ADDRESS ETHICAL CHALLENGES IN HUMANITARIAN HEALTHCARE IN ORDER TO REDUCE PRACTITIONERS' MORAL DISTRESS AND IMPROVE ETHICAL PRACTICE AND DECISION-MAKING AT MULTIPLE LEVELS.

-HumEthNet working statement

ABOUT Reflections

REFLECTIONS is a semi-annual publication written by and geared to a range of actors in the realm of humanitarian healthcare.

The newsletter is available in both electronic and pdf formats. Subscription to the newsletter is free.

We welcome submissions in the form of humanitarian healthcare ethics-related events promotion, reviews of books, films, exhibits or events, and recommendations for new readings, viewings, and websites. If you wish to make a submission, offer feedback or suggestions, or to subscribe, write to us at humethnet@gmail.com.

Reflections is co-edited by Sonya de Laat and Elysée Nouvet.

The Humanitarian Healthcare Ethics Network, HumEthNet, was inaugurated on November 22-24, 2012, in Hamilton, Canada at the Humanitarian Healthcare Ethics (hhe) Forum, hosted by the hhe Research Group with funding from CIHR. Participants are from a variety of disciplinary, organizational, professional, and country backgrounds engaged in the development of realistic applications for ethics in humanitarian healthcare practice. For information on membership contact humethnet@gmail.com.



For more information on the HumEthNet or the hhe Research Group visit:

www.humanitarianhealthethics.net