

HumEthNet REFLECTIONS

Volume 3. Issue 2.

Summer 2015

Time to Reflect on HumEthNet Activities

In the fall of 2012, HumEthNet was formed following the Humanitarian Health Ethics (hhe) Forum that was hosted at McMaster University. Since then, the multidisciplinary network, which was “created to exchange ideas and further collaborations to advance debate and generate knowledge to help inform ethical practice in humanitarian healthcare,” has carefully been nurtured and has seen encouraging growth. As of today, the Network boasts roughly 80 members. They represent a wide variety of academic and practice backgrounds including bioethics, physiotherapy, family medicine, nursing, public health, policy development and analysis, political theory, and law, along with an active group of graduate students. Members come from (or are based in) 14 different countries: Burundi, Canada, Estonia, India, Indonesia, Ireland, Senegal, Spain, Sweden, Switzerland, Syria, UAE, UK and USA. While this is encouraging, there is room to expand HumEthNet’s networking potential.

To further enhance the reach of HumEthNet, the HHE group from McGill-McMaster has recently become a member of ALNAP, the Active Learning Network for Accountability and Performance in Humanitarian Action. Resources for the HHE group and individual members such as Elysée Nouvet’s BPREP report can be accessed through their resources section as well:

<http://www.alnap.org/>.

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HumEthNet member
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Picturing ethics

Two tweets, two different
takes on people

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Photo by Lynda Redwood-Campbell

From the Humanitarian Healthcare Ethics website:

On the Importance of Human Connection:
Fear, Ebola, and Security **by Larissa Fast**

"The unwelcome return of development
porn" **by John Hilary** is a critical look at
recent television campaigns and
iconography of suffering.

Dr. **Lynda Redwood-Campbell**
comments on the importance of
coordination in disaster response action.

Dr. **Elysée Nouvet's** blogpost for ALNAP
on Nicarraguans' perceptions of
humanitarian medical missions: The Sharp
Edge of Gratitude.

**The HHE website includes the
ARCHIVED copies of the *Reflections
Newsletter*, along with information on
the Humanitarian Health Ethics
research groups and international
network (HumEthNet). There is also a
vast array of resources and ethics
education material, a decision-making
tool (HHEAT), and a variety of case
studies.**

The website is currently undergoing
transition to a new platform. Please contact
us if there are suggestions you would like
to make: humethnet@gmail.com.

Visit the website:

www.humanitarianhealthethics.net

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Likewise, the Humanitarian Health Ethics website is a hub of information, resources, tools and links meant to foster debate, facilitate education and training, and support collegiality and collaboration. This is where you can find news about Network members, upcoming events or ongoing research, and get inspired through commentary and reflections posted by Members on the website's blog and on the Picturing Humanitarian Healthcare sub-site. The website is also the place to find the Humanitarian Health Ethics Tool (HHEAT), its accompanying handbook, and over 20 case studies to enhance ethics discussion and learning. The process undertaken to develop the HHEAT has just been published in *Prehospital and Disaster Medicine*, the full reference is on page 10.

Primary among the Network's communication mechanisms are the Reflections Newsletter and the Humanitarian Health Ethics website, developed in conjunction with the HHE Forum. Including this edition, there have been six issues of Reflections since the initial copy was distributed in February 2013. Back issues are all available on the website archives in case you missed or misplaced a copy.

Enjoy reading,

Sonya de Laat
REFLECTIONS co-editor
Research Coordinator, McMaster University
PhD(c) in Media Studies, Western University
- and -

Lisa Schwartz
HHE co-director, McMaster University

***Follow us and contribute using
your favourite social media:***



In Focus: Ross Upshur

Ross Upshur is dedicated to exploring complex health ethics issues and considers them from a pan-global perspective rather than separating them into local or global arenas. For Ross, healthcare is a social justice issue shaped by various political, socio-cultural, historical, and economic forces. These elements impact healthcare delivery as much as do technological innovations and distribution.

Completing the first Primary Care Health Services Atlas of primary care service delivery in Ontario, directing research focused on complex chronic diseases particularly in seniors, co-leading a team that published a white paper report, *Stand on Guard for Thee*, in response to the absence of attention to ethical issues in national plans for pandemic influenza response, initiating a line of enquiry into assumptions of evidence based medicine, and co-authoring research that has led to the establishment of global Task Force with the World Health Organization on drug resistant tuberculosis in high HIV burdened populations, are just a few of the many accomplishments credited to HumEthNet member, Ross Upshur. Ross is the Canada Research Chair in Primary Care Research at the University of Toronto and is a Professor at the Department of Family and Community Medicine and Dalla Lana School of Public Health. He is also an Adjunct Associate Professor in the School of Geography and Earth Sciences and Associate Member of the Institute of Environment and Health at McMaster University. He is the former Director of the University of Toronto Joint Centre for Bioethics (2006-2011) and was a staff physician at the Department of Family and Community Medicine, Sunnybrook Health Sciences Centre from 1998-2013.

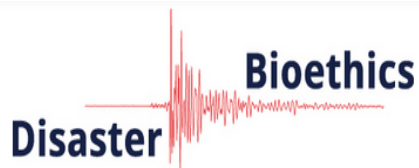
In 2013, he co-edited, with Andrew Pinto, the **Introduction to Global Health Ethics** (Routledge). Billed as an “introductory textbook [to support] students to understand and work through key areas of concern”, the text is an invaluable resource for students undertaking any number of health-related undergraduate or graduate courses in ethics or considering

placements overseas. With a forward by James Orbinski, the text covers such topics as human rights, global health governance, indigenous health, global health partnerships, and global health advocacy.

For Ross, the HumEthNet represents an important opportunity for rigorous inquiry into the very complex ethical issues raised by humanitarian work. Having had extensive involvement with the Ethics committee of Doctors Without Borders and as a founding board member of Dignitas international informs his understanding of the on-the-

ground realities faced by humanitarian organizations. Research is fundamental to better humanitarian practice and attention to the ethical issues is fundamental in this regard. **hhe**





2nd Disaster Bioethics Summer School

7th - 11th September 2015

UNIVERSITY OF
BIRMINGHAM



This event is targeted at those who respond to humanitarian emergencies and disasters. It will also be useful for academics working in the broad area of humanitarian crisis, particularly in ethics. The aim of the week is to give participants sufficient skills, knowledge and confidence to work up a small case study that could be used to provide some basic ethics training or preparation for humanitarian healthcare workers.

Subsistence and travel grants are available. For more information and to make an application for a place and grant, go to <http://disasterbioethics.eu/index.php/activities/summer-school-2015> or contact costsummerschool@contacts.bham.ac.uk



facebook.com/MESHUoB



@UoBMESH

Read our Ebola blog here: <https://uobethics.wordpress.com>



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 enhance discussion.

CASE: Injections Better Than Pills?

Setting: A remote area of a country where a long-standing civil war has been halted by a recent cease-fire.

Scenario: Two months ago, an international medical NGO established a project to support local health clinics and provide treatment and prevention programs for malaria. The NGO had not worked in this community before but has projects underway in other parts of the country. The team includes two expatriate nurses, an expatriate physician, and three community health workers who are from the provincial capital. The team has struggled to build relationships with local healthcare providers and community leaders.

The project includes the introduction of a new malaria treatment program that consists of taking two pills once a day for three days and it would replace the currently available treatment of daily injections. Local health professionals are hesitant about the change in treatment protocol when it is presented to them. The local community, including some local health workers, voice their concern about this treatment; in their opinion injections are better than pills, and more pills are better than a few. Some local health workers are also sceptical that this new treatment regimen will be available once the non-governmental organization leaves the area. What's more, community health workers have heard that some local health providers have discouraged patients from accepting the new treatment.

The team has just received a formal letter from the community leadership council expressing discontent with the actions of the NGO suggesting that the community may cease to cooperate with the project. They express that they have not been consulted and feel the changes are being imposed upon their community. They also state that malaria is not the biggest concern in their community and question why the NGO is emphasizing this condition over other needs including widespread malnutrition.

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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



HHEAT: Humanitarian Health Ethics Analysis Tool	
1. Identify/Clarify Ethical Issue:	What is at stake and for whom?
2. Gather Information:	What do we need to know to assess the issue?
3. Review Ethical Issue:	Does information gathered lead us to reformulate the issue?
4. Explore Ethics Resources:	What can help us make a decision?
5. Evaluate & 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?

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

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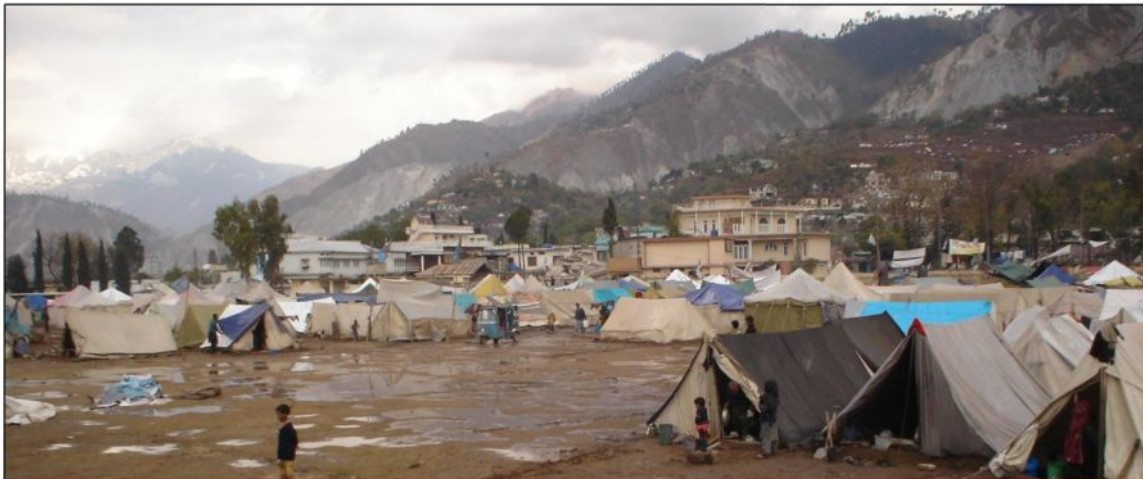


Humanitarian Health
Ethics Network



@HumEthNet

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)

Excerpt from “An outbreak of outbreaks: Humanitarian epidemiology in West Africa” available at www.humanitarianhealthethics.net

by John Pringle

I was disappointed that I couldn't go to West Africa sooner. The Ebola epidemic was at its peak in the fall of 2014, the same time that I was preparing for my doctoral defence. I watched “Ebola Frontline” which conveyed tragedy and urgency. The documentary followed **Médecins Sans Frontières** (MSF) doctor Javid Abdelmoneim as he cared for Ebola patients in Sierra Leone.^[1] It was graphic and raw, something out of Dafoe's “A Journal of the Plague Year”. That people had to be turned away from Ebola treatment centres was profoundly inhumane. That traumatized aid workers had to turn people away because treatment centres were overrun, to watch helplessly as people died agonizing deaths in cars or on the ground – was yet another searing reminder of our collective failure, that there is no shared responsibility for global health, and that our notion of “international community” is more dream than reality.

....

My narrow experience of the [three](#) outbreaks – meningitis, lead poisoning and Ebola – demonstrates how poverty kills.



Photo by John Pringle

Outbreaks flourish where there is insufficient investment in essential public health services, where poverty is the norm, where global neoliberalism sacrifices community health on the altar of free market capitalism. The absence of the profit motive in addressing the community health needs of the poor results in a ‘global coalition of inaction’. To think anything else is not just naïve, but dangerous amnesia. So here we are again, hearing the echoes and tired mantras familiar to seasoned, disillusioned aid workers: “unprecedented”; “valuable lessons” and “never again”.

John Pringle is a nurse and epidemiologist with a PhD in public health and bioethics from the University of Toronto. He is currently a Postdoctoral Fellow in humanitarian health ethics at McGill University. His work takes a critical approach to bioethical issues surrounding humanitarian action under globalization and global health governance. In addition to his work in Canada, he is a member of Médecins Sans Frontières (MSF) and has worked in Eritrea, northern Nigeria, and most recently in Sierra Leone during the Ebola crisis.

@johndpringle_

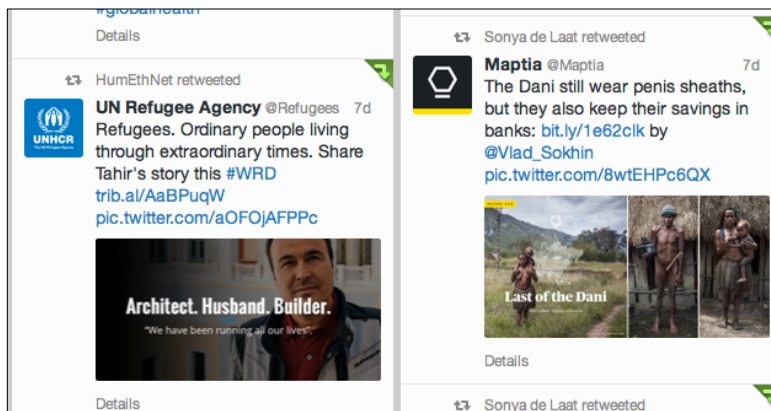
commentary

Two Tweets, Two Different Takes on People by Sonya de Laat

UN Refugee Agency @Refugees Refugees. Ordinary people living through extraordinary times. Share Tahir's story this #WRD trib.al/AaBPuqW pic.twitter.com/aOFOjAFPPc

Maptia @Maptia The Dani still wear penis sheaths, but they also keep their savings in banks: <http://bit.ly/1e62clk> by @Vlad_Sokhin

On June 11, two tweets came through my feed in close succession. Initially, both struck me as encouraging: they appeared to be moving toward more nuanced representations and away from flat, one-dimensional stereotypes. Upon closer inspection, the UN Refugee post about an "Architect. Husband. Builder." is indeed about rendering refugees less hopeless and different. The photos of the Dani, on the other hand, continue the tradition in many photographic practices of



exaggerating exoticism. The photographs by Vald Sokhin, a photographer represented by Panos, an agency dedicated to photography for social justice, are carefully composed portraits of individual Dani in traditional dress along with a prop of contemporary globalized life, e.g., can of pop or bank machine.

I cautiously celebrate the UN approach as a crucial element (one among many) of refugee governance. It's

important to understand that refugees have more dimensions than that of being displaced (forced) from their homes; they have agency, worldly knowledge, skills. In my initial look at the photographs of the Dani, I thought these too were about nuancing otherwise stereotyped people. But text such as "Last of...", "abandon traditions", "Stone Age" and "cannibalism" still capitalize on shock, exoticism and apparent innocence, dependence. 'They' are certainly not the 'last' of their kind: that language is a dangerous relic of salvage-ethnography. I hoped the mix of 'old' & 'new' in the photos would be treated as a sign of resilience, resourcefulness and engagement with a globalized world; a sign of vibrancy and continuation of their culture despite attempts at forced assimilation. While I'm not diminishing the real harms done by political and social systems enforced on them, the use of 'modern' items do not signify 'loss of culture' or dependence on westerners (e.g., tourists). The irony of the elders using Spiderman and Angry Birds branded items may not actually have gone unnoticed by the people using these items, but in the context of this article ...

For more reflections on
PICTURING HUMANITARIAN
HEALTHCARE, visit

<http://www.humanitarianhealthethics.net>.

New publications...

* Authored by Network member(s)



Audet, François. "From disaster relief to development assistance: Why simple solutions don't work." *International Journal* 2015, Vol. 70(1) 110–118 DOI: 10.1177/0020702014562595 ijx.sagepub.com Policy Brief



Closser, Svea, Anat Rosenthal, Kenneth Maes, Judith Justice, Kelly Cox, Patricia A. Omidian, Ismaila Zango Mohammed, Aminu Mohammed Dukku, Adam D. Koon and Laetitia Nyirazinyoye. "The Global Context of Vaccine Refusal: Insights from a Systematic Comparative Ethnography of the Global Polio Eradication Initiative" *Developing World Bioethics* Accepted manuscript online: 18 JUN 2015 04:16AM EST | DOI: 10.1111/maq.12229



Das, Veena. *Affliction: Health, Disease, Poverty*. New York: Fordham University Press, 2015.

Fayemi, Ademola K. "African Bioethics vs. Healthcare Ethics in Africa: A Critique of Godfrey Tangwa." *Developing World Bioethics*. Article first published online: 24 APR 2015 | DOI: 10.1111/dewb.12082

*Fraser, Veronique, Matthew R. Hunt, Sonya de Laat, Lisa Schwartz. "The Development of a Humanitarian Health Ethics Analysis Tool." *Prehospital and Disaster Medicine*. June 2015. DOI: 10.1017/S1049023X1500480X

Gammeltoft, Tine M. *Haunting Images: A Cultural Account of Selective Reproduction in Vietnam*. Berkeley: California University Press, 2014.

Rajczi, Alex. *Liberalism and Public Health Ethics*. Article first published online: 9 MAY 2015 | DOI: 10.1111/bioe.12163

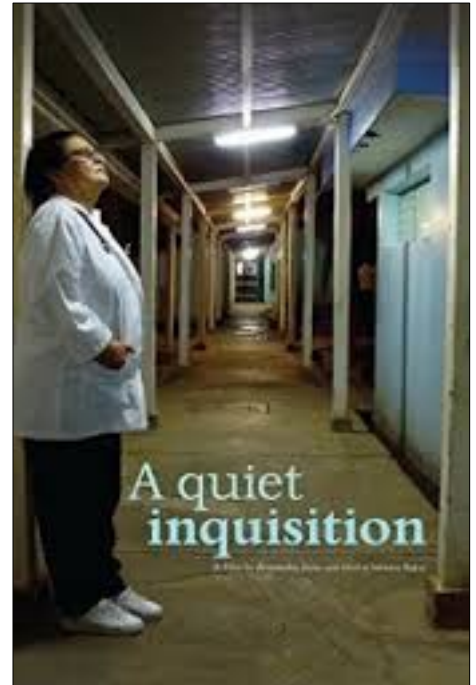
The latest issue of *Anthropology in Action* is a special issue entitled "Negotiating Care in Uncertain Settings and Looking Beneath the Surface of Health Governance Projects." Visit the Berghahn press website for more information: www.journals.berghahnbooks.com/aia

FILMS FOR THOUGHT...

FILM: **A Quiet Inquisition.**

Directors: Alessandra Zeka, Holen Kahn, 65min.

SYNOPSIS from <http://www.quietinquisition.com>: At a public hospital in Managua, Nicaragua, an OBGYN doctor struggles with her conscience as she contends with the harrowing implications of a new law that prevents the termination of any pregnancy, even when a woman's life is at stake. As the Doctor and her colleagues navigate the fears of prosecution and whether to use medical protocols that enable them to save lives, the drama of the deadly impact of this law emerges, illuminating the reality of prohibition against the backdrop of a political, religious and historically complex national identity.



AIDependence. Directors: Aliec Smeets and Frederic Biegmann.

SYNOPSIS from <http://www.aidependence.com>: **AIDependence** breaks stereotypes about aid, non-governmental organizations "NGOs" and a life in poverty. Using the example of Haiti, the country with the most NGOs per capita, the documentary shows that good intentions aren't always good enough.

India's Daughter. Director: Leslee Udwin, 58 min.

SYNOPSIS from indiasdaughter.com: This film pays tribute to the remarkable short life of "India's Daughter" (Jyoti) and documents the brutality of her gang-rape and murder in Delhi in December 2012. It also examines the mindset of the men who committed the rape with exclusive interviews and – perhaps most importantly – it tries to shed light on the patriarchal society and culture which not only seeds but may be said even to encourage violence against women.

We Were Rebels. Directors: Katharina von Schroeder and Florian Schewe, 92 min.

SYNOPSIS from www.wewererebels.com: We Were Rebels tells the story of Agel, a former child soldier who returns to South Sudan to help build up his country. The film accompanies him over a period of two years – from South Sudan gaining its independence in 2011 to the renewed outbreak of civil war in December 2013.

Gottland (FILM based on book below). Directors: Lukáš Kokeš, Petr Hátle, Viera Čákanyová, Rozálie Kohoutová, Klára Tasovská, Radovan Šíbrt, 100 min. SYNOPSIS from IMDB: Gottland is a cross-genre film based on selected parts of the international bestseller and European book of the year 2009, **Gottland: Mostly True Stories from Half of Czechoslovakia**, by Mariusz Szczygie. Transl. Antonia Lloyd-Jones. Pub. Melville House: 2014

Upcoming Events

*Call for Proposals: **The World Conference on Humanitarian Studies 2015** on Changing Crises and the Quest for Adequate Solutions 17-20 October 2015 in Addis Ababa, Ethiopia.* <http://www.humanitarianstudiesconference.org/index.php?id=2>

Important 2015 dates:

Call for Papers: June 16 to September 15

Final Paper acceptance date: September 30

*International Summer Academy program in **Peacebuilding, Mediation, Conflict Resolution & Intercultural Dialogue***

<http://www.ipdinstitute.ch/International-Summer-Academy-in-Peacebuilding,-Mediation-Conflict-Resolution-2015/>

- I Summer Academy Period: 7-17 August, 2015 (11 Days)
- II Summer Academy Period: 17-27 August, 2015 (11 Days)

Event Location: Baar, Switzerland

Academic School in Mediation & Conflict Resolution

<http://www.ipdinstitute.ch/3-Month-Certificated-Academic-School-in-Mediation-and-Conflict-Resolution-2015/>

Date: 17 August - 17 November 2015 (3 Month)

Event Location: Switzerland

Continues from page 10.

...they play up western notions of infantilism ascribed to subaltern populations and that have been perpetuated over the past 150 years of photography. Maybe the Dani (or some of them) really do feel that the licensed products spell an end for their culture, and that they feel like children in the grand scheme of geopolitical wranglings, but we don't know. The UN tweet - even though still moderated by the UN - links to the 'voice' of Tahir, a refugee. There is no voice of any of the Dani. One wonders what story they would have told of themselves had they had their druthers. **hhe**

Contribute to *REFLECTIONS*:

If you have comments on newsletter content, are interested in submitting a relevant article, book, resource announcement or other news to an upcoming newsletter,

please contact: humethnet@gmail.com

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. It is co-edited by Sonya de Laat and Elysée Nouvet from the hhe at McMaster University.

The newsletter is available online and in 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, please write the editors at humethnet@gmail.com.

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