

Ethical Considerations for Vaccination Programmes in Acute Humanitarian Emergencies

**WHO SAGE
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Introduction

- **More severe outcomes where: extreme insecurity & limited infrastructure**
- **Immediate response: food, water, shelter and limiting communicable disease outbreak risks**

Ethical concepts

- **Balancing benefits and risks**
- **Justice (distributive & procedural justice)**
- **Autonomy & Consent**
- **Research**

Beneficence and Human Rights

assistance as charity & duty to rescue to

**governments: a collective duty of care to
ensure that effective affordable risk
mitigation measures/basic requirements for
daily life are available to those most in need.**

Balancing Benefits and Risks

- **Benefits vs. harms: individual/community & direct/indirect**
- **Risk of disease vs. risk of vaccine**
- **Vaccines - safety track records in routine use, but more limited experience in affected populations (characteristics)**

Distributive Justice

allocation of limited resources including shelter, food and potable water, as well as vaccines that are in limited supply

- **Utilitarian vs. Egalitarian vs. Pluralistic considerations balanced with pragmatism**

- **Those most likely to suffer severe consequences from the disease if infected**

(chronic illness & immunosuppression)

- **Those most likely to spread infection
(children & emergency service providers)**

Distributive Justice – Priority Setting

- **Essential service providers (e.g. health**
 - **Essential service providers (e.g. health workers, emergency responders, community leaders, military, police) - if at greater risk of infection**
- **Hosted refugee or internally displaced**

Procedural Justice

- Legitimate guidelines with national legal systems guiding implementation
- Accountability of practice
 - aid programmes
 - codes of conduct for responding agencies
 - technical standards
 - performance indicators and impact assessments

agencies

Consent & Autonomy

adjusted (time) ~ severity of consequences

- **“Public health may be invoked as a ground**
 - **“Public health may be invoked as a ground for limiting certain rights in order to allow a State to take measures dealing with a serious threat to the health of the population or individual members of the population. These measures must be specifically aimed at preventing disease or injury or providing care**

Siracusa Principles

- Endorsed by the UN Economic & Social Council in 1985
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- Restriction is provided for & carried out in terms of law
- Legitimate objective
- Strictly necessary in a democratic society to
- No less intrusive & restrictive means available to

Research

- Medical care and service delivery take precedence over research
- ~~Medical care and service delivery take~~ Programme evaluation and surveillance vs. precedence over research
- Programme evaluation and surveillance vs. Research
 - Clear relevance, methodologically sound and defined benefit (future access to effective measures)

Conclusions

- Balance between utility and equity
- Duty of care to ensure availability of appropriate effective vaccines
 - Evidence based guidelines & adherence obligation
 - Limits on autonomy to prevent community harm
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