

Book Review

The Ethics of Public Health volumes I and II **Michael Freeman (ed.) Ashgate Publishing Limited, 2010**

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Whilst public health interventions, and ethical consideration of them, have a long history, concern about ethical issues in public health first came to the fore in the 1980s in response to the rise of HIV/ AIDS. Since that time this has been a rapidly growing field of enquiry and work on public health ethics has been carried out by public health professionals, bioethicists and lawyers, among others. Given the range of disciplines involved, tracking down and accessing publications relating public health ethics has not always been straightforward. In *The Ethics of Public Health* Michael Freeman has brought together 69 key articles in the field into a two-volume set. The earliest date from the late 1980s and concern the ethics of smoking, the use of compulsion in response to AIDS, and the role of public health interventions in the decline of mortality in Britain between 1850 and 1914. The most recent is from 2008 and concerns climate change and human health. These alone indicate something of the range of topics included in these volumes, while these articles have been sourced from a wide variety of journals (including medical, legal and bioethics journals) and edited volumes, thus bringing together into one place a comprehensive range of material to which many readers would otherwise not have access.

The two volumes of *The Ethics of Public Health* are divided into 20 sections (10 in each volume) with a fairly substantial introduction to each volume by Freeman providing a summary of what is included. Volume I starts with three sections covering the background to the rise of public health ethics, its wider relation to bioethics, and the historical debate about the impact of public health interventions. It then moves on to cover research issues, public health and autonomy, questions of governance, public health and human rights, surveillance and privacy, prevention and its limits, and confinement and liberty. Volume II begins with six sections dealing with particular case studies: SARS, HIV/AIDS, bioterrorism, avian flu, climate change, and tobacco control. It concludes with sections on vaccination, public health and genetic health, public health and equity, and public health and the developing world. Some of these sections are more extensive than others (the section on climate change, for example, only contains one article, while that on bioterrorism contains six).

Within this short review there is not space to deal with each article individually, and all have previously appeared in peer-reviewed sources. Instead I want to focus on some broader issues about the collection as a whole. As noted above, work on public health ethics has been mushrooming over the last two decades. It has also expanded to cover an increasingly wide range of possible public health interventions and the relationship of public health ethics to other fields of enquiry (such as human rights, social inequality, and development economics). This all creates a powerful set of

challenges when pulling together a work (even a fairly long two volume work such as this) that aims to cover the field as a whole. One can either choose to select one or two articles from each of a wide range of sub-disciplines and topics within the field to give a sense of its breadth – covering the whole field lightly – or one can choose to focus on certain key areas and include more on these in order to provide a more comprehensive coverage of at least part of the field. As will be apparent from the outline above, the editor in this case has, for the most part, chosen the first of these routes. The advantage of this is that the volumes provide a ready overview of the main themes covered by work in this area, and the articles selected for these volumes do an excellent job of providing such an overview.

A potential downside, however, is that where only two or three articles on a particular topic are included (as is the case in many of the sections here) there is less room to explore the extent of the contemporary debate on these topics and the range of conflicting positions that have been taken. For example, there are only two articles in the section on public health and autonomy (although others that relate to this topic appear elsewhere in the two volumes). While these are important articles, they cannot in themselves hope to cover the range of concerns about the role considerations of autonomy ought to play in public health policy. These range from concerns about whether the autonomy of groups (as well as individuals) need to be respected, including how we are to characterise autonomy, to questions about whether paternalism is acceptable as part of public health. In his introduction the editor goes some way to dealing with this problem by setting the papers in context and providing an extensive list of further reading. There is, however, a limit to how effective this can be and in places the richness of the disagreement is somewhat hidden by the choice of articles made.

Whilst the aim in these volumes is to cover the range of topics included in public health ethics, it is inevitable that in such a broad field decisions need to be taken as to which areas of enquiry are excluded. Within *The Ethics of Public Health*, it is noticeable that more space is devoted to issues around infectious diseases than to other topics relevant to public health. For example, of the six case study sections, four are concerned with infection and its control or prevention. This is perhaps not surprising, given the role that ethical investigation into the control and prevention of infectious diseases has played in the development of public health ethics as a field in its own right. From its early days responding to AIDS, through questions about vaccination policy, to the recurring risk of pandemics, infectious diseases have been a prominent and central area of concern. Simply put, there has been more work done in response to these concerns than in relation to other areas of work in public health. The editor has done a good job in providing reasonably comprehensive coverage of this area and of choosing articles that illustrate the main lines of debate within it.

The extent to which infectious diseases recur throughout the two volumes does, however, give a somewhat misleading picture of the way in which the field of public health ethics is developing. There are two sub-fields that I would have liked to see more extensively covered for the work more effectively to cover the field as a whole. The first of these concerns the social determinants of health and the relationship

between the public's health and broader social inequality and political and social structures. Related to this are important questions about the ways in which genetics, structures within society, and individual choice interact to have a considerable impact on our health as a society. This is not to say that there are no articles touching on this topic collected here, there are; it is rather that their number does not seem, to me at least, to reflect their importance in the field. The second topic I would have liked to see more on is the impact of lifestyle choices on public health. Again, this is not an area that has been totally excluded; there is a case study section on tobacco control. But tobacco control is the only lifestyle issue that is dealt with. Other aspects of lifestyle that impact on health factors such as obesity are not covered, although these are playing an increasingly important part in the development of thinking about public health ethics. Again, debate in this area focuses on autonomy and choice in ways that question some of the assumptions about the role of autonomy in bioethics more widely, but there is little indication of this in the papers collected in these volumes. There may well be practical reasons why more articles on these topics have not been included, and doubtless to some extent my concern here relates to my own research interests lying primarily in these areas, but a little more explanation in the introduction about how choices were made and reasons why some areas are less well covered than others would have been helpful.

Dividing the volumes into sections is useful as this provides some structure. However, which article goes where in such a structure creates problems of its own. For example, Marcel Verweij's paper on influenza vaccinations in nursing homes is included in the section on prevention of disease, but could just as well go in the section on vaccination. Each article fits well in the section in which it is placed, but the choice of location does mean that it is not always easy to see which articles relate to any given topic. At first glance there would appear to be very little coverage of HIV/AIDS in these volumes as there is only one article in the section with this title. However, articles that relate to this topic appear in a range of other sections as well, including those on research, surveillance and privacy, and confinement and security. Similarly, articles dealing with research related to public health are not confined to the section on research issues, but also appear in sections on public health and the developing world, and on public health and genetic health. What this all means is that it can be relatively easy to miss relevant articles. The editor does, in his introduction to each volume, go some way to addressing this by providing a summary of each article. But one would need to read these quite thoroughly to pick out which articles were relevant to one's interests. The provision of a list of related articles occurring elsewhere in the volumes at the start of each section might have helped to alleviate this (particularly as no subject index is provided).

One final point; the articles appear in these volumes in the same format as they did in the original sources from which they have been obtained. This has some advantages – the original page numbers, for example, are included, which can be useful in returning to the source or locating parts of an article quoted elsewhere from the original source. It does, though, mean that there is no consistency in style, and at times the font used is very small.

These, however, are all relatively minor complaints. The two volumes of *The Ethics of Public Health* do a very good job of bringing together in one place some of the key texts in the development of this field over the past two decades. They should serve as a useful source for all those working in the field: although most will have relatively easy access to some of the articles included here, it is unlikely that many will otherwise have access to them all.

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