Teaching Ethics in Schools of Public Health in the European Region: Findings from a Screening Survey

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ABSTRACT

Public health ethics is gaining recognition as a vital topic for public health education. The subject was highlighted in a Delphi survey of future priorities of member schools of The Association of Schools of Public Health in the European Region (ASPHER). We conducted a survey of teaching public health ethics in Bachelors and Masters of Public Health programmes targeting all 82 ASPHER member schools in 2010/2011, as an initiative toward improving ethics education in European Schools of Public Health. An eight-items questionnaire collected information on teaching of ethics in public health. A 52 percent response rate (43/82) revealed that nearly all of the responding schools (40 or 95% of the respondents with valid data) included the teaching of ethics in at least one of its programmes. They also expressed the need for support, (e.g., a model curriculum (n=25), case studies (n=24)), which indicates an area for further work to be met by the ASPHER Working Group on Ethics and Values in Public Health. This survey will help guide development of this topic as a teaching priority in public health education in Europe.

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Key Words: Public health ethics, education, European Region


INTRODUCTION

Public health (PH) professionals and policy makers are often confronted with difficult ethical questions that require them to make decisions. For example, whether they should limit individual autonomy in order to promote the greater good of a population.1 While ethics content has been clearly addressed in medicine (mainly bioethics centred), this has not been the case in PH.2 Yet, scholarly efforts to define what are the ethics (as academic and professional tools) that distinctively belong to PH are not scarce. For instance, mapping ethics principles across specific areas of PH (i.e., health promotion and disease, prevention, risk reduction, epidemiology and other forms of public health research)2 was proposed in 2002 providing a framework for the consideration of ethical principles and how they apply to the professional reality of the discipline. Additionally, examples of structured codes of practice for PH exist, upon which an ethics curriculum can be built. The work of James Thomas and colleagues from 2002 articulating a code of practice for PH around 12 principles3 is one of them.

Yet, PH professionals and policy makers have not always been trained in how to deal with difficult ethical questions in a systematic and reflective manner4 and they have called for more and better education in ethics.5 The urgency of systematic discussion of ethical issues in PH necessitates ethics education in university PH programmes1,6 and the need for such activities was recognized and confirmed by the Association of Schools of Public Health in the European Region (ASPHER) internal Delphi study in 2008/2009.7 Assessment of the extent to which ethics education is implemented in Schools of Public Health (SPHs) in the European Region is an important first step in a process to improve the requested ethics education. National research in Europe on the topic has only been conducted in the United Kingdom, where a survey found that the frequency and content of PH ethics education was hitherto limited and inconsistent.8 The Working Group on Ethics and Values in Public Health, a collaboration of ASPHER and the Ethics in Public Health section of the European Public Health Association (EUPHA), initiated a first assessment of the state of ethics content in education in ASPHER member schools. This study was seen as
an initial step towards the development of a model curriculum suitable for adoption at the European level for higher education institutions delivering PH training. This paper reports on the first findings of the ethics education survey in European SPHs.

**METHODS**

A screening survey targeting all full ASPHER members comprising SPHs and university departments/centres/units (n=82) was designed and implemented in 2010. An eight-items online questionnaire (Figure 1) designed—and pre-tested with outside-of-sample respondents—by the ASPHER Working Group on Ethics and Values in Public Health was emailed to ASPHER members in October 2010. Schools and their designated contact persons were identified from ASPHER member electronic records and were invited to participate in the survey. The questionnaire included one ID-initial question and seven subject-focused close-ended items. Additionally, two filter items were included to guide response patterns. Estimated time for completion was five to ten minutes. Several reminders aimed at increasing response rate followed until April 2011.

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1. **General Information**

1.1 **Info about the School of Public Health / Institution**

Name of the Institution:
Name of the Dean and email address:

1.2 **Contact person for ethics related questions**

Name:
Position:
Email:
Telephone:
Fax:

2. **Is ethics taught in your Bachelor Programme(s)?**

☐ Yes, we teach ethics in our bachelor programme(s)
☐ Ethics is taught in all programme(s)
☐ Ethics is taught in some programme(s)
☐ No, we do not teach ethics in our Bachelor programme(s)
☐ We do not have a Bachelor programme(s)

If you answered “yes” go to Question 3
Otherwise skip to Question 5
3. Regarding the extent of ethics taught in your (main) bachelor programme…

☐ Ethics is taught in a specific module on public health ethics
  ☐ Core course
  ☐ Elective course

☐ Ethics is taught across other modules
  How often are specific contents on ethics taught across modules?
  ☐ Rarely
  ☐ Occasionally
  ☐ Frequently
  ☐ Very frequently

4. The academic team in your (main) public health bachelor programme includes someone formally qualified to teach ethics (= has at least a Master’s degree in ethics as an academic discipline)?

☐ Yes
☐ No
☐ No, but has they have some ethics-specific training (e.g. summer school)

5. Is ethics taught in your Master Programme(s)?

☐ Yes, we teach ethics in our master programme(s)
  ☐ Ethics is taught in all master programme(s)
  ☐ Ethics is taught in some master programme(s)

☐ No, we do not teach ethics in our master programme(s)
☐ We do not have a master programme(s)

If you answered “yes” go to Question 6
Otherwise skip to Question 8

6. Regarding the extent of ethics taught in your (main) master programme…

☐ Ethics is taught in a specific module on public health ethics
  ☐ Core course
  ☐ Elective course

☐ Ethics is taught across modules
  How often are specific contents on ethics taught in other modules?
  ☐ Rarely
  ☐ Occasionally
  ☐ Frequently
  ☐ Very frequently

7. The academic team in your (main) public health master programme includes someone formally qualified to teach ethics (= has at least a Master’s degree in ethics as an academic discipline)?

☐ Yes
☐ No
☐ No, but has at least some ethics training (e.g. summer school)
8. How could ASPHER support the teaching of ethics in your programme(s)?

By providing:
- A model curriculum
- Case studies
- Training courses to qualify the academic team
- Summer courses in public health ethics
- A network for teaching ethics in Public Health
- Other [please specify]:

Fig. 1. ASPHER questionnaire on PH ethics education.

RESULTS

The survey achieved a general response rate of 52.4 percent (n = 43/82) of which 40 (49.4%) offered information on all three questionnaire sections revealing that 95 percent of the respondent schools included the teaching of ethics in at least one of its programmes (n=38/40), 16 (39.02%) in their bachelor programmes and in 38 (95%) in their master programmes.

Regarding ethics education in bachelor programmes of PH (Table 1), despite the fact that just over one third of the respondent schools (n = 41) offering a bachelor programme in PH (39%; n=16), all of them reported that the teaching of ethics is included in the standard curriculum of these programmes. Further, in three quarters of these schools (75%; n=12/16) ethics was standard curricular content in all programmes offered. As for the delivery format, half of the 16 schools with undergraduate programmes in PH, had a core course on ethics in PH (n=8), and one delivered ethics as part of an optional course. The remaining seven schools included ethics content as cross-disciplinary content in their bachelor programmes. This was done frequently in five schools and occasionally in two schools. More than half of the schools with bachelor programmes in PH indicated that at least one person in the academic team was formally trained in ethics at master level (n=9). Another three requested formal training (e.g., summer courses) of staff members below the master level.

All respondents (n=40) offered a master programme, and ethics content was included in the curricula of 38 of them (Table 1). Delivery of ethical content was reported to take place almost equally in core courses (n=16) or by transversal content, being delivered across modules throughout the programme (n=18). The remaining four respondents offered ethics as elective courses. Ethics content across modules was indicated as being frequently or very frequently taught in eight cases and rarely or occasionally in ten
cases. Half of the respondents indicated that staff involved in PH ethics education had a master’s degree in ethics, while the other half had lower educational levels.

Table 1

_Ethics education in Bachelor and Master Programmes of Public Health_

<table>
<thead>
<tr>
<th>Bachelor Programmes</th>
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<tbody>
<tr>
<td>Is ethics taught in your Bachelor Programme(s)?</td>
<td>Yes</td>
<td>No</td>
<td>No BSc available</td>
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<td></td>
<td>39% (16/41)</td>
<td>0%</td>
<td>61% (25/41)</td>
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<td></td>
<td>All programmes</td>
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<tr>
<td></td>
<td>75% (12/16)</td>
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<td></td>
<td>Some programmes</td>
<td></td>
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<tr>
<td></td>
<td>12.5% (2/16)</td>
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<tr>
<td>Core course</td>
<td>Elective course</td>
<td>Across modules</td>
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<td>Is ethics taught in a specific module or across modules?</td>
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<td></td>
<td>50% (8/16)</td>
<td>6.25% (1/16)</td>
<td>43.75% (7/16)</td>
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<td></td>
<td>Rarely 0%</td>
<td>Occasionally 12.5%</td>
<td>Frequently 31.25%</td>
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<tr>
<td></td>
<td>Frequently 31.25%</td>
<td>Very frequently 0%</td>
<td></td>
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<tr>
<td>Yes</td>
<td>No</td>
<td>Training</td>
<td></td>
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<tr>
<td>Academic team formally qualified to teach ethics?</td>
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<td></td>
<td>56.25% (9/16)</td>
<td>25% (4/16)</td>
<td>18.75% (3/16)</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Master Programmes</th>
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<tbody>
<tr>
<td>Is ethics taught in your Master Programme(s)?</td>
<td>Yes</td>
<td>No</td>
<td>No MSc available</td>
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<tr>
<td></td>
<td>95% (38/40)</td>
<td>5% (2/40)</td>
<td>0%</td>
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<td></td>
<td>All programmes</td>
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<td>44.74% (7/38)</td>
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<td></td>
<td>Some programmes</td>
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<td></td>
<td>15.79% (6/38)</td>
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<tr>
<td>Core course</td>
<td>Elective course</td>
<td>Across modules</td>
<td></td>
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<tr>
<td>Is ethics taught in a specific module or across modules?</td>
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<td></td>
<td>42.11% (16/38)</td>
<td>10.53% (4/38)</td>
<td>47.37% (18/38)</td>
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<td></td>
<td>Rarely 5.26% (2)</td>
<td>Occasionally 21.05% (8)</td>
<td>Frequently 15.79% (6)</td>
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<tr>
<td></td>
<td>Very frequently 5.26% (2)</td>
<td></td>
<td></td>
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<tr>
<td>Yes</td>
<td>No</td>
<td>Training</td>
<td></td>
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<tr>
<td>Academic team formally qualified to teach ethics?</td>
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<td></td>
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<tr>
<td></td>
<td>55.26% (21/38)</td>
<td>23.68% (9/38)</td>
<td>21.05% (8/38)</td>
</tr>
</tbody>
</table>
The last section of the questionnaire investigated respondents’ views on possible items to support ethics education. All respondents indicated that they wished to be supported by ASPHER for the ethics content of their PH programmes. They identified provision of a model curriculum (n=25) and case studies (n=24) as their priority needs. Summer courses for staff (n=22) and networks for teaching ethics (n=19) were suggested as well, while the option for training courses was selected by relatively fewer respondents (n=14). ‘Other’ forms of support included online courses in PH ethics.

DISCUSSION

This screening survey successfully provides a first look at how and to what extent ethics is included in PH education in the European Region, taking ASPHER member SPHs as a sample. The findings of this study revealed that ethics content is highly valued by ASPHER SPH members as almost all (95%) include it in some form within their PH programmes. However, there is a high degree of variability in how SPHs integrate ethics into their bachelor and master programmes (core course, elective course or across modules). Variability was also seen in the frequency of ethics content taught across modules and whether specifically trained academics were involved in teaching ethics in PH programmes.

Teaching ethics in PH programmes is widely acknowledged as essential and the range of resources available in universities providing such training is impressive (See compendium in Tools for teaching. Skills in public health ethics SPH, 2005). Hence, the understanding that ethics should be included in the training of PH professionals is not a case for debate. Neither is it reasonably arguable whether such teaching should be implemented accidentally or intentionally. Instead, as suggested by Thomas the goals of such teaching (from “developing theory” to “making people moral”) underpin selection of what content is included and the perspective/s adopted. Suggested contents from the same author include “The values and beliefs inherent to a public health perspective”, “PH mandate and powers”, “The application of ethics to topics such as informatics and genomics” and so on.

An issue linked with what should be taught, is who should be teaching ethics in PH programmes. There is little agreement on what the specific level of expertise formally acquired by staff responsible for the teaching of such content should be. However, it has been convincingly argued that if SPHs wish to teach ethics at a non-superficial level, they will have to secure staff with expertise. This ought to be achieved through the provision of professional incentives, such as promotions and tenure guidelines that raise scholarship of ethics appreciation, among the schools’ strategic priorities.
From this survey’s outcomes emerges a clear self-reported need from European SPHs for training and support materials and a direct request for ASPHER to develop tools to assist them.

The limitations of this study include the lack of knowledge acquired about the situation of PH education in academic institutions outside of ASPHER membership, which limits the external generalization of findings. Our response rate of just over 50 percent was similar to that in Kessel’s study in the UK based on SPHs and schools of medicine in 1998. However, there is no argument against or in favour of assuming that the findings of this survey are or are not an accurate proxy of the situation beyond ASPHER.

Further research should include the use of methodologies that enable the gathering of in-depth information with robust qualitative components to enhance knowledge about how and what is taught in this specific field up to this point in time. Higher Education Policies should also address the need of including mandatory suitable training in ethics by qualified staff in PH programmes.

The ASPHER-EUPHA Working Group on Public Health Ethics works to improve knowledge and the implementation of measures for the short- and mid-term teaching of ethics in PH. We focus on the questions of what and how much ethics content has to be taught to build professional competences of students (and ultimately PH professionals) with the goal to improve PH practice in an ethically justifiable way. Current initiatives of the Working Group include participation in development of this issue of Public Health Reviews devoted to this topic. This will help in the development of a recommended European core curriculum and with addressing the perceived needs as outlined by the respondents to this survey.

**Key Points:**

- Little was previously known about the teaching of ethics content in PH education and professionals and policy makers have not always been trained in how to deal with ethical questions in a systematic and reflective manner.
- This paper presents the findings on the first survey with European scope investigating teaching of ethics in PH programmes.
- The findings of this study revealed that ethics content is highly valued by SPHs as almost all (95%) include them in some form within their PH programmes.
- There is high variability in format and intensity of these teachings, and the statements of need for support by respondents suggest both the need for further investigation and room for improvement by the SPHs in their curriculum development.
- Tools to assist in teaching ethics were requested, including a model curriculum, case studies and summer courses for staff.
- The inclusion of suitable mandatory training in ethics by qualified staff in PH programmes should be addressed by Higher Education policies.
Acronyms List:
ASPHER = Association of Schools of Public Health in the European Region
EUPHA = European Public Health Association
PH = Public Health
SPHs = Schools of Public Health

About the Authors:

Dr. Carmen Aceijas lectures in public health at Salford University. Prior to this, Dr. Aceijas lectured in public health at the University of East London where she led the MSc in Public Health and the MSc in Health Promotion programmes from 2007 to 2012 and where she developed a specific interest in European public health capacity building. She sits on ASPHER’s Executive Board, is a member of the ASPHER taskforce on Ethics in Public Health and chairs the Under-Graduate Programs for Public Health Education in Europe.

Caroline Brall studied at Maastricht University, the Netherlands, where she received a BSc in European Public Health and MSc in Healthcare Policy, Innovation and Management. During her studies, her main research interests focused on ethical issues in public health and health care which enabled her to participate in the ASPHER research project concerning ethics education in public health. Currently, she is research assistant and PhD candidate at the Institute for Medical Ethics of the Ruhr University Bochum, Germany.

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**REFERENCES**