Ethics in the Globalizing Work Life

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ICOH Mission works for fair globalization:
Guardian of professional and global ethics in occupational health

Ethics

RESEARCH
Scientific excellence

INFORMATION
Communication & collaboration

TRAINING
Competence & capacity

GOOD PRACTICES
Practical impact

for OCCUPATIONAL HEALTH
Eight Millennium Development Goals by the World Summit 2000

ILO Decent Work:
- Employment
- Social security
- Rights in the workplace
- Social dialogue

New: SDG 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all
Challenges to ethics

- Lack of Global Governance
- Poverty
- Child work
- Slave work
- Literacy, illiteracy
- Mass Migration, ethnic diversity
- Global warming
- Global financial crisis, towards Debt Economy
- Global shortage of food
- Discrimination, stigmatization, exclusion
- Unemployment, temporary work, lay-offs
- Corruption
- Terrorism

These are primarily challenges of Ethics!
Poverty as a challenge to global ethics

• While numeric poverty has been reduced, absolute poverty has increased
• Inequities have dramatically increased in the past 20 years
• Two major groups of poor populations: Working poor (one billion) and ageing poor (~ 600 million?) Particularly old women.
• Poverty is an issue of basic rights: "absolute bad"
• Tolerance of poverty is unethical
• Decent work and occupational health important tools in elimination of poverty
Ageing means growing dependency on others. The Olds: The largest group of poor and discriminated people in the world!
1. Denmark
2. New Zealand
3. Finland
4. Sweden
No more bilateral

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Hippocratic Oath
(460-370 BC)

- Autonomy (let be and be independent)
- Respect for persons (golden rule)
- Benevolence (do good)
- Non-maleficience (don't harm)
- Justice (treat equally, be fair)
- Confidentiality (keep secret)
Role of professional NGOs in promotion of global ethics

- Globally widely accepted; independent, professional
- Specific guidance for ethics in the field of their particular interests
- Formal inter-governmental and governmental bodies delegate substantive assignments to NGOs (WHO-CIOMS; Academy of Finland - NABRE)
- IALI strong links with government and institutions
- ICOH in close collaboration with, ILO, WHO and CIOMS
- ICOH-IEA-IOHA Triple MoU (clause on ethics)
Content of new global ethics

International Conference on Global Ethics — “What is Global Ethics and how to research it?”
29th April 2006, Ghent University, Belgium.

- New ethical issues,
  - Cross-cultural ethics, social understanding, reconciling conflicting interpretations, positive human rights, common goods, elimination of "global bads", child work, illiteracy, asbestos, compelled work etc.
- Cosmopolitan ethics
  - Basic human rights, freedom, dignity, democracy, solidarity
- Ecological ethics
  - Value of whole ecosystem (not only humans, including animals)
  - Sustainability, physical limits
- Global justice
  - Global distribution
  - Intra-generational
  - Inter-generational

Several international organizations and NGOs
Golden rule: Basis for global ethics

"Treat the others as you like them to treat you"
"Don't treat the others as you don't like them to treat you"

Most of the main religions
- Christianity
- Taoism
- Buddhism
- Jainism
- Islam etc.

And the great Philosophers
- Thales of Milet
- Confuze
- Kant
Medical Association

http://www.wma.net/en/10home/index.htm

WORLD MEDICAL ASSOCIATION DECLARATION OF HELSINKI
Ethical Principles for Medical Research Involving Human Subjects
Adopted by the 18th WMA General Assembly, Helsinki, Finland, June 1964, and amended by the
The Code of Ethics represents an attempt to translate in terms of professional conduct the values and ethical principles in occupational health.

**Objective**

The Code applies to occupational health professionals and occupational health services regardless of whether they operate in a free market context subject to competition or within the framework of public sector health services.

**Target**

Autonomy (independent)
Respect for persons (golden rule)
Benevolence (do good)
Non-maleficence (don't harm)
Justice (treat equally, be fair)
Confidentiality (keep secret)
**ICOH Code of Ethics (2002)**

**Duties & obligations**
- Aims and advisory role
- Knowledge and expertise
- Development of policy
- Emphasis on prevention and prompt action
- Follow-up of remedial actions
- Safety and health information
- Commercial secrets
- Health surveillance
- Information to the worker
- Information to the employer
- Danger to a third party
- Biological monitoring and investigations
- Health promotion
- Protection of community and environment
- Contribution to scientific knowledge

**Conditions of operation**
- Competence, Integrity, Impartiality
- Professional independence
- Equity, non-discrimination and communication
- Clause on ethics in contract
- Records
- Medical confidentiality
- Collective health data
- Relationship with health professionals
- Combating abuses
- Relationship with social partners
- Promoting ethics and professional audit
ICOH Code of Ethics

Structure
The Code consists of 5 parts:

A) Preface on the creation of the Code;

B) introduction providing definitions and objectives (11 points);

C) basic principles (3 points))

D) duties and obligations of occupational health professionals (15 points);

E) conditions of execution of the functions of occupational health professionals (11 points).
Occupational health practice must be performed according to the highest professional standards and ethical principles.

The duties of occupational health professionals include protecting the life and the health of the worker, respecting human dignity and promoting the highest ethical principles in occupational health policies and programmes.

Integrity in professional conduct, impartiality and the protection of the confidentiality of health data and of the privacy of workers are part of these duties.
Duties and obligations of occupational health professionals

1. Aims and advisory role
2. Knowledge and expertise
3. Development of a policy and a programme
4. Emphasis on prevention and promotion actions
5. Follow up of remedial actions
6. Information, communication and training
7. Commercial secrets
8. Health surveillance
9. Information to the worker
10. Information to the employer
11. Danger to a third party
12. Biological monitoring and investigations
13. Health promotion
14. Protection of community and environment
15. Contribution to scientific knowledge
Conditions of execution of the functions of occupational health professionals

1. Competence, integrity and impartiality
2. Professional independence
3. Equity, non-discrimination and communication
4. Organizational ethics and contracts of employment
5. Records
6. Medical confidentiality
7. Collective health data
8. Relationships with health professionals
9. Combating abuses
10. Relationships with social partners
11. Promoting ethics and professional conduct
What is new in this edition:

• Extended scope of application of the code of ethics to organisations and not only to OSH

• Periodical audit of occupational health services

• Contribution to scientific knowledge and research
What’s new?

• Promotion and protection of workers’ health and well-being

• Multidisciplinary approach to occupational medicine (psychology, ergonomics, environmental protection) and to continuous learning

• Proactive role of occupational physicians for the improvements in the safety and health of workers (Ramazzini)

• Removal of language and cultural barriers and overcome of cultural differences (anti-discrimination)

• Focus on the need to make occupational health services globally accessible (universal coverage)

• Health surveillance based on scientific evidence and good practices (evidence base)
Institutional ethics

• Ethical code for institutional governance; management and everyday life
• Key principles: ’
  – Equity & Justice,
  – Respect of people,
  – Personal and professional responsibility
• IE is not covered by codes of individual or professional ethics
• Ensures ethical conduct at all levels of institutional life
• Exx. University of Jyväskylä Code of Ethics, University of Western Australia code of Ethics and Code of Conduct.
Community/Company ethics

Challenges
• Fair treatment/Discrimination
• Genetic testing
• Confidentiality
• Hidden risks
• Information to employers and workers
• Incontinuity, insecurity
• Equity
• Violence, harassment
• Protection of commercial secret
• Ethical production/Investment

Solutions
• Code of ethics
• Competence
• Independence
• Second opinion
• Group discussions
• Ethical counseling
• Authorities
• Preparing for the worst
• Ecology
International Ethical Guidelines for Epidemiological Studies

2009 INTERNATIONAL ETHICAL GUIDELINES FOR EPIDEMIOLOGICAL STUDIES

1992 CIOMS INTERNATIONAL ETHICAL GUIDELINES FOR BIOMEDICAL RESEARCH INVOLVING HUMAN SUBJECTS

1990 DECLARATION OF INUYAMA ON HUMAN GENOME MAPPING, GENETIC SCREENING AND GENE THERAPY

1985 INTERNATIONAL GUIDING PRINCIPLES FOR BIOMEDICAL RESEARCH INVOLVING ANIMALS

1983 PRINCIPLES OF MEDICAL ETHICS RELEVANT TO THE PROTECTION OF PRISONERS AGAINST TORTURE

http://www.cioms.ch/publications/frame_available_publications.htm
Ethical competence

Concept of comprehensive training

High professional competence: Guarantee for integrity

Core competences

Knowledge competences
Metaknowledge

Generic competences

Interaction - Reflection - Sharing

Practical skills

Ethics

Guarantee for integrity

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ETHICS
Values
Principles
Keep competence and skill
Do good, no harm
Be honest
Do Help

JUSTICE
Basic human rights
Be fair
Provide opportunities
Ensure minimum standard
Support for underserved
Just reward

EQUITY
Equalize opportunities and burdens
Universal service provision
Focus on those at highest risk
Equal treatment

Solidarity
A mental state
Prerequisite for community survival
Sharing without expecting return
Not necessarily universal

Duties & obligations

• Aims and advisory role
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