



Ethics and Human Rights in Health

Background and problem statement

Background

Throughout history, physicians have been filling an important and unique role in society. Being medically knowledgeable, we have many times served as the gatekeepers between life and death. Persons have therefore turned to physicians in times of weakness, often being wounded, sick or having a beloved family member in dire need. Modern healthcare has given rise to extremely complex and multifaceted ethical dilemmas. All too often medical students and physicians are unprepared to manage these situations competently.

In history, physicians have been involved in unethical behavior and even war crimes, showing the risk of abusing great power. We can also experience unethical behaviour and lack of professionalism in everyday practices. The Universal Declaration of Human Rights, International Humanitarian Law and medical ethics evolved in response to such actions and can be seen as a commitment by medical society to put the needs of the patients first. These frameworks help us advocate the right to health, address formal and informal barriers to health care and provide ethical guidance in everyday work.

We need to realize and teach that medicine is both a science and an art. Science deals with what can be observed and measured, and a competent physician recognizes the signs of illness and disease and knows how to restore good health. But scientific medicine has its limits, particularly in regard to human individuality, culture, religion, freedom, rights and responsibilities. The art of medicine involves the application of medical science and technology to individual patients, families and communities, no two of which are identical. By far the major part of the differences among individuals, families and communities is non-physiological, and it is in recognizing and dealing with these differences that the humanities along with ethics and universal human rights, play a major role.

In order to deliver care which mirrors our ethical commitment, we must take every possible step to ensure that the care is patient-centered. This includes ensuring proper communication between healthcare personnel and patients as well as striving for mutual understanding between health care professions. Medical students need to have the competence to properly communicate with patients, regardless of the patients' level of health literacy and their emotional state to grasp given information.

To ensure that physicians have the right knowledge to provide such care, the medical curriculum must address both international frameworks and ethical guidelines. Medical students should obtain essential skills on how to cope with specific ethical problems, especially in ethically challenging situations as when treating critically-ill patients, euthanasia, or when seeing corruption in healthcare. In this context vulnerable groups, as risking a less than optimal care, should also be given specific emphase. For some vulnerable groups, attaining the highest possible standard of health is inherently linked to other areas, i.e. for children, it includes education.

Medical students must also develop a critical mind to be encouraged to follow the ethical guidelines and develop an ethically appropriate approach to patients and to medical colleagues. This will add to the overall goal of physicians as it was stated in the Hippocratic oath and the Declaration of Geneva.



When society faces challenges and difficulties, the support for basic moral values often diminishes. Future physicians therefore need to be given opportunity to strengthen their commitments towards Human Rights and ethical practice. We see the need to call upon governments, as being responsible for the healthcare of tomorrow and the allocation of resources, to implement the Universal Declaration of Human Rights, International Humanitarian Law and the Declaration of Geneva. We call upon education institutions to integrate this knowledge in medical curriculum, to build capacity among medical students and ensure the provision of ethical health care in coming generations.

Problem Statement

Medical ethics and human rights are guiding values for medical practitioners. Together they ensure a patient centered approach, where the needs and rights of the patients are of the greatest importance. Future health care personnel must be competent in the medical ethics that govern her or his practice, and understand how international frameworks such as the Declaration of Human Rights are set to safeguard our inalienable human rights. Furthermore, as future health care personnel medical students must feel confident to take ethically sound decisions, and to advocate for their patients in all settings. Students therefore need to have a basic understanding for the roles, rights and responsibilities that come with a medical mission and how these roles apply during threat and ethically challenging situations.

Main focus areas of the Program include:

- Medical Ethics (Patient Centred Care, Good Medical Practice, direct doctor-patient Relationship, including sensitising children for medical surroundings)
- Human Rights for Medical Professionals in daily clinical settings
- Rights of patients, doctors and medical students
- Rights of a child, including non-discrimination, non-violence, access to education and health care.
- Rights of vulnerable target groups, including migrants and refugees, persons with disabilities, people that face racial and any other discrimination
- Ethical research and ethical financing of healthcare
- Ethical issues in medicine including Organ and Bone marrow donation, IVF, Euthanasia, Abortion, and so on.

Target group and beneficiaries

Target group

Medical Students: as future health care professionals need to be empowered by enhanced knowledge on international frameworks safeguarding ethics and human rights.

Medical Faculties: as having the mission of education of medical students, not only in terms of knowledge and practical skills, but also the approach to the patient and obtainment of psychological qualities essential to the profession.

Health Care Students: engaging in interprofessional dialogue to ensure an ethical health care practice.

Professional organizations: as developing ethical guidelines in accordance to medical experience should be encouraged and invited to engage as defenders of ethics and human rights in health.

International and national policy makers: as creating policy that apply in the work of



healthcare professionals should be made aware of the importance of a patient centred care and the role of medical ethics and human rights in health.

Beneficiaries

Medical Students: developing knowledge which is equally important as the scientific education and acquiring the self-assurance that ones acting is in accordance with the above mentioned international frameworks and their national counterparts, as medical students and as future health care personnel who are putting the patient's' needs first.

Healthcare providers: ensue a correct interprofessional cooperation and a work environment where ethical reflection is part of everyday praxis.

Vulnerable groups: as a right based approach will raise the quality and accessibility of health care.

Patients: given an ethical and patient centered care, with patients aware of their rights and responsibilities where a right based approach ensures the highest attainable level of health care and access to health care where one can trust the medical professional and rely on a professional ethically harmless approach.

Children: given equal treatment and healthcare for all children, providing more knowledge for the parents about children's right to health, providing more knowledge for the healthcare professionals to understand the specific needs of vulnerable children groups.

Logical framework of interventions

End-goal and assumptions

End-goal:

Medical students as future physicians are able to question their professional behavior and decision-making and answer by ethical and human rights principles regardless of the situation. By understanding the Universal Declaration of the Human Rights, International Humanitarian Law and ethical codes they are able to carry out a correct interprofessional cooperation and are skilled to advocate for the rights of their patient, themselves and their colleagues.

Assumptions

A. Medical students have a genuine wish to put the needs of the patient first and to act ethically, but a dissatisfactory awareness on universal human rights, right to health, law and medical profession obligations.

B. Medical ethics is strongly linked to the Universal Declaration of Human Rights and ensures that basics and inalienable rights of the patient is respected.

C. Modern healthcare has given rise to extremely complex and multifaceted ethical dilemmas.

D. Majority of medical students tend to believe in stigma of "rights and wrongs", not being sensitised and conscious about individual diverse human rights issues even though understanding of these are the basis for all sound and ethical decision-making.

E. Present stigma of successful professionals and medical university managers that states "As long as the physician is a knowledgeable and skilful clinician, ethics doesn't matter," results in not enough time in the medical curricula for ethics and ethical reflection.

Preconditions and backwards mapping

Human Rights and medical ethics are lacking in medical education. This has consequences in health care practice, as future health care personnel don't acknowledge the importance of



an ethical and rights based approach when providing care in accordance with their mandate. A key value communicated through medical curricula must always be to put the patient first and to keep a patient centered approach in all settings. The problem should be addressed through both formal and informal education and needs to be an integrated part of medical education.

In order to achieve this IFMSA should promote patient-centred healthcare and appropriate behaviour among our members within the NMO activities and IFMSA international. In order to provide the best medical services, we should look for expertise from medical authorities and establish the collaboration between medical faculties with students in the field of medical ethics and Human Rights related Faculties – our allies in achieving ethical and holistic-centred healthcare, as well as Institutions and NGOs related to law, human rights violations, medical ethics, our future partners and advisors during campaigns and projects held within the Program.

Through advocacy, interprofessional collaborations, awareness raising and peer to peer education the knowledge on ethical conduct as well as frameworks and guidelines will be given to future health care personnel. This will ensure that the next generation will be competent to question their professional behavior and decision-making and answer by ethical and human rights principles regardless of the circumstances. By understanding the Universal Declaration of the Human Rights, International Humanitarian Law and ethical codes they will be able to carry out a correct interprofessional cooperation and will be skilled to advocate for the rights of their patient, themselves and their colleagues.

To achieve the end-goal in accordance with the backwards mapping, a number of objectives is formulated:

Formal education:

- Advocate the inclusion of a right based approach and ethical guidelines in obligatory medical curriculum;
- Advocate the importance of addressing relevant legal frameworks, such as the Universal Declaration of Human Rights and the Geneva Declaration in medical curriculum;
- Address ethical issues including questions about the equitable distribution of resources, protections of vulnerable groups, respect for patient choice of treatment options and solidarity between communities during outbreaks such as tuberculosis and HIV/AIDS.

Medical practice:

- Ensure a sustainable and beneficial doctor-doctor and patient-doctor relationship;
- Equip medical students with knowledge and tools to commit to patient-centered care;
 - Equip future health care personnel with the competence to properly communicate with patients, regardless of the patients' level of health literacy and cross-cultural and gender barriers.

Capacity Building:

- Educate and empower medical students to develop a firm understanding of the impact of the relevant legal frameworks through formal and informal education;
- Equip future health care personnel with the confidence to apply a human rights based approach in all settings;
- Address human rights violations and possible actions to stand against violations of the right to health;



- Provide knowledge on barriers, formal and informal including cultural and gender barriers, to ensure a patient-centered and rights based care.

Applying medical Ethics and a Human Rights based approach under specific conditions:

- Address research ethics governing the standards of conduct for scientific research euthanasia;
- Give more emphasis to the rights of children in the health settings and how they can be better protected according to their specific needs. The concept of assent and consent needs to be well understood.
- Educate medical students on the care for critically-ill and dying patients, including euthanasia;
- Understand ethical concerns associated with the planning, preparedness and responses to disasters and future pandemics;
- Address human organ and tissue transplantation ethical guides and health-care policy making advises;
- Empower medical students to take a stand against corruption in healthcare.
- Empower medical students to Identify and take action against human trafficking situations

Milestones and indicators

Outcome 1: Future health care personnel are knowledgeable on and have firm understanding of the impact of the relevant legal frameworks, such as the Universal Declaration of Human Rights, in their everyday work.

Indicator: Number of trainings held internationally, nationally and locally. Number of students enrolled in trainings. Improvement of students understanding on the legal frameworks and their implications for caregiving

Target group: Medical and healthcare students, medical schools

Threshold: A training covering the scope of the program

Outcome 2: Medical students apply a human rights based approach and commits to a patient-centered care Indicator: Improvement of students' confidence to apply a human rights based approach Improvement of knowledge of students in providing a patient-centered care

Target Group: Medical students

Threshold: Approximation done by the students through self evaluations

Outcome 3: Medical students are knowledgeable on barriers to a rights based approach, including knowledge on cultural and gender barriers and acquire practical skills on ethical communication in healthcare, emphasizing the importance of care for critically-ill patients, conflicts on cultural and gender backgrounds

Indicator: Number of trainings held nationally, locally, and internationally. Number of medical students engaged in peer to peer education. Improvement of students confidence to address barriers to ensure a rights based care

Target Group: Medical students

Threshold: A training or workshop addressing the topic, approximation done by the students through self evaluations

Outcome 4: Medical students advocate on the importance of equipping medical students with the knowledge to pursue this through medical curriculum, which results in the inclusion of ethics and human rights in medical curriculum

Indicator: Number of medical faculties which addresses ethics and human rights as part of



the medical curriculum.

Target Group: Medical faculties.

Threshold: Discussion opportunity on ethical guidelines and the human rights in medical education.

Outcome 5: Medical students are empowered to provide patient-centered and ethically sound care in all settings

Indicator: Number of trainings held nationally, locally, and internationally. Number of medical students engaged in peer to peer education efforts. Self assessment on improved empowerment.

Target Group: Medical students

Threshold: Approximation done by the students through self evaluations

Outcome 6: Creation of sustainable and respectful relationships between medical doctors, students and patients, as well as within the medical healthcare personnel.

Indicator: Number of opportunities to engage in interprofessional communication. Number of community visits.

Target group: Medical students, health care students, medical faculties

Threshold: Approximation done by the students and NMO's through self evaluations

Outcome 7: Medical students advocate on the importance of a human rights based approach and patient centered care in healthcare.

Indicator: Number of advocacy opportunities held nationally, locally, and internationally.

Discussion opportunity on ethical guidelines and the human rights in healthcare.

Target Group: Medical students

Threshold: Ethical guidelines as well as the human rights are discussed among medical students and healthcare professionals.

Interventions

Awareness Create awareness through World Human Rights Day activities Address the care for critically-ill and dying patients Address the corruption in Healthcare Address the care for patients in terms of cultural and gender diversity Address the rights of medical students, doctors and patients both in their daily clinical setting as well as under circumstances of conflict.

Capacity Building Training New Human Rights Trainers Conducting workshops or coursing on the basics of Good Medical Practice Improving medical students skills regarding doctor-doctor and patient-doctor relationships Training of medical students how to move on under circumstances of violations of rights Advocacy Advocacy on the human rights and ethical approach in medical curriculum Advocacy on the human rights in medical healthcare Advocacy for the improvement of the conflict situations in daily life of medical healthcare Direct Medical Education towards Patient Centered Medicine Ensure Medical Education addresses care for and stigmatisation of vulnerable groups and minority as well as stand up for their rights



Narrative

The ethics and human rights in health Program aims to increase the involvement of medical students in human rights in medicine. In order to empower motivated IFMSA members the NMOs should hold trainings, workshops and conferences regarding the topics stated in the Program and encourage students to participate in international campaigns and events related to these issues. Depending on the needs of the NMOs and their current ethical problems, the projects and activities should also be adjusted to the needs and relevant topics - remembering that the area of interest is all-embracing, but keeping in mind recent changes in the populations regarding migration, refugees and travel medicine. This will assure the involvement of the students in advocating the human rights within the NMOs and provide the most relevant topics of interest.

Organisational context and necessary resources to launch the program

Personnel Resources Education and skills building on implementation of activities Material developed as part of the IFMSA Human Rights Trainers concept Students enrolled in programs at Ethics, Law and Human Rights related faculties Experts on ethics and human rights NGOs and Institutions related to ethics expertise, support and collaboration

Material Training New Human Rights Trainers Training New Trainers The Universal Declaration of Human Rights International Humanitarian law as stated in the Geneva Conventions and other relevant protocols Good Medical Practice A Declaration on the Promotion of the Patients' Rights in Europe The World Medical Association Ethics Manual WMA International Code of Medical Ethics Regional and National Codes of Ethics Ethics related policies and policy statements

Funding Local sources for local projects National sources for national projects, workshops, conferences International IFMSA support on facilitation of the grants proposals and creation of regional activities participated and conducted by the NMOs Grants and partnerships with human rights related institutions