

This response was submitted to the consultation held by the Nuffield Council on Bioethics on *Public Health: ethical issues* between May and September 2006. The views expressed are solely those of the respondent(s) and not those of the Council.

Mrs Esther Hollands

QUESTIONS ANSWERED:

Question 1 The definition of public health

ANSWER:

No comment

Question 2 Factors that influence public health

ANSWER:

I agree that these are the main influences, with environment, social factors and lifestyle as more important. Religious belief (or none), and outlook on life/life-views are particularly important, as these influence behaviour, including social interaction, sexual behaviour, and the way in which people care for their body.

Question 4 Control of infectious disease

ANSWER:

Quarantine is for a limited period, and although inconvenient does help to prevent the spreading of infectious disease. It is therefore reasonable to enforce quarantine, as there is no assault on the individual's person or conscience, rather an inconvenience for a time. Those in quarantine should be well provided for, and special measures could be taken for children and families. I do not think that vaccination or prophylactic treatment should be mandatory, although these may be offered. The state should provide resources to develop methods of preventing outbreaks of serious epidemics in other countries, as what happens in other countries affects our own country, so for reasons of self-interest it is reasonable to help other countries. In addition, it is morally right to help poorer countries with problems of health, without imposing our opinions on them. Yes, with global travel, new measures are needed, but I have no useful suggestions! I have only limited reservations regarding mandatory testing for diseases, providing the testing is not invasive or high risk to the individual.

Question 3 Prevention of infectious diseases through vaccination

ANSWER:

I do not believe that a compulsory system of vaccination is justified in any circumstance. 1. Many people have faith in the vaccination system because of the excellent publicity which it originally received. However, many of the diseases for which people are vaccinated were already coming under control through improved sanitation, healthcare, and measures such as quarantine. The statistics in support of vaccination are reported without taking other factors into account, including damage caused by vaccination. 2. A significant number of eminent scientists and doctors have deep reservations about vaccinations. Apart from all the uncertainty surrounding the MMR vaccine, there is also a suggested link between other vaccines and various degenerative illnesses, e.g. M.E., M.S. and some cancers. Should these

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people (the weak minority) be force to suffer in order to achieve a somewhat dubious herd immunity? The this is "free rider" argument in reverse. 3. Some vaccines are not producing the herd immunity they are supposed to. e.g., the recent outbreaks of mumps have been among teenagers who were previously vaccinated. So the recommendation is to re-vaccinated. How many times will they be re-vaccinated, and is it really worth the cost, particularly for an illness which is far less of a problem if caught in childhood? 4. Those who support vaccination most strongly are the drug companies, who stand to profit the most from compulsory vaccination. Many of those who support vaccination are canvassed by the drug companies directly, given incentives to support, or have their work subsidised by these powerful pharmaceutical industries. The evidence in favour of vaccination is, at best, biased. 5. In some countries, outbreaks of a disease (notably, polio) occur after vaccination, and are seemingly caused by vaccination. It is quite right that parents should make decisions on behalf of their children, both in the matter of vaccination and all medical intervention. 1. Parents are ultimately the ones responsible for their children, not the state (excepting the problem of criminal abuse by parents, which is comparatively extremely rare, and should not influence the policies regarding normal caring parents). 2. It is the parents who know their children best, and the medical family history. e.g. my son has severe allergies, and if he were given the standard vaccination for tetanus, perhaps in hospital after an injury, he would be very likely to have an extreme reaction as this vaccine is egg-based, I believe. 3. Many parents cannot in all conscience allow their children to be injected with substances that are known to be harmful, such as mercury. Vaccination also bypasses the body's normal immune defence system, by injecting directly into the bloodstream. 4. Parents have a strong protective instinct towards their children, which is nature's way of ensuring their survival into adulthood. To go against this instinct would not be beneficial to public health. 5. In some cases the statistics for having a vaccination show a greater risk of complications than having the disease. 6. Criminalising parents over a matter of conscience regarding their children is not the way forward.

Question 5 Obesity

ANSWER:

What classes as obese is culturally influenced. Guidance and education should major on positive effects on health, rather than on the problem of obesity. Encouragement to make positive choices for health, rather than penalising, is generally more effective. Parents need to be informed about the values of healthy diets and exercise for children (less TV and computer games!) The school initiatives currently taking place are excellent, which don't sell crisps and fizzy drinks or burgers, and provide good alternative options for school dinners. Children won't choose the best for themselves, as the unhealthy food contains flavour enhancers which make them come back for more. So these unwholesome foods should not be available at school (and ideally not at home either!). Sweets should be much more expensive to try to limit consumption! Perhaps they should have extra tax on them, in a similar way to cigarettes? The food industry should be made more responsible for the food it produces. It already has to comply with many regulations, but these should be revised to reduce additives and flavour enhancers, sugar and salt, to make the food

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industry accountable for what it produces in terms of the nation's health. Many modern western diseases can be directly attributable to the consumption of processed food. If someone's obesity is likely to affect the outcome of medical treatment, e.g. the effectiveness or danger of an operation, it is reasonable to postpone the treatment (if the condition is not life-threatening) until the underlying problem of obesity has been tackled to some extent. Supermarkets and the food industry should be prevented from packaging and positioning sweets where they will be a temptation to children.

Question 6 Smoking

ANSWER:

Reasons for the delayed response are: power of the tobacco industry, public opinion, and tax revenue. Companies that make or sell hazardous substances should definitely be required to contribute to costs for treatments. Smokers already contribute extra through their taxes. It does seem fair to contribute extra for healthcare, but it would be very hard to work out a truly fair way to do this. National Health service is supposed to treat all equally, so background and lifestyle are relevant according to this principle. At this stage, I agree that smokers should be allowed to smoke, in spite of the fact that I strongly dislike the habit myself. However, they should be prevented from smoking anywhere in public places where other people will be forced to be passive smokers, and should consider the rights of others to a smoke-free environment. Parents smoking at home is a real problem for the health of children, but sanctions cannot be imposed in this area. The dangers and costs of smoking should continue to be widely publicised. Public opinion has changed over the years on this issue. The state should do all it reasonably can to prevent children and teenagers from smoking.

Question 7 Alcohol

ANSWER:

As with tobacco and food industries, the problem is pressure from the producing industry. Public opinion is also mixed on this, as the media from time to time published reports on the health benefits of alcohol. There is a strong and influential pro-alcohol lobby. People often feel they must have alcohol to have a good social evening. People rely on these social drugs because of life problems, so that they need them to get through life. People with religious or strong ethical beliefs in general manage better without other props. There is a problem with marketing for alcohol sometimes aimed at young people, and it is still cool to drink, and uncool to abstain. Alcohol should be less freely available, and extending opening hours was a big mistake.

Question 8 Supplementation of food and water

ANSWER:

When food is fortified, I can choose whether or not to buy it. If water has substances added to it, I have no choice about whether I have it. Supplementation of food is mainly putting back vitamins and minerals necessary to the body, that have been taken out of the food during processing. Adding a substance such as fluoride or

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chlorine to water is a different kind of issue, as these are not necessary to the body, and can cause health problems. Adding fluoride to water is not universally accepted as a good thing. Why should I be forced to have fluoride in my water, just because other people eat sweets/give their children sweets, and so damage their teeth? Fluoridation should only be carried out after lengthy consultation with the public, and referenda. I would question the statement that children benefit from fluoridation. Adults have to make the decisions for children, of course, because children cannot weigh up the issues for themselves. You only have to teach a class of teenagers to discover how easy it is to sway them all in favour of one opinion or another, by the way you present the arguments! If we are really concerned about the teeth and general health of children we will do more to improve their diet, not rely solely on fortified cereal (also full of sugar!) for them to receive their required vitamins and minerals. I think it is acceptable to restrict the choice of individuals to protect the health of children only if actual harm is being done to children (as in passive smoking, for instance), not in a disputed area such as fluoridation. Adding fluoride to table salt would not help children as they should not be adding salt to their food anyway. It would be a way for adults to poison themselves doubly effectively, however! It seems that not enough research has been done on this subject, if evidence of safety is not absolutely clear.

Question 9 Ethical issues

ANSWER:

All of these principles operate in balance with one another. It is therefore difficult to class them in order of importance. The Golden Rule of Jesus, in the Bible, puts it much more simply: "Do to others as you would have them do to you." The principle of not harming others depends on which position you are originally coming from: pro-vaccinators would say doing no harm to others means vaccinating all; those against vaccination, like myself would say doing no harm means not vaccinating. Parents deciding for their children are guided by what they believe to be in the best interests of their own child. They are more concerned than anyone else for the welfare of their own child, so they must do what is right for them: that is the parent's duty. Autonomy, trust and consent are the main principles involved for each individual family. They will also consider the principle of doing no harm to others.