

## **SECOND ASIA-PACIFIC REGIONAL MEETING for NATIONAL ETHICS/BIOETHICS COMMITTEES**

### ***Reducing Inequities through Solutions-Orientated Bioethics***

**22 -23 October 2019 / Wellington, New Zealand**

#### **GUIDANCE NOTE on SESSIONS 1-3**

The Second Asia-Pacific Regional Meeting for National Ethics/Bioethics Committees (AP-NEC2) will cover three technical topics:

- Session 1: CLIMATE CHANGE - ethical issues relating to climate change and health ethics, such as the disproportionate burden climate change places on certain groups (e.g., poor women) and places (e.g., the Pacific Islands).
- Session 2: EMERGING TECHNOLOGIES - ethical issues relating to emerging technologies and health, such as informed consent, privacy/confidentiality, access to services, control and ownership of health information or quality of care.
- Session 3: INDIGENOUS POPULATIONS - ethical issues relating to indigenous populations and health, such as acknowledging and incorporating indigenous perspectives into design and conduct of research, control, ownership and benefit sharing of research involving indigenous populations, representation of indigenous peoples in research, informed consent, selection criteria, or privacy/confidentiality.

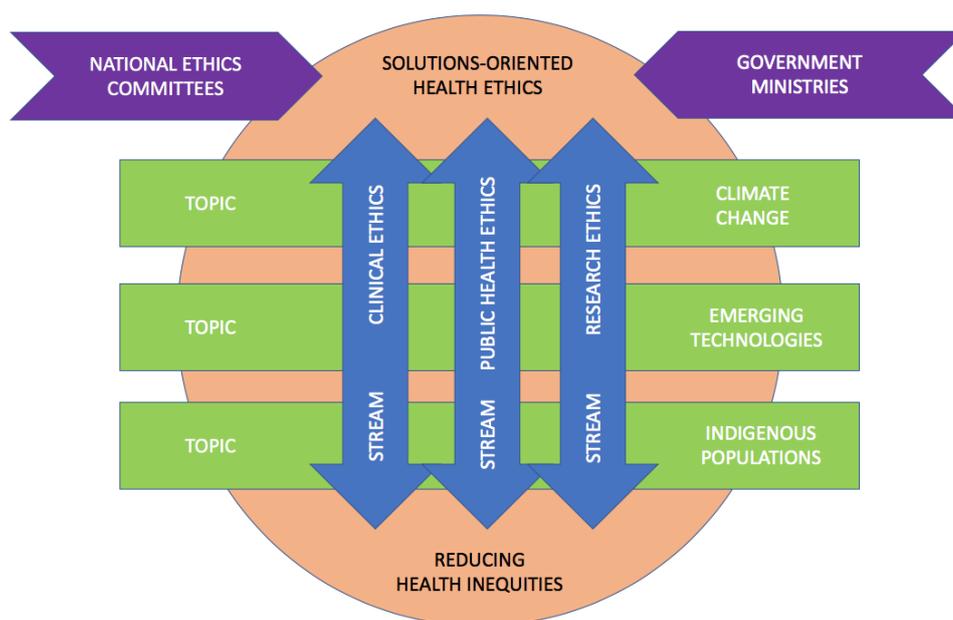
AP-NEC2 will consider each of these technical topics along three streams of health ethics:

- Clinical Ethics – key issues include informed consent, decision-making capacity, privacy and confidentiality.
- Public Health Ethics – key issues include balancing public good against individual liberty; prioritizing treatment and prevention; health promotion and equity; and the implications and limits of public health surveillance
- Research Ethics – key issues include what value does the research have for the communities from the participants are drawn, who benefits, how are the participants chosen, and how are the rights and well-being of participants protected?

More generally, additional issues include resource allocation, corporate partnerships, workplace ethics, equitable access, individual vs population health, and public accountability. In global health, additional issues include cooperation between countries to address the social determinants of health (e.g., poverty, malnutrition, poor education, unhealthy living conditions, lack of access to health care), “brain drain” from resource-poor countries to wealthier countries, cultural relativity, and data- and benefit-sharing in international research.

The unifying theme for AP-NEC2 is equity. Specifically, the meeting will look to identify the pathways that lead to inequities in health outcomes and find solutions for addressing the challenges and opportunities along the three streams of health ethics across the three technical topics.

Throughout the discussions, the respective roles of national ethics committees and government ministries, as well as their coordination with each other, will be critical in finding solutions to reduce health inequities through health ethics frameworks.



Sessions 1-3 will be structured as follows:

## I. PLENARY

The moderator – a member of the AP-NEC2 Steering Committee - will introduce each of the presenters in the session and lead the plenary discussion. The moderator will be provided notes, including background on the presenters. To ensure that the sessions run on schedule and all presenters are given sufficient opportunity to speak, the secretariat will assist the moderator to monitor and enforce the allotted times for presentations – presenters will be notified when they have one minute left to speak.

### A. Technical Presentation (20 minutes)

The technical presentation will be delivered by a temporary advisor and provide a broad overview of the topic, while highlighting priority issues in the Asia-Pacific region. The presentation will highlight health equity and implications along the three streams of health ethics, consider challenges and opportunities in strengthening ethics frameworks to reduce health inequities, and discuss the roles of ethics committees and governments in such efforts. Generally, the presentation should showcase the temporary advisor's expertise in the field, garner enthusiasm for the topic from participants and direct participants to talking and thinking along the lines of central meeting themes.

Temporary advisors should submit their presentations to the secretariat by 14 October 2019. These will be shared with the session moderators to help them prepare. The final versions of the presentations will be made available to the participants after the meeting through the on-line shared folder. Additional background materials may be provided to the secretariat for inclusion in the shared folder.

### B. Report on Survey Results (5 minutes)

The report will be delivered by the secretariat and summarize the responses to the survey that was completed by meeting participants during the lead-up to the meeting. The analysis will provide a baseline review of how participating countries are currently addressing the issues pertaining to the technical topic.

The summary of the responses will be made available to the participants through the on-line shared folder.

C. Country Perspectives Panel (5 minutes each)

To maximize the opportunities to learn from the wide-ranging experiences of countries participating at the meeting, participants will deliver short interventions as preassigned country panelists. Each panelist will share one country example that illustrates the challenges and opportunities within one of the health ethics streams in relation to the technical topic, with focus on inequities.

Optionally, the panelist may use one PowerPoint slide. Panelists should submit their slide to the secretariat by 14 October 2019. These will be shared with the session moderators to help them prepare. The final versions of the slides will be made available to the participants after the meeting through the on-line shared folder. Additional background materials may be provided to the secretariat for inclusion in the shared folder.

Panelists are suggested to address the following questions:

- What were the key facts of the situation?
- What were the roles of the agencies involved?
- What policy instruments were relevant?
- What actions were taken?
- What were the outcomes and/or outlook?

D. Plenary Discussion (20 minutes)

The open plenary discussion will allow all participants to ask questions and make comments.

II. GROUP WORK

The temporary advisor from the preceding plenary session will moderate the report back and plenary discussion following the group work.

A. Parallel Breakout Sessions (30 minutes)

Building on the preceding plenary session, the participants will engage in small group work to identify potential solutions to reduce health inequities in the context of the technical topic. The participants will be asked in advance to self-select which group they would prefer to join, each group assigned to one of the three streams of health ethics. Each group will be given a feedback template and supported by a facilitator and notetakers. Each group will nominate a rapporteur, who will report the group's findings back in plenary.

Guiding questions:

- What are the priority issues on the technical topic in this stream of health ethics (clinical, public health, research)?
- What are the equity implications?
- What other ethical principles should apply?
- What solutions have worked or not worked in your countries?
- What are areas to prioritize for further research?
- What areas might there be for regional collaboration?
- What is the role of National Ethics Committees in facilitating the solution? What are the tools, methods or processes to be used to realize those solutions?
- What is the role of government in integrating an ethics approach to health challenges and opportunities?

B. Report Back and Plenary Discussion (30 minutes)

At the conclusion of the group work, the participants will reconvene in plenary. Using the feedback template as a guideline, the rapporteur from each group will report their findings to the plenary.

The open plenary discussion will allow all participants to ask questions and make comments.

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