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This valorisation addendum aims to offer additional ideas and suggestions for value creation in practice, which can be generated from the thesis presented afore. The underlying value (and thereby also challenge) this thesis brings forward is the interdependence and combined view of – broadly speaking – ethics, economics and politics with view to public health. Analysing the consequences of austerity and scarcity resulting from the economic crisis of 2008 on health in the European context, it becomes obvious, that the social relevance inherently is at the core of the research conducted in the course of this thesis.

Economic policy-making in the health sector can be informed by the results the thesis brings forward, such as investing in health instead of shrinking available budgets, which is also in line with the line of argument concerning ‘health is wealth’. The latter stipulates that a society can only flourish when its population is healthy (Figueras & McKee, 2012). Providing the opportunities for individuals to achieve health is thus crucial for “societal well-being” (Figueras & McKee, 2012). In addition, the thesis brought forward that policy-makers experienced difficult and strenuous situations during decision-making at times of scarce resources, where they had to prioritise between distinct areas to focus on and invest in, e.g. medications, health professional staffing or care equipment and sites. According to the interviewed policy-makers the need for ethics advisory or assistance in terms of tools or advice is increasing. They deem the degree of objectivity provided by ethical analyses as facilitating their decision-making tasks (chapter six of this thesis).

Against this backdrop, three main ways of value creation derived from the results of this thesis are suggested:

1) Providing ethics assistance to policy-makers in Europe and building their ethics competencies

Results of the research of this thesis are relevant for policy-makers at national and international level. In supporting policy-makers, actions should be taken on EU and national government level to offer ethics advisory and assistance. This ethics advisory and assistance could be offered in various ways, e.g. by organising workshops for specific issues with the aim to assist in particular decision-taking processes involving ethical decisions. Also, more intensive retreats (of two or three days) could be offered in which ethical instruments are taught to policy-makers, providing them with a toolset, which they can make use of independently for pressing queries and decisions thereafter. The Brussels Campus of Maastricht University could be an optimal place to host those workshops and retreats, being close to EU level policy-makers working in Brussels and serving as a networking place. In addition, concrete tools, such as checklists or guidelines should be developed, that provide policy-makers with support in decisions-making situations involving ethical trade-offs. Those services and activities aim to build ethical competencies for policy-makers themselves, so that their ethical decision-making capacities are developed. Another target group that could profit from ethics education – or rather awareness rising of ethical issues – is media.

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Providing ethics workshops for media could be a way to improve social responsibility and awareness thereof for media in general. In order to increase the focus on developing ethics competencies of policy-makers themselves, certificates in ethics could be introduced for policy-makers with the aim to improve ethical decision- and policy-making in a sustainable and long-term way.

2) Informing the public and translating between science & practice
Results of the study can furthermore inform the general public about the ethical assessment of policy developments during the economic crisis. For the academic community, the thesis showed that an improved translation between science and practice is necessary so that scientific discourses or academic tools can be better integrated and made use of in everyday health policy-making. This translation can be achieved for instance through an increased engagement of scientists within public debates on the one hand, and an enhanced perceptibility of policy-makers and the public for scientific support on the other. In general, more public health discourses concerning ethical values within decision-making are needed, as those values are at the origin thereof.

3) Establishing ethical impact assessments
With the aim to strengthen the focus on ethics within policy processes as outlined in point two, impact assessments could be introduced assessing the impact in terms of ethics, thereby shedding light onto the ethical dimension. In addition to the common practice of policy impact assessments, which assess economic, social, and environmental effects of public policy (Adelle & Weiland, 2012), the dimension of ethics should be added.

Generally, the significance of ethics and focus thereof within the discipline of public health should be increased. Given that public health ethics is inherently distinct from medical, clinical or bioethics and that the discourse is rather limited, both research and advisory in public health ethics should receive a greater priority within health research and policy. In conclusion, the introduction of ethical policy advice and awareness rising about ethical issues in policy processes in European contexts marks an important innovation towards an encompassing societal approach with regard to health.

References
