

Making those hard decisions – for people and the environment

ADITHYA PRADYUMNA

Resnik DB. *Environmental health ethics*. New York: Cambridge University Press; 2012. ISBN 9781107617896. 305 p. Paperback. INR 1994.

Ethics in the field of environmental health deals not just with dilemmas involving individuals and groups of people, but also between people and the rest of the natural world, compounding the challenges. Resnik's *Environmental health ethics* is written to serve as a "starting point," "calling attention to important issues...and dilemmas," and to provide a framework for ethical decision-making on issues relevant to environmental health. On each of those grounds, the book delivers well and in a succinct manner. This is also probably the first book devoted exclusively to this important subject, moving as it does beyond the traditional boundaries of public health ethics. While the bulk of the book is on the application of the proposed ethical framework to issues concerning environmental health, ethical theory, too, is discussed. The author includes other environmental thinkers' critique of his framework, thus displaying a good deal of transparency about his line of thought.

With regard to decisions that concern economic development on the one side and human and environmental well-being on the other, the author opines that some degree of mutual compromise is necessary. He holds that this can be the objective result of an ethical framework dealing with multiple competing values. His approach is based on an "enlightened form of anthropocentrism," one that gives a higher value to human concerns but also gives independent value to concerns of animal welfare and the larger natural world. It is akin to a critical type of environmental pragmatism, encouraging discussion on deeper moral differences and avoiding quick-fix solutions (1). The principles on which the framework is based: human rights, utility, justice, animal welfare, stewardship, sustainability and precaution.

Resnik goes on to discuss the realistic options available in each case, scrutinising them using current evidence and his framework. The apparent short-term benefits are weighed against longer term consequences, and it is suggested that decisions be revisited in the light of new evidence. While recommending a balance between competing values, he adds that decisions should be consistent, withstand criticism from

the public, and be based on distributive and procedural justice.

He starts with a familiar issue – vector control and the use of pesticides – in which the conflict between the health impacts of vectors against those of pesticides is apparent. Importantly, other issues such as population size or the consumption of meat, which are either relatively challenging or unfamiliar to the average public health professional, are included in this discourse.

Some of Resnik's conclusions are debatable. For instance, questionably, he allows for the use of genetically modified foods (after "adequate measures" have been taken to mitigate and prevent risks) for their role in food security and economic growth. The inappropriateness of this technology for developing countries (2) and the threats posed (through direct and indirect mechanisms) to global food security and health are known (3). In that context, the author's application of the principle of "precaution" also needs further discussion – which may be the most contentious part of the framework. Mainstream technology has assumed the guise of a saviour in dealing with social problems in developing countries, and the zeal for its promotion (4) has superseded any need for reflection, or for stringent checks and balances (5). There is a need to learn from previous developmental programmes which had disastrous consequences on biodiversity and communities (6).

In the author's words, "much more work remains to be done." Environmental health concerns range from individual well-being to the survival of life in general. More than any other time in history, we have reached a stage in which people are having a catastrophic impact on the global environment, and are also systematically oppressing groups of people and other species, in the name of efficiency, development and the greater good. It is very difficult to be aware of latent prejudices (7), and this may hold true in the context of how people perceive of the environment as well. It is possible and not unlikely that in the near future, the priority given to each of the competing ethical principles will be different, with several authorities already recommending an urgent paradigm shift in development thinking (8). The Sustainable Development Goals are potentially the first global step towards such a shift.

This book is relevant to practitioners and students of public health, the environmental sciences, engineering, the agricultural sciences and philosophy, as well as industrialists and policy-makers. It provides first-time readers with a technical input on the subject, and would serve to stimulate a debate among professionals. There is, indeed, a gigantic gap between ethics and decision-making, which necessitates discussion striving to narrow the gap.

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To believe or not to believe: the onlooker's role in cases of sexual boundary violations

RAKHI GHOSHAL

Who would you believe? Director: Sunita Simon Kurpad. Supported by: The Institutional Ethics Review Board, St John's Medical College, Bengaluru, 18 minutes

Available from: <http://sjri.res.in/hhResources>

This triple-tiered 18-minute documentary explores the issue of sexual boundary violation (SBV) in the healthcare setting. SBV is a complex terrain and the evaluation of the incidents falling in its domain rely on the imperatives of objective, rational and legal decision-making as these incidents are often considered an individual's subjective perception of a gesture, an activity or spoken words. Consequently, it is not uncommon to find those acting as decision-makers and the jury getting caught in the slippage between *their* perception of the accuser's "perception" and the objectivity warranted by the law. In the process, the "reality"/"truth" of SBV gets lost.

It is this complexity that the documentary captures. It decidedly portrays rather "grey" character, ie it abstains from portraying a voiceless, meek victim against an obviously evil perpetrator. Instead, it makes use of a somewhat reverse characterisation, thus approximating to real-life situations as closely as possible.

In the first section of the film, a 20-year-old female patient narrates how her 62-year-old male surgeon came to check on her on the eve of her surgery, but without a chaperone. The doctor did not record this examination in the case notes either. The patient was left initially confused, and then shaken when he used "more hands than stethoscope" to palpate her chest. The conversation that follows takes place in an interesting mode, with the characters talking about themselves in the third person. It is a dialogue between the surgeon, the patient and a nurse (who forwarded the patient's complaint to the hospital authorities), and it acquaints us with certain facets of each character.

The surgeon has a very clean record, his female secretary has never reported having had any problems in working with him, and he argues that he is being targeted as he comes from a different state. The nurse allegedly holds a grudge against the surgeon for he had reprimanded her for her work some time ago; also, she is a local person. The patient is apparently vivacious and admittedly flirted with the ward boys, male patients and doctors. Having thus significantly "greyed" the characters, the first section of the film ends here, leaving the audience uncertain as to who to believe.

Taking this uncertainty regarding "who to believe" as the point of departure, the next section acquaints us with a "real life case". A close friend and colleague of the Canadian doctor, Dr Paul Garfinkel, had been accused of gross sexual misconduct by a female patient. However, Dr Garfinkel unquestioningly supported him, believing that he knew his friend thoroughly. When he eventually learnt that the sexual violation had indeed

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