

BELLAGIO STATEMENT OF PRINCIPLES

PREAMBLE

Socially and economically disadvantaged groups and individuals are almost always the worst affected by epidemics. Too often, they have little voice in making and implementing policy responses to health emergencies – responses which, in turn, commonly neglect the needs and rights of the disadvantaged.

Consideration for the interests of the disadvantaged is important for practical as well as ethical reasons: public health efforts are more likely to succeed in an atmosphere of social solidarity and public trust, including the trust of disadvantaged people. Avian and human pandemic influenza planning and response should therefore not only be based on sound science and public health principles, but should also respect and give particular attention to the needs and rights of the disadvantaged, and include processes through which their preferences and interests can be articulated and incorporated.

The following principles aim to help governments and intergovernmental and nongovernmental organizations take account of the interests of the disadvantaged in avian and pandemic influenza planning and response. "Checklists" of the type attached to this statement provide a ready means of ensuring that this occurs. These principles do not exhaust all relevant technical and moral considerations but focus rather on those with the most salience for the needs and rights of disadvantaged peoples.

PRINCIPLES

- I. All people should have ready access to accurate, up-to-date and easily understood information about avian and human pandemic influenza, public policy responses, and appropriate local and individual actions. Communications should be tailored to overcome obstacles that disadvantaged groups face in accessing such information.
- II. Veterinary and public health strategies should foster wide engagement in planning for and responding to the avian and pandemic influenza threat. Civil society, religious groups and the private sector should be involved in helping to overcome barriers to effective engagement by disadvantaged groups.
- III. Planning and response should facilitate public involvement in surveillance and reporting of possible cases without fear of discrimination, reprisal or uncompensated loss of livelihood. Recognizing their vulnerability, special efforts are needed to foster reporting by disadvantaged groups, as well as to protect them from negative impacts which could worsen their situation.
- IV. The impact and effectiveness of interventions and policies need to be evaluated and monitored, especially with respect to prospects for providing fair benefits to, and avoiding undue burdens on, disadvantaged groups, so that corrective adjustments can be made in a timely manner.
- V. Developing as well as developed countries should have access to the best available scientific and socio-economic data and analyses to inform avian and pandemic influenza planning and response, including information on the particular burdens and secondary harms that a pandemic and pandemic responses may inflict on disadvantaged groups.
- VI. National and international efforts are needed to promote equitable access to vaccines, antivirals and other appropriate public health and social interventions, both between and within countries, so as to provide fair and non-discriminatory treatment for traditionally disadvantaged groups as well as those who are specially disadvantaged in the context of avian and human influenza.

About the Bellagio Group:

With support from the Rockefeller Foundation, an international group of experts in public health, animal health, virology, medicine, public policy, economics, bioethics, law and human rights met in Bellagio, Italy from 24 July to 28 July 2006 to consider questions of social justice and the threat of avian and human pandemic influenza, with a particular remit to focus on the needs and interests of the world's disadvantaged.¹ The Bellagio Statement of Principles, above, captures the major conclusions of the group's deliberations.²

¹ Members of the Bellagio Group were Joseph J. Amon, Katherine C. Bond, Milan N. Brahmhatt, Allen Buchanan, Alexander M. Capron, Derek A. T. Cummings, Patrick S. Duggan, Ruth R. Faden, Ian D. Gust, Ruth A. Karron, Joseph M. Mfutso-Bengo, Nguyen Tien Dzung, M. Joachim Otte, Ellen Silbergeld, Sanjay Sinho, Agus Suwandono, Jon Ungphakorn, Sarasin Viraphol, Xue Lan, and Zeng Guang.

² The Statement reflects the views of participants in an individual capacity. It does not necessarily reflect the views of the institutions with which participants may be affiliated. For more information about this statement, go to: <http://www.hopkinsmedicine.org/bioethics/bellagio> or email: pandemic_influenza@jhu.edu