

# Law is everywhere

## BETTER HEALTH FASTER

3<sup>rd</sup> lecture in the SSPH+/ETH Jubilee Series “This Is Public Health”  
Wed 4.3.2020 – 17:15h (CET) @ ETH Zurich HG D16.2 and  
live-streamed online <https://ethz.zoom.us/j/253320154>

**Prof. Dominique Sprumont**

Deputy Director, Institute of Health Law, University Neuchâtel  
President, Research Ethics Committee of Vaud, Lausanne



# 和而不同

He Er Bu Tong

Seeking Harmony in spite of the differences

<https://www.youtube.com/watch?v=NNC0klzM1Fo>

孔子

*Confucius*

# This is a Meta-Course

How can we convince the NON-LAWYERS who do most public health work to work with us?

How can we use law more effectively in public health work?

## mortality and incidence rate during 125 years in Denmark

Statens Serum Institut, Rigshospitalet (National Hospital), University of Copenhagen, Copenhagen,  
Denmark; Gentofte University Hospital, Hellerup, Denmark

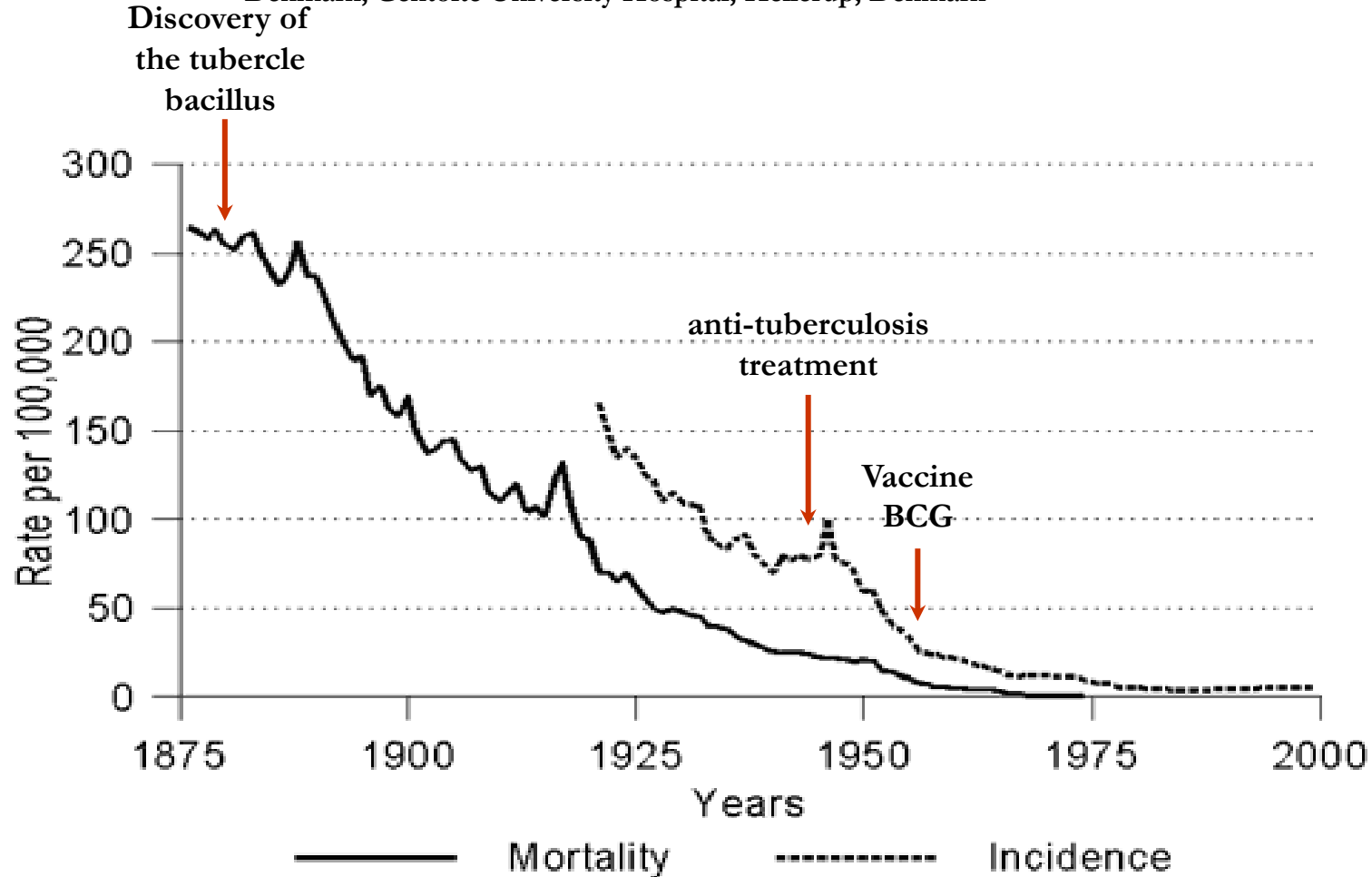
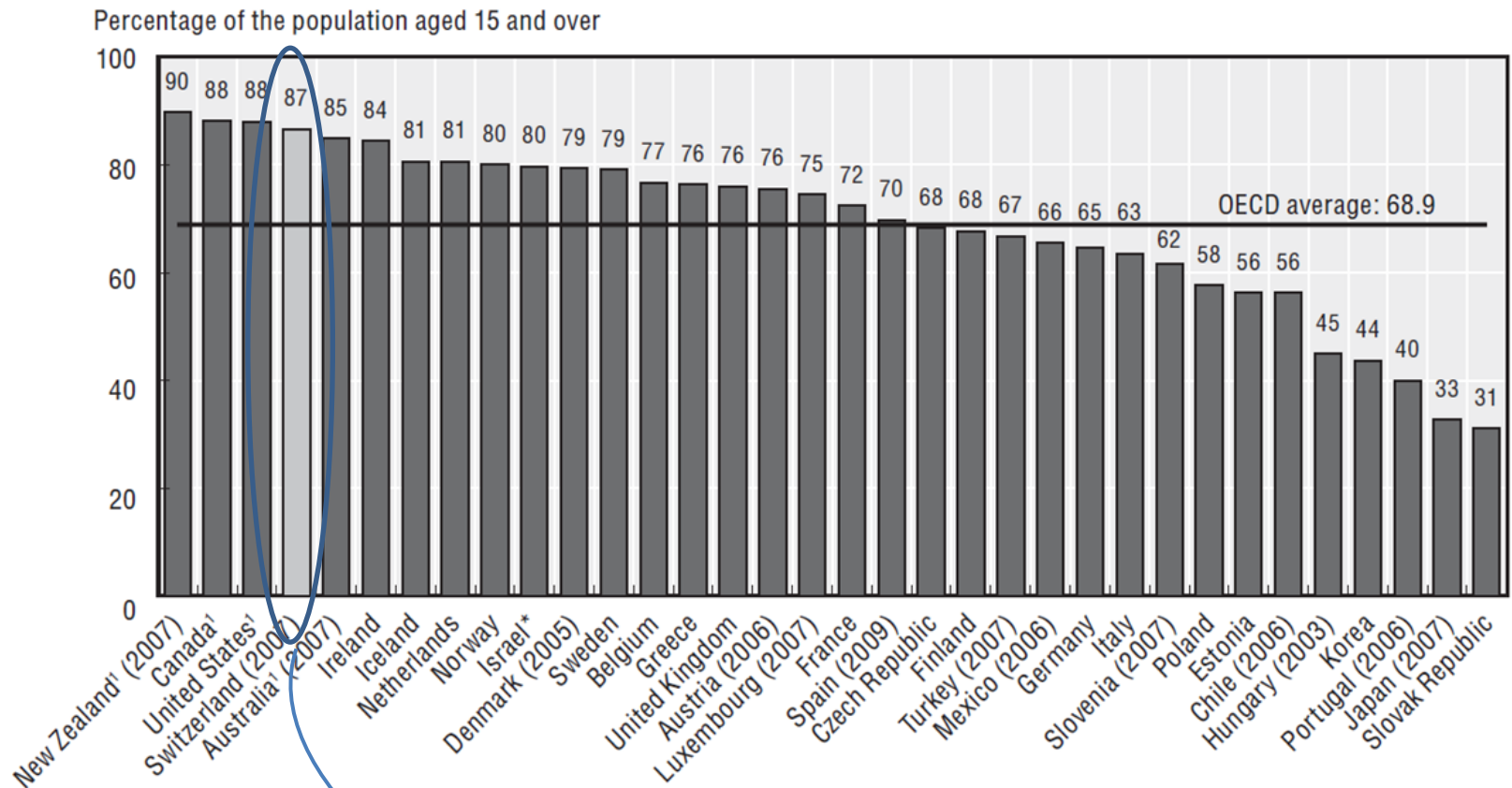


Figure 1.4. **Share of the population considering their health to be good or very good in OECD countries, 2008**



1. Results of these countries are not directly comparable with those for other countries, due to methodological differences in the survey questionnaire resulting in an upward bias.

\* Information on data for Israel: <http://dx.doi.org/10.1787/888932315602>.

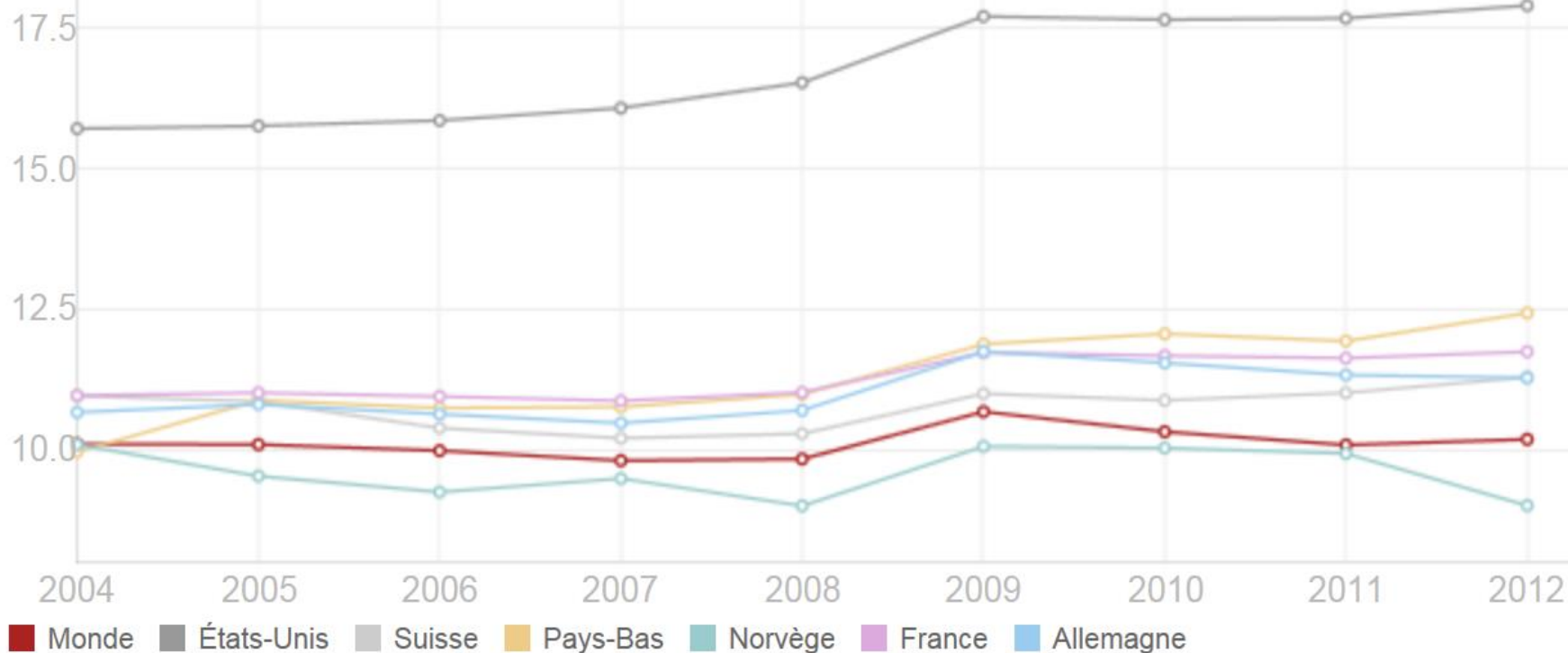
Source: OECD Health Data 2010.

Switzerland: 2012 = 90%

Neuchâtel = 75%

## HEALTHCARE SPENDING AND GDP (%) WORLD BANK

[HTTP://DONNEES.BANQUEMONDIALE.ORG/INDICATEUR/SH.XPD.TOTL.ZS/COUNTRIES/1W-US-CH-NL-NO-FR-DE?DISPLAY=GRAPH](http://donnees.banquemondiale.org/indicateur/SH.XPD.TOTL.ZS/countries/1W-US-CH-NL-NO-FR-DE?display=graph)



Monde ✕

États-Unis ✕

Suisse ✕

Pays-Bas ✕

Norvège ✕

France ✕

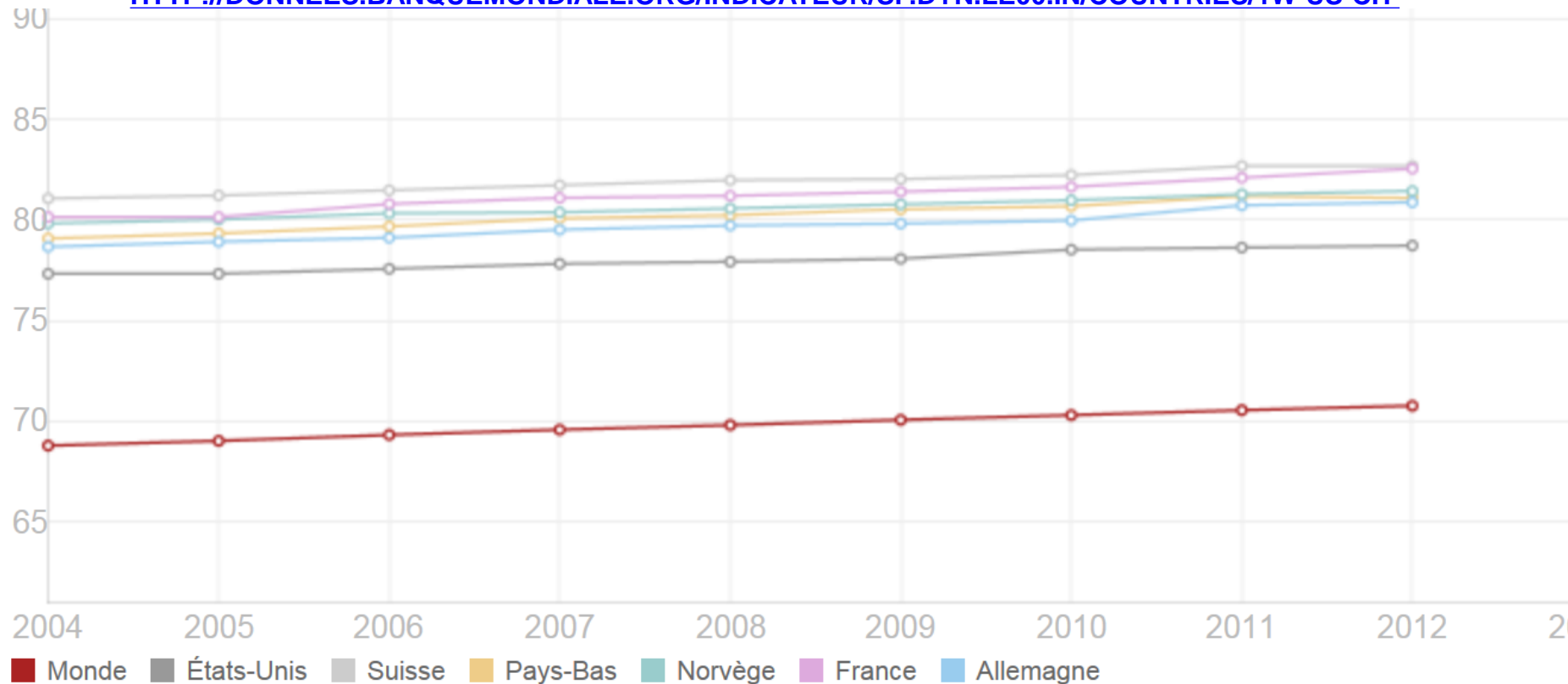
Allemagne ✕

Please remove one of the selected countries before adding additional countries.

**Aide/Feedback**

## LIFE EXPENCTANCY AT BIRTH (WORLD BANK)

[HTTP://DONNEES.BANQUEMONDIALE.ORG/INDICATEUR/SP.DYN.LE00.IN/COUNTRIES/1W-US-CH](http://donnees.banquemondiale.org/indicateur/SP.DYN.LE00.IN/countries/1W-US-CH)



Monde ✕

États-Unis ✕

Suisse ✕

Pays-Bas ✕

Norvège ✕

France ✕

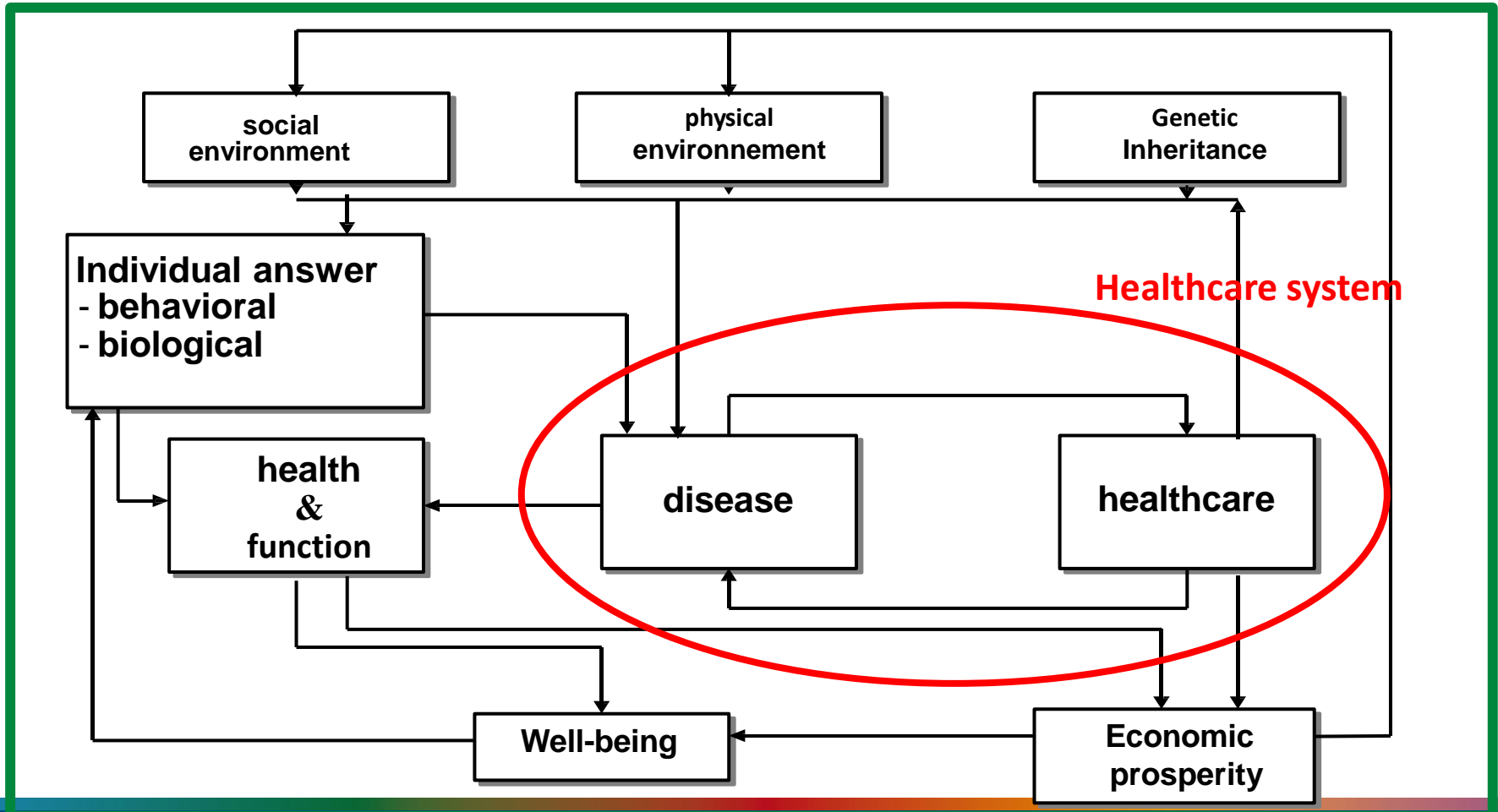
Allemagne ✕

Please remove one of the selected countries before adding additional countries.

**Aide/Feedback**

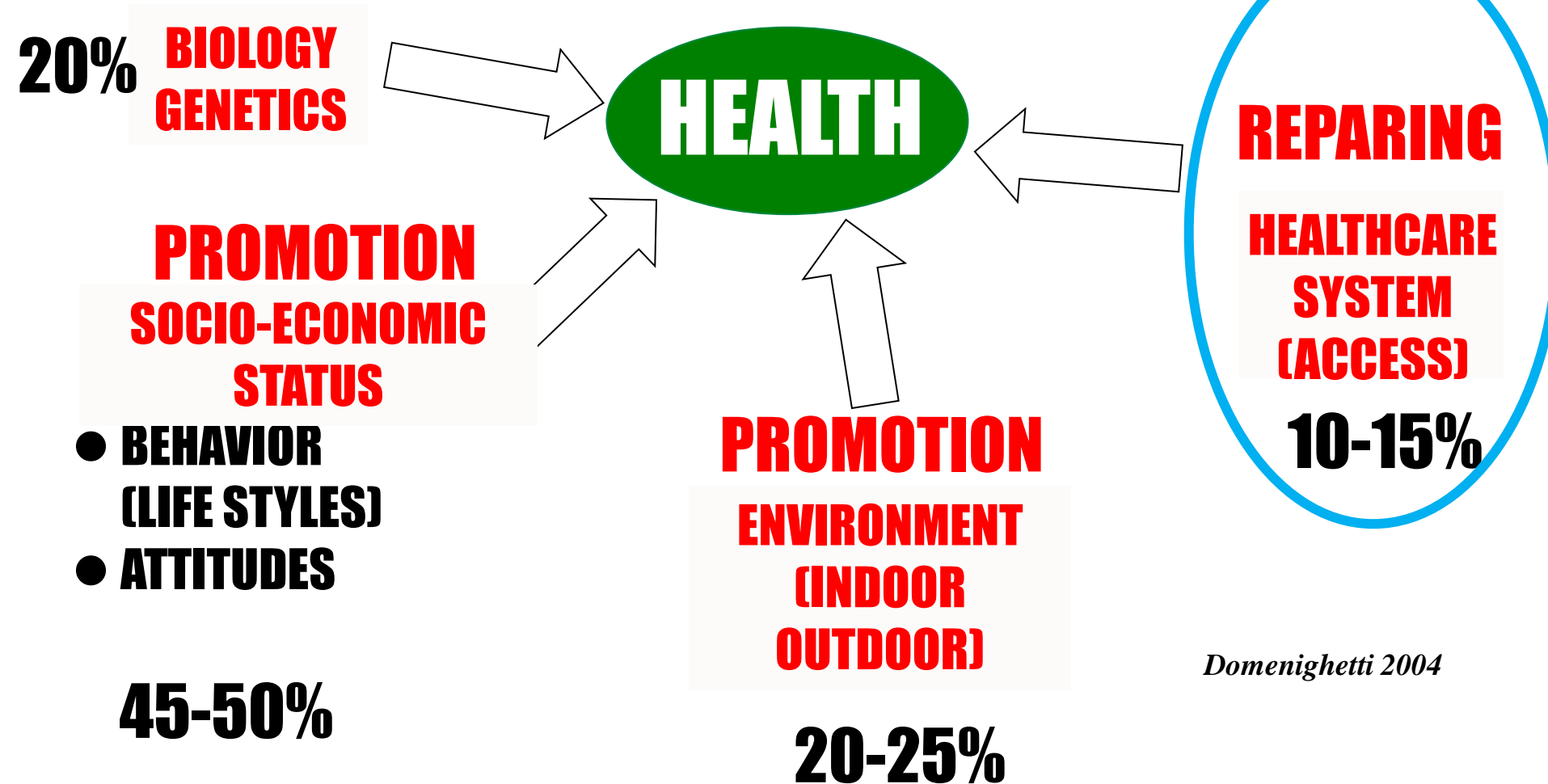
EVANS Robert G. et STODDART Gregory L., Producing health, consuming health care, Soc. Sci. Méd. Vol. 31 No. 12, pp 1347- 1363, 1990

## Health system





# HEALTH DETERMINANTS AND % CONTRIBUTION TO LONGEVITY



*Domenighetti 2004*

A need of clarification ?

Fo waas redä mier ?

What are we talking about?  
De quoi parle-t-on?

**De quoi parle-t-on?**

Fa was rede wär?

我們正在談論什麼？

# Proposal for a legal definition of health

- In law, health is understood as a fundamental right (the right to health), as a personality right (individual right) and a public interest (community health/public health).

«La santé consiste en un état de bien-être physique, mental et social; ***elle relève des droits de la personne***» (Loi sanitaire, Jura, 1990)

«La santé, comme état de bien-être physique, psychique et social qui ne s'apprécie pas uniquement en fonction de la maladie ou du handicap, est ***un bien fondamental*** qui doit être protégé» (Loi sur la santé, Fribourg, 1999)

- Public health law is the study of the **legal powers and duties of the state**, in collaboration with its partners (e.g., health care, business, the community, the media, and academe), to assure the conditions for people to be healthy (to identify, prevent, and ameliorate risks to health in the population) and the **limitations on the power of the state** to constrain the autonomy, privacy, liberty, proprietary, or other legally protected interests of individuals for the common good.

Lawrence Gostin, Public Health Law in a New Century. Part 1, JAMA, June 7, 2000-Vol 283, No. 21 2837

**PUBLIC HEALTH IS ALSO ABOUT HUMAN RIGHTS AND FUNDAMENTAL FREEDOMS**

# What is health law?

Fo waas redä mier ?

What do we  
De quo loquimur est?

**De quoi parle-t-on?**

Fa was rede wär?

我們正在談論什麼？



Centers for Disease Control and Prevention  
CDC 24/7: Saving Lives, Protecting People™

[A-Z Index](#)

Search



## Public Health Professionals Gateway

Public Health Law

Public Health Professionals Gateway > Public Health Law > Publications & Resources



### Public Health Law

About Us

Technical Assistance

Publications & Resources

Public Health Law Academy

Public Health Law News

Partners

## Public Health Law Academy

The Public Health Law Academy offers free, online training to provide an understanding of the basics of our legal system and the use of law and policy for improving population health outcomes. These self-paced courses were designed for state, tribal, local, and territorial public health professionals, as well as public health lawyers, nurses, educators, advocates, and faculty and students in graduate and undergraduate programs.

### Go to the Public Health Law Academy

Training topics include—

#### Introduction to Public Health Law

- [Public Health Law: Past & Present](#)
- [Preemption & Public Health](#)
- [Structure of Government: Exploring the Fabric and Framework of Public Health Powers](#)

#### Hot Topics in Public Health Law

- [Public Health Threats & The US Constitution: What Responders Need to Know](#)
- [Legal & Policy Approaches to Reducing Prescription Drug Overdose](#)
- [Pharmacist Collaborative Practice Agreements: Who, What, Why, & How](#)

**PUBLIC HEALTH LAW  
ACADEMY**

[Explore the Public Health Law Academy's courses](#)

**Public Health Law News**

A free newsletter on public health law and policy

► Sign up

► Read the News

# Introduction to Legal Epidemiology

## Public Health Law Academy Training

PRESENTATION | GOOD GOVERNANCE

Why does the life expectancy in two neighboring counties differ? How does raising the minimum wage affect health? How do you assess the effectiveness of a newly adopted law aimed at preventing traumatic brain injury in youth? Is there an approach that answers all of these questions? The answer is yes. It's legal epidemiology!

Legal epidemiology provides a scientific approach to studying the impact and effectiveness of laws on health. Our Introduction to Legal Epidemiology training introduces the discipline of legal epidemiology. It is intended for public health lawyers, policy analysts, epidemiologists, and public health practitioners.

After this training, you will be able to

- explain how law affects health;
- define and describe basic legal epidemiology principles; and
- apply legal epidemiology in practice.



If you are a TRAIN user, please register through [TRAIN](#).

## RELATED RESOURCES

“Interventional  
Public Health  
Law”

→ laws intended to  
influence health  
outcomes or  
mediators





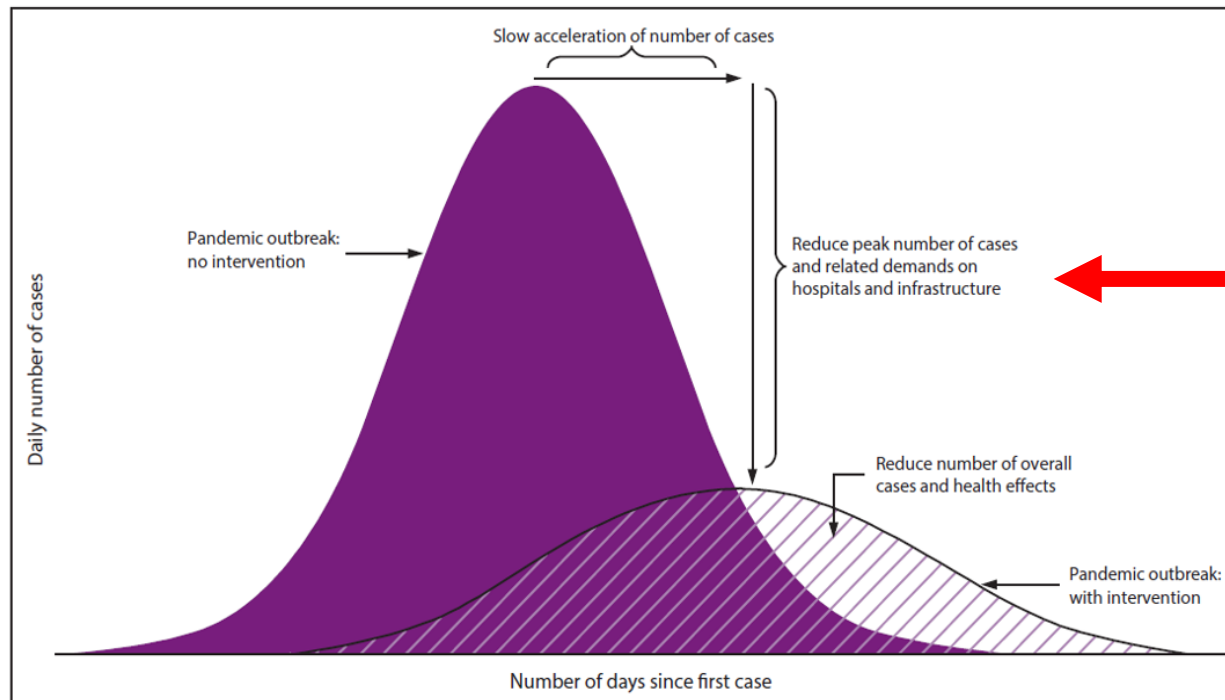
# 10 Essential public health elements

1. Surveillance of population health and well-being
2. Monitoring and response to health hazards and emergencies
3. Health protection, including environmental, occupational, occupational, and food safety
4. Health promotion, including action to address social determinants and health inequity
5. Disease prevention, including early detection of illness
6. Assuring governance for health
7. Assuring a competent public health workforce
8. Assuring organizational structures and financing
9. Information, communication, and social mobilization for health
10. Advancing public health research to inform policy and practice.

<https://www.cdc.gov/stltpublichealth/publichealthservices/essentialhealthservices.html>

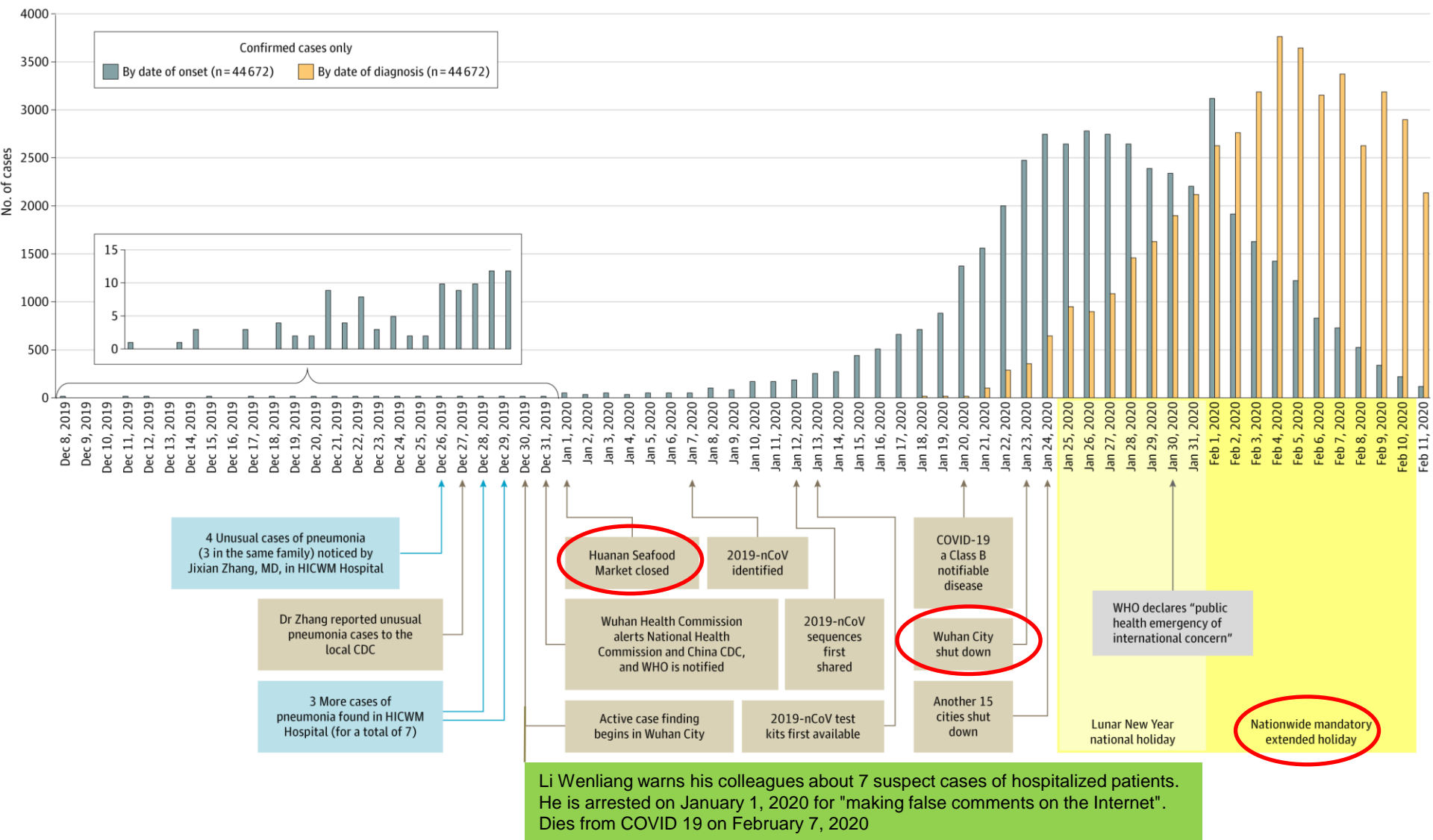
# Pandemic: Moving From Containment To Mitigation

FIGURE 1. Goals of community mitigation for pandemic influenza



Source: Adapted from: CDC. Interim pre-pandemic planning guidance: community strategy for pandemic influenza mitigation in the United States—early, targeted, layered use of nonpharmaceutical interventions. Atlanta, GA: US Department of Health and Human Services, CDC; 2007. <https://stacks.cdc.gov/view/cdc/11425>.

Recommendations and Reports / Vol. 66 / No. 1 April 21, 2017  
Community Mitigation Guidelines to Prevent Pandemic Influenza — United States, 2017



From: **Characteristics of and Important Lessons From the Coronavirus Disease 2019 (COVID-19) Outbreak in China: Summary of a Report of 72 314 Cases From the Chinese Center for Disease Control and Prevention**  
 JAMA. Published online February 24, 2020. doi:10.1001/jama.2020.2648

# And more than health laws

“Infrastructural  
Public Health  
Law”

→ laws establishing  
the powers,  
duties, and  
structure of  
public health  
agencies



# And more than health laws

“Incidental Public Health Law”

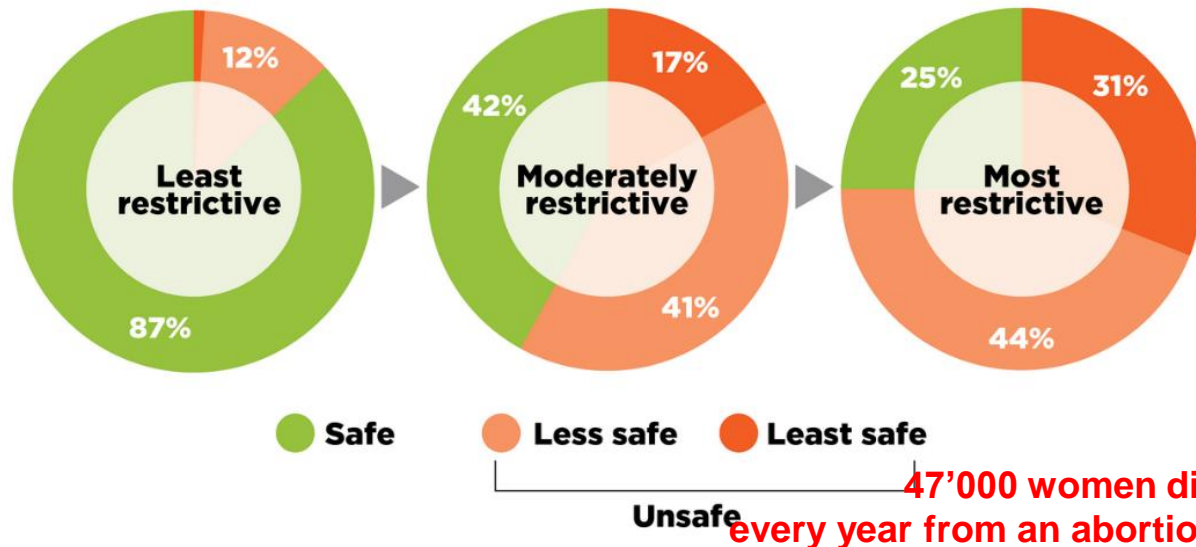
→ laws, regardless of topic or purpose, that are studied for their impact on public health



Road Safety Message from Ritika Kumbhat Class-IX-A-DPS Surat

## GUTTMACHER INSTITUTE

**The proportion of abortions that are unsafe is much higher in countries where laws are more restrictive**



Abortion is *safe* when done by a trained person using WHO-recommended methods, *less safe* when only one of those conditions is met and *least safe* when neither is met.



# Abortion incidence between 1990 and 2014: global, regional, and subregional levels and trends

*Gilda Sedgh et al., Lancet 2016; 388: 258–67*

	Average number of countries per year	Abortion rate (90% UI)
Prohibited altogether or to save a woman's life†	58	37 (34–51)
Physical health	34	43 (40–53)
Woman's mental health	19	33 (27–49)
Socioeconomic grounds	10	31 (23–47)
On request	63	34 (29–46)

UI=uncertainty interval. \*Gestational limits, authorisation requirements, waiting periods, and other conditions for legal abortions vary across countries in all categories.

†Includes countries where abortion is also allowed in cases of rape or incest.

**Table 4: Abortion rate per 1000 women aged 15–44, by grounds under which abortion is legally allowed, 2010–14\***

# Coronavirus: Nasa images show China pollution clear amid slowdown

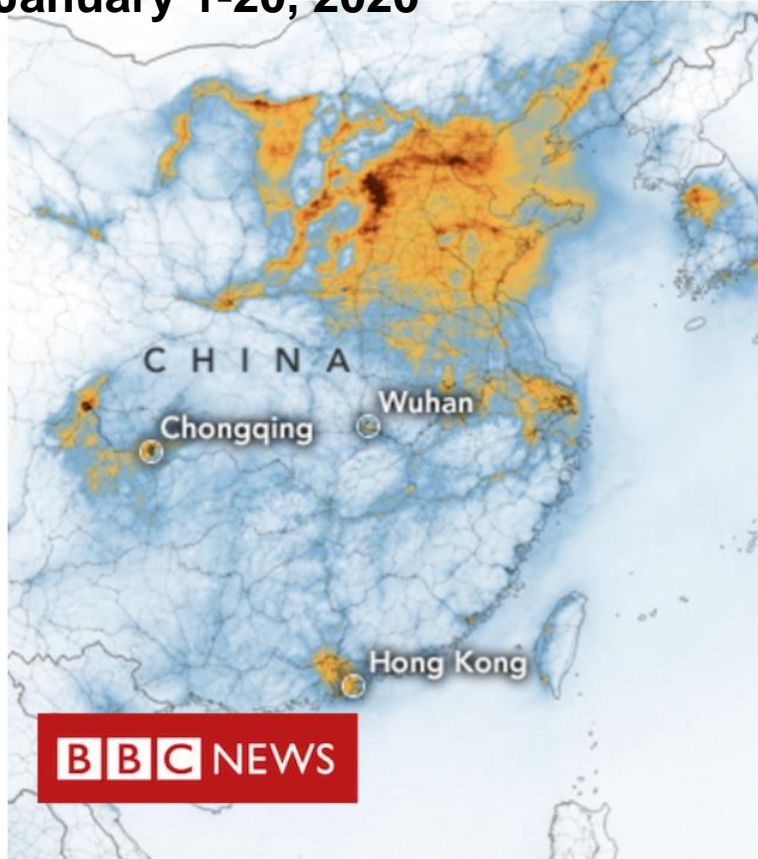
LASTEST NEWS

BREA <https://www.bbc.com/news/world-asia-51691967>

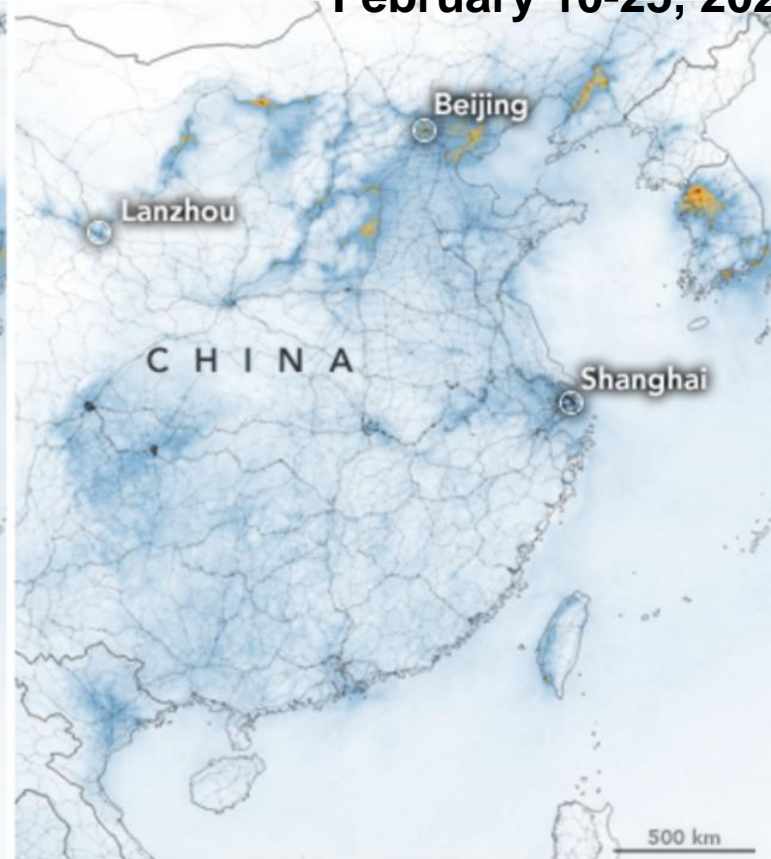
TRENDING NEWS

WORLD NEWS

**January 1-20, 2020**



**February 10-25, 2020**



Coronavirus: Nasa images show China pollution clear amid slowdown

[https://www.researchgate.net/publication/12149707\\_Impact\\_of\\_Changes\\_in\\_Transportation\\_and\\_Commuting\\_Behaviors\\_During\\_the\\_1996\\_Summer\\_Olympic\\_Games\\_in\\_Atlanta\\_on\\_Air\\_Quality\\_and\\_Childhood\\_Asthma](https://www.researchgate.net/publication/12149707_Impact_of_Changes_in_Transportation_and_Commuting_Behaviors_During_the_1996_Summer_Olympic_Games_in_Atlanta_on_Air_Quality_and_Childhood_Asthma)



## Child and adolescent health

### News

### Events

### Policy

### Child and adolescent health

### Health Behaviour in School- aged Children (HBSC)

### Country work

### Data and statistics

### Multimedia

### Publications

### Partners

### Contact us

## A future fit for children – WHO–UNICEF–Lancet commission launches new report

19-02-2020

A landmark report released by a commission convened by WHO, the United Nations Children's Fund (UNICEF) and The Lancet looks at all the factors influencing child and adolescent health. Through this lens, it details critical, emerging risks to child health, proposes novel solutions and calls for urgent action to achieve measurable results. The report, "A future for the world's children?", is the result of more than 2 years of work by 40 child health experts from around the world.

The WHO–UNICEF–Lancet commission presses for radical rethinking on child health as it finds that the health and future of every child and adolescent worldwide is under immediate threat from ecological degradation, climate change and exploitative marketing practices that push heavily processed fast food, sugary drinks, alcohol and tobacco at children.

### Key messages from the report:

- The health and rights of all children and adolescents are under threat. Some of the most pressing harms include a rapidly changing climate, mass commercial marketing of harmful products like sugar, fast food, tobacco and alcohol, and growing inequities.
- When we invest in children, we invest in the future. Investing in a child's health, development and their environment bring benefits throughout life, and across generations.



WHO/Malin Bring

# Premise 1:

## LAW IS ESSENTIAL TO PUBLIC HEALTH



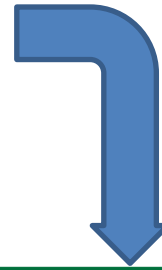
April 2, 1999 / Vol. 48 / No. 12

### **MMWR**<sup>TM</sup> MORBIDITY AND MORTALITY WEEKLY REPORT

- 241 Ten Great Public Health Achievements — United States, 1900–1999
- 243 Impact of Vaccines Universally Recommended for Children — United States, 1900–1998
- 248 Tobacco Use Among Middle and High School Students — Florida, 1998 and 1999
- 253 Transfusion-Transmitted Malaria — Missouri and Pennsylvania, 1996–1998
- 256 Notice to Readers

#### Ten Great Public Health Achievements — United States, 1900–1999

- Vaccination
- Motor-vehicle safety
- Safer workplaces
- Control of infectious diseases
- Decline in deaths from coronary heart disease and stroke
- Safer and healthier foods
- Healthier mothers and babies
- Family planning
- Fluoridation of drinking water
- Recognition of tobacco use as a health hazard



THE  
**MILBANK QUARTERLY**  
A MULTIDISCIPLINARY JOURNAL OF POPULATION HEALTH AND HEALTH POLICY

Making the Case for Laws That Improve  
Health: A Framework for Public Health Law  
Research

SCOTT BURRIS, ALEXANDER C. WAGENAAR,  
JEFFREY SWANSON, JENNIFER K. IBRAHIM,  
JENNIFER WOOD, and MICHELLE M. MELLO

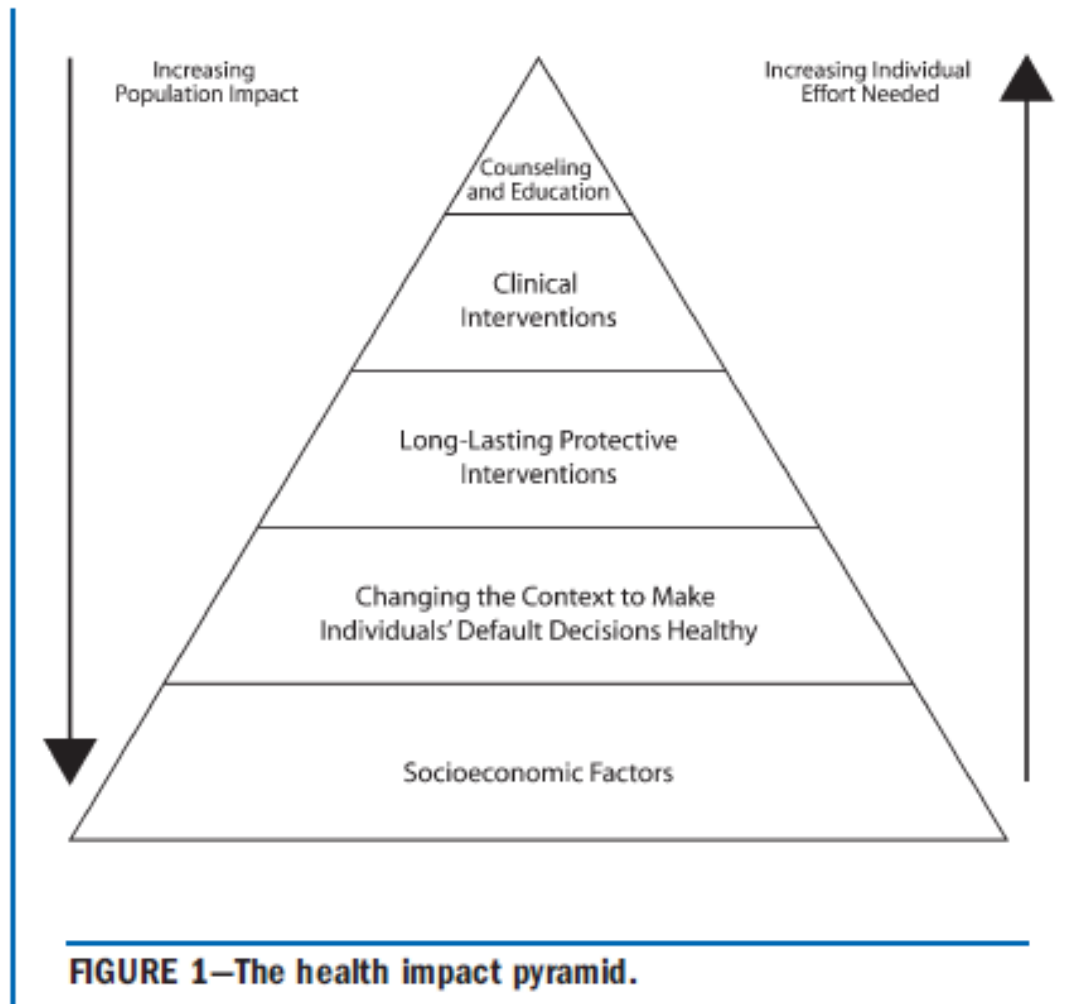
*Temple University; University of Florida; Duke University; Harvard  
University*

## Premise 2: LAW IS NOT JUST A “TOOL”

- “Interventional public health laws”  
→ laws intended to influence health
- “Infrastructural public health law”  
→ defines powers, duties, jurisdictions of health agencies
- **“Incidental public health law”**  
→ laws not enacted or implemented with health in mind, but that have important health effects

## Premise 3:

# LAW IS ONE OF THE ONLY WAYS TO UNDERSTAND AND ADDRESS SOCIAL DETERMINANTS OF HEALTH



Frieden, T. R. (2010).  
A Framework for  
Public Health Action:  
The Health Impact  
Pyramid. *Am J Public  
Health*, 100(4), 590-  
595. doi:  
10.2105/ajph.2009.18  
5652



THE UNIVERSITY OF  
SYDNEY

O'NEILL  
INSTITUTE  
FOR HEALTH & HUMAN RIGHTS LAW  
GEORGETOWN LAW



IDLO  
Creating a Culture of Justice  
International Dispute Resolution | Law | Support Action



World Health  
Organization

Advancing the right to health:  
**The vital role of law**

**WHO 2017**

[http://www.who.int/healthsystems/topics/health-law/health\\_law-report/en/](http://www.who.int/healthsystems/topics/health-law/health_law-report/en/)



**Goal 3:** Ensure healthy lives and promote well-being for all at all ages

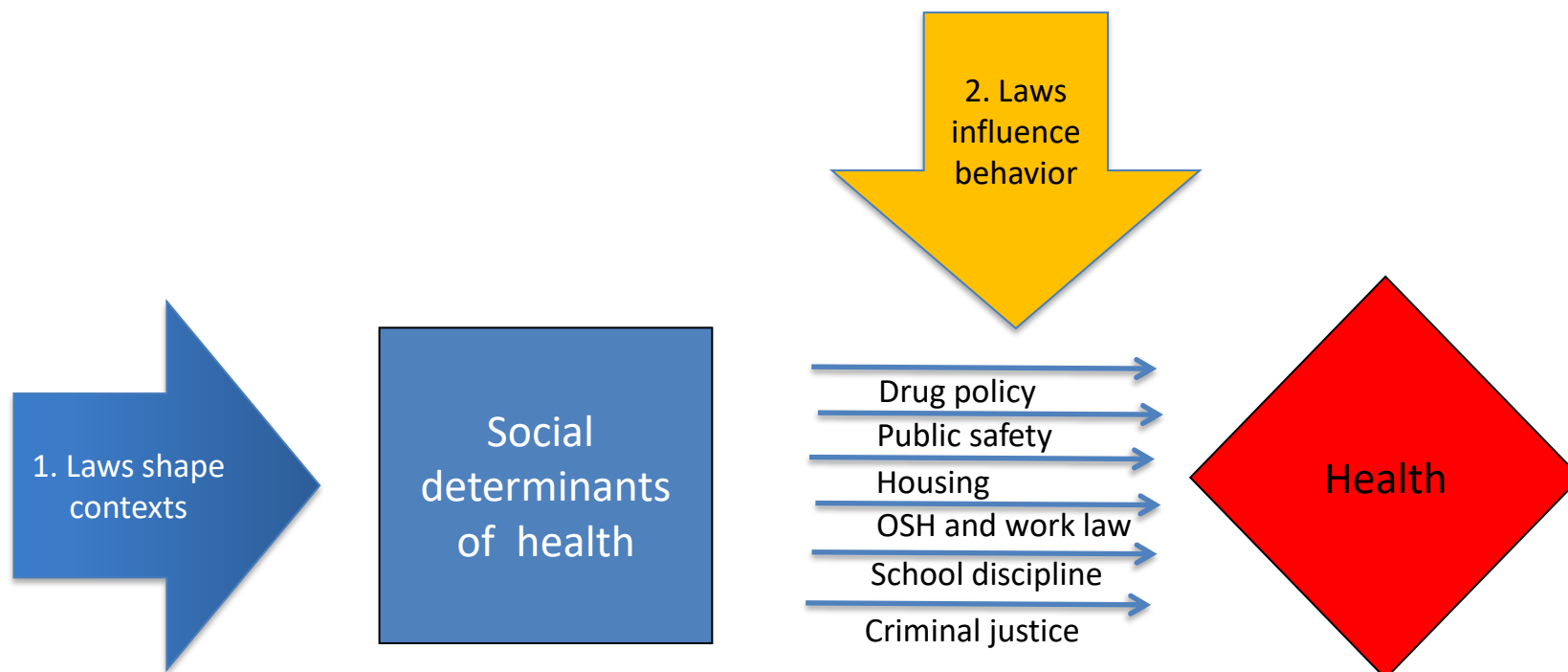
**16.3** Promote the rule of law at the national and international levels and ensure equal access to justice for all

<http://www.un.org/sustainabledevelopment/sustainable-development-goals/>

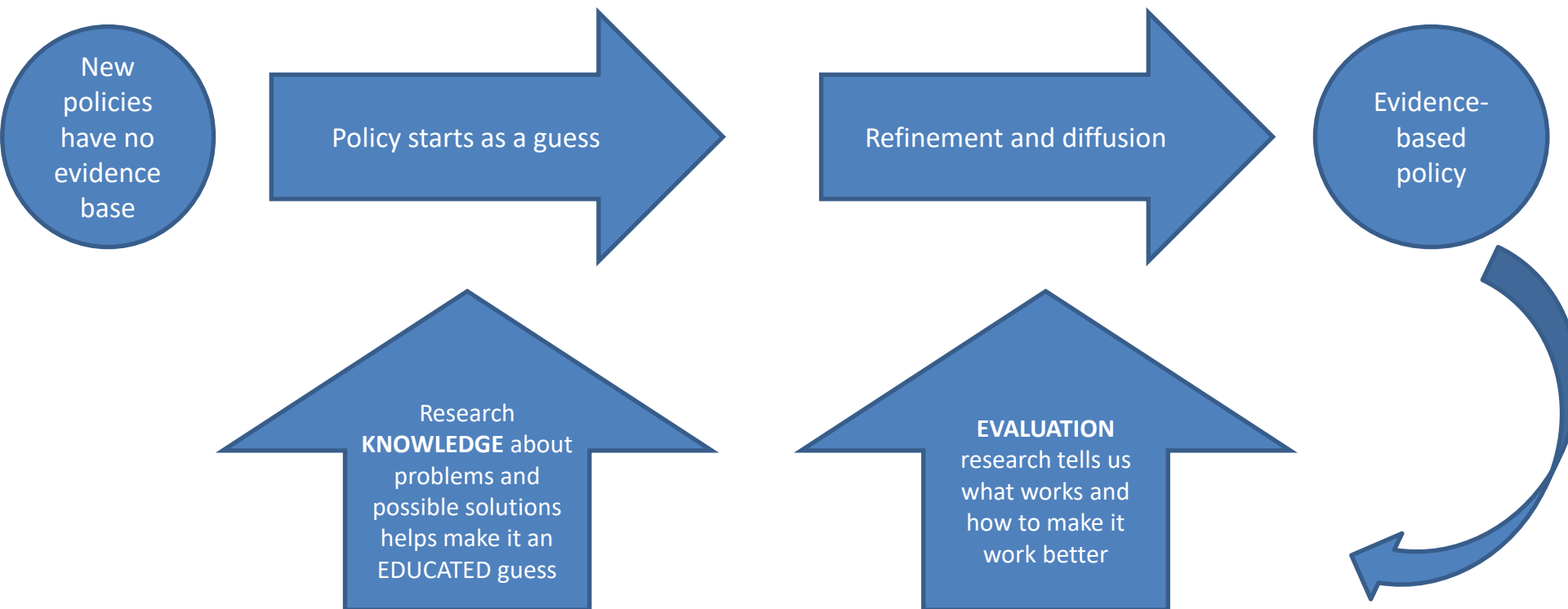
## «salus populi est suprema lex»

Cicero, De Legibus, Livre III, part. III, subd. VIII

# Two Ways Law Influences Health

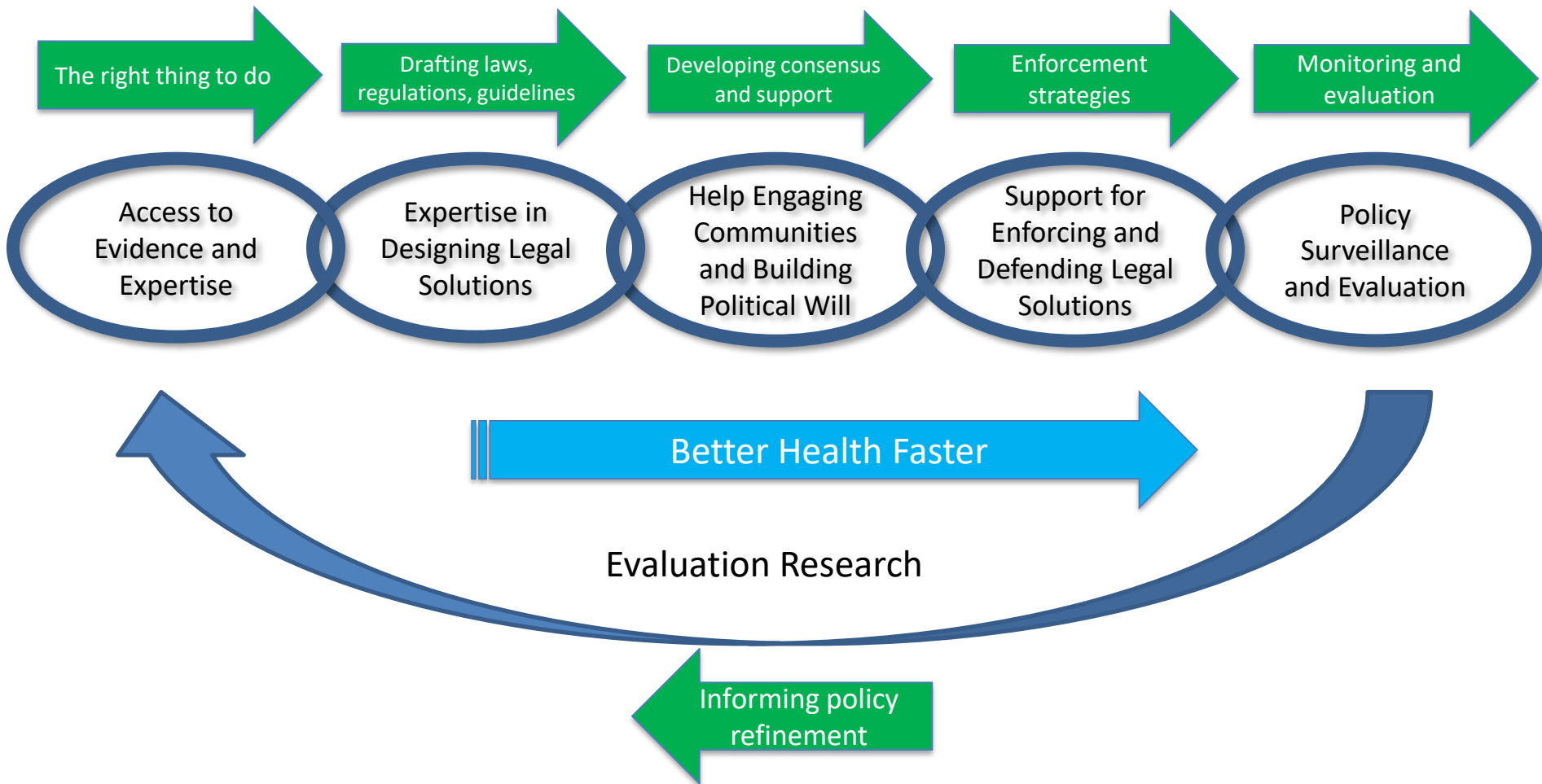


# Evidence-Based Policy is an Output

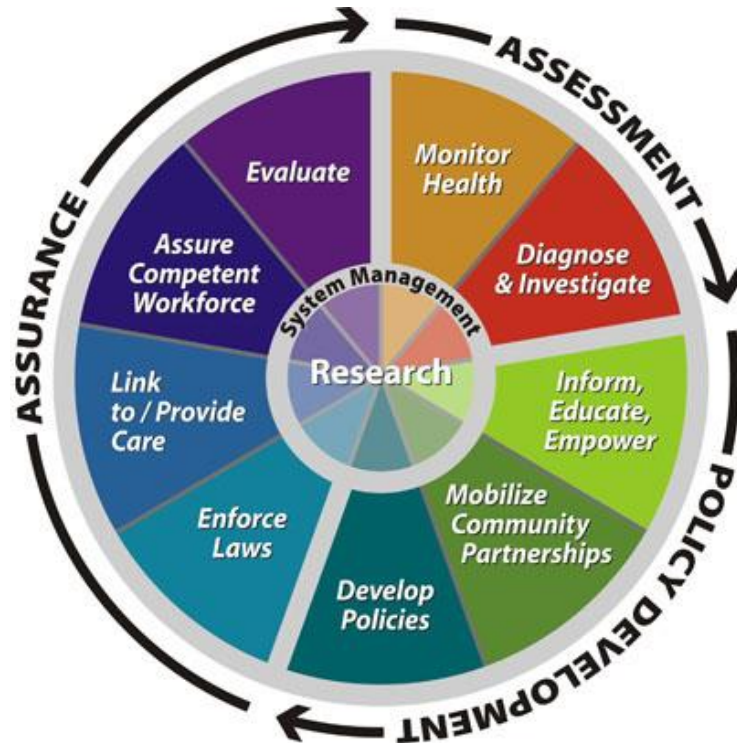




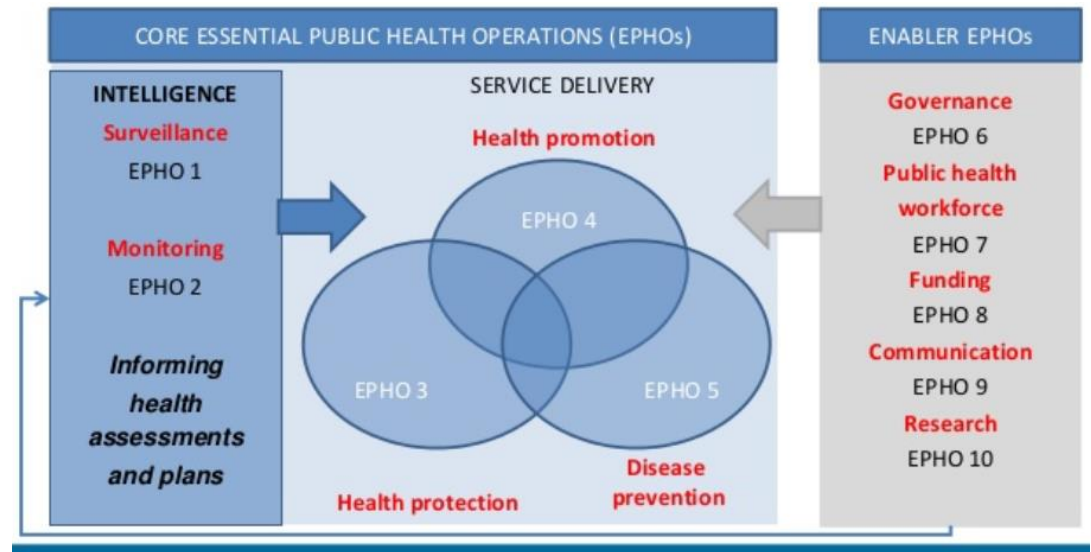
# The 5 essential services of public health law



# A Model with a 2 Decade + Global Track Record



CDC/US Model



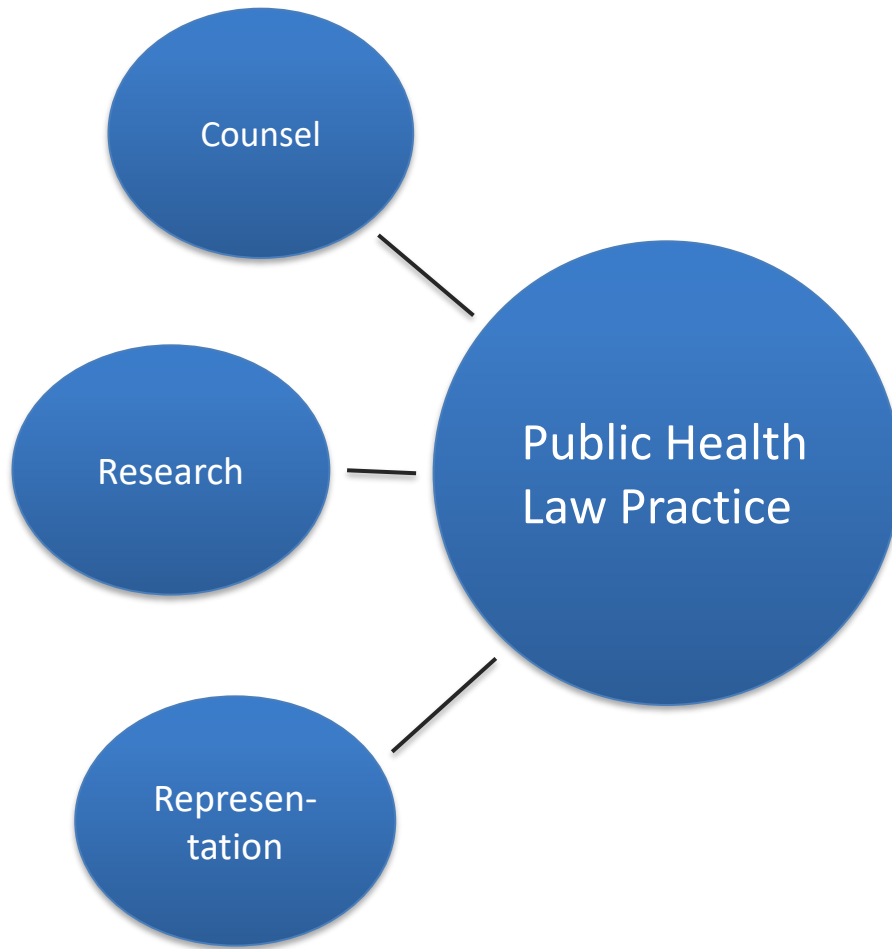
WHO/Euro Model

# The Traditional View

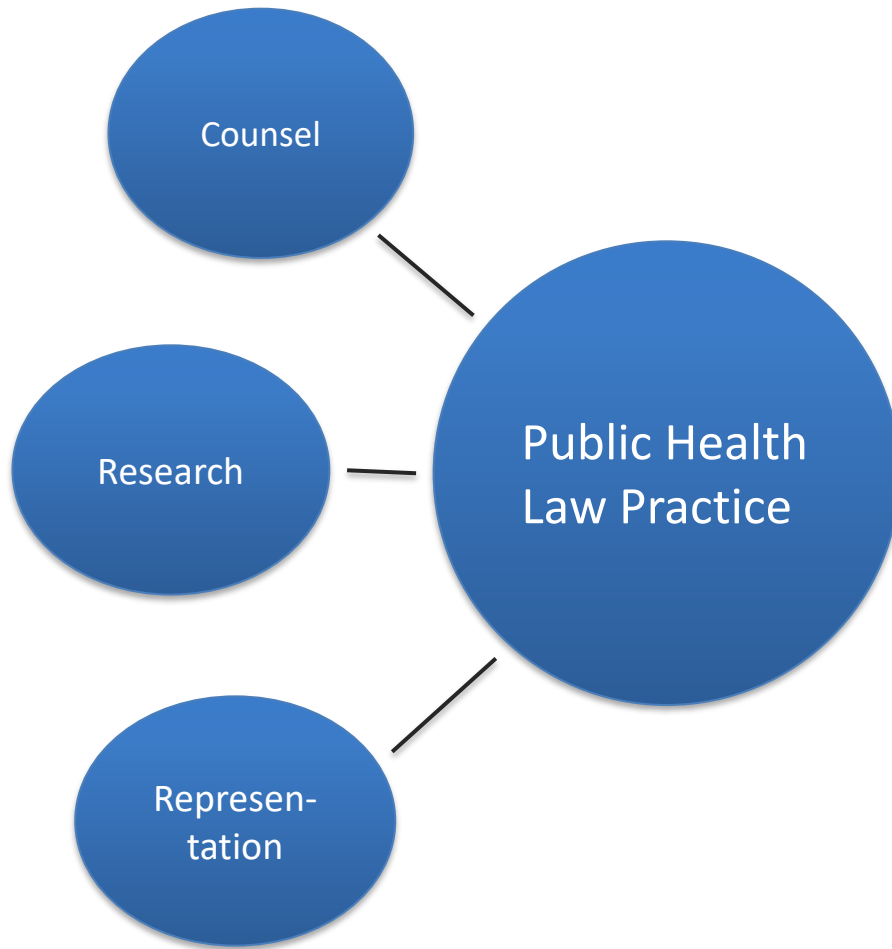
For as long as Public Health Law has been a field, we have never questioned two basic assumptions:

1. Public Health Law is primarily an activity of lawyers, and
2. This activity consists primarily of traditional legal work and roles: legal research, counsel and representation

# Let's Call that "Public Health Law Practice"

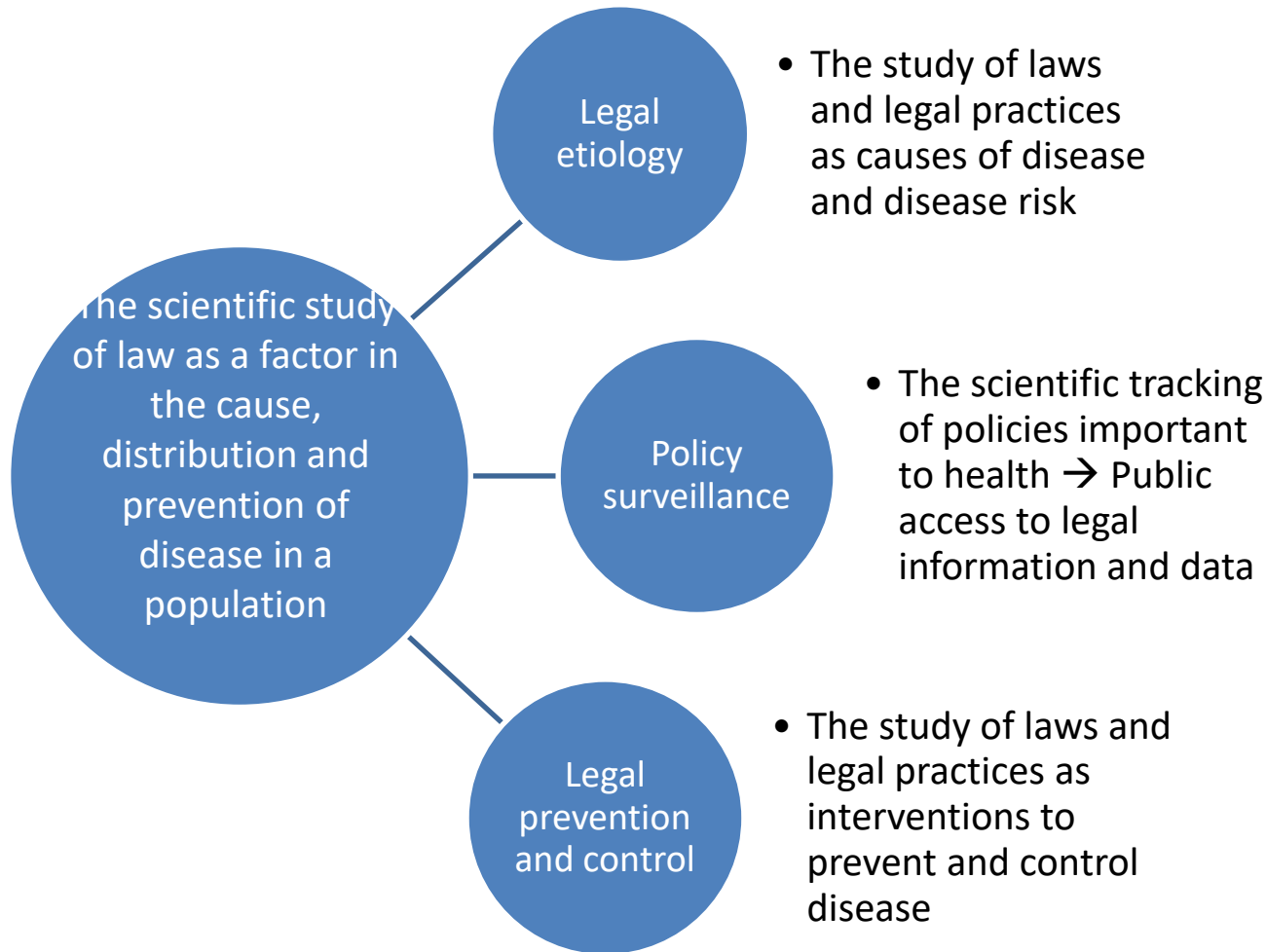


# This Was a Mistake

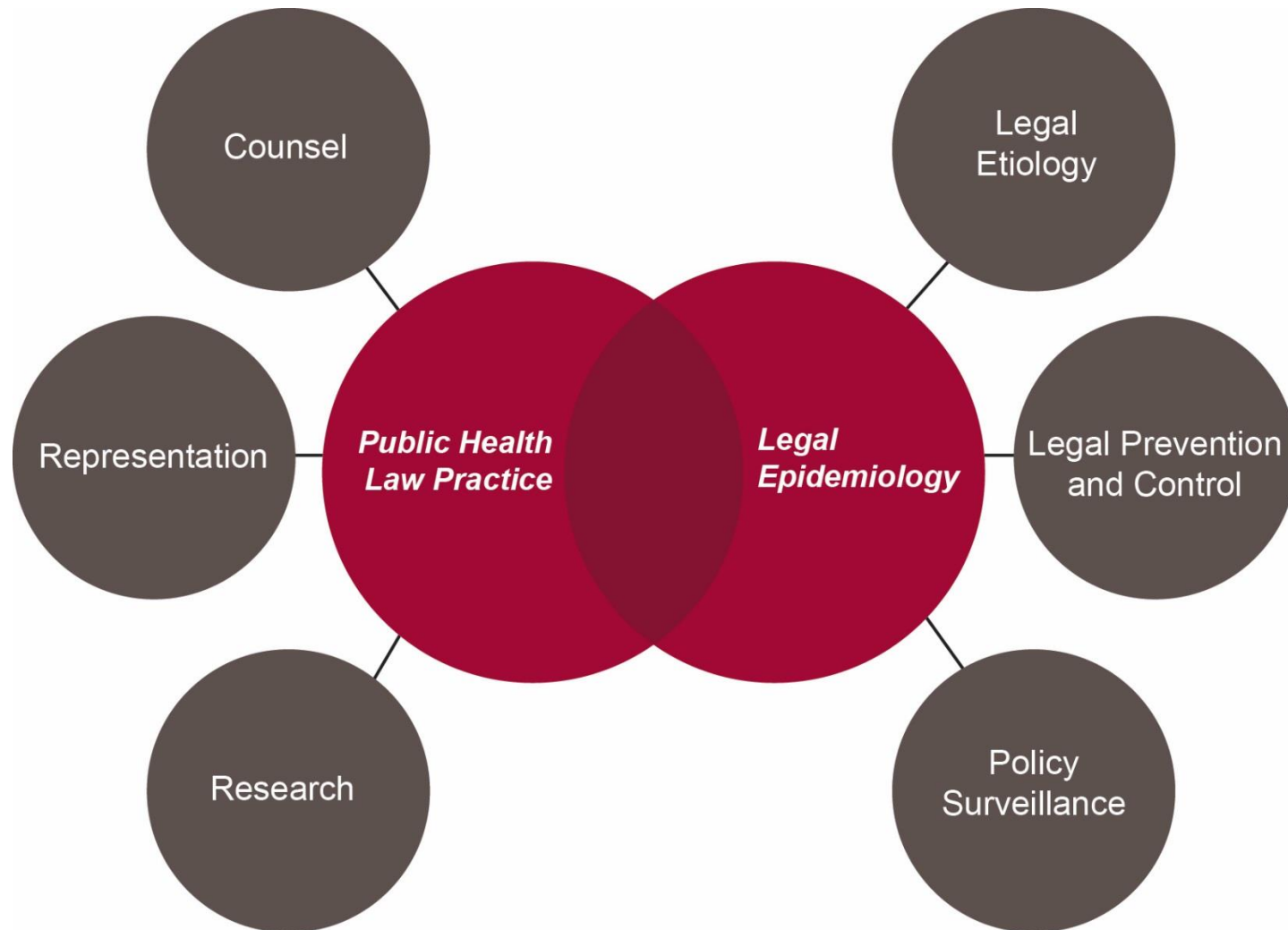


We should have questioned these two assumptions – and this model -- a long time ago, because they are wrong and actually impede the integration of law into public health practice.

# The Other Part of Public Health Law: Legal Epidemiology



# A Transdisciplinary Model



# The Prescription

Break down the chronic cultural barriers by adopting a transdisciplinary model.

Improve performance by ensuring that the full spectrum of public health law functions are being conducted, and optimize performance in each domain

*Better Health Faster*



## Lawyers

- Understand law and its operation in scientific terms
- Use scientific methods in legal work

## Health professionals

- Understand and study law within PH science
- Monitor and timely evaluate legal interventions

- Health agencies have adequate legal support
- Legal TA is routine
- Effective measures are rapidly identified and adopted

**Box 4.11. Ten common mistakes in the dissemination of new interventions, and suggestions for avoiding them**

<http://www.who.int/whr/en/>

**1. Assuming that evidence matters to potential adopters**

Suggestion: Evidence is most important only to a subset of potential adopters, and is often used to reject proposed interventions. Therefore, emphasize other variables such as compatibility, cost and simplicity when communicating about innovations.

**2. Substituting the perceptions of researchers for those of potential adopters**

Suggestion: Listen to representatives of the potential adopters to understand their needs and reactions to new interventions.

**3. Using intervention creators as intervention communicators**

Suggestion: Enable access to experts, but rely on communicators who will elicit the attention of potential adopters

**4. Introducing interventions before they are ready**

Suggestion: Publicize interventions only after clear results have been obtained.

**5. Assuming that information will influence decision-making**

Suggestion: Information is necessary, but influence is usually needed too. Therefore pair sources of information with sources of social and political influence.

**6. Confusing authority with influence**

Suggestion: Gather data on who among potential adopters is seen as a source of advice and use them to accelerate dissemination.

**7. Allowing those who are first to adopt (innovators) to gain primacy in dissemination efforts**

Suggestion: Initial adopters are not always typical or influential. Find out how potential adopters and key users are related to each other in order to identify those who are most influential (109).

**8. Failing to distinguish between change agents, authority figures, opinion leaders and innovation champions**

Suggestion: Single individuals do not usually play multiple roles, so determine what part each person can play in the dissemination process.

**9. Selecting demonstration sites on criteria of motivation and capacity**

Suggestion: The spread of an intervention depends on how initial demonstration sites are seen by others. So, when selecting demonstration sites, consider which sites will have a positive influence.

**10. Advocating single interventions as the solution to a problem**

Suggestion: One intervention is unlikely to fit all circumstances; offering a cluster of evidence-based practices is usually more effective (105, 110).

Adapted from Dearing (111).

The **failure** of public health community with the Tobacco Product Act in **2016**

AND

The **success** of the public health community with the Tobacco Product Act in **2019**

# SSPH+ Lugano Summer School in Public Health Policy, Economics, and Management

Course, Aug 27 – 29, 2020:

Better Health Faster: Using Law and Policy Effectively in Public Health

[www.ssph-lugano-summerschool.ch](http://www.ssph-lugano-summerschool.ch)



<https://www.youtube.com/watch?v=NNC0klzM1Fo>



SWISS SCHOOL OF  
PUBLIC HEALTH

A FOUNDATION OF SWISS UNIVERSITIES

**unine**  
UNIVERSITÉ DE  
NEUCHÂTEL



**CER-VD**  
Commission cantonale  
d'éthique de la recherche  
sur l'être humain

**ETH** zürich

Dominique Sprumont

dominique.sprumont@unine.ch



Coming up next week:

# The law on tobacco products: impacting public health through legislative changes - opportunities and limits

**Prof. Luciano Ruggia**

Research Fellow at the Institute of Social and Preventive Medicine (ISPM)  
of the University of Bern

Director of the Swiss Association for Smoking Prevention AT