A Message from the Editor

In this issue of *Public Health Reports*, there are four articles that deal with the moral principles governing public health conduct. Although this was not planned, these articles highlight that consideration of professional ethics ranks very high among the topics that cause intense personal struggle for the practitioner in public health.

Of course ethics and morality have been debated for millennia. There are countless commentaries by those who know as well as those who don't know what they are talking about. I would imagine that interest in ethics is a cyclical consideration, rising and falling with the behaviors of our leaders and societal celebrities.

Currently in public health we are in a phase of high interest, embracing concepts such as inclusion, environmental justice, health disparities, and obligation to special at-risk populations. These issues are a far cry from the not too distant past of Tuskegee syphilis study and Cold War human radiation experimentation. It is heartening that some choices that were difficult to understand by our predecessors have now permeated our souls and are incorporated into our instincts. Still, this is a never-ending battle.

Evidence of this struggle exists in this month's issue. Kozlowski and O'Connor contend that two governmental agencies may have fallen short of their ethical obligations in communicating specifics on their website aimed at educating young minds regarding the risks of smokeless tobacco. In a commentary from the Centers for Disease Control and Prevention, McKenna et al. counters that Kozlowski and O'Connor misapply the ethical issue.

In a particularly timely essay, Stern and Markel examine the unethical portrayal of immigrants as threats not only to the public health, but also to national security in the 1950s Hollywood film, *Panic in the Streets*. Lastly, Thomas, in this issue's ASPH column, makes a direct plea for ethics to be purposefully considered and taught in schools of public health, rather than merely left to be inferred by the actions of the schools.

We all want to conduct ourselves honorably. There is a yearning for straightforward, unambiguous protocol that describes how to conduct oneself in decision-making that will result in doing the right thing every time. Yet truly ethical behavior (in all but the simplest circumstances) resists any attempt to be codified. Rather, the thoughtful practitioner is routinely faced with torturous strings of reasoning that are often difficult to reproduce. Since this is hardly acceptable, we usually opt for creating policy and standardizing our behavior without regard to how poorly such policy might serve the public. We need to consistently encounter, contemplate, practice, and become more comfortable with the paradoxes and difficult choices of ethical conduct. How to do this? That is the question.

In my opinion, one way to accomplish this is to treat ethics as a call for action. I suggest, for instance, that at the beginning of every study, a consideration of all the ramifications, realistic and far flung, be discussed by the purveyors of the study. We do this already for such concerns as study power, protocol development, and division of responsibility. Shouldn't there be at least as much consideration given to the moral way to conduct the study? The same considerations should exist for any planned public health intervention or policy implementation. I hypothesize that with such careful preparatory consideration, not only would a better appreciation for what constitutes ethical behavior emerge, but also a more agile and confident way of avoiding problems or dealing with them when they do arise.

Of course, there are other important articles and columns in the pages that follow, but we are excited that the journal is a forum for serious reconsideration of ethics. As always, I hope you find not only answers to your public health questions in each and every issue of *Public Health Reports*, but also that you view us as a forum for discussion as well.

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