



**PO/HL310 INTERNATIONAL AND EUROPEAN HEALTH AND HUMAN RIGHTS**  
IES Abroad London

**DESCRIPTION:** International human rights identify the specific obligations of governments towards their people, and this course will look at this through the lens of global public health. Through a series of case studies, the course will explore the ways in which public health and human rights are interrelated. Students will cover the effects of health law, policies and programs on human rights; health consequences of human rights violations; and the linkages between the two fields. Topics including infectious disease control, sexuality, reproductive health, HIV/AIDS, mental health and non-communicable diseases will be used to illustrate and explore practical applications of human rights to global health.

**CREDITS:** 3 credits

**CONTACT HOURS:** 45

**LANGUAGE OF INSTRUCTION:** English

**PREREQUISITES:** None

**ADDITIONAL COST:** None

**METHOD OF PRESENTATION:**

- Lectures
- Seminars
- Student presentations
- Guest speakers

For all weeks, questions will be provided within Moodle in order to help students better navigate the primary sources. Unless otherwise noted, all classes will consist of a presentation by the instructor or guest speaker, followed by an interactive discussion.

**REQUIRED WORK AND FORM OF ASSESSMENT:**

- Punctuality, preparation and class participation -10%
- Final paper outline - 30%
- Final research paper (4,500 word minimum) using primary sources as much as possible - 40%
- Presentation - 20%-

Regular class attendance is mandatory, and grades will be lowered for non-excused absences according to IES Academic Policy Guidelines.

**LEARNING OUTCOMES:**

By the end of the course students will be able to:

- Identify key human rights instruments that form the basis for international health and human rights based work and practice.
- Describe international, regional, national and community judicial mechanisms, with case studies, which further the right to health
- Explain a health and human rights framework and principles, and use these to analyse public health challenges.
- Conceptualize the reciprocal linkages between health and human rights
- Assess the relevance, contributions and limitations of a human rights approach in promoting equitable health outcomes

**ATTENDANCE POLICY:**



Regular class attendance is mandatory. Irregular attendance may result in a lower grade in the course, and/or disciplinary action. The IES Abroad London class attendance policy does not allow for unexcused absences, and grades will be docked one-half letter grade for each such absence. Rare exceptions will be made for the following reasons:

- The student is too sick to attend class. In this instance, the student must call the IES Abroad Centre before class to notify any of the IES Abroad staff. It is not sufficient either to email, send a message with a friend or call the Centre after the class has started.
- A serious illness or death in the immediate family requiring a student to travel home. This requires written approval from the Centre Director before departure.

Arriving more than 10 minutes late to class may count as an unexcused absence. Immigration laws in the UK are extremely strict, and we jeopardize our legal status in hosting students who do not regularly attend class. Students who do not attend class regularly will be reported to the appropriate officials and risk dismissal from the program and deportation from the UK. If a student incurs absences representing 25% of the total class hours, they will be contacted by the Academic Programme Manager (APM) and Centre Director (CD). If these absences are made up exclusively of unexcused non-attendance, this will trigger a disciplinary review. If these absences are made up of excused non-attendance, a meeting will be held to discuss the underlying reasons for lack of attendance, and to discuss ways it can be maintained for the duration of the term. If the 25% threshold is reached due to a mixture of excused and unexcused absences, students will also be asked to attend a meeting to discuss.

**CONTENT:**

Week	Content	Assignments
	<p><b>PART ONE: AN INTRODUCTION TO THE CONTEXT AND FRAMEWORK OF HEALTH AND HUMAN RIGHTS</b></p>	
<p><b>Week 1</b></p>	<p><b>An overview of health and human rights</b>            This week will cover history and foundations of international human rights law; the emergence of the health and human rights discipline. We will look at the critical international documents which provide the framework for human rights, the differences between declarations, covenants and conventions, and discuss the history of the practice of health and human rights.</p>	<p>Required readings:</p> <ul style="list-style-type: none"> <li>• Universal Declaration of Human Rights</li> <li>• International Covenant on Economic, Social and Cultural Rights</li> <li>• International Covenant on Civil and Political Rights</li> <li>• ECOSOC, Siracusa Principles on the Limitation and Derogation Provisions in the International Covenant on Civil and Political Rights. UN Doc. E/CN.4/1984/4: pp. 1-6.</li> <li>• Grad F. Preamble to the Constitution of the World Health Organization. Bulletin of the World Health Organization 2002, 80 (12). 981-984. <a href="http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2567708/pdf/12571728.pdf">http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2567708/pdf/12571728.pdf</a></li> <li>• Gruskin S, Mills EJ, Tarantola D. History, principles, and practice of health and human rights. Lancet 2007; 370(9585): 449-55.</li> <li>• Eibe Riedel, "The Human Right to Health: Conceptual Foundations," in RRH, pp. 21-37.</li> </ul>

<p><b>Week 2</b></p>	<p><b>What is the right to health?</b></p> <p>This class will examine the right to the highest attainable standard of health as codified in ICESCR Article 12 and expanded in General Comment 14. We will discuss the content of the right to health and the framework for its analysis. The underlying principles of participation and non-discrimination will also be described in detail in light of case studies distributed in class to the students.</p>	<p>Required readings:</p> <ul style="list-style-type: none"> <li>• Declaration of Alma Ata</li> <li>• General Comment 14 from the UN Economic and Social Council, at <a href="http://www1.umn.edu/humanrts/gencomm/escgencom14.htm">http://www1.umn.edu/humanrts/gencomm/escgencom14.htm</a></li> <li>• WHO. "Twenty-five Questions on Health and Human Rights" at <a href="http://www.who.int/hhr/information/25_questions_hr.pdf">http://www.who.int/hhr/information/25_questions_hr.pdf</a></li> <li>• Office of the High Commissioner for Human Rights, Fact Sheet 31 on the Right to Health at <a href="http://www.ohchr.org/Documents/Publications/Factsheet31.pdf">http://www.ohchr.org/Documents/Publications/Factsheet31.pdf</a></li> <li>• Hunt P. Right to the highest attainable standard of health. <i>Lancet</i> 2007;370(9585):369-71.</li> </ul> <p>Recommended readings:</p> <ul style="list-style-type: none"> <li>• Mann, JM, Gostin, L, Gruskin S, et al Health and Human Rights. <i>Health and Human Rights</i>, Vol. 1, No. 1 (Autumn, 1994), pp. 6-23 Stable URL: <a href="http://www.jstor.org/stable/4065260">http://www.jstor.org/stable/4065260</a>.</li> <li>• Gruskin S and Tarantola D, "Health and Human Rights" in <i>Perspectives on Health and Human Rights</i> (pp 3-34).</li> </ul>
<p><b>Week 3</b></p>	<p><b>Applying the human rights framework to public health: right-based approaches and impact assessments</b></p> <p>This week the class will revisit the application of a human rights framework – particularly the obligations to respect, protect, fulfil – to specific examples in the right to health. The class will discuss what a human rights impact assessment looks like and what its benefits and drawbacks might be. We will then look at the human rights framework specifically in the context of operationalizing the right to health with respect to maternal and child mortality.</p>	<p>Required reading:</p> <ul style="list-style-type: none"> <li>• Hunt, Paul (2006) (Special Rapporteur on the Right to Health). "Impact Assessments, Poverty and Human Rights: A Case Study Using The Right to the Highest Attainable Standard of Health". Paris: UNESCO, 2006.</li> <li>• Practices in adopting a human rights-based approach to eliminate preventable maternal mortality and human rights: Report of the Office of the United Nations High Commissioner for Human Rights. (A/HRC/18/27). 8 June 2011.</li> <li>• WHO Fact Sheet No. 349: Maternal Mortality (updated May 2014). Available at: <a href="http://www.who.int/mediacentre/factsheets/fs348/en/">http://www.who.int/mediacentre/factsheets/fs348/en/</a></li> </ul> <p>Recommended reading:</p> <p>Yamin AE, "Will we take suffering seriously? Reflections on what applying a human rights framework to health means and why we should care," <i>Health and Human Rights</i>, Vol. 10(1), 2008</p>

<p><b>Week 4</b></p>	<p><b>Accountability</b>  This week will discuss accountability in the context of this course, i.e. the degree to which governments are complying with their obligations arising from the right to the highest attainable standard of health. We will look at monitoring and accountability mechanisms at the international, regional and local levels, and students will be asked to bring case studies of efforts to force governments to comply with their obligations in this area.</p>	<p>Required reading:</p> <ul style="list-style-type: none"> <li>• Connors J (2009). The United Nations human rights treaty body system. United Nations Audiovisual Library of International Law. Video (31 min.) at <a href="http://untreaty.un.org/cod/avl/ls/Connors_HR.htm">http://untreaty.un.org/cod/avl/ls/Connors_HR.htm</a></li> <li>• Potts H. Accountability and the Right to the highest attainable standard of health. University of Essex: 2009. Available at: <a href="http://repository.essex.ac.uk/9717/1/accountability-right-highest-attainable-standard-health.pdf">http://repository.essex.ac.uk/9717/1/accountability-right-highest-attainable-standard-health.pdf</a></li> <li>• Monitoring procedures for the right to health, at <a href="http://www.ohchr.org/EN/HRBodies/Pages/TreatyBodies.aspx">http://www.ohchr.org/EN/HRBodies/Pages/TreatyBodies.aspx</a></li> </ul>
<p><b>PART TWO: LOOKING AT SPECIFIC RIGHTS RELATED TO THE RIGHT TO HEALTH</b></p>		
<p><b>Week 5</b></p>	<p><b>Social determinants of health: a right to water</b>  This class will look at the relevance of human rights to realizing the social determinants of health. We will discuss the emergence of the right to water in international human rights law and its relationship to health.</p>	<p>Required reading</p> <ul style="list-style-type: none"> <li>• Rio Political Declaration on Social Determinants of Health, World Conference on Social Determinants of Health, Rio de Janeiro, Brazil, 21 October 2011.</li> <li>• Protecting the Right to Health through action on the Social Determinants of Health” A Declaration by Public Interest Civil Society Organisations and Social Movements, Rio de Janeiro, Brazil, 18th October 2011.</li> <li>• United Nations Committee on Economic, Social and Cultural Rights, “General Comment No. 15 (2002): The right to water (arts. 11 and 12 of the International Covenant on Economic, Social and Cultural Rights),” E/C.12/2002/11, 20 January 2003.</li> <li>• Human Rights Council, “Human rights and access to safe drinking water and sanitation,” A/HRC/15/L.14, 24 September 2010.</li> <li>• United Nations General Assembly, “The human right to safe drinking water and sanitation,” A/HRC/24/L.31, 23 September 2013.</li> </ul> <p>Recommended reading</p> <ul style="list-style-type: none"> <li>• Maud Barlow, “Point: Water is a fundamental right,” Globe and Mail, 5 August 2010. <a href="http://www.theglobeandmail.com/news/opinions/point-water-is-a-fundamentalright/article1661763/?service=email">http://www.theglobeandmail.com/news/opinions/point-water-is-a-fundamentalright/article1661763/?service=email</a></li> <li>• Jacob Mchangama, “Counterpoint: Water is the wrong right,” Globe and Mail, 5 August 2010. <a href="http://www.theglobeandmail.com/news/opinions/counterpoint-water-is-the-wrongright/article1661785/">http://www.theglobeandmail.com/news/opinions/counterpoint-water-is-the-wrongright/article1661785/</a></li> </ul> <p>UN Department of Public Information, “General Assembly Adopts Resolution Recognizing Access to Clean Water, Sanitation as Human Right, by Recorded Vote of 122 in Favour, None against,</p>

		<p><a href="http://www.un.org/News/Press/docs/2010/ga10967.doc.htm">41 Abstentions”</a> <a href="http://www.un.org/News/Press/docs/2010/ga10967.doc.htm">http://www.un.org/News/Press/docs/2010/ga10967.doc.htm</a></p>
<p><b>Week 6</b></p>	<p><b>Freedom from torture and the obligations of medical professionals</b></p> <p>This class will consider the right to freedom from torture and the work in this area by advocacy groups such as Physicians for Human Rights and UK’s MEDACT will be discussed by a guest speaker.</p>	<p>Required readings:</p> <ul style="list-style-type: none"> <li>• United Nations 1984. Convention Against Torture and Other Cruel Inhuman or Degrading Treatment or Punishment. In: Ethical Codes and Declarations Relevant to the Health Professions, 4th Edition. London: Amnesty International; 2000:92-103.</li> <li>• World Medical Association, 1975. Declaration of Tokyo. In: Ethical Codes and Declarations Relevant to the Health Professions, 4th Edition. London: AmnestyInternational;2000:10-11.</li> <li>• Annas GJ, Grodin MA. Medicine and human rights: reflections on the fiftieth anniversary of the doctors trial. In: HHRR; 301-311.</li> <li>• Rubenstein LS, “Physicians and the Right to Health,” in RRH, pp. 381-390.</li> <li>• Akashah M and Marks S., “Accountability for the Heath Consequences of Human Rights Violations”, <i>Health and Human Rights</i>, Vol. 9(2), pp. 257-280</li> </ul> <p>Preventing Torture: The role of physicians and their professional organisations. London: Medact, 2011. Available at:</p> <ul style="list-style-type: none"> <li>• <a href="http://www.medact.org/resources/preventing-torture-role-physicians-professional-organisations/">http://www.medact.org/resources/preventing-torture-role-physicians-professional-organisations/</a></li> <li>• <a href="http://physiciansforhumanrights.org/issues/torture/">http://physiciansforhumanrights.org/issues/torture/</a></li> </ul>
	<p><b>PART THREE: VULNERABLE GROUPS AND THE RIGHT TO HEALTH</b></p>	
<p><b>Week 7</b></p>	<p><b>Sexual and Reproductive Health</b></p> <p>Students will become familiar with the basic documents concerning sexual and reproductive rights in international law, as well as the ways in which governments violate these rights and the role of the treaty bodies and international organizations in promoting them.</p>	<p>Required reading:</p> <ul style="list-style-type: none"> <li>• Basic Docs, pp. 212-249 (Women’s Rights)</li> <li>• Luisa Cabal and Jaime M. Todd-Gher, “Reframing the Right to Health: Legal Advocacy to Advance Women’s Reproductive Rights,” and Claire Mahon, “Sexual Orientation, Gender Identity and the Right to Health,” in RRH pp. 120-134 and 235-244.</li> </ul> <p>Recommended reading:</p> <ul style="list-style-type: none"> <li>• Miller AM and Roseman MJ, “Sexual and reproductive rights at the United Nations: frustration or fulfilment?” <i>Reproductive Health Matters</i>, Vol. 19(38), pp. 102– 118, 2011.</li> <li>• Kendall T. Reproductive rights violations reported by Mexican women with HIV. <i>Health and Human Rights</i>. Vol 11, No 2 (2009) Available at: <a href="http://hhrjournal.org/index.php/hhr/article/view/175/273">http://hhrjournal.org/index.php/hhr/article/view/175/273</a></li> </ul>

<p><b>Week 8</b></p>	<p><b>Sexual Orientation and Gender Identity: Discrimination on the grounds of sexual orientation and gender identity</b></p> <p>Globally, violence and discrimination against groups because of their sexual orientation or gender identity is quite common: even the perception of homosexuality or transgender identity puts people at risk. This class will focus on the principle of non-discrimination in relation to sexual orientation and gender identity, with case studies in the areas of criminalization of same-sex conduct and orientation, sex workers and HIV transmission.</p>	<p>Required reading:</p> <ul style="list-style-type: none"> <li>• Yogyakarta Principles on the Application of International Human Rights Law in relation to Sexual Orientation and Gender Identity (2006) (Yogyakarta Principles)</li> <li>• Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health (main focus: right to health and criminalization of same-sex conduct and sexual orientation, sex-work and HIV transmission), Anand Grover, UN Doc. A/HRC/14/20, 27 April 2010.</li> <li>• Report of the United Nations High Commissioner for Human Rights: Discriminatory laws and practices and acts of violence against individuals based on their sexual orientation and gender identity, Navanethem Pillay, UN Doc. A/HCR/19/41, 17 November 2011.</li> <li>• S. Gruskin, G Williams Pierce, L Ferguson. “Realigning government action with public health evidence: the legal and policy environment affecting sex work and HIV”, Culture, Health and Sexuality, 2013.</li> </ul> <p>Recommended reading:</p> <ul style="list-style-type: none"> <li>• “Discriminatory laws and practices and acts of violence against individuals based on their sexual orientation and gender identity”. Report of the United Nations High Commissioner for Human Rights, 2011</li> <li>• The Criminalization of HIV Transmission and Exposure by Justice Edwin Cameron Constitutional Court of South Africa</li> </ul>
<p><b>Week 9</b></p>	<p><b>Human Rights Approaches to Mental Health</b> This class will focus on human rights violations related to mental health, and the ways in which a right- based approach can be used to advocate for improvements in the ways in which governments address this issue.</p>	<p>Required readings:</p> <ul style="list-style-type: none"> <li>• World Health Organization, “WHO Resource book on mental health, human rights and legislation,” WHO reference number: WM 34 2005RE, 2005. o Chapter 1 (pp. 1-18) o Annexes 1-4 (pp. 119-165)</li> <li>• WHO and Mental Health and Poverty Project, Mental Health and Development: Targeting people with mental health conditions as a vulnerable group. Geneva: WHO, 2010.</li> </ul> <p>Recommended readings:</p> <p>Bass JK, Bornemann TH, Burkey M, Chehil S, Chen L, et al., “A United Nations General Assembly Special Session for Mental, Neurological, and Substance Use Disorders: The Time Has Come,” PLoS Med, Vol. 9(1):e1001159, 2012.</p>

	<b>PART FOUR: SPECIFIC HEALTH CHALLENGES IN A HUMAN RIGHTS FRAMEWORK</b>	
<b>Week 10</b>	<p><b>Access to Medications</b></p> <p>This week will provide an overview of intellectual property issues as they relate to access to medications and the right to health. Students will become familiar with WTO Agreements relevant to access to medicines, as well as other international and national law around this issue.</p>	<p>Required reading:</p> <ul style="list-style-type: none"> <li>• Chapter 9 in Grodin et al</li> <li>• Stephen Marks, "Access to Essential Medicines as a component of the right to health," in RRH, pp.82-101.</li> <li>• Lisa Forman, "'Rights' and Wrongs: What Utility for the Right to Health in Reforming Trade Rules on Medicines?," Health and Human Rights, volume 10, no. 2, pp. 37-52.</li> <li>• Carlos Maria Correa, "Implications of bilateral free trade agreements on access to medicines," Bulletin of the World Health Organization 84 (2006): 399-404.</li> </ul> <p>Recommended reading:</p> <ul style="list-style-type: none"> <li>• Alicia Ely Yamin, Not Just a Tragedy: Access to Medications as a Right under International Law, 21 B.U. Int'l L.J. 325 (2004).</li> <li>• Lissett Ferreira, Access to Affordable HIV/AIDS Drugs: The Human Rights Obligations of Multinational Pharmaceutical Corporations, 71 Fordham Law Review 1133 (2002).</li> <li>• Rajat Khosla and Paul Hunt, Human Rights Guidelines for Pharmaceutical Companies in relation to Access to Medicines, see chapter III. (Available online through OHCHR website)</li> </ul>
<b>Week 11</b>	<p><b>Non-Communicable Diseases, with a focus on tobacco as a risk factor:</b></p> <p>Non-communicable diseases (NCDs) constitute a growing public health concern for nearly all countries in the world. This class will explore the ways in which a health and human rights approach can be used to respond to this crisis through prevention measures, the right to essential medicines and technologies for NCDs, vulnerable populations, monitoring and reporting.</p> <p>Tobacco is one of the four key risk factors for NCDs, and regulatory efforts around tobacco control are far more advanced than those around diet, physical activity and alcohol. This class will start from the WHO FCTC, looking at to what extent this instrument addresses human rights aspect of tobacco control, how useful this approach is for this issue, and discuss the application of human rights approaches to other behavioural issues in public health.</p>	<p>Required readings:</p> <ul style="list-style-type: none"> <li>• Nygren-Krug H. "A Human Rights Based Approach to Non-Communicable Diseases" in HHR, pp. 567 -57.</li> <li>• De Vos P., et al. 'A Human Right to Health Approach for Non-Communicable Diseases,' The Lancet, 81, no. 9866, pp. 533, 2013.</li> <li>• Beaglehole R., et al. 'Priority Actions For the Non-Communicable Disease Crisis,' The Lancet, vol.377, no. 9775, pp. 1438, 2013.</li> <li>• Briefing paper available through the NCD Alliance website at: <a href="http://www.ncdalliance.org/humanrights">http://www.ncdalliance.org/humanrights</a></li> <li>• The WHO Framework Convention on Tobacco Control</li> <li>• Dresler C et al, in HHR, pages 472-86.</li> </ul> <p>C Dresler, H Lando, N Schneider, H Sehgal. (2012). "Human rights-based approach to tobacco control." Tobacco Control, vol. 21, 208-211.</p>

**Week 12****Final Presentations**

The final week's class will be dedicated to student presentations.

**REQUIRED READINGS:**

Key books (below) will be available in the library.

- Clapham A and Robinson M (eds.). Realizing the Right to Health Zurich, Switzerland: Rüfer & Rub, the Swiss Human Rights Book Series, 2009
- RRH Grodin M. et al (eds.) Health and Human Rights in a Changing World. New York: Routledge, 2013. (HHR)
- Gruskin S, Grodin MA, Annas GJ, Marks SP (Eds). Perspectives on Health and Human Rights. New York: Routledge; 2005. (PHR)
- Mann JM, Gruskin S, Grodin MA, Annas GJ,eds. Health and Human Rights – A Reader. New York: Routledge Press;1999 (HHRR)
- Marks, SP. (Ed.), Health and Human Rights: Basic International Documents. Cambridge, MA: Harvard University Press, 2004.(Basic Docs)



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