

Human Rights and Health  
GENERAL INFORMATION  
Spring 2002

Instructors: Vincent Iacopino and Harvey Weinstein

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Course Purpose and Structure:

This course focuses on the relationship between health and human rights. How does one define and understand international human rights? What role do these rights play in assuring the World Health Organization's definition of health? How can health professionals, lawyers, social scientists, and others concerned with human rights improve individual and community health and well-being by protecting and promoting human rights?

The course provides an overview of the epidemiology of human rights violations in the world and an analysis of the psychology of abuse. The course considers the role of health professionals and other health promoters in: documenting the health consequences of human rights violations, treating survivors of state-sponsored abuse, addressing specific human rights concerns of women and children, identifying the impact of health policy on human rights, and participating in human rights education and advocacy. It examines the relationship between bioethics and human rights and the relationship between human rights, the environment and multinational corporations. Also, the contemporary human rights issues of universality and accountability are addressed.

The course aims to provide students with a basic understanding of human rights issues relevant to health professionals. Lectures and in-class discussions will enable students to acquire knowledge and skills necessary for preventing and alleviating the human suffering caused by human rights abuses. In addition, research assignments will provide students with opportunities to raise meaningful questions by pursuing the study of original ideas. Students' conceptual understandings and knowledge will be assessed through their participation in class. Their abilities to develop original ideas and engage in

critical thinking on human rights will be reflected in their research assignment selection, presentation and writing.

The Human Rights and Health course is offered through the UC Berkeley School of Public Health and will be offered to students from the UCB/UCSF Joint Medical Program , the UC Berkeley School of Public Health, and other graduate programs of the University. Ideally, the number of students taking the course should not exceed 20.

#### Course Information:

University of California, Berkeley Location: 460 Stephens Hall

School of Public Health PH-211 Control #: 75773

Health Issues Seminar Series Thursdays: 2:00 p.m. to 5:00 p.m.

#### Assignment:

Small groups of students will do a presentation on a human rights topic five weeks into the course. In addition, each student will be expected to write a 15-page paper on a health and human right topic of their own choosing. The papers should include the following components: a research question or idea, background information, a description of significance (and methods if applicable), analysis of relevant material and conclusions. Students will present their research topics in class on and subsequently submit the paper to the course instructors.

#### Office Hours:

Dr. Iacopino: Office hours will be held before class and by appointment.

Dr. Weinstein: Thursday, 10:30 AM-12 Noon.

#### Grading:

40% In-class presentations and contributions to discussion

60% 15-page research paper

#### Required Books:

1. Iacopino V, Weinstein H. Health and Human Rights Course Reader, PH 211. 2001. (Readings not marked with an asterisk are in the Course Reader.)
2. Center for the Study of Human Rights. Twenty-Five Human Rights Documents, New York: Columbia University Press, 1994.
3. Amnesty International. Ethical Codes and Declarations Relevant to the Health Professionals, London: Amnesty International. 2000. (provided by instructors)
4. Sivard RL. World Military and Social Expenditures, 1996. Washington, DC: World Priorities, 1996.

#### HUMAN RIGHTS AND HEALTH COURSE SYLLABUS

Spring Semester, 2002

Week 1

January 24

Instructors: Iacopino and Weinstein

How do our understanding of human rights and our definitions of human rights abuses compare to the way these are understood internationally? What are the historical and philosophical origins of human rights and how have human rights and humanitarian law developed?

What are the critical international documents that provide the world's framework for monitoring human rights abuses? What are non-derogable rights and what is meant by the interdependence and indivisibility of human rights? How can respect for human rights be enforced?

Course introduction: individual introductions, outline of subjects to be covered, course objectives, student responsibilities, grading, office hours, reading material and explanation of assignments

Videotape: The Case of Rwanda: Human Rights Violations and Lessons Learned

Exercise: What are Human Rights?

Readings:

Weston BH. International Human Rights: Overview. In: Claude RP and Weston BH, eds. Human Rights in the World Community: Issues and Actions. Philadelphia: University of Pennsylvania Press, 1992:14-31.

Marks S. Promoting Human Rights. In Klare MT and Thomas DC, eds. World Security: Trends and Challenges at Century's End. New York: St. Martin's Press, 1991:292-323.

Henkin L. Introduction: The human rights idea. In: The Age of Rights. New York: Columbia University Press, 1990:1-10.

The Politics of Human Rights, Righting Wrongs. The Economist. August 18, 2001:18-20.

\* Center for the Study of Human Rights. Twenty-Five Human Rights Documents, New York: Columbia University Press, 1994: United Nations Universal Declaration of Human Rights, International Covenant on Civil and Political Rights, International Covenant on Economic, Social, and Cultural Rights.

Week 2

January 31

Instructors: Iacopino and Weinstein

Origins of Health Concerns: How has ideology shaped our understandings of sickness, health and healing? How do concepts of disease and illness affect contemporary health practices? Are human rights valid health concerns? How are the interests of individuals and society represented in medical encounters and health policy?

Health and Human Rights. How has ideology shaped our understanding of sickness, health and healing? Is there a natural point of intersection between health and human rights? What is the legal foundation for a right to health and how is it applied in America and overseas?

Exercise: Analyze from a health and human rights perspective one of the ten great public health achievements, US, 1990-99, in MMWR 48,241-243 (Also in JAMA 281:16,1481.)

Readings:

World Health Organization. Declaration of Alma Ata. World Health Organization, Primary Health Care. Geneva: World Health Organization, 1978: 1-3.

Ottawa Charter for Health Promotion, presented at first International Conference on Health Promotion, Ottawa, 1986: 1-3.

Mann J, Gostin L, Gruskin S et al. Health and human rights. *Health and Human Rights*. 1994;1(1): 7-23.

International Consortium on Health and Human Rights. Draft Declaration on Human Rights and Health Practice. December 2001.

Benatar SR. Global disparities in health and human rights: a critical commentary. *Am J Public Health*. 1998; 88:295-300.

Farmer P. Pathologies of power: rethinking health and human rights. *Am J Pub Health*.

1999; 89(10):1486-1496.

Week 3

February 7

Guest Speaker: To Be Announced

What is the relationship between social ideals and claims to universal human rights? Do human rights apply to all people and for all time? Does the "human rights idea" represent merely a "western" model? How does the practice of female genital cutting or lack of education for girls in Afghanistan or the former practice of foot binding in China exemplify the discourse on universality and cultural relativity? Consider other examples of this discourse.

Readings:

Preis AS. Human rights as cultural practice: an anthropological critique. *Human Rights Quarterly*. 1986; 18:286-315.

Schirmer J. The dilemma of cultural diversity and equivalency in universal human rights standards. In Downing TE, and Kushner G, eds. *Human Rights and Anthropology*. Cambridge: Cultural Survival, Inc., 1988:91-106.

An-Naim A. What do we mean by universal? *Index on Citizenship*. 1994;4/5:120-128.

Annas CI. Irreversible Error: the power and error of female genital mutilation. In Mann J and Gruskin S, eds. *Health and Human Rights: A Reader*. New York: Routledge, 1999:336-362.

Lane SD. Judging the other: responding to traditional female genital surgeries. *Hastings Center Report*. 1996; 26(3):31-40.

Week 4

February 14

Guest Speaker: Sosamma Samuel-Burnett, Coordinator for the Economic and Social Human Rights Program at Food First/Institute for Food and Development Policy, Oakland, CA

Unrealized Economic, Social and Cultural Rights: Overview of the International Covenant on Economic, Social, and Cultural Rights. What are the health consequences of development and global monetary policies? What is the extent of poverty, hunger, and overpopulation in the world today? What are the health consequences of militarism? How are these problems interrelated and how do they affect the environment? What is the role of International Monetary Fund and the World Bank. What are the

effects of structural adjustment policies on poverty and health? What other models exist for developing countries? What is the relation between freedoms and unrealized human needs?

Readings:

- \* Center for the Study of Human Rights. Twenty-Five Human Rights Documents, New York: Columbia University Press, 1994. International Covenant on Economic, Social, and Cultural Rights.
- \* Sivard RL. World Military and Social Expenditures, 1996. Washington, DC: World Priorities, 1996:1-53.
- Kiefer C. Militarism and world health. *Social Science and Medicine*. 1992; 34(7):719-724.
- Sen A. Freedoms and needs. *The New Republic*. January, 1994:31-37.
- Mesmeskoub, M. Deprivation and structural adjustment. In Wuyts, M, Mackintosh M, and Hewitt T, eds. *Development Policy and Public Action*. Oxford: Oxford University Press, 1992:175-198.
- Peabody JW. Economic reform and health sector policy: lessons from structural adjustment programs. *Soc Sci Med*. 1996; 43(5):823-835.
- Editorial. Structural adjustment and health in Africa. *The Lancet*. 1990; 335 885-886.
- Ugalde A, Jackson JT. The world bank and international health policy: a critical review. *Journal of International Development*. 1995; 7(3):525-541.
- Chanis, BH. and Franke, RW. Kerala State: a social justice model. *Multinational Monitor*. 1996; 7/8:25-28.
- Nelson K, Brown ME, Lurie N. Hunger in an adult population, *JAMA*. 1998; 279:1211-1214.
- Robert SA, House JS. Socioeconomic inequalities in health: integrating individual-, community-, and societal-level theory and research. In Albrechet GL, Fitzpatrick R, and Scrimshaw SC, eds. *Handbook of Social Studies in Health and Medicine*. Thousand Oaks: Sage Publications, 2000:125-127.

Week 5

February 21

Instructors: Weinstein and Iacopino

Terrorism, Human Rights and September 11: With our discussions on cultural relativism and economic, cultural and social rights as a background, how can we analyze the events of September 11 and the American response from a human rights perspective? How do we define "terrorism?" What psychological factors enable acts of terrorism? How should health professionals respond to the threat of terrorism?

Film: Preparing for Biological/Chemical Warfare

Definitions of Terrorism. United Nations Office for Drug Control and Crime Prevention, December 21, 2001. Available at: [http://www.undcp.org/terrorism\\_definitions.html](http://www.undcp.org/terrorism_definitions.html)

Definition of Terrorism. *The Daily Diatribe*. October 5, 2001.

Available at: <http://www.therationalradical.com/dsep/other/terrorism-definition.htm>

Mastny V. Terrorism. Available at: <http://encarta.msn.com/find/Concise.asp?ti=03256000>

Whitaker B. Jihad and terrorism: the definition of terrorism. *The Guardian Unlimited*. May 7, 2001.

Available at: <http://www.guardian.co.uk/Archive/Article/0,4273,4182105,00.html>

Bandura A. Mechanisms of moral disengagement. In: Reich W, ed. *Origins of Terrorism: Psychologies, Ideologies, Theologies, States of Mind*. New York: Cambridge University Press, 1990:161-191.

Sidel VW, Cohen HW, Gould RM. Good intentions and the road to bioterrorism preparedness. *Am J Public Health*. 2001; 91(5):716-718.

Henderson DA. The Looming Threat of Bioterrorism. *Science*. 1999; 283:1279-1282.

Week 6  
February 28

Assignment: Small Group Presentations on Health and Human Rights Topics

Week 7  
March 7

Instructors: Weinstein and Iacopino

Human Rights Violations in the World Today: Overview of the current scope and patterns of human rights violations in the world. Overview of the problems of war, political violence, and violations of human rights and humanitarian law.

Health Consequences of Armed Conflicts and Human Rights Violations: What are the immediate and long-term effects of death and disability, destruction of infrastructure, supplies of food, water, housing, health services during times of war and civil conflicts. How do the laws of war aim to protect people in times of war? What constitutes medical neutrality?

Health Status of Refugees and Displaced Persons: What are the immediate and long-term health needs triggered by mass migrations of people during armed conflicts? What constitutes appropriate health services for humanitarian assistance?

Readings:

Human Rights Watch. Introduction. Human Rights Watch World Report 2001. New York: Human Rights Watch, 2001

Zwi A, Ugalde A. Towards an epidemiology of political violence in the third world. *Social Science and Medicine*. 1989; 28(7):633-642.

US Committee for Refugees. Worldwide Refugee Information, 2001. Website:  
[http://www.refugees.org/world/articles/50years\\_rr01\\_5.htm](http://www.refugees.org/world/articles/50years_rr01_5.htm).

Toole MJ. Complex emergencies: refugee and other populations. In: Noji EK ed..*The Public*

*Health Consequences of Disasters*. New York: Oxford University Press, 1997:419-442.

Stover E, Cobey JC, Fine J. The public health effects of landmines: long-term consequences for civilians. In: *War and Public Health*, Levy BS and Sidel VW, eds. New York: Oxford University Press, 1997:137-146.

Falk R. Human rights, humanitarian assistance and the sovereignty of states. In Cahill KM, ed.

*A Framework for Survival: Health, Human Rights, and Humanitarian Assistance in Conflicts and Disasters*. New York: Basic Books, 1993:122-136.

Gibbons E, Garfield R. The impact of economic sanctions on healths and human rights in Haiti-1991-94. *Am J Public Health*. 1999; 89(10):1499-1504.

Marks SP. Economic Sanctions as Human Rights Violations: Reconciling Political and Public Health Imperatives. *American Journal of Public Health*. 1999; 89(10):1509-1513.

Weinstein H, Lipson J, Sarnoff R, Gladstone E. Rethinking displacement: Bosnians uprooted in Bosnia and the United States. In Lipson J and McSpadden L, eds. *Negotiating Power and Place at the Margins: Selected Papers on Refugees and Immigrants*, Vol. VII, Fairfax: American Anthropological Association, 1999:53-74.

Iacopino V, Waldman R. War and health: from Solferino to Kosovo - the evolving role of physicians. *JAMA*. 1999; 282(5):479-481.

Medical Neutrality References: 1) Violations of medical neutrality: classification scheme of the International Commission on Medical Neutrality, 2) Charter of Medical Neutrality (ICMN), 3) Excerpts from the Declaration of Minimum Humanitarian Standards (1990), 4) A code for the protection of medical services in conflict, 5) Common Article 3 of the Geneva Conventions.

Week 8  
March 14

Guest Speaker: Iacopino and Weinstien

Human Rights Violations/Reports From the Field: What is the role of health professionals in documenting the health consequences of conflict and human rights violations? Overview of efforts to document violations of international human rights and humanitarian law, including the problems of genocide, extra-judicial executions, torture, rape, excessive use of force, prison condition, landmines, and chemical weapons.

Methods of Documenting Human Rights Violations: What are the general conditions for a human rights investigation? How can epidemiology and other research methods be applied to the documentation of human rights violence? What forms of evidence should be collected?

Readings:

Geiger HJ, Cook-Deegan RM. The role of physicians in conflicts and humanitarian crises: case studies from the field missions of Physicians for Human Rights, 1988-1993. *JAMA*. 1993; 270:616-620.

Iacopino V, Heisler M, Pishever S, and Kirschner RH. Physician complicity in misrepresentation and omission of medical evidence in post-detention medical examinations in Turkey. *JAMA*. 1996; 276:396-402.

Iacopino V, Frank MW, Bauer HM, Keller AS, Fink SL, Ford D, Palin DJ, Waldman R. A Population-based Assessment of Human Rights Abuses against Ethnic Albanian Refugees from Kosovo. *American Journal of Public Health*. 2001; 91(12):2013-2018.

Claude RP. Human Rights and Statistics: Getting the Record Straight. Jabine TB and Claude RP, eds. Philadelphia: University of Pennsylvania Press, 1992:1-61.

Dermot G. Human rights investigation. In *The Handbook of Human Rights Investigation: A Comprehensive Guide to the Investigation and Documentation of Violent Human Rights Abuses*. Northborough: Human Rights Press, 2000:33-49.

Wilson RA. Representing human rights violations: social contexts and subjectivities. In Wilson RA, ed. *Human Rights: Culture and Context*. London: Pluto Press, 1997:134-160.

Week 9  
March 21

Guest Speaker: Nomfundo Walaza, Visiting Fellow, Human Rights Center, Director, Center for Survivors of Violence and Torture, Cape Town, South Africa.

Torture: How is torture defined? What is the scope of its practice and its prevalence among refugees and asylum seekers? What are the physical, psychological, and social health consequences of torture? How can survivors be helped? What are the possible conceptual and clinical limitations of post-traumatic stress disorder (PTSD) as a diagnosis? How do literary accounts by survivors inform health professionals' efforts to prevent and alleviate suffering?

The Psychology of Abuse: What are the origins of abuse? How do processes of moral disengagement and dissociation promote abuse? What is the unconscious structure of torture? Why does causing death and injury seem to confer power to the victimizer?

Resettlement and Asylum: What health issues arise in countries of asylum? What factors determine the asylum process and how do refugees integrate into new cultures?

Audiotape: Interview with Sr. Diana Ortiz. National Public Radio. 1996.

Readings:

Weinstein HM, Dansky L and Iacopino V. Torture and war trauma survivors in primary care practice. *Western Journal of Medicine*. 1996; 165:112-116.

Summerfield D. Addressing human response to war and atrocity: major challenges in research and practices and the limitations of western psychiatric models. In: Kleber R et. al., eds. *Beyond Trauma*. New York: Plenum Press, 1996:17-29.

Turner S. Torture, refuge, and trust. In: Daniel EV and Knudsen JC, eds. *Mistrusting Refugees*. Berkeley: University of California Press, 1995:56-72.

Muecke MA. New paradigms for refugee health problems. *Soc Sci Med*, 1992; 35(4):515-523.

Iacopino V, Ozkalipci O, Schlar C. The Istanbul Protocol: international standards for the effective investigation and documentation of torture and ill treatment. *The Lancet*. September 25, 1999:1117.

Scarry E. The structure of torture: the conversion of real pain into the fiction of power. In: *The Body in Pain: The Making and Unmaking of the World*. New York: Oxford University Press, 1985:27-59.

\* Center for the Study of Human Rights. *Twenty-Five Human Rights Documents*, New York: Columbia University Press, 1994: *Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment*; and *Convention Relating to the Status of Refugees*.

SPRING BREAK

March 25-29

Week 10

April 4

Guest Speaker: To Be Announced

Health and Women's Human Rights: What are women's human rights? How has feminism contributed to human rights discourse? How does gender discrimination manifest as abuses of women's human rights? What are reproductive rights and how have they been challenged?

Readings:

\* Center for the Study of Human Rights. *Twenty-Five Human Rights Documents*, New York: Columbia University Press, 1994. *Convention on the Elimination of All Forms of Discrimination Against Women*.

Bunch C. Women's Rights as Human rights: toward a re-vision of human rights. *Human Rights Quarterly*. 1990; 12:486-498.

Binion, G. Human Rights: A Feminist Perspective. *Human Rights Quarterly*. 1995; 17:509-526.

Yamin AE. Transformative combinations: women's health and human rights. *JAMWA*. 1997; 52(4):169-173.



Freedman L. Censorship and manipulation of reproductive health information: an issue of human rights and women's health. In *The Right to Know: Human Rights and Access to Reproductive Health Information*. Philadelphia: University of Pennsylvania Press, 1995: 1-37.

Gollub E. Human rights is a U.S. problem, too: the case of women and HIV. *Am J Public Health*. 1999; 89(10):1479-1482.

National Women's Law Center. Introduction and Executive Summary, in *Making the Grade on Women's Health: a National and State-by-State Report Card*. 2001. Available at: <http://www.nwlc.org/pdf/2001ReportCardExecutivesummary.pdf>

Resource: Sivard, RL. 1995. *Women - A World Survey*. World Priorities. Washington, DC.

Week 11

April 11

Guest Speakers: Margaret Brodtkin, Executive Director, Coleman Advocates for Youth, San Francisco, CA.

Health and Human Rights of Children: What are the rights of children? How are they violated. What are the immediate and long-term health consequences of such violations? What is the impact of psychological trauma on development and family dynamics? How does the conceptualization of childhood influence treatment approaches? What are the causes of child labor, hunger and malnutrition and what remedies can be identified?

Human Rights Education: What is the significance of human rights education? What role should health professionals play in building a culture of human rights within the health sector and in the world community? What strategies should be considered to achieve this.

Exercise: Develop a 3-year plan for a children's health and human rights organization (Group A). Develop a Public Health Action Plan for Human Rights Education; OR Develop a California ballot initiative for human rights education in public schools (Group B).

Readings:

\* Center for the Study of Human Rights. *Twenty-Five Human Rights Documents*, New York: Columbia University Press, 1994: Convention on the Rights of the Child.

Schaller JG, Nightingale EO. Children and childhood's: hidden casualties of war and civil unrest. *JAMA*. 1992; 268(5):642-644.

Children's Defense Fund. *The state of America's children*. In Mittal A, and Rosset P. *America Needs Human Rights*. Oakland: Food First Books, 1999:53-59.

International Development Information Centre. *Food Security: A Rights to Access*. No.94-04 March 1994:1-5.

Pogge TW. Poverty: a Violation of Human Rights. *Center for the Study of Human Rights. Rights News*. 2001; 23(1):3.

Blanchet T. Child domestic servants in Dhaka. In *Lost Innocence, Stolen Childhoods*. Dhaka: University Press, Ltd., 1996:97-121.

Bales K. Thailand: because she looks like a child. In: *Disposable People: New Slavery in the Global Economy*. Berkeley: University of California Press, 1999: 34-79.

Swartz L, Levett, A. Political repression and children in South Africa: the social construction of damaging effects. *Social Science and Medicine*. 1989; 28(7):741-750.

Baxi U. Human rights education: the promise of the third millennium? In Andreaopoulos GJ, and Claude RP, eds. Human Rights Education for the Twenty-First Century. Philadelphia: University of Pennsylvania Press, 1997:142-154.

Claude RP. Human rights education: its day has come. Amer Soc of Intl Law. 1998; 8(2):13-23.

Week 12

April 18

Guest Speaker: Speaker from Business for Social Responsibility

Environment, Multinational Corporations, Health and Human Rights. What are the effects of industry practice, pollution, and dumping on the health rights of populations? Are human rights and a free market compatible? What is the role of government policy in making trade-offs between growth and health? How can multinational corporations be held accountable for human rights abuses?

Exercise: Develop a human rights impact assessment methodology to assess the human rights implications of development programs (Working Group A) and Health Policy (Working Group B).

Readings:

McKellar FL, Horlacher DE. Population, living standards and sustainability: an economic view. In: Mazur LA, ed.

Beyond the Numbers: A Reader on Population, Consumption, and the Environment. Washington, D.C: Island Press, 1994:76-92.

Hekimian K. The post-Soviet legacy of industrial pollution in Armenia. In: Bradford B and Gwynne MA, eds. Down to earth: Community Perspectives on Health, Development, and the Environment. West Hartford: Kumarian Press, 1995:49-59.

Wilson L. Fighting toxic waste dumping in Kentucky. In: Bradford B and Gwynne MA, eds. Down to earth: Community Perspectives on Health, Development, and the Environment. West Hartford: Kumarian Press, 1995: op cit., pp.107-112.

Capek SM. Environmental justice, regulation, and the local community. Int J Hlth Svcs.1992; 22(4):729-746.

Millen JV, Holtz TH. Transnational corporations and the health of the poor. In Kim JY, Millen JV, Irwin A and Gershman J, eds. Dying for Growth: Global Inequality and the Health of the Poor. Monroe, Common Courage Press, 2000:177-223.

Shilling DM, Rosenbaum R. Principles for global corporate responsibility. Business and Society Review. 1995:55-56.

Week 13

April 25

Guest Speaker: Helene Lipton, Professor of Pharmacy and Health Policy, Schools of Medicine and Pharmacy, UCSF, San Francisco, CA

Human Rights and Health policy: How can health professionals assess the impact of health policy on human rights, both on civil and political rights and on the economic, social and cultural rights?

Analysis of the Intersection Between Health Policy and Human Rights: Tobacco and HIV, access to health care, denial of health care to undocumented immigrants, and discrimination against disabled persons.

Readings:

Gostin L, Mann J. Towards the development of a human rights impact assessment for the formulation and evaluation of public health policies. *Human Rights and Health*. 1994; 1(1):58-80.

Barry M. The influence of the U.S. tobacco industry on the health, economy, and environment of developing countries. *NEJM*. 1991; 324(13):917-919.

Gostin LO, Lazzarini Z. *Human Rights and Public Health in the AIDS Pandemic*, New York: Oxford University Press, 1997:12-32 and 49-55.

Fee E, Krieger N. Thinking and rethinking AIDS: implications for health policy. In *AIDS: The Politics of Survival*. Amityville: Gaywood Publishing Co, Inc., 1993:227-251.

Toebe B. Towards an Improved Understanding of the International Human Right to Health. *Human Rights Quarterly* 1999; 21(3):661-679.

Thomas SB. The color line: race matters in the elimination of health disparities. *Am J Public Health*. 2001; 91(7):1046-47.

Ziv TA, Lo B. Denial of care to illegal immigrants: Proposition 187 in California. *NEJM*. 1995; 332(16):1095-1098.

Weinstein H, et al. *The Albanian Mental Health System. A Human Rights Center Report*, Berkeley: University of California, 2000; 3-5:12-29.

Week 14

May 2

Guest Speaker: Jeffrey Burack, Assistant Adjunct Professor of Bioethics, Division of health and Medical Sciences, School of Public Health, UC Berkeley.

Bioethics and Human Rights: What are the professional ethics of healers? What is the relationship between bioethics and human rights? How have people become unwitting participants in human experimentation? How have governments, scientists, and health professionals colluded in the misuse of their own citizenry? How have public health officials participated in human experimentation? Historical examples of this include the eugenics movement, Nazi medicine and the concentration camp experiments, the Tuskegee experiments, human radiation, mind control, and chemical and biological warfare. What is known about the role of health professionals in experiments and torture?

Readings:

\*Amnesty International. *Ethical Codes and Declarations Relevant to the Health Professionals*, London: Amnesty International. 2000.

Commonwealth Medical Association. *The Guiding Principles: Medical Ethics and Human Rights*. London: Commonwealth Medical Association, 1994:1-11.

Kass N. An ethics framework for public health. *Am J Public Health*. 2001; 91(11):1776-1782.

Proctor R. Nazi Doctors, racial medicine and human experimentation. In Annas GJ and Grodin, MA, eds. *The Nazi Doctors and the Nuremberg Code: Human Rights in Human Experimentation*. New York: Oxford University Press, 1995:17-31.

Silove D. Doctors and the state: lessons from the Biko case. *Social Science and Medicine*. 1999; 30(4):417-429.

Rubenstein L, London L. The UDHR and the limits of medical ethics: the case of South Africa. *Health and Human Rights*. 1998;3(2): 161-175.

Bayer R.(1998) The debate over maternal-fetal HIV transmission prevention trials in Africa, Asia, and the Caribbean: racist exploitation or exploitation of racism? *Am J Public Health*. 1998; 88(4):567-570.

Brennan T. Proposed revisions to the Declaration of Helsinki - will they weaken the Ethical principles underlying human research? *NEJM*. 1999; 341(7):527-530.

Levine R. The need to revise the declaration of Helsinki. *NEJM*. 1999; 341(7):531-534.

Kass N. An ethics framework for public health. *Am J Public Health*. 2001; 91(11):1776-1782.

Jones J. A moral astigmatism. In: *Bad Blood: The Tuskegee Syphilis Experiment*. New York: The Free Press, 1981:1-15.

The Nuremberg Code

Week 15  
May 9

Panel Discussion: Symposium with Guests

Truth, Justice and Reconciliation: How can we define truth, justice, and reconciliation? How should perpetrators of human rights abuses be held accountable for their actions? Is there any relationship between justice and reconciliation? What is the role of a truth commission? What does justice and reconciliation have to do with the protection and promotion of human rights?

Human Rights Education: What is the significance of human rights education? What role should health professionals play in building a culture of human rights within the health sector and in the world community? What strategies should be considered to achieve this.

Readings:

Ignatieff M. The nightmare from which we are trying to awake. In: *The Warrior's Honor: Ethnic War and the Modern Conscience*. New York: Metropolitan Books, 1997:164-190.

Zalaquett J. Confronting human rights violations committed by former governments: principles applicable and political constraints. In: Kritz N, ed. *Transitional Justice, Vol 1*, Washington, D.C: United States Institute of Peace Press, 1995:3-31.

Hayner PB. Fifteen truth commissions: 1974 to 1994: a comparative study. *Human Rights Quarterly*. 1994;16:597-611.

Hayner PB. Five illustrative truth commissions. In: *Unspeakable Truths: Confronting State Terror and Atrocity*. New York: Routledge, 2001:32-49.

Neier A. Doing justice at home and abroad. In *War Crimes: Brutality, Genocide, Terror, and the Struggle for Justice*. New York: Times Books, 1998:35-95.

Minow M. Vengeance and forgiveness. In *Between Vengeance and Forgiveness: Facing History After Genocide and Mass Violence*. Boston: Beacon Press, 1998:9-24.

Fletcher L, Weinstein H, et. al. Justice, Accountability and Social Reconstruction: an interview study of Bosnian judges and prosecutors. *Berkeley J of International Law*. 2000; 18(1):103-105, 141-151.

Weschler L. Getting over. *The New Yorker*. 1993(April 5):173-236, and 281-284. 22