PO/HL310 INTERNATIONAL AND EUROPEAN HEALTH AND HUMAN RIGHTS
IES Abroad Barcelona

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.

IES Abroad Global Pillars:
This course engages with the IES Abroad Global Pillars by exploring relationships between sustainable living, sustainable production, equitable living, human well-being and social determinants of health. Situating these global challenges in the history of economic and international development, the course reflects on legacies of colonialism, the "third world" debt crisis and the emergence of millennium/ sustainable development goals as socio-political discourses. Students will critically analyse paradigms of social responsibility and reflect on how global challenges and their solutions will likely affect their future career paths.

CREDITS: 3 credits

CONTACT HOURS: 45 hours

LANGUAGE OF INSTRUCTION: English

INSTRUCTOR:

PREREQUISITES: None

ADDITIONAL COST: None

METHOD OF PRESENTATION:
- Lectures
- Seminars
- Student presentations
- Course-related trips
- Guest speakers TBC

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%
- Presentation about issue or topic in health and human rights - 20%
- Midterm exam - 30%
- Final paper outline - 10%
- Final research paper - 30%

Punctuality, preparation, and class participation
Active participation throughout the course is expected of each student. Students are expected to come to classprepared to discuss the assigned reading, contribute to class discussion and be well prepared to answer questions.

Paired Presentations
In pairs, students will deliver a PowerPoint presentation about issue or topic in health and human rights that interest them.
Midterm exam
The midterm exam will use different formats to assess students' progress towards the learning outcomes in the first half of the course. The question formats will include short answer questions and justified True/False questions.
Final paper outline
Students will develop an outline/ plan for of the final research paper. Developing the outline will provide students with the opportunity to discuss and receive feedback on their plans for the final paper.
Final research paper
(3,000 word) using primary sources as much as possible. Students will write a 3000-word final paper on either a research question of their choosing or one selected from a list. The paper should be typed, double-spaced and follow a coherent academic referencing style

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 analyze 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:
As a member of our class community, you are expected to be present and on time every day. Attending class has an impact on your learning and academic success. For this reason, attendance is required for all IES Barcelona classes, including course-related excursions. If a student misses more than three classes in any course without justification, 3 percentage points will be deducted from the final grade for every additional absence. Seven unjustified absences in any course will result in a failing grade. Absences will only be justified, and assessed work, including exams, tests and presentations rescheduled, in cases of documented medical or family emergencies.

CONTENT:

Session	Content	Assignments
Session 1 and 2	PART ONE: INTRODUCTION TO THE CONTEXT AND FRAMEWORK OF HEALTH AND HUMAN RIGHTS **An overview of health and human rights** This week will cover history and foundations of international human rights law and the emergence of the health and human rights discipline from a critical social science perspective. We will: 1. Look at the critical international documents which provide the framework for human rights 2. Explore differences between the legal and political standing of "second generation" (social, economic and cultural) and "third generation" (collective and environmental) human rights	**Required Reading:** • Gruskin S, Mills EJ, Tarantola D. (2007). History, principles, and practice of health and human rights. *Lancet*, 370(9585): 449-55 • WHO. Twenty-five Questions on Health and Human Rights at www.who.int/hhr/ information/25_questions_hhr.pdf **Further Reading:** • Universal Declaration of Human Rights: Universal Declaration of Human Rights | United Nations • International Covenant on Economic, Social and Cultural Rights: International Covenant on Economic, Social and Cultural Rights | OHCHR • International Covenant on Civil and Political Rights International Covenant on Civil and Political Rights | OHCHR • 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 • Siracusa-principles-ICCPR-legal-submission-1985-eng.pdf (icj2.wpenginepowered.com) • Grad, Frank P. (2002). The Preamble of the Constitution of the World Health Organization. *Bulletin of the World Health Organization*, 80 (12), 981 - 984. World Health Organization. https://apps.who.int/iris/handle/10665/268691
Session 3 and 4	**Health and Human Rights in Practice** This class will look at health and human rights in practice, exploring some of the issues that social scientists have raises about the implementation of health and human rights principles in different national contexts. Drawing on a case study of health and human rights in the context of the Russian annexation of Crimea, we will explore: 1) The effects of local political cultures on the willingness and ability of institutions to pursue the principles of the right to health 2) Whether the right to health be guaranteed through legal mechanisms alone	**Required Reading:** • Cerón, A., & Jerome, J. (2019). Engaging with the Right to Health: Ethnographic Explorations of the Right to Health in Practice. *Medical Anthropology*, 38(6), 459–463. • Carroll, J. J. (2019). Sovereign rules and rearrangements: banning methadone in occupied Crimea. *Medical Anthropology*, 38(6), 508-522 **Further Reading:** • Arendt, H. (1979). The decline of the nation state and the end of the rights of man. In *The Origins of Totalitarianism.* Pp. 267–302. San Diego, CA: Harvest Books • Gledhill, J. (2003). Rights and the Poor. In *Human Rights in Global Perspective* (pp. 219-238). Routledge • Wilson, R. A., & Mitchell, J. P. (2003). Introduction: the social life of rights. In Human Rights in Global Perspective: Anthropological Studies of Rights, Claims and Entitlements. Routledge

Session	Content	Assignments
Session 5 and 6	**What is the right to the highest attainable standard of health?** 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 underlying principles of participation and non-discrimination. Drawing on a case study from the United States, we will explore the relationship between national health systems and the realisation of rights to health.	**Required Reading:** • Hunt P. (2017). Right to the highest attainable standard of health. *Lancet* 370(9585):369-71 • Farfán-Santos, E. (2019). Undocumented motherhood: Gender, maternal identity, and the politics of health care. *Medical Anthropology*, *38*(6), 523-536. **Further Readings:** • Declaration of Alma Ata: Microsoft Word - almaata_declaration_en.doc (who.int) • General Comment 14 from the UN Economic and Social Council, at www1.umn.edu/ humanrts/gencomm/escgenc om14.htm • Office of the High Commissioner for Human Rights, Fact Sheet 31 on the Right to Health OHCHR | Fact Sheet No. 31: The Right to Health • Mann, J. M., Gostin, L., Gruskin, S., Brennan, T., Lazzarini, Z., & Fineberg, H. V. (1994). Health and human rights. *Health & Hum. Rts.*, *1*, 6. • Gruskin, S., & Tarantola, D. (2017). Health and human rights. In *Health Rights* (pp. 127-181).
Session 7 and 8	**Accountability, Responsibility and Structural Violence** 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. Exploring Paul Farmer's work on the concept of "structural violence", we will also look at governmental responsibility for rights violations, and what this means for the discipline of health and human right.	**Required Reading:** • Farmer, P., & Gastineau, N. (2002). Rethinking health and human rights: time for a paradigm shift. *Journal of Law, Medicine & Ethics*, *30*(4), 655-666. **Further Reading:** • Connors J (2009). The United Nations human rights treaty body system. United Nations Audiovisual Library of International Law. Video (31 min.) at untreaty.un.org/cod/avl/ ls/Connors_HR.htm • Potts H. (2009). Accountability and the Right to the highest attainable standard of health. University of Essex. Available at: http://repository.essex.ac.uk/9717/1/accountability-right-highest-attainable-standard-health.pdf

Session	Content	Assignments
Session 9	**Film Viewing: Bending the Arc** Bending the Arc tells the story of medical anthropologist and physician Paul Farmer (see Session 7 and 8). It follows his work combating multi drug resistant TB and HIV AIDS in the global south, his conflicts with the WHO and medical establishment, and his attempts to reframe the paradigm of health and human rights. We will watch it in class.	No assignments this week

Session	Content	Assignments
Session 10 and 11	**PART TWO: LOOKING AT SPECIFIC RIGHTS RELATED TO THE RIGHT TO HEALTH** **Social determinants of health: a right to water** 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.	**Required Reading** • Rio Political Declaration on Social Determinants of Health, World Conference on Social Determinants of Health, Rio de Janeiro, Brazil, 21 October 2011. https://www.who.int/publications/i/item/rio-political-declaration-on-social-determinants-of-health • 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. http://www.wphna.org/htdocs/downloadsnov2011/11-10-20%20WCSDH%20Civil%20society%20Declaration.pdf • 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. https://digitallibrary.un.org/record/486454?ln=en • Human Rights Council, "Human rights and access to safe drinking water and sanitation," A/HRC/15/L.14, 24 September 2010. https://digitallibrary.un.org/record/691661?ln=en • United Nations. Water Rights. Human Rights to Water and Sanitation. https://www.unwater.org/water-facts/human-rights-water-and-sanitation **Further Reading** • Barlow, M. (2010). Point: Water is a fundamental right. *Globe and Mail*, 5 August 2010: https://www.theglobeandmail.com/opinion/point-water-is-a-fundamental-right/article1375869/ Mchangama, J. (2010). Counterpoint: Water is the wrong right. *Globe and Mail,* 5 August 2010: https://www.theglobeandmail.com/opinion/counterpoint-water-is-the-wrong-right/article1375870/ • UN Department of Public Information, "General Assembly Adopts Resolution Recognizing Access toClean Water, Sanitation as Human Right, by Recorded Vote of 122 in Favour, None against, 41 Abstentions": https://press.un.org/en/2010/ga10967.doc.htm

Session	Content	Assignments
Session 12 and 13	**Medical Ethics, freedom from torture and the obligations of medical professionals** This class will consider the right to freedom from torture, how this relates to medial ethics, and the work in this area by advocacy groups such as Physicians for Human Rights and UK's MEDACT.	**Required Reading:** • Annas, G. J., & Grodin, M. A. (1996). Medicine and human rights: reflections on the fiftieth anniversary of the doctors' trial. *Health and human rights*, 6-21 • Wilson, D. (2012). Who guards the guardians? Ian Kennedy, bioethics and the 'ideology of accountability'in British medicine. *Social History of Medicine*, *25*(1), 193-211 **Further Reading:** • Augustin, Y. S., Birch, M., & Bodini, C. (2011). Preventing torture: The role of physicians and their professional organisations: principles and practice: https://www.medact.org/2011/resources/preventing-torture-role-physicians-professional-organisations/ • Rubenstein, L. S. (2009). Physicians and the right to health. *Clapman A, Robinson M. Realizing the right to health. Zurich: Ruffer & Rub*, 381-92 • United Nations 1984. Convention Against Torture and Other Cruel Inhuman or Degrading Treatment of Punishment. In: Ethical Codes and Declarations Relevant to the Health Professions, 4th Edition. London: Amnesty International; 2000:92-103: https://redress.org/wp-content/uploads/2018/10/REDRESS-Guide-to-UNCAT-2018.pdf • World Medical Association, 1975. Declaration of Tokyo. In: Ethical Codes and Declarations Relevant to the Health Professions, 4th Edition. London: Amnesty International; 2000:10-11: https://www.amnesty.org/en/wp-content/uploads/2021/06/act750051985en.pdf Akashah, M., & Marks, S. P. (2006). Accountability for the health consequences of human rights violations: Methodological issues in determining compensation. *Health and human rights*, 256-279.

Session	Content	Assignments
Session 14 and 15	**PART THREE: VULNERABLE GROUPS AND THE RIGHT TO HEALTH** **Sexual and Reproductive Health** 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. Drawing on a case study of a maternity clinic in Peru, we will explore how the implementation of rights to health policies can end up reproducing existing inequalities.	**Required Reading:** • Mahon, C. (2008). Sexual orientation, gender identity and the right to health. *Realizing the Right to Health, Swiss Human Rights Book*, *3* • Guerra-Reyes, L. (2019). Numbers that Matter: Right to Health and Peruvian Maternal Strategies. *Medical anthropology*, *38*(6), 478-492 **Further reading:** • Cabal, L., & Todd-Gher, J. (2009). Reframing the Right to Health. Legal Advocacy to Advance Women's Reproductive Rights. *Realizing the right to health. Zurich: Rüffer and Rub*: https://portalredalas.espaciovirtual.org/repositorio/sites/default/files/2021-01/CABAL%2C%20Luisa.%20Reframing%20the%20Right%20to%20Health.pdf • Miller, A. M., & Roseman, M. J. (2011). Sexual and reproductive rights at the United Nations: frustration or fulfilment? *Reproductive health matters*, *19*(38), 102–118. https://doi.org/10.1016/S0968-8080(11)38585-0 • Kendall T. (2009). Reproductive rights violations reported by Mexican women with HIV. *Health and human rights*, *11*(2), 77–87.
Session 16 and 17	**The concept of "Biological Citizenship" and the Right to Health** This week, we will explore ideas of "deservingness" and how they intersect with the health and human rights. We will look at Adriana Petryna's concept of "biological citizenship" (how rights and access to healthcare are conferred on some and denied to others) and what this means for vulnerable and marginalized groups in society in particular.	**Required Reading** • Petryna, A. (2004). Biological citizenship: The science and politics of Chernobyl-exposed populations. Osiris, 19, 250-265. • Willen, S. (2011). Do "illegal" im/migrants have a right to health? Engaging ethical theory as social practice at a Tel Aviv open clinic. *Medical Anthropology Quarterly* 25(3):303–330

Session	Content	Assignments
Session 18 and 19	**PART FOUR: CHALLENGES IN A HUMAN RIGHTS FRAMEWORK AND THEIR SOLUTIONS** **Access to Medications, Care and the Concept of "Pharmaceuticalisation"** 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. Drawing on a case study of HIV/AIDS policy in Brazil, we will discuss the problem of "pharmaceuticalisation" as it relates to global health and (solutions to) rights to health	**Required Reading:** • Mahon, C. (2008). Sexual orientation, gender identity and the right to health. *Realizing the Right to Health, Swiss Human Rights Book*, *3* • Guerra-Reyes, L. (2019). Numbers that Matter: Right to Health and Peruvian Maternal Strategies. *Medical anthropology*, *38*(6), 478-492 **Further reading:** • Cabal, L., & Todd-Gher, J. (2009). Reframing the Right to Health. Legal Advocacy to Advance Women's Reproductive Rights. *Realizing the right to health. Zurich: Rüffer and Rub*: https://portalredalas.espaciovirtual.org/repositorio/sites/default/files/2021-01/CABAL%2C%20Luisa.%20Reframing%20the%20Right%20to%20Health.pdf • Miller, A. M., & Roseman, M. J. (2011). Sexual and reproductive rights at the United Nations: frustration or fulfilment? *Reproductive health matters*, *19*(38), 102–118. https://doi.org/10.1016/S0968-8080(11)38585-0 • Kendall T. (2009). Reproductive rights violations reported by Mexican women with HIV. *Health and human rights*, *11*(2), 77–87.
Session 20	**Antimicrobial Resistance, Antibiotics and Pharmaceuticalisation** This week we will explore one of the most pressing issues in global health, antimicrobial resistance (AMR), its relationship to processes of pharmaceuticalisation and how it might affect efforts to secure rights to health. Drawing on a case study of AMR and antibiotic prescription and use in Catalonia, we will explore the historical legacy of overreliance on medications in Spanish healthcare.	**Required Reading:** • Brisley, A., Lambert, H., Rodríguez, C. (forthcoming 2023). Antibiotics in Catalan Primary Care: Prescription, use and remedies for a crisis of care. Medical Anthropology
Session 21	**Fieldtrip: Tuberculosis and and Historic Barcelona** We will take a tour around Barcelona's old town, exploring some of the key sites associated with tuberculosis – which plagued Spain for much of the 19th and early 20th centaury – and the arrival of antibiotics.	Assignment(s) and/or Reading(s)

Session	Content	Assignments
Session 22 and 23	**Health System Reform and The Right to Highest Attainable Standard of Health** This week will look at whether current directions in global health policy and health system reform in different national contexts. We will explore the contradictions and synergies between rights-based approaches to health and pressure on governments to transfer responsibility for health-care provision to the private sector.	**Required Reading:** • Jerome, J. (2019). Much more than a clinic: Chicago's Free Health Centers 1968-1972. *Medical Anthropology*, 38(6), 537-550 • Abadía-Barrero, C. (2015). Neoliberal justice and the transformation of the moral: The privatization of the right to health care in Colombia. *Medical Anthropology Quarterly* 30(1):62–79. doi:10.1111/maq.12161 **Further Reading** • Jerome, J. (2015). A Right to Health: Medicine, Marginality, and Health Care Reform In Northeastern Brazil. Austin: University of Texas Press
Session 24	**Revision Session**	No assignments

COURSE-RELATED TRIPS:

- Tuberculosis and and Historic Barcelona

We will take a tour around Barcelona's old town, exploring some of the key sites associated with tuberculosis – which plagued Spain for much of the 19th and early 20th centaury – and the arrival of antibiotics.

REQUIRED READINGS:

- Abadía-Barrero, C. (2015). Neoliberal justice and the transformation of the moral: The privatization of the right to health care in Colombia. *Medical Anthropology Quarterly* 30(1):62–79. doi:10.1111/maq.12161
- Annas, G. J., & Grodin, M. A. (1996). Medicine and human rights: reflections on the fiftieth anniversary of the doctors' trial. *Health and human rights*, 6-21.
- Biehl, J. (2007). Pharmaceuticalization: AIDS treatment and global health politics. *Anthropological Quarterly*, 1083-1126.
- Carroll, J. J. (2019). Sovereign rules and rearrangements: banning methadone in occupied Crimea. *Medical Anthropology*, 38(6), 508-522.
- Cerón, A., & Jerome, J. (2019). Engaging with the Right to Health: Ethnographic Explorations of the Right to Health in Practice. *Medical Anthropology*, 38(6), 459–463.
- Farfán-Santos, E. (2019). Undocumented motherhood: Gender, maternal identity, and the politics of health care. *Medical Anthropology*, *38*(6), 523-536.
- Farmer, P., & Gastineau, N. (2002). Rethinking health and human rights: time for a paradigm shift. *Journal of Law, Medicine & Ethics*, *30*(4), 655-666.
- Gruskin S, Mills EJ, Tarantola D. (2007). History, principles, and practice of health and human rights. *Lancet* 370(9585): 449-55.
- Gruskin, S., Pierce, G. W., & Ferguson, L. (2014). Realigning government action with public health evidence: the legal and policy environment affecting sex work and HIV in Asia. *Culture, Health & Sexuality*, *16*(1), 14-29.
- Guerra-Reyes, L. (2019). Numbers that Matter: Right to Health and Peruvian Maternal Strategies. *Medical anthropology*, *38*(6), 478-492.
- Human Rights Council, "Human rights and access to safe drinking water and sanitation," A/HRC/15/L.14, 24 September 2010. https://digitallibrary.un.org/record/691661?ln=en
- Hunt P. (2017). Right to the highest attainable standard of health. *Lancet* 370(9585):369-71.
- Jerome, J. (2019). Much more than a clinic: Chicago's Free Health Centers 1968-1972. *Medical Anthropology*, 38(6), 537-550.

- Mahon, C. (2008). Sexual orientation, gender identity and the right to health. *Realizing the Right to Health, Swiss Human Rights Book*, *3.*
- Marks, S. P. (2009). Access to essential medicines as a component of the right to health. *Realizing the right to health. Zurich, Switzerland: Rüfer and Rub*, 82-101.
- Petryna, A. (2004). Biological citizenship: The science and politics of Chernobyl-exposed populations. Osiris, 19, 250-265.
- Principles, Y. (2007). Yogyakarta Principles on the application of international human rights law in relation to sexual orientation and gender identity. *Yogyakarta, Indonesia.*
- 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. http://www.wphna.org/htdocs/downloadsnov2011/11-10-20%20WCSDH%20Civil%20society%20Declaration.pdf.
- Rio Political Declaration on Social Determinants of Health, World Conference on Social Determinants of Health, Rio de Janeiro, Brazil, 21 October 2011. https://www.who.int/publications/i/item/rio-political-declaration-on-social-determinants-of-health
- 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.
- United Nations. Water Rights. Human Rights to Water and Sanitation. https://www.unwater.org/water-facts/human-rights-water-and-sanitation.
- WHO. Twenty-five Questions on Health and Human Rights at www.who.int/hhr/ information/25_questions_hhr.pdf.
- Willen, S. (2011). Do "illegal" im/migrants have a right to health? Engaging ethical theory as social practice at a Tel Aviv open clinic. *Medical Anthropology Quarterly* 25(3):303–330.
- Wilson, D. (2012). Who guards the guardians? Ian Kennedy, bioethics and the 'ideology of accountability'in British medicine. *Social History of Medicine*, *25*(1), 193-211

RECOMMENDED READINGS:

- Akashah, M., & Marks, S. P. (2006). Accountability for the health consequences of human rights violations: Methodological issues in determining compensation. *Health and human rights*, 256-279.
- Arendt, H. (1979). The decline of the nation state and the end of the rights of man. In *The Origins of Totalitarianism.* Pp. 267–302. San Diego, CA: Harvest Books
- Augustin, Y. S., Birch, M., & Bodini, C. (2011). Preventing torture: The role of physicians and their professional organisations: principles and practice: https://www.medact.org/2011/resources/preventing-torture-role-physicians-professional-organisations/
- Barlow, M. (2010). Point: Water is a fundamental right. *Globe and Mai*l, 5 August 2010: https://www.theglobeandmail.com/opinion/point-water-is-a-fundamental-right/article1375869/
- Cabal, L., & Todd-Gher, J. (2009). Reframing the Right to Health. Legal Advocacy to Advance Women's Reproductive Rights. *Realizing the right to health. Zurich: Rüffer and Rub*: https://portalredalas.espaciovirtual.org/repositorio/sites/default/files/2021-01/CABAL%2C%20Luisa.%20Reframing%20the%20Right%20to%20Health.pdf
- Cameron E. (2009). Criminalization of HIV transmission: poor public health policy. *HIV/AIDS policy & law review*, *14*(2), 1–75.
- Connors J (2009). The United Nations human rights treaty body system. United Nations Audiovisual Library of International Law. Video (31 min.) at untreaty.un.org/cod/avl/ ls/Connors_HR.htm.
- Correa, C. M. (2006). Implications of bilateral free trade agreements on access to medicines. *Bulletin of the World Health Organization*, *84*, 399-404.
- Declaration of Alma Ata: Microsoft Word - almaata_declaration_en.doc (who.int).
- 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. Siracusa-principles-ICCPR-legal-submission-1985-eng.pdf (icj2.wpenginepowered.com).
- Ferreira, L. (2002). Access to affordable HIV/AIDS drugs: The human rights obligations of multinational pharmaceutical corporations. *Fordham L. Rev.*, *71*, 1133.
- Forman, L. (2008). " Rights" and wrongs: what utility for the right to health in reforming trade rules on medicines? *Health & Hum. Rts.*, *10*, 37.
- General Comment 14 from the UN Economic and Social Council, at www1.umn.edu/ humanrts/gencomm/escgenc om14.htm.

- Gledhill, J. (2003). Rights and the Poor. In *Human Rights in Global Perspective* (pp. 219-238). Routledge.
- Grad, Frank P. (2002). The Preamble of the Constitution of the World Health Organization. *Bulletin of the World Health Organization*, 80 (12), 981 - 984. World Health Organization. https://apps.who.int/iris/handle/10665/268691.
- Gruskin, S., & Tarantola, D. (2017). Health and human rights. In *Health Rights* (pp. 127-181). Routledge.
- Hunt, P. H., & Khosla, R. (2008). Human Rights guidelines for pharmaceutical companies in relation to access to medicines: the sexual and reproductive health context. (Available online through OHCHR website).
- Jerome, J. (2015). A Right to Health: Medicine, Marginality, and Health Care Reform In Northeastern Brazil. Austin: University of Texas Press.
- International Covenant on Economic, Social and Cultural Rights: International Covenant on Economic, Social and Cultural Rights | OHCHR.
- International Covenant on Civil and Political Rights International Covenant on Civil and Political Rights | OHCHR.
- Mann, J. M., Gostin, L., Gruskin, S., Brennan, T., Lazzarini, Z., & Fineberg, H. V. (1994). Health and human rights. *Health & Hum. Rts.*, *1*, 6.
- Mchangama, J. (2010). Counterpoint: Water is the wrong right. *Globe and Mail,* 5 August 2010: https://www.theglobeandmail.com/opinion/counterpoint-water-is-the-wrong-right/article1375870/.
- Miller, A. M., & Roseman, M. J. (2011). Sexual and reproductive rights at the United Nations: frustration or fulfilment? *Reproductive health matters*, *19*(38), 102–118.
- Monitoring procedures for the right to health, at www.ohchr.org/EN/HRBodies/Pages/TreatyBodie s.aspx
- Office of the High Commissioner for Human Rights, Fact Sheet 31 on the Right to Health OHCHR | Fact Sheet No. 31: The Right to Health
- Potts H. (2009). Accountability and the Right to the highest attainable standard of health. University of Essex. Available at: http://repository.essex.ac.uk/9717/1/accountability-right-highest-attainable-standard-health.pdf
- 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. OHCHR | A/HRC/35/21 - Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.
- 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 UN report: discriminatory laws and practices and acts of violence against individuals based on their sexual orientation and gender identity | International Commission of Jurists (icj.org).
- Rubenstein, L. S. (2009). Physicians and the right to health. *Clapman A, Robinson M. Realizing the right to health. Zurich: Ruffer & Rub*, 381-92
- UN Department of Public Information, "General Assembly Adopts Resolution Recognizing Access toClean Water, Sanitation as Human Right, by Recorded Vote of 122 in Favour, None against, 41 Abstentions": https://press.un.org/en/2010/ga10967.doc.htm
- United Nations 1984. Convention Against Torture and Other Cruel Inhuman or Degrading Treatment of Punishment. In: Ethical Codes and Declarations Relevant to the Health Professions, 4th Edition. London: Amnesty International; 2000:92-103: https://redress.org/wp-content/uploads/2018/10/REDRESS-Guide-to-UNCAT-2018.pdf
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