

## Health and Human Rights

Professor Juliet S. Sorensen

Rubloff 8<sup>th</sup> Floor, Bluhm Legal Clinic, Northwestern Law School

312-503-1482

[j-sorensen@law.northwestern.edu](mailto:j-sorensen@law.northwestern.edu)

Office hours Monday 3:30-5:30

**Course description:** The course examines the intersection of health and international human rights. Readings and discussion will focus on whether there is a universal right to health; how to maximize access to health; the health implications of war crimes and atrocities; and the meaning of rights and access in resource-poor settings such as refugee camps and fragile states. Special attention will be paid to the role of corporate social responsibility and advanced economies in access to health.

Students will work in interdisciplinary groups on a clinic health and human rights initiative known as the Access to Health Project. Headed by Professor Sorensen of the Center for International Human Rights and faculty at the Institute for Global Health at Feinberg Medical School, with assistance from Schuette Clinical Fellow in Health and Human Rights Alexandra Tarzikhan, the Access to Health Project seeks to leverage academic partnerships to maximize access to health in communities in the developing world. **This year, the Access to Health Project will partner with multiple organizations including Elman Peace in Somalia, the United Mission for Relief and Development in both Gaza and Bangladesh, and Clinica de Familia de La Romana in the Dominican Republic.**

A community-based needs assessment reflecting human rights, public health and sustainability considerations will be conducted in collaboration with the partner organizations. The student teams will prepare an oral presentation and final written report detailing their findings and recommendations.

### Course Objectives

At the conclusion of the course, students will be able to identify key areas of health and human rights litigation around the world; evaluate corporate social responsibility programs related to health as a human right; and critically evaluate health interventions in a resource-poor setting from a rights perspective. They will also acquire skills in key informant interviews, focus group facilitation, and cross cultural competencies in a highly

challenging environment in which historical and political understanding is essential.

**Grading basis: Class participation 20%; oral presentation 20%; final papers (including peer evaluation\*) 60%.**

*\*Peer Evaluations:* Group research project peer evaluations consider each team members' quality of contribution, dependability, and demonstrated initiative. This information figures into individual grades.

Assignments are located on the class Canvas page.

**NOTE: This class will start on Monday, January 10, 2022 to accommodate the start of the law school spring semester and the public health winter quarter. A required make-up class for Martin Luther King Day will meet on January 21 from 6-9 pm. The last class will meet on Monday, March 7.**

### **Class 1: Is There a Right to Health?**

**Assignment:**

- [\*Minister of Health v. Treatment Action Campaign\*](#) (skim or skip pp. 19 – 25, 43 – 73);
- [Meier, “Right to Health Litigation and HIV/AIDS Policy”](#);
- [Flores v. Southern Peru Copper Corporation](#);
- [Elman Peace 2019 Annual Report](#)
- UMR 2020 Annual Report
- Clinica de Familia 2020 Annual Report

**Class Plan:**

Hours 1 and 2: The Right to Health

Hour 3: Introduction to Group Projects, Community Partners

**Class 2: Who is Entitled to Health? Note: this class will meet on Jan 21 from 6-9 pm.**

**Assignment:**

- Tami Tamashiro, [“Impact of Conflict on Children’s Health and Disability”](#);
- [In the Matter of Yated](#);
- [European Roma Rights Centre v. Bulgaria](#);

- Watch: Jenna Leahy on virtual teamwork best practices
- WHO, “[The Right to Health is a Fundamental Human Rights for All, including Refugees](#)”
- **Group 1:** George Dvaladze, “[Gaza: Health Situation in the Gaza Strip](#)”;
- **Group 2:** Stephanie Leventhal, “[A Gap Between Ideals and Reality: The Right to Health and the Inaccessibility of Healthcare for Haitian Migrant Workers in the Dominican Republic](#)”, 27 Emory Int'l L. Rev. 1249 (2013).
- **Group 3 and 4:** watch Ilwad Elman’s Sept. 2021 address to the [UN Security Council](#); remarks begin around 10:48.
- **Group 5:** [Protecting Autonomy of Rohingya Women in Sexual and Reproductive Health Interventions](#), Voices in Bioethics Vol. 7 (2021).

#### Class Plan:

Hour 1: Vulnerable Groups and the Entitlement to Health

Hour 2: Technical training: Bangladesh, Dominican Republic, Gaza, and Somalia

Hour 3: Group Project Work

Groups must be finalized by 5 p.m.

#### Class 3: The Right to Health and the Social Contract; Effecting Change in Health, Human Rights, and Development

#### Assignment:

- *Jacobson v. Massachusetts*;
- *Does v. Maine*
- Chowdhury, “[The Mantra of Delivery](#)”;
- Stern, “[The Simulation Change Model](#)”
- **Group 2:** OECD, *[Latin American Economic Outlook 2018: The Dominican Republic](#)*
- **Group 4:** “[Right to Health and Social Justice in Bangladesh](#)”

#### Class Plan:

Hours 1: The Right to Health and Individual Liberty

Hour 2: Partnership, Opportunity, Need, and Idealism without Illusions: The PONI Model and Organizational Change

Hour 3: Group Project Work

#### **Class 4: Health and Human Rights at Home: The Era of COVID-19**

##### **Assignment:**

- Institute of Medicine, [“U.S. Health in International Perspective: Shorter Lives, Poorer Health”](#) (Read Report Brief only);
- The New York Times, [“Is it better to Die in America or in England?”](#)
- Lippert v. Jeffreys: Health Care Monitor Fourth Report, pp. 1-17 (overview and executive summary only)

##### **Class Plan:**

Hour 1: Access to Health/Access to Justice

Hour 2: Guest Speaker Dr. Shannon Galvin

Hour 3: Group Project Work

#### **Class 5: Activism and Strategic Litigation in Furtherance of the Right to Health; Refugees and the Stateless**

##### **Assignment:**

- Rasanathan, [“Realizing Human Rights-Based Approaches for Action on the Social Determinants of Health”](#);
- [Soobramoney v. Minister of Health](#);
- [Samity v. State of West Bengal](#);
- *Nell Toussaint v. Canada* (2018)

##### **Class Plan:**

Hours 1 and 2: The Role of the Legal System in Access to Health

Hour 3: Group Project Work

## **Deliverable:** Literature Review and Bibliography

Each project team will submit a comprehensive literature review examining secondary information relevant to its topic. A literature review is a prose synthesis of past research into areas related to the topic, complete with citations. It includes a discussion of the contributions made by prior studies and a clear description of what is still unresolved. It should also discuss how the team's research will fit into the knowledge progression outlined in the review. This background research is pertinent for understanding prior research on the topic as well as properly preparing students for in-country work. Acceptable literature reviews can vary dramatically in size and scope. Top-notch literature reviews have generally examined 25-30 sources and been 8-15 double-spaced pages in length.

## **Class 6: Health, Human Rights, and Climate Change**

### **Assignment:**

- [Climate change and gender-based health disparities](#)
- [Report on the Impact of Climate Change and Migration \(Read the Introduction and Section II pp. 4 – 11\)](#)
- *Teitiota v. New Zealand*, UN Human Rights Committee Case (2020)
- [COP26: 5 Takeaways for Climate Migration and Displacement](#)
  
- **Group 3 and 4:** Eklow and Krampe, [“Climate-Related and Security Risks in Somalia”](#)
- **Group 5:** Henley-Shepard, [“Disasters and Displacement in Bangladesh: Re-conceptualizing Strategies of Risk Reduction and Resilience”](#)

### **Class Plan:**

Hours 1 & 2: Health, Human Rights, and Climate Change

Hour 3: Group Project Work

## **Class 7: Resources and Responsibilities**

### **Assignment:**

- Report of the General Assembly, [“The Human Rights Responsibilities of Pharmaceutical Companies in Relation to Access to Medicines”](#);

- Stanford Business School Case Study: “Intellectual Property in a Time of Pandemic: The COVID-19 Vaccines”
- [“Big Pharma Says It Offers Cheap Vaccines For Refugees, But It’s Not Completely True”](#)
- Craig Garthwaite, “If we want cures to diseases like COVID-19, we should stop vilifying drug companies”
- **Group 1:** Doctors Without Borders, [“In Gaza, Lingering Trauma is Worsening a Mental Health Crisis”](#), (2021)
- **Group 2:** Inter-American Commission on Human Rights, [“Report on the Situation of Human Rights in the Dominican Republic”](#), (2015) (pp. 78 – 84, 126 – 129)
- **Group 3 and 4:** UN Office for the Coordination of Humanitarian Affairs, [“Humanitarian Needs Overview: Somalia”](#), (2021) (pp. 5 – 13)
- **Group 5:** Riley, Akther, Noor, et al., [“Systematic human rights violations, traumatic events, daily stressors and mental health of Rohingya refugees in Bangladesh”](#), Conflict and Health 14, 60, (2020)

### Class Plan:

Hours 1 and 2: Corporate Social Responsibility and the Right to Health

Hour 3: Group Project Work

### Class 8: Global Health and Atrocities; Gender-Based Discrimination and the Right to Health

*Note: This class includes readings and discussion around topics related to gender-based violence. I encourage you to care for your safety and well-being.*

### Assignment:

- Physicians for Human Rights, [“Rape as a Weapon of War: Accountability for Sexual Violence in Conflict”](#);
- [Prosecutor v. Furundzija](#);
- The New York Times, [“Report Finds Gradual Fall in Female Genital Cutting in Africa”](#);
- Sorensen and Tarzikhan, The Conversation, [“El Salvador’s abortion ban jails women for miscarriages and stillbirths – now one woman’s family seeks international justice”](#)

- **Group 1:** Elizabeth Mahase, “[Gaza: Israeli airstrikes kill doctors and damage healthcare facilities](#)”, BMJ, (2021)
- **Group 2:** Gizelle Lugo, “[The Dominican Republic's epidemic of domestic violence](#)”, The Guardian, Nov 2012.
- **Group 3 and 4:** [Ewelina U. Ochab](#) “[Somalia: Sexual Violence on the Rise](#)”, Forbes, Oct. 2021
- **Group 5:** Verena Hölzl, “[Male rape survivors go uncounted in Rohingya camps](#)”, The New Humanitarian, Sept. 2019

**Class Plan:**

Hour 1 and 2: Sexual and Gender Based Violence– Rape, Domestic Violence, and Intersectionality

Hour 3: Group Project Work

**Class 9: When is the Law a Sufficient Intervention to Address Public Health?**

**Assignment:**

- The New York Times, “[Next to Tribe With Alcohol Ban, a Hub of Beer](#)”;
- The Omaha World Herald, “[Protesters on Horseback Halt Vote on Alcohol Sales on Pine Ridge Reservation](#)”
- [Injustice Watch](#), [The History and Harm Behind Illinois’s Criminal HIV Transmission Law](#) ([injusticewatch.org](http://injusticewatch.org))

**Class Plan:**

Hour 1: Knowing exposure of a partner, a fetus, the public

Hour 2: The criminalization of reproductive health; guest speaker Adam Rhodes

Hour 3: Group Project Work

**Class 10: Oral Presentations**

**Deliverable:** Each research team will make a presentation in class summarizing their research findings in furtherance of the clinical project. The purpose of these presentations is to allow students to benefit from the breadth of research and experience of their colleagues, furthering the learning component of the class experience in a wider variety of topic areas than covered in the in-class time. Each team will have 15 minutes to present and 5 minutes for audience questions and suggestions.

***Group project final papers are due on Tuesday, April 13.***