

Medical Education

# **Integrating Human Rights into Medical Education**

## **Educating medical students, residents, and practicing physicians about human rights can help them become more effective advocates for patients.**

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An understanding of human rights principles and the connection between health and human rights should begin in the first year of medical school. In this essay we examine the connections between health and human rights and the ways that faculty and students can introduce a human rights perspective into medical training.

### **Connecting Health and Human Rights**

We believe the right to health care is a human right, closely linked to the realization of many other human rights, from the rights to food, housing, and work to the right of access to information and freedom of association [1].

Physicians around the world are called upon to provide health care to persons who have suffered the physical and psychological consequences of torture, imprisonment without trial, and cruel and inhuman treatment. In the past 3 decades, a new field of medical specialization has evolved for the care of persons who have experienced trauma at the hands of governments or individuals. In the United States alone, there are more than 30 treatment centers dedicated to assisting the more than 500,000 torture survivors who live in this country [2].

Human rights abuses also challenge the ethical practice of medicine, from the Nazi doctors to the current situation in Guantanamo Bay. The United Nations and nongovernmental organizations (NGOs) have documented these challenges and provided guidance for physicians in the form of codes of conduct [3,4]. Yet most US medical schools ignore the important intellectual and practical aspects of the human rights movement in teaching medical students.

The consequences of such human rights abuses as direct violence and gender and racial discrimination are reflected in epidemiological data as well as in poorer health care services. On a systems level, moreover, structural violence (the application of force to maintain disparities between social classes) leads to abuses of human rights and a tremendous illness burden among the poor [5,6].

If properly trained, physicians can assist victims medically, legally, and socially by documenting and publicizing abuses. They can work with asylum seekers, testify in court, and provide patients with specialized services or connect them to agencies that are sensitive to the political, cultural, and social dimensions of their suffering. As professionals, physicians are influential political and social actors who can advocate for change in inequitable or harmful social policies and practices.

### **Human Rights in Medical Education**

A rights-based approach to medicine provides a moral framework that enables doctors, from family physicians to medical policy makers, to address injustice in health care locally, nationally, and globally [7]. International efforts to protect health by promoting human rights, assisting victims of abuse, and recognizing the many determinants of health have been evolving for more than half a century.

Human rights education in US medical schools can take place in many forums. Medical student groups that focus on human rights already exist in more than 60 medical schools, according to figures from Physicians for Human Rights [8]. These groups involve the student body in discussing and debating concepts of human rights, equity, and health as phenomena that go beyond biomedicine.

At the least, medical schools should organize periodic lectures and grand rounds for students, residents, faculty, and staff where physicians who are experts or activists in human rights speak about the ways they integrate a human rights viewpoint into their practice of medicine.

Ideally, faculty should begin to incorporate human rights principles into existing medical school classes. Some likely prospects are classes on international health, violence and trauma, health disparities, or patient-doctor relationships. Teaching methods and materials may include the use of case studies, experiential fellowships or internships, reference to international health and human rights norms, and health and human rights reports of the United Nations and well-known NGOs. The medical literature contains rich resources on health and human rights topics, and several NGOs maintain excellent bibliographies (see Suggested Readings, below).

At Harvard Medical School, we have offered a course entitled *Medicine, Human Rights, and the Physician* as an elective since 1996. It consists of a series of lectures by invited speakers, primarily physicians who live in or are visiting the Boston area, complemented by public health and legal experts. The speakers present both domestic and international situations where health and human rights concerns converge. Students also investigate and present human rights topics to the class. Last year, for example, students presented on the role of physicians in refugee camps, and health and human rights in El Salvador and Cambodia.

Continuing medical education courses in health and human rights, such as those offered by the Francois Xavier Bagnoud Center for Health and Human Rights at the Harvard School of Public Health and by Physicians for Human Rights, can reach residents and practicing physicians. These provide a good orientation to basic principles and current practices in the health and human rights field and introduce attendees to experts both nationally and internationally.

In addition, human rights principles can be mindfully incorporated into residency training programs, such as the Global Health Fellowship program in the Department of Medicine, recently developed at the Brigham and Women's Hospital in Boston [7].

*Authors' note: The views presented here are solely those of the authors and not that of Harvard Medical School.*

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## Suggested Readings

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