Human Rights and Public Health in the AIDS Pandemic


Overall rating: Excellent
Strengths: Full overview of the identification and resolution of conflicts between HIV/AIDS strategies and human rights
Weaknesses: Illustrations from policies later abandoned as flawed
Audience: Public health officers, virologists, HIV/AIDS practitioners, medical and health science investigators, health care educators and students

The authors tackle the challenge of presenting human rights law to public health practitioners, and public health issues to lawyers. The result is a comprehensive book that uses mutual concerns about AIDS to link human rights practitioners with public health practitioners by the discussion of case studies comprehensible to both.

First, the origins, structure and institutions of international human rights law and its dynamics are explained. Detailed attention is given to the human rights most relevant to an individual’s physical and mental well-being, and to the promotion of public health. The authors explain the interaction and interdependency of rights. They discuss the tension caused by claims of universality of human rights on one hand and respect for cultural relativity and diversity on the other.

The second chapter considers the harmonization of human rights with public health processes. International human rights law has evolved to control the abuse of governmental power over individuals by military, police and other public officers. Advancement of public health often depends, however, on the exercise of governmental authority by public officers. The intrusion into people’s lives by public health policies and activities risks human rights abuses. The authors describe how human rights and the goal of promoting public health should be complementary.

The next chapter describes a systematic approach to the exploration of the human rights dimensions of public health policies and practices. Human rights impact assessment involves finding relevant facts, determining whether intended public health purposes are compelling, evaluating how effectively proposed policies would achieve public health purposes, and determining whether policies are well targeted.

Chapter 4 addresses the integration of human rights values into public health policies and practices on AIDS. It examines AIDS policies in different countries by bringing together a wealth of information and experience on contaminated transfusible blood and blood products, health care professionals’ liability to infection, isolation, quarantine, suspected persons’ compulsory testing, and treatment. Violations of human rights may have been due to health protection panic and moral panic in face of the rising rates of HIV/AIDS infection. The authors show how public health practitioners who are aware of human rights values could present rational policy options to contain the risks posed by the spread of HIV/AIDS infection. The concluding chapter presents 3 case studies that raise critical questions in HIV policy and research; they involved the balancing of public health benefits against the cost to human rights.

This book admirably introduces the impact of human rights values on HIV/AIDS policy, and how human rights may have been used to an increasing extent for the training of physicians. This diversification of the medical education settings requires the further development of skilled clinicians into their new roles as teachers or preceptors. In addition, it is important that medical educators involved in developing, coordinating or supporting community-based training have an awareness...
of the unique issues relevant to this context to ensure success of educational activities. Community-Based Teaching is a useful resource for all individuals involved in the community-based medical education spectrum.

Readers are familiarized with 4 challenges: 1) to teach both the art and science of clinical practice, 2) to engage, to teach and to mentor students, 3) to recruit, train and maintain an excellent faculty of teachers, and 4) to develop a teaching methodology appropriate for the office and community setting. Issues arising out of these challenges are addressed: teaching in the office, the preceptor, the learner, curriculum development, program evaluation and program planning. Each topic is covered in detail. For example, in the chapter on the preceptor, discussions on identifying, selecting, rewarding and retaining preceptors are included. Integrated into these discussions is the importance of faculty development, which includes the design, timing, content and delivery of appropriate community preceptor activities. Perspectives from both the community physician teacher and university administrative personnel are included.

The material is presented in a consistent and connected manner. Despite the fact that most of the authors are US internal medicine specialists, the content is readily applicable to the Canadian community-based training context. Exceptions include the discussions of teaching within US physician payment systems and the listing of US resources. The chapter, which provides a series of models, would benefit from Canadian examples.

Appendices include a discussion of frequently asked questions and a series of templates that serve as a useful trigger for directors to develop necessary program documentation. The index is clearly organized, and the bibliography includes a pertinent review of the medical education literature, with ancillary resources from the field of adult education.

Overall, this publication is a useful resource for program directors or faculty developers involved in community-based training at either the undergraduate or postgraduate levels. It should be considered essential for coordinators or teachers within the discipline of internal medicine. Chapters that discuss office teaching and the responsibilities of learners and teachers would be of interest to all community preceptors.

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