Richard Claude* understands science and human rights. By building a bridge between the two, he contributes to both. His analysis is based on what he calls “the binary theory of science rights”, in which there is clear recognition of the scientist's claim to intellectual property and related rights, and the general public's claim to the benefits of science. “Balance, not dominance, is the key to this equilibrium.” He identifies four core elements of the right to enjoy the benefits of science: an environment of freedom, to assure that scientists may seek the truth without undue pressures from Government or others; protection from harmful applications of science; equality among beneficiaries, in the sense that everyone has the right to enjoy the benefits of scientific progress and its applications; and international cooperation to assure that these benefits are enjoyed in all countries, particularly developing countries.

Claude illuminates these principles by examining various violations, such as the Nazi doctors and the infamous Tuskegee study in the United States in which African-American men with syphilis were denied medication by Public Health Service researchers so that they could study the progress of the disease. The cases he uses help us to understand the principles, however, he does not explore the many ways in which the issues remain problematic. To take just one example, the United States Federal Government's budget for defense-related research and development (R&D) for fiscal year 2003 is about $58 billion, more than its R&D budget for all other sectors combined. With research budgets so sharply skewed, what is the meaning of the freedom and neutrality of science? And how does the massive budget for military research protect us from harmful applications of science?

Claude illustrates the challenge of assuring that people enjoy their right to the benefits of the advancement of science by raising the issue of securing access to lifesaving drugs for people living with HIV/AIDS. For example, HIV-positive mothers face a serious dilemma in deciding how they should feed their newborn infants. Breastfeeding carries the risk of transmitting the virus to the infant, but formula-feeding also has its risks, especially in resource-poor settings. According to major international agencies dealing with HIV/AIDS, the final decision is to be made by mothers on the basis of “informed choice”. Voluntary counseling and testing are to be made available to them, and HIV-positive mothers are to be informed of the relative risks of the differing feeding options in their particular setting. The difficulty is that the research required to assess these risks in a meaningful way has not been done. If women, especially in low-income countries, are expected to make informed choices, they have a right to the required information, and Governments have a correlative obligation to assure that the needed research is carried out.

To put this more broadly, research obligations of Government remains to be addressed. Of course, there is always a question of the objectivity of that research. In the United States, the diet recommended by government nutritionists emphasizes milk and other dairy products. Would this have happened if the agriculture sector there were not so influential?

Another theme that must be addressed is the use of science as a basis for coercion by government officials. For example, under what sorts of medical evidence should Governments be permitted to compel particular treatments, such as vaccines or quarantines? In a case in Oregon, a woman diagnosed as HIV-positive was prevented by the State from breastfeeding her infant. In the court case, the “evidence” on the risks was largely based on an as yet unpublished study done in Kenya! Governments may sensibly coerce people under their jurisdictions in some circumstances, such as the need to prevent epidemic diseases, but the standard of evidence required must be very high and the principles under which coercion is warranted need to be clearly laid out.

Claude acknowledges that the International Covenant on Economic, Social and Cultural Rights provides a sound foundation for recognizing health as a human right. However, there are points on which it needs to be extended. For example, article 7 says that “no one shall be subjected without his free consent to medical or scientific experimentation”. But it does not spell out the widely accepted principle that health care in general should be based on the informed consent of the patient. Human rights law needs to catch up and recognize that the requirement of informed consent is not limited to the context of medical experimentation.

The book illustrates the many ways in which abuses of science can contribute to the violation of human rights and, more positively, shows how science contributes to the advancement of human rights. However, there is still a need for a comprehensive overview. Perhaps it is time for the UN Committee on Economic, Social and Cultural Rights to consider the formulation of a “General Comment” on the roles of science, comparable to those it has already produced on other issues covered in the Covenant.

There is a pressing need for further guidance on the uses of science and its relationship to human rights. Many themes could have been covered more deeply in Claude’s book. However, it was not intended to exhaust the topic. We should recognize that it is a truly pioneering work that provides a solid launching platform for addressing these questions. Without Science in the Service of Human Rights, we might never have asked them.

*Science in the Service of Human Rights
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