PHL 453: Ethical Issues in Global Public Health
Spring 2008

Instructor:
Professor Judith Andre  
andre@msu.edu

Office hours by appointment. Email is always available, and it’s the best way to set up an appointment.

Text Books:

Required:

Recommended:
Rachels, James, Elements of Moral Philosophy. Any edition. Many are available cheaply on the web.

Course Description:

Most people in the world are poor, and most of those are sick: Illness and poverty cause and reinforce one another. This course looks at the moral and ethical issues that this suffering, and responses to it, present. Much of our discussion will focus on poorer countries, but the United States too will be our concern, both because of the significant poverty here, and because we are affected by what happens elsewhere – germs, for instance, do not respect political boundaries. While we will focus on health-related issues, these are embedded in larger issues: having enough to eat strengthens one’s immune system; safe drinking water prevents many diseases; education encourages health-promoting behaviors. The course will focus more on public health than on the health care of individuals, and on policy rather than clinical scenarios, but there is no bright line separating these areas.

We will draw upon research from several different disciplines besides philosophy; the course is intended for a wide audience.

Goals

The goals of the course are to help students become familiar with the ethical issues above, understand what current scholarship has to say about them, and learn how to analyze
them from a philosophical perspective. Students will also learn to work cooperatively with other students in order to consider and evaluate diverse perspectives.

Organization

After an introduction to the global burden of disease, the nature of public health, and some basics in ethical theory, the course will be organized around central ethical concepts:

1. Autonomy and utility (cardinal but competing values) Subtopics include
   - liberty of movement and the perceived need to quarantine those with infectious disease
   - freedom of speech and family planning funding
   - market freedoms; the tobacco and pharmaceutical industries; the exchange of organs
   - autonomy (the right to choose how one lives) and public health attempts to change behavior

2. Human rights. Our primary example will be research on human subjects, especially in poorer countries.

3. Justice. Examples include
   - when medication and other health resources are limited (as they always are), who should get them? Who should decide?
   - should rich countries hire health care professionals from poor ones?
   - should rich countries give medical care to migrants from poorer countries?

4. Eudaimonia, or what it means to live a full human life. Subtopics include
   - the relationship between human health and environmental protection
   - disabilities
   - virtue, or better, character
   - the role of democracy

Requirements: Thirty percent of your final grade is earned through preparing for and attending class; 40% from short papers; 30% from your final. Details follow.

Attendance 15%

The quality of class discussion depends on the community of inquiry we develop, the basic prerequisite for which is simply everyone's being there, prepared (hence theAngel submission requirement; see below). Once in class, listen, reflect, and speak up!

14 classes: 4.0
13  3.5
12  3.0
--etc.--
Weekly Angel submission 15%

Week 1: Introduce yourself
Due by Monday Jan 19. Who are you? What do you bring to the course to enrich it? This might be experience abroad, other courses you've taken, medical knowledge, web skills, acquaintance with poverty, whatever.

Weeks 2-15 “Question paragraph.” (3-5 sentences)
Due each Monday, 7:00 am. From the week's assigned reading. What point(s) would you like class discussion to address, and why? Something that needs clarification, or that seems to be mistaken, or is especially important? Why?

Weekly Angel submissions will be graded “1”, “2”, or “3”. The ordinary grade will be “2”. Paragraphs showing close reading of several assigned texts, or in other ways unusually good, will earn a “3.” “1” is reserved for obviously perfunctory efforts.

A total of
28 points: 4.0
26 points: 3.5
24 points: 3.0
22 points: 2.5
etc --

Three short papers (chosen from 5 or 6 possibilities offered) 40%
500 words. Each question will be assigned a week before it is due. Typically you will be asked to work with a concept: clarify and apply it. If you do more than three papers, the lowest grade will be dropped.

Rough draft of final essay, including essay exchange in class April 28. 10%
The rough draft will be graded, but graded as a rough draft. (For instance, a 3.5 on the rough draft would be equivalent to about a 2.0 if it were handed in as a final paper.) If you do not participate in the essay exchange, without a serious and documented excuse, you will receive no credit.

Revised final essay 20%
Approximately 3000 words. A position paper, in which you take a position on a substantive question, support that position with reasons, consider objections, and respond to them.
WEEK ONE: INTRODUCTION
Global health (some facts); public health (the concept); moral reasoning (a skill)

In Class Video:
"Rx for Survival," Program 5: “Back to Basics”

Recommended viewing:
http://video.google.com/videoplay?docid=423753244338529080

WEEK TWO: MORAL REASONING; UTILITARIANISM IN PARTICULAR

Required Reading
Kidder, Part I, “Dokte Paul”


Recommended
Rachels, “The Utilitarian Approach,” (chapter 6 in the fifth edition)
“Utilitarianism” in the encyclopedias and glossaries listed in Angel under the Resources tab.

WEEK THREE: ETHICS IN PUBLIC HEALTH

Required


Childress, J., et al. "Public Health Ethics: Mapping the Terrain." Journal of Law, Medicine, and Ethics. 30:2 (Summer 2002), 170-8

"Deontological Ethics" in Wikipedia, especially the introduction and subsections 1.2 (Kant) and 1.3 (Ross)

**Recommended**


Koggel, pp. 4-14.

*These are the words of Immanuel Kant, one of the most influential ethical theorist of the past 50 years. It's dense, challenging reading, but I do hope you give it a try. You might prefer to read some of the secondary literature first, for instance the chapters from Rachels given just above, or treatment in Wikipedia or Routledge.*


**WEEK FOUR: RELATIVISM & CULTURAL DIFFERENCE (gender; democracy)**

**Required**


Ntarangwi, Mwenda "I Have Changed my mind now": U.S. Students' Responses to Female Genital Cutting in Africa." *Africa Today* Vol 53, Iss 4, pp. 86 ff (PDF)

*This is a teacher's point of view; she is an anthropologist. What are her own normative commitments, if any? What does she mean by "anthropological analyses"?*


*This was written more than fifty years ago. I asked an anthropology professor about its validity today; she responded "the Linton article's old, but it is still cited as an early example of ethical work. People have moved on from here, noting that things are more complex, etc., but I don't think that people have actually said that he's wrong. So, it can be seen as sort of a baseline."*
Recommended


In Koggel (required text for course) pp. 23-49

Egbeke Aja, "Changing Moral Values in Africa: An Essay in Ethical Relativism"
V.F. Cordova, "The We and the I"
This is a thoughtful article, not completely clear, but quite suggestive.

WEEK FIVE: LIBERTY AND THE CONTROL OF DISEASE
(Freedom of speech in federally funded programs; mandatory vaccination; quarantine)

Required Reading:

The first five articles are quite short. They concern quarantine and other coercive or restrictive measures for controlling infectious disease. The diseases include TB and SARS. (Sudden Acute Respiratory Syndrome, which struck in the spring of 2003. Toronto was hit hard.)

The article by Dare is the longest and the one to which we will pay close textual attention. Please bring it to class in hard copy.


Gostin, Lawrence O; Ronald Bayer, and Amy L. Fairchild, "Ethical and Legal Challenges Posed by Severe Acute Respiratory Syndrome, JAMA Dec 24/31, 2003, pp. 3229-3237.


An old article, but valuable for the way to describes possible means for controlling disease spread. Our legal system, with its network of federal and state powers, is complex.

Recommended


A case history of the way in which public health power can gradually become oppressive.


The US needs to get in the habit of looking at what Canada and Europe do. Here's a start.


Another country, another set of choices.

WEEK SIX: LIBERTY: CAPITALISM AND CHOICE (corporations; the organ trade)

Our topic for the next few weeks is the moral dimensions of capitalism. We begin with a particular question -- should organs be for sale? We will have a chance to see how different disciplines and professions approach this question. Our guest speaker, Prof. Ann Mongoven, has her degree in Religious Studies, and so will focus on myth, symbol, and ritual; she will also draw on the year she spent in Japan, and the cultural differences she found there.

After the break, we will take a step backward and look at the moral foundations of capitalism, and the moral obligations of businesses. That theme will continue next week.

Required Reading

Velasquez, Manuel G. "The Business System" from Business Ethics: Concepts and Cases, 2nd edition. This is long, but readable; it's from a textbook, and so aimed at readers like you. Note that very cheap copies of this classic textbook are available online. The cheap ones are earlier editions, but the overview of business economics in the chapters we will read have not changed much.


\textit{Articles in medical journals are very condensed.}


\textit{She's a philosopher, and aims at a clear, rational argument, made particularly concise for this venue.}

\textbf{Recommended}


\textit{Detailed, critical (and therefore useful) book review. The book he discusses is summarized below by Kaserman.}


\textit{Journalism, at its best balanced and informative}

Kaserman, David L., and A. H. Barnett, "How to Save Thousands of Lives Each Year."

\textit{Summary of the book critized by Eric Cohen, above. As economists they aim for clear logic, and clearly defined terms, explicit presuppositions.}


\textit{We will watch part of the film based on this book next week.}


\textit{An "op-ed" piece (opinion column or editorial), aimed at provocation and persuasion, through argument and anecdote. Not aimed at balance, but often thought-provoking.}

\textbf{WEEK SEVEN: CORPORATIONS (pharmaceutical companies in particular)}

\textit{This week we will be considering the moral nature of corporations, and one business in particular, pharmaceuticals. We will see a film made from the book, The Corporation. Summaries are included in the readings below.}

\textit{A second Velasquez reading will be our theoretical background. We use the resources of law (including tax law) to encourage corporations. Why? What good do we expect them to accomplish for society? American corporate law requires corporations to seek FIRST the welfare of their stockholders - to maximize their returns. So, do criticisms of pharmaceutical companies (and next week, tobacco companies) have any moral ground to stand on? Don't they have to obey the law?}
Readings about the pharmaceutical industry focus on TRIPs, a treaty which makes it difficult for countries to make generic versions of patented drugs. (Generics are a lot cheaper, right?) As you read this, notice in particular what social good patent laws are intended to produce.

**Required**


Wikipedia: "Agreement on Trade-Related Aspects of Intellectual Property Rights" (all)

Oxfam, "Patents versus Patients: Five Years After the Doha Declaration" PDF online at http://www.oxfam.org.uk/resources/policy/health/bp95_patents.html

*This is long, but written so that it can be usefully skimmed if that is necessary. Notice especially the summary on pp. 2-4; the clear section headlines (each begins on a new page); and the frequent boxes, giving examples.*

Joel Bakan, "Business as Usual," from *The Corporation*. PDF

**Recommended**


A good review will summarize a book in some detail, and then evaluate it fairly, backing up its evaluation with reasons. Both Scott and Devlin (below) do that. Note that they are writing for different audiences.


Medicine for Malaria http://www.mmv.org/rubrique.php3?id_rubrique=15

*Comment: a non-profit trying to sidestep TRIPS*

One World Health: A non-profit pharmaceutical company http://www.oneworldhealth.org/

*Another non-profit trying to sidestep TRIPS*

WEEK EIGHT: CORPORATIONS, TOBACCO COMPANIES IN PARTICULAR

This week we will look at the tobacco industry, which raises familiar issues: first, the tension within public health between individual liberty and the public good; second, issues of business ethics.

But we will begin with the final "chapter" of the film "The Corporation," and a look back at the Velasquez readings. We'll do an exercise like the one we did in class last week: a list of terms, teams of two or three students, one team to each term. The terms are listed below. Maybe we'll have a contest; maybe there'll be more jelly doughnuts?!

And then we will focus on the argumentation in the Goodin and Sullum articles. Please bring hard copy to class.

Required research

Learn the meaning of the following terms. Dig back into the Velasquez and other earlier readings, BUT ALSO consult the various encyclopedias and glossaries under the "Resources" tab, concerning both philosophy and economics. And consider how they might be related to global public health.

- externalities
- free riding
- public goods
- commons
- liberal (watch out!)

AND be prepared to summarize the following activities:
- tobacco company strategies
- public health counter-strategies

Required readings

The first four of the following readings describe the strategies used by tobacco companies, abroad (1-3) and at home (4). The fifth (a set of PowerPoint presentations) describes the efforts of public health to combat tobacco use. The last two are philosophical arguments about the ethics of the public health strategies.


Warner, Kenneth "In The Land Of The Smoke Drinkers" *Health Affairs*; Jan/Feb 2008; 27, 1; pg. 296. Review of Allan Brandt's *The Cigarette Century*. Online

Global Tobacco Control, "Taxation," "Overall," and "Advertising." These are training modules from the Johns Hopkins School of Public Health, the oldest and one of the most prestigious such schools in the country. The presentation is in PowerPoint format. PDFs.

*Robert E. Goodin, *No Smoking: The Ethical Issues* 1989 excerpts PDF*

*Jacob Sullum, *For Your Own Good: The Anti-Smoking Crusade and the Tyranny of Public Health* 1998 excerpts PDF*

**Recommended readings and film**

"The Insider;" a film starring Russell Crowe.

*True story of Jeffrey Wigand, tobacco company scientist and whistle-blower.*


http://www.economist.com/world/international/displayStory.cfm?story_id=12678335&source=htextfeature

*(Tobacco firms want the right to participate in global efforts to limit the lethal consequences of nicotine addiction--but 160 governments say no)*

WEEK NINE: RESEARCH ON HUMAN SUBJECTS

Our topic this week is research on human subjects, particularly in developing countries, but also the increasing set of "career guinea pigs" in the United States.

Readings 1 and 2 are the basics of research ethics, as we understand them today. Reading 3 is the federal regulation that makes those basics concrete. Readings 4 and 5 are about paid research participants in the United States. Reading 6 gives a fine-tuned analysis of coercion, a concept we've been using loosely, but that will still elude simple definition.

The recommended readings include the concept of human rights, basic to the protection of research subjects, but also to many of our other topics. Rights in this sense (as opposed, say, to constitutional rights) are moral claims based on one's nature as a human being, claims that by definition outweigh utility. For that reason, utilitarians cannot directly endorse them.

We also read more about Paul Farmer, and the strategies he uses to get the best care for the poor. Ideally we'll finally really TALK about him as well.

Required


Focus especially on "Ethical Requirements for International Public Health Research," pp. 93-94 and on the Case Study, pp. 97ff.

This module was developed by the Association of Schools of Public Health. You might browse the site to see what other ethical issues they believe should be addressed.

Emanuel, Wendler, and Grady, "What Makes Clinical Research Ethical"


This is the basic regulatory law for all research on human subjects funded by the US government. It's meant to be referred to rather than simply read. Read enough to get the flavor, but focus on these two sections:

§46.111 Criteria for IRB approval of research.
§46.116 General requirements for informed consent.


"Coercion," in the Routledge Encyclopedia of Philosophy

Mountains Beyond Mountains, Part III, "Medicos Aventureros"

**Recommended**

"Human Rights," in the Routledge Encyclopedia of Philosophy

"Rights," in the Stanford Encyclopedia of Philosophy (open access)
http://plato.stanford.edu/

Wikipedia, or other source, for basic information on the Nazi Doctors and on the Tuskegee Syphilis Study. (The Center owns a video, "Deadly Deception," first aired on Frontline, about the Tuskegee Syphilis Study.)

**WEEK TEN  JUSTICE AT HOME (Theory; America’s poor; migrants)**

This week we begin looking at questions of distributive justice: put crudely, if there is not enough of something - and there rarely is --how do we decide who gets what?

(As the country once again considers universal health care/insurance, keep a basic fact in mind: no country, not even the U.S., can afford to provide every beneficial medical treatment to everyone who needs it. So we will have to make hard choices. We now let pocketbooks, geography, and luck do the allocation.)

*Reading 1 is theory; readings 2, 3, and 4 deal with the practical question of fairness in access to health care. These are essentially individualistic approaches, treating the common good as the result of adding up individual situations. Readings 5 and 6 are broader, and consider public (intrinsically shared) goods, more pertinent to public health. Finally, reading 7 addresses a practical question: should pandemic flu strike, there would not be enough vaccine. Who should get it? Please bring reading 7 to class.*

**Required**

Rawls, one page summary of Theory of Justice PDF

Also see treatments in the Stanford Encyclopedia (online) and the Routledge (through library's e-resources)

John Rawls' Theory of Justice was the most influential work of social philosophy in the twentieth century. Almost all discussions of justice now stem from it (sometimes in disagreement, of course).
Norman Daniels, "Equal Opportunity and Health Care," PDF
   Daniels follows Rawls, and considers the implications of Theory of Justice in health care.

   Engelhardt is the most prominent libertarian writing in health care ethics. He opposes a Rawlsian framework.

   From one of the two most important commissions in the history of bioethics, whose full title was "The President's Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research." The report was released a quarter century ago. Since the time of that report the proportion of Americans with any kind of health insurance, public or private, has significantly decreased.

   You can learn more about it in Wikipedia; or you might find it interesting to skim more of the report itself, online at http://www.bioethics.gov/reports/past_commissions/securing_access.pdf

   Beauchamp writes from a specifically public health perspective, and explicitly rejects market approaches to providing health care or insurance.

   Much more than health care goes into one's state of health. The field of public health is by definition interested in the broader social determinants of health.

   If pandemic flu like that of 1918 should strike again, vaccine will at first be in short supply. This Minnesota workgroup drafted a plan, making conceptions of justice concrete.

WEEK ELEVEN: JUSTICE ACROSS BORDERS (Theory; hiring health care professionals from poor countries; allocating scarce medications and equipment)

   There are many readings, most of them short. Put your most serious energy into the first set, which is theoretical. Please bring the Dwyer article to class.
On justice

John Rawls's Law of Peoples as summarized in Wikipedia


"Global Justice, recent work on" in the *Routledge Encyclopedia*, parts 2 (consequentialist account) and 3 (contractarian account). The other sections are also worth reading.

On treating migrants and refugees


On hiring health care professionals from abroad


McIntosh, Tom, Renee Torgerson, and Nathan Klassen, "The Ethical Recruitment of Internationally Educated Health Professionals: Lessons from Abroad and Options for Canada." *Canadian Policy Research Institute*, January 2007 (Google the title)

On helping the sick poor in other countries


Recommended


*Farmer's position, succinctly put.*

Seminal discussion of global poverty and defence of strong duties to aid the needy.


Further thoughts about cost-benefit analysis.


WEEK TWELVE: EUDAIMONIA: JUSTICE AND FULLNESS OF LIFE
(Aristotle; neglected diseases, which damage but do not kill)

Justice, says Aristotle, means treating equals equally. But no two people are identical. So what kind of equality, and what kind of differences, matter? See the PowerPoint for last week, for our discussion of how different thinkers have answered that question. Rawls says we have an equal right to the basic primary goods (money, opportunity, and whatever in the culture is necessary for self-respect).

This week we look at two contemporary philosophers (Nussbaum and Sen) who enrich and expand Rawls. They begin with this insight: each person has different needs; so an equal amount of, say, money is not of equal use to everyone. Suppose, for example, that two single parents get the same salary. The money will not go as far for the one with a child needing hours of home therapy every day. So equality of resources can't be exactly what justice is about.

Amartya Sen and Martha Nussbaum suggest that justice is about the chance to live a full human life: to use one's mind, to work productively, to have children, to love others, and so on. Everyone deserves a chance to do these things if they so choose. What justice demands is an equal chance at these things (in their language, "equal capability sets").

Their work draws from Aristotle's concept of eudaimonia: the exercise of one's capacities in a life that affords them scope.

Our two practical topics will be gender (women are often kept from developing their full capacities) and neglected diseases (many of whom cripple and disfigure rather than kill).

Required reading:

"Eudaimonia," in the Routledge online Encyclopedia of Philosophy
(Something basic about Sen. I've been unable to find anything brief and readable for you; can
you google, or otherwise search, and find something for the rest of us?)

Nussbaum, Martha, *Women & Human Development* pp. 70-82. (We did the first part of this
chapter, "In Defense of Universal Values," in Week 4). PDF

30, No. 1, pp. 137-154. PDF

*New York Times* series on neglected diseases. (Type titles into the search bar at nytimes.com)

"Dose of Tenacity Wears Down a Horrific Disease," (guinea worm), 3/26/06 By Donald
G. McNeil

"Preventable Disease Blinds Poor in Third World," (trachoma) 3/31/06 By Celia Dugger

"Beyond Swollen Limbs, a Disease's Hidden Agony," (lymphatic filariasis) 4/9/06 By
Donald G. McNeil

"Mothers of Nepal Vanquish a Killer of Children," (measles) 4/30/06 By Celia Dugger

Craft, Naomi, "Women's Health: Life Span: Conception to Adolescence" BMJ (British
Medical Journal) Vol 315 (Nov 8, 1997) 1227-1230

google the article title, within quotation marks

*Recommended*


PDF available on the web: just google it. But just in case, here it is:
%20of%20What%27.pdf

Drugs for Neglected Diseases Initiative: http://www.dndi.org/
A non-profit organization which has just announced a partnership with GlaxoSmithKline
to develop drugs for neglected diseases.

Read about the Aravind Eye Hospital in Madurai, India.
http://www.schwabfound.org/schwabentrepreneurs.htm?schwabid=2326

Think about: the role of the private sector in poor countries; two-tier services; Dr. V's
bullying his family into commitment; his wanting to imitate the McDonald's model, but
not for profit.
Read (parts of) Book 1 of Aristotle's *Nicomachean Ethics*.  
*It's very short, but dense. What we have of Aristotle's is student notes, and you know how condense those would be. Be sure you've checked out "eudaimonia" in the Routledge Encyclopedia first, so that you're not misled by the word "happiness."*

http://www.constitution.org/ari/ethic_00.htm

*Reduction in female mortality has been counterbalanced by sex selective abortions.*

**WEEK THIRTEEN: DEMOCRACY AND FULLNESS OF LIFE**  
*Forms of government and their impact on health*

"*Man is by nature a political animal,*" wrote Aristotle. Today that sounds cynical; we think of politics as, at best, manipulative jockeying for power. But Aristotle expressed a deeper truth: we are social. We live well only with others, and any complex society requires a government. To quote Aristotle again, early in the *Nicomachean Ethics* he writes that "*even if the end is the same for a single man and for a state, that of the state seems . . . something greater and more complete. . . . Though it is worth while to attain the end merely for one man, it is finer and more godlike to attain it for a nation or for city-states."* Originally the works we now separate as the *Ethics* and the *Politics* were a single work.

Democracy is arguably a good in itself, a proper expression of our nature as rational and self-governing. Often it also protects and promotes the capabilities that Sen and Nussbaum argue make a full life, eudaimonia, possible. But not inevitably; the details matter - as always. Our readings this week talk about the kinds of democracy that contribute to health.

**Required**


*This is a highly technical article, so we will focus almost solely on the "Conceptual Framework" section, pp. 770-773.*

Kidder, *Mountains Beyond Mountains*, Part IV: "A Light Month for Travel"

Farmer travels to Cuba and Russia, neither one a real democracy. One deals well, one terribly, with infectious disease.


This essay will repay close reading. It might help to start with the abstract, then note the section headings and read the "Conclusion (p. 20)". You can ignore the charts.


These two leaders of public health ethics in the United States apply the capabilities approach to public health concerns.

"Unnatural Causes: Is Inequality Making Us Sick?"

Read the transcripts of Episodes 1, 6, and 7 of this video. I hope to have the episodes themselves available later this week. Here's the URL; a button for transcripts is in the left hand column of the screen.

http://www.unnaturalcauses.org/episode_descriptions.php?page=1

**Recommended**


Putnam argues that the social cohesiveness of 100 years ago is much lessened in today's America, and he worries about its effect on the common good. He later (2000) published a book of the same title, developing these ideas.

Li, Chenyang, "Confucian Value and Democratic Value," in Koggel, pp. 184ff.

Sen, Amartya, "Democracy and Its Global Roots: Why Democratization is Not the Same as Westernization," in Koggel, pp. 208ff.

for those who worry that democracy is a Western value and should not be "imposed" elsewhere


An anthropologist looks at Paul Farmer's arguments.
WEEK FOURTEEN: ENVIRONMENTAL AND PUBLIC HEALTH ETHICS
(The DDT controversy; zoonotic disease)

Rudolf Virchow, the nineteenth century pioneer of public health: "politics is public health in the most profound sense." Many today say the same of environmental causes. And just as democracy is both instrumental in bringing about eudaimonia, and intrinsically part of eudaimonia, so is a healthy environment. (Remember Martha Nussbaum's claim that relating to the non-human world is one of the basic human functionings?) But just as in the case of politics, connections between the environment and health are complex; sometimes the good of one seems to conflict with the good of the other.

"Virtue" is a technical word in philosophy, deriving from a Greek word for strength. That word is sometimes translated as "character." An excellent character both brings about eudaimonia (courage, patience, compassion have good results) and is part of it (patient, compassionate people have inner peace). Two old sayings capture this: "Virtue is its own reward" and one good example is the fact that "a coward dies a thousand deaths, a brave man only once."

Our practical issues this week include DDT and other pesticides; the environmental impact of health care itself; and whether Paul Farmer's almost superhuman dedication should be considered virtuous.

Required readings

"Virtue" in Wikipedia,

Kidder, Mountains Beyond Mountains, Part V: "O for the P"

Farmer is a great man, but fully human and therefore flawed. Do you think some of his characteristics count as virtues? If so, which, and why?


Karaim, Reed, "Not so Fast with the DDT," American Scholar Vol. 74, No 3 (Summer 2005)


**Recommended**

*How Costa Rica decided that economic growth and environmental protection feed one another.*

Carrick, "The Hidden Costs of Environmentally Responsible Health Care," Perspectives in Biology and Medicine Vol. 48, No 3 (Summer 2005).  PDF
*Summary and critical review of Pierce and Jameton's Ethics of Environmentally Responsible Health Care., Oxford 2004.  (I highly recommend the book.)*

*Classic article. Wolf argues that a perfectly moral person would be quite unattractive, at least as Kant and Mill define moral ideals.*

*Connects to our discussion last week of the relationship between forms of governance and health. Agrawal looks at the way various political and economic arrangements affect the environment.*


**WEEK FIFTEEN: ROUGH DRAFT OF FINAL ESSAY DUE IN CLASS**

Class time will be spent reading one another's drafts and giving constructive criticism.