

Towards an interspecies health policy : great apes and the right to health $\mbox{\sc Nieuwland},\mbox{\sc J}.$

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Introduction

Recent perspectives on public health emphasize the relevance of ecological processes. Amongst those perspectives we find the idea of One Health (OH): an initiative to promote collaboration across disciplinary boundaries which is based on the recognition of the numerous interconnections in terms of health between humans, non-human animals (henceforth referred to as animals) and the environment, in order to improve the health of all involved

By bringing together the health of humans and animals against the background of a shared environment, incoming philosophical questions arise. What does health mean in such a multispecies perspective? How does this affect the scope of public health? Moreover, central to this thesis: how should we include the interests of non-humans?

Before paying attention to such questions, we need to take a step back and reflect on the nature of OH itself as an ecological perspective on health policy. Doing so is especially relevant when considering its various interpretations. Certain scholars primarily understand it to be a framework with which to address the threat of zoonoses (infectious diseases transmitted by pathogens from animals to humans either directly or through food, water and the environment (Taylor et al. 2001)) and antimicrobial resistance, while other scholars highlight the potentially vast scope of the OH concept, making it "challenging to think of examples or issues that might not be classified as One Health challenges" (Lapinski et al. 2015: 53). How do we navigate between holistic and narrower interpretations, between the trivial affirmation that everything is connected and a strong but narrow emphasis on zoonotic disease and antimicrobial resistance? This question will be central to chapter 1.

Values shape the scope of ecological perspectives on health. One's values and moral outlook structure the way in which the OH concept is understood and operationalized. Thus, in order to address the question of scope, we apparently need to engage with the values at play. Although moral values are paramount in shaping OH policy, it is possible to discern four largely descriptive features which could serve as a common ground for a wide range of perspectives. Once we have established the validity of these features as an objective basis, values can subsequently shape health policy informed by this knowledge. It requires one to

step back and explicate the underlying values which have structured one's understanding of OH.

What do these features involve? Firstly, OH highlights interspecific threats to health, including but not limited to zoonotic diseases only. Secondly, interspecies interaction may result in health benefits. Thirdly, understanding health from an interspecific point of view calls for the awareness of similarities and differences between species with respect to utilizing knowledge across species boundaries. Fourthly, health is inescapably placed in an ecological perspective. Whereas these features are not completely value neutral, they provide ample opportunity for establishing a broad agreement between various perspectives and a meaningful specification of the OH concept.

With this specified description of OH in place, I argue that compelling reasons exist to consider a human rights perspective. A very simple reason for doing so: human rights are not a prominent part of discussions on OH. This absence is alarming considering the fact that human rights reflect the basic entitlement of justice; indeed, a strong reason for taking these rights seriously. Another pragmatic reason entails that different perspectives endorse human rights for various reasons, creating a kind of overlapping consensus about their value (Nussbaum 2006). In that sense, indeed somewhat similar to the way in which the four features have the potential to garner broad support, human rights provide a relatively uncontroversial normative reference point for ecological and interspecies health policy, hereby causing the premises of the present inquiry to appeal to the basic moral intuitions of many. Moreover, human rights, in particular the human right to health, help to focus questions pertaining to distributive justice observed across political- and species boundaries. Although debates on global health justice involve far more than the human right to health, it singles out a basic entitlement held by individuals of high relevance to forward any implementation as to health policy, allowing it to serve as an appropriate starting point for introducing issues regarding global health justice to the OH initiative.

Turning it around, we can ask in which way the OH concept informs questions of global health justice. Ecological and interspecies determinants of health irrevocably traverse the boundaries of nation states, thus highlighting the interdependence of humans around the world. Pathogens such as highly pathogenic avian influenza virus and Ebola virus can travel the Earth rapidly due to the infrastructure of a globalized economy. The effects of ecosystem

collapse are not only felt far and wide but also accompanied by an unsettling disregard for the political ideas of nation states and their boundaries. Therefore, an understanding of public health which omits ecological and interspecies relations proves radically incomplete in both descriptive and moral terms. The health of individual humans is inescapably dependent on ecosystem services as well as vulnerable to interspecies threats such as emerging infectious diseases.

The above assessments raise questions about the content of human rights, in particular to the right to health. Do we have a right to access to healthcare? And, if so, how does this right influence the equitable distribution of resources internationally? What can be done about the significant differences in vulnerability to emerging infectious disease across the globe or the way numerous pharmaceutical developments are skewed towards the interests of people living in developed countries? In addition, does a right to health extend beyond the medical realm? It is argued that humans should not only have access to healthcare but also see to it that it is safeguarded by policies aimed at the social determinants of health (Daniels 2007; Venkatapuram 2013). Perhaps we should proceed even further by including the ecological and interspecies determinants of health as disclosed by means of a OH perspective, too.

Firstly, however, we need to take a closer look at how human rights as such are structured. To what extent do such rights exist, and on which grounds are they based? These issues require an additional explanation and justification of the concept of human rights as moral rights. What underpins such universal claims of justice? Certain scholars advocate a will-based theory of moral rights whereas others introduce an interest-based theory. Rather than expressing a mere theoretical interest, preferring one theory above the other has significant practical implications. Certain rights resulting from an interest-based theory cannot be warranted by means of a will-based theory. This conclusion proves to be important in terms of the implications as well as of the justification of opting for an interest-based theory of rights in order to understand human rights (see chapter 3).

If certain significant interests generate moral rights, pressure is placed on other criteria e.g., species-membership. What restricts the scope of human rights pertaining to humans only if interests generate rights? Scrutiny of the concept of human rights uncovers the need to explicate the nature of moral status as well as interests. Do animals indeed have moral status, and if they do, what is in their interests? Many animal ethicists regard sentience as an

unequivocal criterion for upholding moral status (as a sufficient, and for some even as a necessary condition). Implying subjectivity, sentience concerns the ability to feel (at the most basic level to experience pain and pleasure). Even if this viewpoint is correct, we are not necessarily presented with an answer to what is in the interest of sentient animals. Sentience does already indicate certain elements which oppose the interest of individuals, for example, the interest in not being made to suffer. Nevertheless, this argument does not deliver a full account of all relevant interests. To do so, we need to discuss well-being and its various interpretations.

A subjectivist account, rendering individuals the authorities of well-being and their interests, competes with its objectivist counterpart, which aims to provide a conception of the good life for some part irrespective of individual experience. Both perspectives select an element of value. The subjectivist will argue: who are we to evaluate the well-being of someone else according to objective standards, which they might even reject? The objectivist in turn objects: on occasion, perhaps often, individuals are obviously misguided in their conceptions of the good life, rendering them ill-suited to be the authority regarding their own well-being. Perhaps we should consider a middle ground. Suppose well-being comprises being justifiably satisfied (Sumner 1996; Haynes 2008). Individuals are now the authority of well-being (a subjectivist account) while simultaneously addressing objectivist concerns by way of requiring that the individual is able to reflect on his/her own life in order to ensure that he/she is justifiably satisfied. Even if we rest assured that autonomous individuals are fully capable of judging their happiness and that this stance provides us with a reasonable view on well-being, to what extent are animals able to do so? To address this question, chapter 2 concludes with a discussion of the relevance of agency in relation to well-being.

Chapter 3 will bring all this to bear on the question of moral rights, hereby fleshing out an account of animal rights in general and the rights of great apes in particular. The latter provide an interesting case given their cognitive capacities. Are they autonomous in the same or similar ways as adult human individuals are? It has been argued that great apes are also entitled to freedom, which would provide a ground for liberating individual great apes from human dominion. The attribution of autonomy, which underlies a specific claim to freedom, has however been challenged, too. When faltering between these two opinions, some favor a precautionary approach. In this view, while the jury is still out, we should recognize the claim to freedom of individual great apes as a precautionary measure (Cochrane 2009). The three

perspectives all start off from autonomy. Does it have to be that way? What if we apply the understanding of well-being in terms of being justifiably satisfied? Does this not lead to latitude, perhaps even rendering autonomy more or less irrelevant? This outcome is all the more relevant to those clinging to a precautionary approach, not the most solid ground.

In chapter 4, the right to health takes center stage. Which kind of interests give rise to a right to health? Are there any reasons to acknowledge such a right for humans only? Health is generally valued for the absence of pathology and the presence of opportunity, interests that great apes largely share with humans. Are there nonetheless perhaps other reasons that restrict the right to health to humans only? Are great apes entitled to more than negative rights only i.e., not to be killed, tortured or kept captive, the three rights the Great Ape Project (1993) has advocated for ever since its conception? What underpins any positive entitlements? Should great apes contribute to the common good in order to be eligible for such entitlements? To what extent should an individual be a member of a particular political community, for example, a nation-state, in order to have a right to health?

Chapter 5 addresses the content of the right to health. What do the interests in the avoidance of pathology and in the access to opportunity entail? Which level of health should be safeguarded? What if we consider the right to health to involve protection against standard threats to health (Wolff 2012a)? An expansion hereof may be required, but we are provided with a starting point for exploring the contents of a right to health. Such standard threats to health are relatively serious and a certain solution should be attainable under reasonable conditions.

Chapter 5 throws up key questions concerning the idea of a right to health, including, for instance, its relation to liberty rights. To what extent should we promote health if this implies restricting freedom? For example, do we need to ban the production and selling of tobacco in reference to the health interests of individuals addicted to smoking. Or, should individuals have the right to determine for themselves whether to accept any negative impact on their health? How do such questions translate to great apes? To what extent do they possess "health agency": the ability to understand how one should act in order to safeguard and improve one's own health? (Ruger 2010) These issues again take us back to the issue of autonomy.

Assuming that great apes are not autonomous in the relevant sense, how do their interests in freedom relate to their interests in health?

Another matter relates to the specific duties corresponding to the right to health. Certain scholars justify understanding the right to health in terms of the access to health care and public health measures, avoiding broader interpretations (Tasioulas & Vayena 2015). Otherwise, they are concerned whether the distinctiveness of the right to health will no longer be present, as everything even if only remotely relevant to health will be subsumed under this one right. Rather than in terms of interests, the right to health is defined in terms of its distinctive duties. And, what about the Herculean task of monitoring and safeguarding health by means of addressing every relevant factor that can possibly affect individual health? Such an endeavor, they worry, may not only prove too much but also impede any progress that could be made by means of focusing on a narrow range of factors instead.

Perhaps something important will disappear if we isolate the right to health from its ecological and interspecies determinants. Not every health interest is directly intertwined with these broader aspects. However, ultimately the health of each and every individual is linked to the socio-ecological background, to the origin of vital ecosystem services as well as to possible interspecies threats. This subject-matter requires further research which cannot be completed within this thesis. Nevertheless, a provisional sketch of the contours of everything this inquiry would require is presented here.

Chapter 6 takes a closer look at the moral relevance of one's socio-ecological environment: do beings with interests who do not reside in modern societies have rights based on their interests? Even if there are no principled objections to interfering with natural settings, the fallibility and feasibility of human intervention impose serious challenges. For the great apes who interact at a certain level with humans, these concerns appear to be less serious. Nonetheless, one could argue that great apes in the wild have the right to be left alone. Whenever fallibility and feasibility restrict human intervention, freedom could prohibit such meddling altogether. How does the tension between health and freedom (for a discussion hereof, see chapter 5) translate to a context in which wild animals live? This issue will be first dealt with by referring to the case of the Assateague horses (see chapter 6) and next explored more specifically with regard to great apes (see chapter 7).

Chapter 7 concerns the various arguments pertaining to the question: what would an interspecies health policy look like? Challenging the human-ape boundary as an exploratory case for achieving interspecies health justice will be served in the spirit of the Great Ape

Project. The treatment of great apes in captivity must be considered first. What does a right to health entail for those individual great apes?

With regard to great apes living outside human-dominated societies, the issue of vaccination provides us with a relevant case, especially given the recent attention paid to and the debate on this subject. Vaccinating great apes in the wild raises the following questions. If deemed relatively safe and feasible, should we vaccinate great apes in order to protect them against diseases with a potentially devastating impact? If so, for what reason primarily? When considering the strategy of vaccinations, should we strive for a preventive or a reactive attitude? Do the benefits of vaccinating great apes in the wild justify enrolling captive apes in order to carry out medical research? And, should we make an exception to the ban on utilizing great apes for invasive research in the face of devastating threats to human health? Taking a closer look at the human-ape interface: are current practices including habituation, tourism and research justified with respect to their interests in health and freedom? The way these questions cut across species and context exemplify the need for a genuine interspecies health policy.