

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

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Author: Nieuwland, J.

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Summary

Disease outbreaks caused by for example highly pathogenic avian influenza virus and Ebola virus have sparked a non-human turn in public health. Non-human animals and ecosystems cannot be sequestered from human health. The interconnection between these domains is emphasized by the notion of One Health, whereby collaboration is endorsed across disciplinary divides in order to adequately safeguard health against a backdrop of interdependency.

Such a broad outlook, however, allows for selective interpretation and moral appropriation. In order to address these issues, I have firstly developed a modest and largely descriptive understanding of One Health, buttressed by means of an overlapping consensus. It is then argued that the lack of engagement with concerns of justice in One Health literature and policy is disconcerting. I point towards human rights, the right to health in particular, as a means to instill a sense of justice in One Health thought and practice. This act itself prompts a reevaluation of such moral rights from both an ecological and interspecies perspective. An interspecies health policy need not only account for animals for their impact on human health but do justice to their interests as well. The thesis follows up on the Great Ape Project (GAP) by setting off from human rights as well as highlighting morally relevant similarities shared amongst human and non-human primates to then question inherent anthropocentrism. The right to health complements the set of basic negative rights defended by GAP.

Needless to say, developing a right to health for both human and non-human primates not only requires a thorough engagement with issues including: moral status, well-being, justification and function of moral rights, the details of a right to health, and the scope of moral obligations. The present thesis defends an interest-based theory of moral rights and falls in line with the theory developed by Alasdair Cochrane, albeit (1) critical of his denial of animal freedom, in response to which I develop a right to freedom of opportunity instead, and (2) more elaborate on the right to health.

The rights to freedom of opportunity and health are brought to bear on the various interfaces between human and non-human apes, across the spectrum between wilderness and mixed human-animal societies. It does so using One Health as a framework for integrating apparently disconnected practices – e.g. funding for health care of confined great apes,

medical research for conservation, vaccinating great apes in the wild, public health strategies for addressing zoonotic disease risks, habituation and in situ health measures – so as to work towards an interspecies health policy.