The Human Rights Key: An innovative tool for teaching health and human rights in the health sciences

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Background. In response to the need for health and human rights education in undergraduate medical curricula, the Faculty of Health Sciences at the University of Cape Town, South Africa, has included human rights learning in its reformed programme. Drawing on experiences in several curricular initiatives within the Faculty and beyond, I introduce the Human Rights Key as a new heuristic learning tool.

Objective. To share a teaching innovation in an area of need in medical education.

Method. The Key scaffolds and facilitates students’ learning through a sequential process of guided self-reflection with probing questions. It illuminates the inter-relationship of key human rights concepts, enabling students to create and make connections between human rights principles, legal mechanisms, their own personal realities and their developing clinical practice.

Discussion. Feedback reflects the effectiveness of the Human Rights Key in supporting transformative learning, suggesting that the Key will remain prominent in students’ memory. Online publication of the Key as an open educational resource (OER), with extensions to specific themes, has increased its impact and demonstrated the generalisability of the tool.

Conclusion. I propose the Human Rights Key as a useful visual communication tool to guide students in connecting their classroom learning with the reality of local, regional and international health and human rights issues. As an OER with a Creative Commons licence, the Key is available online for both educators and students to use as a resource with downloadable components.


―Health workers need to be educated about how to incorporate human-rights principles into their work.‖

While teaching human rights to a diverse group of health science students, I felt a need to open a door to turn learning into personal meaning-making beyond the understanding of legal instruments. This shift in teaching objectives, from transmission of knowledge towards transforming attitudes, created an opportunity to try new and alternative approaches that could promote the personal connections needed to motivate individual students to engage in issues of social justice.

Human rights are defined by London and Baldwin-Ragaven[1] as ‘universally applicable social or material entitlements, essential to fulfil fundamental needs, which individuals can claim from society on the basis of [their] humanity.’ Mann[2] argued for the inextricable link between human rights and health to be recognised beyond the health consequences of human rights violations. This broader perspective takes into account the multiple influences that impact on human rights and health, including the promotion and protection of human rights towards human flourishing. London et al.[3] point out that health professionals can be change agents to advance social justice and equity in health; yet, they can also create barriers when they act as gatekeepers who limit access to health.

In South Africa (SA), a progressive constitution sets norms and standards within a legal framework towards achieving democratic practices; yet, the legacy of apartheid, with growing inequalities and a weak public health system, challenges educators in a health science faculty (HSF) to seek ways to promote students’ social responsiveness towards social justice and equity. A history of complicity by health professionals in human rights abuses is a contributing factor that is driving curricular change.[4] The Health Professions Council of SA (Committee on Human Rights, Ethics and Professional Practice 2006) mandated for human rights (together with professional ethics and medical law) to form a core component of medical undergraduate curricula. In the HSF at the University of Cape Town (UCT) a transformation agenda intends to scaffold human rights as a curricular golden thread throughout the years of undergraduate study.

To understand health through a human rights lens it is important to recognise the social, political, cultural and economic factors that contribute towards or limit wellbeing. Apart from the structural factors in the health system there are many actors, including medical undergraduate students, who can play a role in mediating the realisation of the rights of others.

Human rights education (HRE) enables the use of critical self-reflection as a process of self-discovery. It fosters a consciousness for each student to acknowledge the realities of difference, and the relationships between the determinants of health, the multiple stakeholders and influences, and the legal instruments. Although HRE forms part of the life orientation course in SA high school curricula, few students appear to understand the relationship between classroom learning and clinical practice, as is apparent in student feedback. To view health through a multifaceted lens, I propose an ontological approach to teaching, one in which “knowing is … situated within a personal, social, historical and cultural setting … a way of thinking, making and acting.”[5]

In this article I explain the emergence of the Human Rights Key (Key) as a tool to equip students and educators to learn and teach human rights issues in an engaging manner. I explain the meanings to be drawn from the metaphor and describe how the Key is used in the classroom. It has also been made available as an open educational resource (OER) and shared with the wider educational community. The limitations and transferability of the
Key are explored, including the expansion of its usability through the new opportunities afforded by the internet, leading to my conclusion.

**Emergence of the Key**

Beyond the school curriculum, the first year of the reformed UCT curriculum in the HSF includes a course ‘Becoming a professional’ (BP) – 25% of its content is related to health and human rights. The overriding theme in this multidisciplinary module is the ‘Integrated health professional’ (IHP), a model of professional identity constituting the reflective, empathetic and knowledgeable domains. As a facilitator in this course, I felt challenged in engaging students’ interest and commitment to human rights. I wanted to assist them to link their present being to their future practice and to the codified legal human rights instruments.

While teaching senior students in their third year, opportunities arose to explore additional ways to promote human rights learning. As I initiated and facilitated human rights workshops in the Department of Obstetrics and Gynaecology, a wheel image became a useful visual model, using the IHP concept from BP as the hub. Concentric circles indicated progressively broader influences from the family, community (local) and country (national) to wider international actors. The Universal Declaration of Human Rights created the foundation or holding platform (Fig. 1).

Further examination of possibilities led me to develop the wheel into the head of a key. The Key was recognised as a symbol for opening and closing doors – as a self-assessed indicator measuring and evaluating students’ own agency. This heuristic Key offered a visual model for students to draw on their prior learning and personal experiences. Students are able to reflect on their own biographies and frames of reference, shifting from global to closer domestic influences. Because of SA’s discriminatory history, many of our students’ lives have been and still are affected by past and present injustices. Through the Key, each student may recognise the multidimensional aspect of human rights and its relationship with multifaceted developing professionalism.

**Method**

**Cutting the Key**

In the classroom I construct the Key (Fig. 2) piece by piece, using paper templates, guiding students to place their own content into the visual model. Probing questions to promote the students’ understanding of health and human rights facilitate their reflection on the state of their own Keys within

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**Fig. 1. Health and human rights wheel (IHP = integrated health professional; R = reflection; E = empathy; K = knowledge).**

**Fig. 2. The Human Rights Key infographic (by Veronica Mitchell, UCT, 2011).**
a human rights framework, resulting in raising their self-awareness and evolving consciousness. By posing problems related to their future practice as clinicians working within varying spheres of influence in the context of women's health, students gain a deeper understanding of the complexities of the lived realities of individuals and population groups.

A detailed explanation of the Key's components and the method used to facilitate student learning is available on the Human Rights Key website (https://open.uct.ac.za/handle/11427/6599).

Testing the Key
Feedback from both educators and students has indicated the meaningful contribution that the infographic offers to HRE. Since its inception in 2008, it has been used in the classroom, with educators from/at other institutions, and presented at both local and international conferences.

The Key's visual representation is appealing to students, assisting them to remember the concepts of what they have learnt as well as showing how the many components are integrated. The Key provides a summary of previous discussions and learning within the larger context of local and international influences. It illuminates the inter-connectiveness of the elements, demonstrating the enormous value of education and awareness.

Furthermore, from an educator's point of view, the Key enlightened the students' understanding by simplifying concepts and clarifying their relevance and relationships by contextualising the complexities. The transformative objective in HRE is facilitated by the Key, providing a vehicle to value different standpoints. As a tool for critical reflection, it gives students an opportunity to explore their own areas of need. Moreover, the model enables students to identify their future professional responsibilities.

However, a few students have found the Key challenging and confusing. Responding to students' earlier calls for more structure, the method of delivery in presenting the Key has changed. Initially, I drew the model on a white board, but now I use coloured templates to represent the Key's components to show how they fit together, and refer students to the website for further self-study. The addition of the Key as an online resource makes it available to students to revise and reinforce their learning.

Research is planned into the longitudinal impact of the Key on students’ social responsiveness, with an examination of the difficulties that appear to limit a few students' understanding of the concepts.

Discussion
Interpretation of the Key
The Key contributes to substantive understanding of human rights. It offers a visual tool to explore and challenge values and attitudes that 'truly reflect the underlying principles of human rights: universality, indivisibility, interdependence, equality, human dignity, respect, non-discrimination and social progress' – essential components for the success of HRE.

Turning human rights into personal realities is facilitated by means of the Key's symbolic significance and its individualistic design for each person. A connection between students' personal experiences and their future professional practice is created. As Haidet et al. indicate in their study using life-circle drawings, a visual diagram can be useful in understanding how the webs of relationships in the life-worlds of students may shape and influence their practice.

The Key metaphor enables 'us with the capacity as agents to make sense of the universe, sort out perceptions, make evaluations, create an adventure in meaning and guide our purposes' Deshler emphasises the relevance of metaphors for transformative learning, particularly in participatory teaching as a vehicle to promote dialogue and the recognition of new, unexplored perspectives. He argues that metaphors offer a sense of ownership, freedom and liberation, and assist learners to recognise unexamined influences that impact on their lives.

Generally, keys are personal possessions kept and cared for in a vigilant manner with a sense of responsibility. As Key holders and duty bearers, the quality of practitioners' Keys can reflect their own agency. For instance, indifference and complacency imply a Key sitting in a lock without being turned. Similarly, conformity and acceptance of a status quo could mean a Key that is never or seldom used. Even when mechanisms are in place, initiative, knowledge, skills and confidence are needed to take up the Keys and use them in a meaningful manner. To empower others out of their vulnerability, doctors as agents of change have the opportunity to become champions of equality. London argues that agency is critical to a human rights approach.

Health professionals, through their position of authority and as community role models, can assist others in finding and turning their Keys, acting as mentors in their advocacy roles and more conventional role of monitors. As students gain a critical understanding of their individual human rights values through guided personal reflection in constructing their own Keys, an opportunity is created to generate personal and social change.

For many marginalised people, their Keys can be interpreted as blanks – present, yet indistinct – not fulfilling their purpose of opening doors. In ongoing human rights violations the Key can play a protective role in turning against abuse, unlocking the doors to alternative choices or locking doors to oppressive situations. Doors tend to be bolted through oppression and ignorance. In such situations, assistance may be needed to unlock potential individual opportunities.

Developing partnerships with co-operative efforts are key to a human rights approach in health. If health professionals facilitate the opening of channels of communication, the Keys held by communities are ‘oiled’ – as with the locks they are used in – which would allow them to be used more easily and freely. Such a supportive bridging role is evident in the relationships developed with government, including social services and the local police, and civil society organisations, such as community-based organisations, non-governmental organisations and faith-based groups. Networking and collaboration create avenues for support and assistance in promoting fairness in a united democracy.

The expansion of the initial classroom Key has led to the development of the Key website on UCT OpenContent. Expanding themes include the rights of persons with disabilities (Disability Key) and sexual and gender minorities (lesbian, gay, bisexual, transgender (LGBT) Key), demonstrating the generalisability of the model. As an OER it gives permission through a Creative Commons licence (Attribution – Non-Commercial – ShareAlike) for others to use, download and adapt for their own context.

Alongside the barriers to realising rights, is the recognition that when health professionals become human rights defenders, holding both their own Keys and those of others, they can become vulnerable. Their actions and decisions may be influenced by third parties. In such situations of dual loyalty, value judgements need to be made – knowing which Key to hold and how far to turn it.

Further plans for the Key
As indicated earlier, research is needed to assess the long-term impact of the Key model on individual students’ learning and professional practice.
It will be useful to explore the transformative impact in changing attitudes and collective behaviours towards defending and promoting human rights. Furthermore, the Key may act as a valuable tool to stimulate institutional discourse and help to build connections between different stakeholders.

**Conclusion**

In this article I have described the development of an innovative Key model for teaching health and human rights. The visual representation reflecting the principles of HRE illustrates the inter-relationship between professionalism and legal mechanisms, assisting students in guiding their understanding and personal interpretation of the multidimensional nature of health and human rights. Furthermore, the visual medium helps students to self-reflect within their own contexts and experiences, interpreting the components of their own Keys. By raising awareness of human rights for individuals and communities, students as future health professionals are able to draw on this reflective tool. In so doing, they may contribute towards the progressive realisation that everyone has the right to the highest attainable standard of health. Healthcare through a human rights lens acknowledges and respects varying perspectives.

The internet offers new opportunities to strengthen HRE. By publishing the Key as an OER on UCT OpenContent, with additional theme topics, it can be used by others beyond one institutional boundary. The increasing views on the website indicate the ongoing interest and value of sharing classroom innovations.

Unlocking a toolbox of opportunities, the Key promotes deep learning, advancing respect for social justice and equity. International, regional and local human rights mechanisms provide the strength and support for each individual’s Key – a universal entitlement.

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**References**