

Abstract

Recently, international human rights leaders have renewed the call for advocacy on economic, social, and cultural rights and suggested partnerships with local organizations. The Thai Drug Users' Network (TDN) promotes the human rights of a marginalized and medically underserved population within Thailand. It also works internationally to reduce drug-related harms. Thus, TDN transcends a strict local-international dichotomy. The group grew out of professional and personal ties between Thai drug users and international health and human rights actors. Border-crossing connections and two-way transfer of knowledge, particularly through bridging individuals or "cultural translators," have benefited both TDN and the non-Thai organizations that work with it. This case study shows how international-local, and even donor-recipient, relationships may be navigated in ways that are symbiotic and mutually empowering.

Récemment, les leaders internationaux en matière de droits de l'homme ont renouvelé un plaidoyer pour des droits économiques, sociaux et culturels, en suggérant des partenariats avec des « organisations locales ». Le Réseau des usagers de drogues thaïlandais fait la promotion des droits de l'homme pour une population marginalisée et sous-médicalisée en Thaïlande. Il travaille également sur le plan international pour réduire les dangers liés aux drogues. De ce fait, le TDN transcende une dichotomie stricte locale/internationale. Ce groupe s'est créé à partir de liens professionnels et personnels entre des usagers thaïlandais de drogues et des acteurs internationaux dans les domaines de la santé et des droits de l'homme. Les connections transfrontalières et les transferts de connaissance dans les deux sens, en particulier par l'intermédiaire de "traducteurs culturels," ont profité tant au TDN qu'aux organisations non-thaïlandaises qui travaillent avec lui. Cette étude de cas démontre comment des relations au niveau international/local, voire donateur/bénéficiaire, peuvent être nourries de manière symbiotique et mutuellement autonomisante.

Recientemente, los líderes internacionales de derechos humanos han vuelto a hacer un llamamiento para la defensa de los derechos económicos, culturales y sociales, sugiriendo asociarse con "organizaciones locales". La Red de Usuarios de Drogas Tailandesas promueve los derechos humanos de una población marginada y médicamente subatendida dentro de Tailandia. También trabaja a nivel internacional para reducir los daños relacionados con las drogas. Por lo tanto, la TDN trasciende una dicotomía estrictamente local-internacional. El grupo creció de vínculos profesionales y personales entre usuarios de drogas tailandesas y peritos internacionales en materia de salud y derechos humanos. Los vínculos transfronterizos y la transferencia de conocimientos de dos vías, sobre todo a través de contactos personales o "traductores culturales", han beneficiado tanto al TDN como a las organizaciones no tailandesas que trabajan con la misma. Este estudio de caso muestra cómo las relaciones internacionales-locales e incluso entre donantes y beneficiarios pueden manejarse de formas que sean mutuamente beneficiosas.

EAST-WEST FUSION: Cross-Border Human Rights Activism and the Thai Drug Users' Network

Sheri Fink

Recently, leaders of international human rights organizations have renewed the call for advocacy on economic, social, and cultural rights.¹ They stress the usefulness of working with local organizations to achieve this aim. The Thai Drug Users' Network (TDN) functions as a local advocacy organization, founded on a universal human rights platform in 2002. Most of the approximately 100 people involved in the organization are former and current drug users. Over the past several years, these Thai human rights activists have forged close professional and personal ties with international counterparts in organizations including Human Rights Watch, the Open Society Institute, Doctors Without Borders, and Health GAP — groups with diverse but overlapping mandates in the health and human rights fields. With the support of these organizations, TDN campaigns within Thailand for the right to health and HIV prevention and treatment modalities and against extrajudicial executions and other unacceptable means of repressing the illegal drug trade. Thus, their mandate covers economic, social, and cultural rights as well as civil and political rights.

TDN has also broadened its reach beyond Thailand. TDN members share their expertise with organizations in other countries and support the growth of programs that

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reduce drug-related harms and involve drug users in health care policy-making. Thus, a strict local-international dichotomy is not always a useful classification for human rights organizations.

This article will demonstrate that border-crossing connections and two-way transfer of knowledge, particularly through the efforts of bridging individuals or “cultural translators,” have benefited both TDN and the non-Thai human rights organizations that work with it. This case study supports the notion that the globalization of activism and international-local, and even donor-recipient, relationships may be navigated in ways that are primarily symbiotic and mutually empowering rather than paternalistic or exploitative.

The Problem

Thailand is internationally celebrated for having driven down HIV incidence in its general population with sound prevention programs, including a “100% condoms” campaign targeting sex workers and their clients.² One marginalized population in which HIV infection rates have persisted as high as 40-50%, however, is that of drug users.³ Currently, nearly a third of new HIV infections in Thailand occur among the country’s estimated 100,000 to 250,000 injection drug users (IDUs).⁴

The problem began nearly two decades ago. In Bangkok during the first nine months of 1988, HIV rates among intravenous drug users reportedly rocketed from around 0 to almost 40%, due mainly to the efficiency of needles in transmitting HIV.⁵ Still, Thailand has continued to outlaw needle exchange programs, which are proven to significantly reduce the HIV transmission rate.⁶

Until 2004, Thai drug users who contracted HIV were excluded from access to anti-retroviral (ARV) drugs under Thailand’s national AIDS treatment program.^{7,8} Even after the ban was lifted, however, drug users reportedly had great difficulty in obtaining treatment due to, among other factors, persistent stigmatization and lack of knowledge among health care workers. There is little availability of opiate (methadone and buprenorphine) substitution therapy, which

has been shown to help stabilize chaotic lifestyles, allowing HIV-infected drug users to adhere to ARV therapy at comparable rates to non-drug users and benefit from treatment.⁹ This aspect of the “harm reduction” approach toward drug users has been associated in a large number of scientific studies with decreased risk behavior for HIV transmission and substantial reductions in illicit drug use and criminal activity.¹⁰

As with many countries, however, Thailand maintains a highly punitive approach toward combating the drug market, imposing severe penalties for even minor drug users or those caught carrying injection equipment.¹¹⁻¹³

Of Movements and Those Who Move Them

TDN might never have been founded if not for a unique Thai-US partnership between Paisan Suwannawong, the founding chairperson of the Thai Network of People Living with HIV/AIDS (TNP⁺), and Karyn Kaplan, an American working with Health GAP (Global Access Project), who was also the first HIV/AIDS program coordinator at the International Gay and Lesbian Human Rights Commission (IGLHRC, an independent organization housed at Human Rights Watch).

Suwannawong was a locally prominent treatment activist in Thailand whose work building capacity and demanding universal access to anti-retroviral medications had come to Kaplan’s attention during a previous job she had held in Thailand. Since 1997, Suwannawong’s group, TNP⁺, had advocated universal treatment access for those living with HIV/AIDS.¹⁴ Hundreds of organizations across Thailand had joined TNP⁺. Health GAP members, as part of their campaign to increase access to affordable HIV treatment in developing countries, invited Suwannawong to New York to address a rally promoting international treatment access at the 2001 United Nations General Assembly Session (UNGASS) on HIV/AIDS.

During the course of the visit, Suwannawong learned of IGLHRC’s work advocating the human rights of those subject to discrimination or abuse based on their sexual orientation, HIV status, or other factors. The organization had

worked to document abuses, repeal discriminatory legislation, and train and educate individuals on the human rights framework and its applications.

Suwannawong immediately saw an application for this kind of work among the most neglected, marginalized HIV-positive population in his country — IDUs. “The abuses are horrible,” he told Kaplan.¹⁵

Kaplan, who had been told to “listen to advocates,” saw an opportunity for IGLHRC to apply its expertise.¹⁶ She sought support from the organization to begin working on the issue. IGLHRC provided \$5,000 for a month-long project to study and document the human rights situation of drug users in Thailand.

Together, Kaplan and Suwannawong designed the study instrument and research methodology, with Kaplan drawing on resources from Human Rights Watch and academic institutions, and Suwannawong identifying priority populations and ways to access them.

In May 2002, the research was carried out among drug users in three regions of Thailand: southern Satun Province, northern Chiang Mai province, and the capital, Bangkok. Sites included Bangkok’s largest slum, Klong Toey, which was heavily policed, and the highly militarized northern part of Thailand close to the Burmese border. Suwannawong, himself a former drug user, was able to seek out and develop trust among fearful populations of drug users, making possible the in-depth interviews that formed the basis of the study’s conclusions. The interviews uncovered factors leading to social marginalization and impaired access to HIV prevention services and AIDS care. Experiences with law enforcement were also studied.

According to Kaplan, the interviews themselves often became “interventions,” during which drug users were given information and support.¹⁷ Participants reported being terrified to seek medical care. The results showed that in spite of nearly two decades of AIDS prevention programs in Thailand, these drug users knew very little about HIV transmission and even less about hepatitis C, a deadly disease also passed through contaminated needles.

Some study participants had agreed to be contacted again. In December 2002, the researchers invited these par-

ticipants to a meeting in which they shared the study's results and offered training on human rights and harm reduction principles. According to Kaplan, it was at this event that drug users themselves decided to form the TDN. Says Kaplan: "That moment was when they decided, we can't walk out of this room and not do something."¹⁸

Thus, both international and local organizations and individuals made crucial contributions to this project and benefited from each other's participation. Suwannawong and the Thai researchers gave Kaplan's international organization extra credibility in its work among drug users as well as an important cause to promote. It is possible, but unlikely, that a purely foreign-run research project could have achieved the same level of access and elicited similarly candid responses from study participants, including complaints of abuse at the hands of nearby military.

The partnership also allowed the international organization to succeed in raising awareness of human rights among a new set of activists in Thailand who found that the international human rights framework applied well to their situation. These activists are now promoting human rights themselves and, as will be shown later, are now acting as international activists in other countries. It was an opportunity, according to Kaplan, "to make all the principles and frameworks mean something in a community that is asking for recognition of its situation."¹⁹

When international human rights organizations bring their mandates and funding to various countries, there is often a danger that locals will feel manipulated or co-opted rather than empowered and supported. The fact that the Thai partners and subjects of the human rights documentation study subsequently organized themselves into an activist movement shows that they developed a strong sense of ownership over the study and its results. The results were not merely written up in a human rights report and disseminated to political leaders and the media primarily in the west; they were actually brought back to the participants themselves, and this likely played a large role in the Thai sense of ownership over the project.

Local activists clearly benefited from their partnership with internationals in this situation. Financial support

made it possible for them to collect the data needed to advocate the human rights of drug users — something that activist Suwannawong had believed for years was necessary.

A Rights Movement Takes Shape

The founders of TDN based their work on human rights principles and framed their advocacy in the international language of human rights. The reason for this was simple — in Thai society, drug users were treated as undeserving of basic human rights unless they gave up drugs. Activists working on behalf of drug users recognized that, before they could demand their rights to health care and to information, drug users had to regain their sense of dignity and learn that they were entitled those rights.²⁰

The activists began with the position that the high prevalence of HIV among Thai drug users resulted from the Thai government's denial and violation of human rights, and that the government should therefore be held accountable. At the same time, the group's members intended to take responsibility for their own health and to help other drug users do the same.

In February 2003, just weeks after TDN's initiation, Thailand's government declared its latest "war on drugs." Police swarmed Bangkok's largest slums, arresting tens of thousands of suspected drug users. According to Human Rights Watch, the first three months of the effective "open season" on alleged drug criminals resulted in the extrajudicial executions of more than 2,000 persons thought to be involved in the drug trade.²¹ The Thai activists returned to the Klong Toey slum, hoping to inform drug users about TDN. When the activists looked for the drug users, "None of them were there," said Kaplan.²² They had slipped out of sight and out of reach of efforts to assist them.

The TDN activists took action to bring attention to the crisis on a national and international level. A major opportunity arose in April of 2003, at the annual International Harm Reduction Association conference, which took place in Chiang Mai, Thailand. When the Thai health minister took the stage, TDN members held a peaceful public protest.

That brave move — protesting openly as drug users in the midst of a “drug war” — won the approving attention, technical support, moral support, and, ultimately, financial support of several international organizations represented at the conference, including the Open Society Institute. Thus, cross-border connections between the Thai activists and international organizations grew.

Karyn Kaplan played an important “bridging” role between the Thai activists and their international counterparts. She left the IGLHRC to work full-time in Thailand and to be with Suwannawong, with whom she had developed a personal relationship.

Kaplan’s ability to link human rights campaigners across cultures had much to do with both her history in Thai and American activist circles and her Thai language skills and cultural knowledge. “No one knew about the Thai advocacy movement, primarily because of the language barrier,” says Kaplan. “It’s a huge barrier for Thai AIDS activists to network internationally, even though they’d like to.”²³

By June of 2003, as the drug war continued and TDN’s international links solidified, the organization spearheaded an “International Day of Action.” Small groups of activists in at least 10 countries demonstrated against the drug war outside of Thai embassies. Also that day in Thailand, roughly 60 TDN members and other Thai activists demonstrated outside of the Thai Government House and delivered letters to Thai political leaders. In New York, the AIDS activist organization ACT UP organized a demonstration at the Thai mission to the United Nations, reporting 30 participants. The group’s press release referred to the existence of a global network of AIDS activist groups that were capable of responding to each other’s needs by launching coordinated worldwide protests: “In this way, countries such as Thailand can face international pressure to halt human rights abuses and provide adequate AIDS care and prevention.”²⁴ This network played an important role in expanding treatment access and sharing expertise not only in Thailand but also around the world.

Growing Empowerment, Growing Success

Indeed, as their local activism continued and international attention to their work increased, TDN began to succeed in its efforts to work with Thailand's government. "Now there is a movement," says Kaplan. "A lot of amazing things have changed."²⁵ TDN holds a seat on the government's national harm-reduction task force and has worked to gain funding and political support for the program. On the task force, TDN has taken responsibility for capacity-building within the community and among drug users and for running training programs and organizing public forums.

TDN members also held meetings with members of the Ministry of Public Health and the Office of Narcotics Control, entities that had never formally interacted with drug users. TDN also met with Prime Minister Thaksin Shinowatra, who, as a strong proponent of a strict suppression model of combating drug use and trade, had declared Thailand's drug war.

Speaking at the International AIDS conference in July 2004, in front of thousands of international AIDS activists, researchers, and policy-makers from around the world, Thaksin declared his willingness for Thailand to begin shifting toward adopting harm-reduction approaches. Harm reduction is a public health concept that aims at preventing or reducing the negative health consequences of certain behaviors.²⁶ In relation to injecting drug use and the prevention of HIV/AIDS, harm-reduction program components may include needle exchange, drug substitution treatment, and risk-reduction counseling.²⁷ Thaksin's statement in support of harm reduction represented a significant rhetorical shift away from his previous punitive approach toward drug users. His speech was consistent with the idea that the TDN activists had made an impact on the national level.

What allowed this non-hierarchical group of former and current drug users in Thailand to gain agency over their destinies? The answer is surely multi-factorial and deserves further research. Among the factors, certainly, was the knowledge and persistent and passionate activism of the TDN members themselves. Their actions and credibility gained them respect among HIV/AIDS health advocates

around the world. International agencies provided the group with needed funding and technical support for their activities. Vocal support from internationals certainly helped boost TDN's profile with the Thai government, particularly in the run-up to Thailand's hosting of the International AIDS Conference, where Thailand's officials wanted the country to be seen as a leader in the HIV/AIDS fight in the region.

Suwannawong and the other TDN members could use their knowledge as current and former drug users to help the Thai government achieve prevention and treatment success in this community. Interestingly, with their tight links to outside organizations, they also offered the Thai government knowledge about funding opportunities. "Because I knew what was going on around the world, I could lobby my government . . . to submit a proposal for the Global Fund, first round," said Suwannawong.²⁸ The government successfully competed for a first-round grant from the then-newly formed Global Fund to Fight AIDS, Tuberculosis, and Malaria.

Later, TDN itself received an unusual grant from the Global Fund, provided outside the normal Country Coordinating Mechanism (CCM), made up of government representatives, civil society organizations, and other partners responsible for developing Global Fund proposals and overseeing their implementation.²⁹

The sixth meeting of the Global Fund took place in Chiang Mai, Thailand, in October 2003. At least 100 members of TDN, Thai AIDS Treatment Action Group (TTAG), and the other Thai HIV activist groups made a strong and loud showing. They gathered outside the meeting and refused to disperse until Dr. Richard Feachem, the Global Fund's director, came out to address them. "Thank you for coming over, thanks for your voice. If it was not for the voice of people living with HIV, the Fund would not exist. Please keep your voices loud, please keep your voices strong," he said.³⁰ Feachem's comments reflect the central importance of local voices in promoting human rights, particularly the human right to health for those with HIV. The Global Fund approved TDN's proposal, making a grant outside the Fund's CCM for only the second time in the group's history (the Global Fund's Board has asked the Secretariat to

reconsider non-CCM funding criteria, with the possibility of expanding them).³¹ TDN's Global Fund project is aimed at ensuring the human right to health for the marginalized population of drug users. It will do so by establishing four fixed harm reduction program sites and provide training for hundreds of peer outreach workers, educators, and researchers. The intervention will provide important data on drug users' health and social status. The Global Fund's recognition of TDN and its subsequent approval of the grant will likely encourage the Thai government to work cooperatively with the group. Says Kaplan: "Without explicit support from the government in this climate, former drug users going out to [reach out to] others could be very dangerous."³²

The activists have one more layer of security — their relationships with activists across borders who say that they are ready at any moment to launch actions to support the Thai human rights campaigners should any of them be targeted by the government. "Their work is incredibly important," says Greg Gonsalves, director of treatment advocacy for the Gay Men's Health Crisis, a New York organization.³³ Years of working together has spawned relationships not only between organizations but also between people. "We all know each other. We collaborate on different things. There are formal connections and friendly connections," says Gonsalves.³⁴

Local Versus International Human Rights Organizations: Blurring the Lines

TDN's work has begun to extend beyond Thailand's borders, suggesting the lack of a clear distinction between "local" and "international" human rights organizations. The group joined an international movement to put methadone on the list of essential drugs.³⁵ In July 2004, the World Health Organization responded positively by announcing that it was moving forward with an application to add methadone and buprenorphine to the essential drugs list. The application was approved, and the two drugs were added to the list in March 2005.^{36,37}

Members of TDN have also offered their expertise to international organizations trying to start harm-reduction

programs in countries where no indigenous movements of drug users exist, especially in countries where speaking out is more dangerous.³⁸ TDN shows that these movements can start at the grassroots level and grow to challenge discriminatory laws and national practices and to demand that donors, international organizations, and the media pay attention to their issues. Throughout the region and the world, TDN serves as an unusual model of effective, peer-based, community-grounded advocacy for human rights and harm reduction. The group received the 2004 Award for Action in AIDS and Human Rights conferred by Human Rights Watch and the Canadian HIV/AIDS Legal Network.³⁹

TDN was invited to Cambodia to present its model of work to health officials from throughout the Asian region at a forum co-sponsored by the United States Centers for Disease Control and Prevention. "People appreciate when they have the [HIV-positive] person coming out and describing what it's like to be that person; it's so much more effective," said Kaplan.⁴⁰ TDN emphasized the benefit of involving drug users in health care policy and planning. TDN members also visited North and South Vietnam to share their experiences with peer outreach workers there.

Conclusion

The Thai Drug Users' Network is an example of how the knowledge of former and current drug users may be utilized to effect positive change for their community and beyond, even in the context of government opposition. It is also an example of how activists multiply their power by reaching across borders.

The success of this group is arguably due to both the members' self-empowerment and the additional empowerment conferred by the support of international advocacy leaders. Their being able to draw funding has been another key source of efficacy and legitimacy.

Thailand's Paisan Suwannawong has driven change in Thailand through initiating several effective advocacy groups composed of HIV-positive individuals and former and current intravenous drug users. His partner, New Yorker Karyn Kaplan, has acted as a bridge between cultures through her strong personal relationships, bilingualism, and

high degree of knowledge. The role of passionate HIV-positive activists such as Suwannawong and “bridging” advocates such as Kaplan in both knowledge transfer and the success of indigenous activism certainly merits further understanding.

This study of TDN suggests that mutual respect and a complex, two-way transfer of knowledge between local and international human rights organizations and local and international activists can effectively promote the human rights agendas of all involved. It would be useful to study the extent to which these types of interweaving relationships, particularly those characterized by the presence of cultural “bridging” individuals, are common in other successful human rights campaigns. How much knowledge, and how much success, originates from indigenous versus outside influence, or the confluence of the two? TDN’s history provides a local-international partnership model that could help international human rights organizations improve the efficacy of their efforts, particularly in social-economic-cultural rights advocacy.

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