Notes on Contributors

Amel Alghrani (she/her)
Professor of Law, University of Liverpool
Motivated by my identity as a Black, Asian, Minority Ethnic (BAME) academic specialising in the regulation of healthcare, my involvement in this collection exploring the prosecution of doctors for gross negligence manslaughter (GNM) stems from an awareness of the disparate impact of laws on BAME individuals. With approximately 46 per cent of NHS doctors being of BAME background, our chapter wanted to highlight their heightened vulnerability to prosecution and regulatory referrals and harsher sanctions. My chapter with Hannah Saad aims to address unexplored diverse voices at the intersection of healthcare and criminal law, specifically within the context of GNM. Our commitment to highlighting these disparities underscores the importance of diverse perspectives in understanding and reforming healthcare practices.

Dunja Begović (she/her)
Research Associate, Lancaster University
Coming from a background of bioethics and medical jurisprudence, and more recently working on research projects about palliative care, I have found myself fascinated by the end-of-life context and the important, though sometimes neglected, ethico-legal challenges raised by it. I hope that the chapter I have contributed to will help students expand their thinking about death and dying and provide insight into an area of medicine – and life – that is often not talked about openly but is nevertheless of high significance to societies and individual humans alike.

Zareen Bheekhun (she/her)
Clinical Research Nurse/PhD Student, King's College London
I qualified as an adult nurse in 2006 and my career as a clinical research nurse began in 2012. Before that, I wasn't aware nurses have a key role in research. As a research nurse, I was faced with questions about the justifications behind research. I got in contact with Silvia Camporesi in the hopes of starting a PhD in this area. Silvia has since then been my mentor through thick and thin. What Silvia and I find permanently interesting about clinical research ethics is its ability to generate perpetual debate; for example, the role humans have played in the search for the 'greater good'.

Philip Bremner (he/him)
Lecturer in Law, King's College London
My research has focused on legal parenthood in the context of diverse families. Assisted reproductive technology is a central part of family formation for many same-sex families. I was, therefore, interested in reflecting on how considerations about who is recognised as a parent in these families forms part of the context surrounding the legal regulation of assisted reproductive technologies.

Silvia Camporesi (she/her)
Professor of Bioethics and Sports Integrity and Ethics, KU Leuven
I've been writing on clinical research ethics since my PhD at the European Institute of Oncology in 2010, and over the years I have retained deep interest in the 'ethical knot' at the centre of it. What motivated me the most to join this project was the opportunity to work again with Zareen Bheekhun. Zareen, a clinical research nurse originally from Mauritius, with an MSc in Anthropology from University College London (UCL), was my graduate teaching assistant at King's College London for the Ethics of Clinical Research course. Zareen is one of the most gifted teachers and researchers I have ever met. If you find our chapter interesting, genuine, or captivating, you'll know it's because of her!

Beverley Clough (she/her)
Professor in Law and Social Justice, Manchester Law School, Manchester Metropolitan University
Whilst ideas of mental capacity and decision-making are core aspects of medical and health law textbooks, these tend to take central assumptions around capacity/incapacity and disability for granted. I have been keen to explore what disability studies offers to medical law. It can highlight the ways in which medicine has traditionally focused on diagnosis and cure, and the problematic consequences of this in terms of the denial of legal agency and the harms of non-consensual treatments. A shift in emphasis towards societal structural barriers offers the tools for radically rethinking law and legal responses in this context.

John Coggon (he/him)
Professor of Law, University of Bristol
Health law is an important field of study. But it is complex and controversial: in part because the very ways that we choose to look at law and health at once open up insights and understanding while also hiding or skewing points that matter. In jargonistic terms, critical analysis in health law works through simplifying assumptions; for instance, that a person has 'full autonomy' or has straightforward access to services. I am pleased to contribute to a foundational text in health law that explores and challenges different simplifying assumptions and represents ranging perspectives, including marginalised voices, on multiple practical topics.

Rita D'Alton-Harrison (she/her)
Professor of Law, Royal Holloway, University of London
The principles and values of the NHS Constitution enshrine the belief that 'everyone counts' and that a comprehensive service should be provided to all. This serves as an important reminder that equality in access to healthcare should be a protected right. To understand if this protection exists it is important to critically examine all aspects of healthcare and its impact on particular groups within our society. As both a practitioner and an academic I believe that only through challenge and accountability can we ensure that equitable treatment becomes a reality for all. Education is the stage from which we can view the improvements and change society can and should make for a sustainable and harmonious future in the field of health law.

Thana C. de Campos-Rudinsky
Associate Professor of Ethics, Law, and Global Public Policy, Pontifical Catholic University of Chile
My work examines our ethical responsibility to care for one another in moments of great vulnerability, especially within the contexts of structural poverty, illnesses, disabilities, loneliness, pregnancy, and early motherhood. Conventional wisdom grounds this responsibility on the moral value of justice. Few scholars acknowledge, and in actuality several dismiss, the power of love as a robust practical principle. As a Global South scholar, I offer an interpretation of our ethical responsibility to care for one another, grounded in a decolonial perspective of love, where love is a practical reason/directive for individual and institutional deliberation, grounding a responsibility to accompany, in a non-intrusive way, those experiencing medical suffering.

Aileen Editha (she/her)
PhD Candidate and Robert Sutherland Fellow in Law, Queen's University Canada
I am honoured to be part of this endeavour to increase and encourage representation in health and medical law discourse. In addition to highlighting the disparate outcomes of health policy, my chapter aims to explore the perspectives of the marginalised 'others' that are seldom included in textbooks and mandatory reading lists. This book is an opportunity for learners and educators to engage with other perspectives as well as broaden and reflect on their own.

Magdalena Furgalska (she/her)
Lecturer in Law, University of York
It is easy to see mental health law as a complex and technical area and to justify coercive measures based on our perceptions and misunderstandings about mental ill-health and who a mental health patient is; 'we fear what we don't know' comes to mind. My work aims to demonstrate how the law affects people's everyday lives in the hope of challenging the status quo. The chapter is designed to allow students to reflect on the law of psychiatric detention and the implicit biases that

exist about mental health, and to approach these topics not only as future lawyers but also as human beings.

Sabrina Germain (she/her)
Reader in Healthcare Law and Policy, The City Law School, City St George's, University of London
The structural inequalities that affect vulnerable and marginalised groups are not often featured in currently available health law textbooks. However, health disparities scholars like me want to bring into the classroom conversations around the role of the law in creating or sustaining barriers affecting these groups. It was important for me to supply chapters that would help colleagues ignite these discussions, providing them with an alternative perspective and original and accessible materials as a useful starting point. Recently I have also been reflecting on my identity and race and my role as a writer. I feel compelled to bring to the fore more meaningfully the experiences of racialised and vulnerable groups in healthcare.

Jonathan Herring (he/him)
Professor of Law, University of Oxford
Law students are well trained to deal with businesspeople and the issues that trouble them. They are required to read many cases involving disputes between rich people, who are using the law to get richer. The boardroom, the solicitor's office, and the construction site are regularly visited. The nursing home, the asylum centre, and the childcare centre are rarely visited. I want to hear the voice of those marginalised by mainstream society; to see those places where the privileged don't want to look; and to explore the power imbalances within society.

Harleen Kaur Johal (she/her)
PhD Candidate and National Institute for Health Research Academic Clinical Fellow, University of Bristol
Understanding and addressing health disparities is of great importance to me as a doctor and researcher. Through my work, I explore how power structures in academic and healthcare institutions impact on healthcare policy and practice, thus disadvantaging marginalised groups. Although this has long been an interest of mine, given my identity as a third-generation immigrant and woman of colour, it was through working in an adult intensive care unit during the COVID-19 pandemic that I experienced at first hand the impact that inequitable access to healthcare has on vulnerable groups and their outcomes, which I discuss in my chapter with Sabrina Germain.

Naomi Jones (she/her)
Honorary Clinical Lecturer, UCL Medical School
Paediatric Registrar, London
As a paediatrician, I am a passionate advocate for the health and wellbeing of children, young people, and families, particularly those from vulnerable or marginalised groups. My intention in contributing to this book was to enable

students of healthcare law, of any professional background, to consider the structures within society, healthcare, and the law that impact diverse groups. I have sought to explore how the law affects clinicians and patients, and to reflect the dilemmas faced in real-life practice. I hope this book is valuable for students to better empower patients in their healthcare journey.

Beth W. Kamunge-Kpodo (she/her)
Lecturer in Law, University of Leicester
I was motivated to participate in this project as it aligns with my personal and professional social justice values. I am aware of the ways in which the erasure, exclusion, or token/unethical 'inclusion' of marginalised communities in research and practice can have harmful effects. I would like to see a world in which marginalisation is no longer possible.

Rebecca Limb (she/her)
Lecturer in Law, University of Southampton
Child patients face many challenges as they navigate their medical treatment; however, their voices are often unheard. My scholarship, informed and inspired by my experiences as a child patient, is concerned with capturing, recording, and sharing the lived experiences of children who undergo medical treatment with the academic community and using their experiences as a lens through which to analyse child medical law. I was therefore excited to contribute a chapter that has a child's voice at its core and encourages its readers to analyse the law from the child's perspective.

Zaina Mahmoud (she/her)
Lecturer in Law, University of Liverpool
It always struck me as odd that diversity in academic research is seen as an afterthought or optional. As an Arab woman, my identity shapes every aspect of my daily interactions and cannot be ignored or removed. Participating in a textbook that recognises this reality was important to me, as it contributes to diversifying reading lists, allowing students to feel seen and heard, and ideally, prompts other academics and researchers to adopt an intersectional approach to their work.

Cynthia Mbugua (she/her)
PhD Student, Royal Holloway, University of London
When navigating the use of and access to fertility treatments, it is crucial to acknowledge that there are various external factors that have become impediments in accessing assisted reproduction, beyond the emotional and financial facets. In the chapter to which I have contributed, the goal was to scrutinise and engage with these factors – namely, age, ethnicity, and sexual orientation – encouraging a thoughtful examination of the broader personal, societal, and legal implications inherent in this deeply personal journey. This in turn provides valuable insights into the dynamic and evolving nature of health law, while

encouraging a deeper understanding of the need for legal reform and advocacy in the realm of assisted reproduction.

Caterina Milo
Lecturer in Law, School of Law, University of Sheffield
Dialogue and inclusion of diverse voices are at the heart of my academic engagement. I feel called to foster teaching environments where no voice is silenced, but students find the opportunity to respectfully, truthfully, and critically develop and share their own ideas. Such an approach is also reflected in my writings. In my chapter, together with Thana C. de Campos-Rudinsky, I highlight the importance of seeking a more holistic account of patients' rights, one that doesn't silence but listens and values patients' needs in a person-centred way. It is, ultimately, a desire to foster bridges of dialogue, rather than walls of silence and division, that motivated me to take part in this textbook.

Anna Nelson (she/her)
Research Associate, University of Sheffield
Through my research and teaching about issues around reproductive technology, childbirth, and the law I have come to believe it is important to approach new issues by asking: who (or what views) does the dominant framing of this issue serve? I was therefore delighted to be asked to contribute to this textbook, which offers a vital tool to help think through this question across a wide range of health law issues. With my chapter, I hope to encourage readers to think critically about 'everyday' concepts in health law and to interrogate the role that (problematic) norms play in constructing these.

Joshua Parker (he/him)
PhD Candidate in Bioethics, Lancaster University
Healthcare seems to be falling short of its goal of promoting social justice. In spite of all the advances of modern medicine, vast health inequalities exist and healthcare is facing various challenges of sustainability, including economic and environmental issues. This concerns me both as a doctor and an academic. By focusing on the broad issues of justice raised by the intersection between health, healthcare, and climate change, my hope is to demonstrate not just the significant scholarly interest of this underexplored topic, but its practical relevance.

Jordan A. Parsons (he/him)
Assistant Professor in Medical Ethics and Law, University of Birmingham
Through my research, it has become increasingly apparent to me the extent to which various marginalised groups are disproportionately negatively affected by many of the structures and systems in healthcare. This was an issue that was largely absent from my undergraduate studies, so I now make a point of highlighting these sometimes challenging perspectives when I am teaching. In doing so, I am currently limited in the readings I can set that are pitched at the appropriate

level. As such, I was keen to be part of this textbook and hope that its uptake will encourage students' critical reflection on healthcare law.

Sheila Payne (she/her)
Emeritus Professor in Palliative Care, International Observatory on End of Life Care, Lancaster University
I have been undertaking research and policy development to promote service innovation in global palliative care for many years. Raising awareness of needs to access equitable and affordable services and medicines for people in the final phase of life is essential. Working closely with colleagues in large international collaborative research programmes has helped to highlight what constitutes best practice and enabled the development of free massive open online courses to improve access to educational resources. I have worked with international non-governmental organisations such as the World Health Organization and the European Association for Palliative Care to implement change.

Elizabeth Chloe Romanis (she/her)
Associate Professor in Biolaw, Durham Law School, Durham University
Examining how the deployment of power in social structures, like law and medicine, impacts people is at the heart of my scholarship (feminist reflections on reproductive law and ethics). This is a critique relevant to all areas of health law and so I try to place it at the centre of my teaching. Yet, of the mainstream textbooks, few acknowledge, and none place at the centre, the ways in which law and medicine themselves can marginalise users of healthcare, especially women, people with chronic illness, and people with the physiology to become pregnant. In the chapters to which I contribute, my intention was to make the power dynamics in doctor–patient relationships more visible so that students can reflect on these.

Hannah Saad
Paralegal, UK Covid-19 Public Inquiry
As a daughter of two doctors who emigrated from Egypt to work in the NHS, I am acutely aware of the monumental task faced by public health sector workers. Studying medical law at both undergraduate and postgraduate level further highlighted how laws can impact BAME individuals differently and was a topic I would have liked to explore in more depth when I was a student. I was particularly interested in looking at this specifically in the medical law context, given the diversity of the NHS and the fears many health professionals feel following high-profile GNM cases. My chapter explores some of the factors that may be undermining equality of legal and professional regulation in the NHS and seeks to advance this dialogue further.

Yakubu Salifu (he/him)
Lecturer in Palliative Care, International Observatory on End of Life Care, Lancaster University and CEO COMPASS-GhanaCharity

I am motivated to contribute to this textbook a chapter on death and dying due to my passion for enhancing compassionate end-of-life care. Exploring the intersection of legal and ethical frameworks from a palliative care perspective is crucial. Addressing evolving needs demands adaptability in guidelines to ensure patient-centred care, respecting individual choices and promoting dignity in the context of death and dying. My contribution aims to shed light on aligning legal and ethical considerations with the empathetic principles of palliative care for a more holistic and compassionate approach to end-of-life challenges, especially in resource-limited settings.

Zoe L. Tongue (she/they)
Lecturer in Law, University of Leeds
My scholarship focuses on feminist perspectives on reproductive rights and the structural inequalities that shape access to and experiences of reproductive healthcare. In my teaching, I try to bring in gender, race, class, and disability-based perspectives to highlight how healthcare law (and especially abortion law) marginalises some groups of people more than others. We need to weave these issues throughout textbooks on healthcare law, rather than treating these perspectives as an afterthought. The chapters I contribute use a feminist standpoint to explore the impacts on pregnant people of law, medical practice, and broader societal structures.

Marisha Wickremsinhe (she/her)
Honorary Research Fellow, London School of Hygiene & Tropical Medicine
I was eager to contribute to this volume because its orientation and content support health law's ongoing reckoning with structural injustice and the ways in which the law sometimes works to harm, not help, wellbeing. Legal frameworks – for example, those that tell us which drugs (and, by extension, which people who use drugs) – are 'acceptable' in mainstream society, shape our views on whether and how certain groups can access healthcare. Encouraging students who represent the future of the field to critically engage with the normative assumptions underlying these frameworks is a key step in the road towards health equity.