

FROM THE PUBLISHER

With this issue, the editors conclude a thematic series exploring key concepts in a rights-based approach to health. The series began, in Volume 10 Number 1, by addressing the question, “What is a rights-based approach to health and why should we care?” Subsequent issues considered accountability (10:2), participation (11:1), and non-discrimination and equality (11:2). This final number in the series considers the concept of “international assistance and cooperation.”

The essays in this issue illuminate the critical role of global organizations and mechanisms in fulfilling human rights obligations relating to health beyond our political borders. From diverse perspectives, as lawyers, physicians, and academics, the authors analyze the meaning and dynamics of global health responsibility and seek to establish an initial framework and grounds for action in this domain. Executive Editor Alicia Ely Yamin opens the issue with the recent catastrophe in Haiti to explore the recurrent tensions that arise between humanitarian needs and underlying structural issues, between compassionate relief and technical development, and between a global assertion of international responsibility and a contextually-rooted accountability. These tensions, as she perceives them, elucidate and challenge various applications of the international human rights framework.

Gorik Ooms and Rachel Hammonds draw from the HIV/AIDS epidemic to underscore the urgency of emerging global health dilemmas. They suggest that the manner in which we approach mutual assistance at the global level can be qualified by “the weight of lives not saved.” The authors argue that a citizen’s role in reducing global health disparities is a weighty obligation imposed by international covenants to uphold the right to health. From this perspective, wherein we are all implicitly bound to participate in the global health realm, they offer new analyses and applications of existing methodologies to meet the next round of global health challenges. The authors note the potential of the Global Fund to Fight AIDS, Tuberculosis and Malaria as a prototype for a global health institution that might traverse political boundaries.

This idea is further developed by Andy Seale and colleagues, who suggest that by approving a strategy

shaped by sexual orientation and gender identities (SOGI), the Global Fund demonstrates the necessity of appropriate partnerships between international players and local actors. The essay by Kelly McQueen and colleagues looks specifically at the right to essential surgery and affirms that international organizations are able to make sweeping and solid claims about global health inequity, and in so doing, motivate change on the individual state level.

An underlying theme in many of the essays is the crucial role of international institutions and the necessity of working in cooperation and respect with state and local players for this role to be fulfilled. As Fatma E. Marouf suggests when she advocates for the World Bank’s Inspection Panel, which acts to prevent leakage of funds in the global health sector, such activity, when properly modulated with attention to local and international legal norms and regulation, can exert important influence on resource distribution and allocation. Similarly, Ashley Weber and Lisa Mills use the example of providing essential medicines for low-resource countries to highlight the complexities that arise when national interest and international obligation conflict.

The role of international obligations in a rights-based approach to health is particularly evident in the policymaking realm. Benjamin Mason Meier and Ashley M. Fox challenge policymakers to transcend inherent limitations that result from viewing the right to health as an individual right, and to create collective international legal obligation in tandem with a public health approach. Stacey B. Lee describes how international human rights organizations have served as “key players” in defining and clarifying international obligations. These key players, however, need to devote more effort to working together across their own frameworks, according to Vivek Maru. In order to promote better efficacy, Maru suggests that legal empowerment programs and social interventions should employ the other’s methods.

The approach to addressing global health inequities must be clear. To ensure that essential obligations are met, Emily Mok argues, clarity of standards in the field of health rights must be pursued. As Flavia Bustreo and Curtis F. J. Doebbler insist in their discussion on foreign policymaking, health rights — on every front — should be approached as a priority.

Collectively, the essays in this issue analyze current assumptions and practice invoked by existing notions of “international assistance and cooperation.” The critique available through application of the human rights lens is itself analyzed and rendered more complex. How can a human rights approach strengthen and accelerate global efforts to reduce health inequities and improve health for all? As they constructively assess the landscape of the global health paradigm, the authors pose ambitious alterations to inform the path we are now following.

With this issue, *Health and Human Rights* moves to an online-only format, and in the next issue, to a reconfiguration of our superb editorial team. Our next two issues will focus on the social conditions of health (12:2) and the complex dynamics of human rights in disaster relief (13:1).

It is my privilege as Publisher to support the journal as it continues to adapt to changing times and continues to intensify debate on the topics that have always been its core concern.

Jennifer Leaning