## **BOOK REVIEW**

## Assessing Human Rights in Global Health Governance

JULIE HANNAH

Human Rights in Global Health: Rights-Based Governance for a Globalizing World, edited by Benjamin Mason Meier and Lawrence Gostin, published by Oxford University Press, 2018

Institutions matter, and institutions of global health governance are increasingly implementing human rights to advance global health. This is the central contention of *Human Rights in Global Health: Rights-Based Governance for a Globalising World*, a unique and comprehensive survey of global institutions, public health, and the institutional mainstreaming of human rights.

The book, published in May 2018, is already a celebrated piece of scholarship. It has been praised in many reviews, and its contribution to the health and human rights field will likely continue for years to come. Indeed, the collection represents an enormous and successfully executed undertaking that makes a significant contribution to the health and human rights field. It presents a snapshot of a moment in history when global health institutions and human rights are under massive pressure. History plays a central role in the volume, contextualizing past struggles, achievements, and lessons learned.

The book's main purpose is to provide an introduction to and assess the relationship of human rights within global health governance. Governance for global health is defined in the book as the provision of "expert policy guidance, financial and technical assistance, normative standards, and accountability mechanisms" (p. 3). Importantly, the book conceives of health broadly and features a range of global institutions—including the World Health Organization, the International Labour Organization, and the World Bank—that engage not only in health care but also in the underlying determinants of health. This diverse reflection produces an intriguing narrative of the complex institutional experience of global health and human rights.

While an expansive volume—just under 600 pages—the book remains surprisingly accessible. Much of this is owed to the consistent and deliberate structure of each section, which is much to the credit of the book's editors, Benjamin Mason Meier and Lawrence Gostin, both indefatigable global health scholars and practitioners. The five sections of the collection cover 24 chapters, with more than 40 contributing authors.

The first section focuses on the historical and conceptual frameworks for global health and human rights. Chapter two, by Alicia Ely Yamin and Andrés Constantin, richly recounts two decades of the health and human rights movement and should be required reading (indeed, the entire volume should be) for any introductory public health or human rights course. The final chapter, like each concluding chapter of subsequent sections, looks to the future and critically reflects on what lies ahead for global governance in health and human rights.

The second section focuses on the historical, current, and future of human rights engagement at the World Health Organization. The final chapter is a plaintive call for leadership to sustain the rights-based progress made and to advance institutional mainstreaming more broadly.

A selection of inter-governmental organizations is presented in section three, including an insightful review and candid critique of human rights engagement at the International Labour Organization by Lee Swepston. While the volume cannot include reflections on every inter-governmental organization, it would have been interesting to see chapters on human rights engagement from organizations responding to other

topical global health and rights crises, including the United Nations High Commissioner for Refugees and the International Organization for Migration on migration and human rights, and the United Nations Office on Drugs and Crime on the opioid or global pain crises and human rights. This is certainly something for the editors to consider in a second volume.

The fourth section draws out the contested human rights terrain of global economic governance and multilateral funding and is perhaps one of the more critical sections of the volume. With an introductory chapter framing rights-based approaches to development within global governance for health by Stephen Marks, the section explores the World Bank, the World Trade Organization, the Global Fund, and the future of multilateral funding.

The institutional gaze shifts to the United Nations human rights machinery in the fifth and final section. The opening chapter of this section focuses on the Office of the High Commissioner for Human Rights and the evolution of the right to health from within the office. Gillian MacNaughton and Mariah McGill paint a grim picture of an under-resourced institution where health-related work is not a programmatic priority, with only one fulltime staff member working on the right to health. The final three chapters of the section capture more encouraging perspectives of the rich normative development on health from the special procedures and treaty body systems and the emerging political engagement and promise of the Universal Periodic Review at the Human Rights Council.

The list of authors is formidable and includes leading scholars and senior members of the vast United Nations machinery. Nineteen of the authors are either current or former members of staff in the global governance mechanisms discussed. Many have cut their teeth on the frontlines of health and human rights activism, which allows, at times, for a robust and critical reflection on the challenges, opportunities, and future for human rights in global institutions. A reader would be hard pressed to find any other collection of global rights leaders who offer such insights into these institutions' culture

and politics.

However, the fact that many of the authors—while highly respected thinkers and colleagues—are decidedly "inside" voices does require the reader to accept that some chapters may present a less critical view. While the degree to which critical reflection is featured in the chapters is variable, the skeptical reader may be pleasantly surprised by the candor with which some of the authors reflect on institutional challenges, at times offering incisive and fascinating personal perspectives.

For students and scholars alike with an interest in the current foundations of global health and human rights, this book is an accessible and comprehensive introduction to global governance for health. However, readers with a strong interest in understanding the instrumental and catalytic role of civil society in the successes highlighted will not be entirely satisfied. Again, something to consider for a future collection.

And while institutions matter, the book highlights that the leadership and courage of *people* who staff these institutions are powerful components of rights-based change. From the early leadership of Jonathan Mann at the World Health Organization, to the campaigning of Mary Robinson at the Office of the High Commissioner for Human Rights, to the global health and human rights leaders of tomorrow—people matter.

It is also *people* who are directly affected by global institutions, for better or for worse.

As the authors from UNAIDS (chapter four) state:

The practice of global health governance today is overly technocratic, specialized, and inaccessible to the people it is meant to serve ... Now is the time for the global health community to take stock, to critically revisit its values, and to consider how development approaches must be reformed to achieve the SDGs and promote the realization of human rights for global health. (p. 90)

The synergistic relationship between people and governance institutions as understood by affected communities is perhaps a missing voice from this collection. One volume cannot be all things, but this absence will hopefully inspire a second volume to invite contributions from affected communities themselves who respond to critical questions: How have global governance mechanisms supported meaningful change in their everyday lives? What struggles and cautionary tales can these institutions learn for future sustainability? These voices must remain central not only to institutional programming and practice but also to the scholarly discourse around global health governance and human rights.

Julie Hannah is director of the International Centre on Human Rights and Drug Policy at the University of Essex, UK, and an advisor to the United Nations Special Rapporteur on the right to the enjoyment of the highest attainable standard of physical and mental health.