

## FROM THE PUBLISHER

As Director of the FXB Center for Health and Human Rights, I am delighted to welcome readers to the new series of the Center's flagship journal. *Health and Human Rights* was launched under the FXB Center's founding director, Jonathan Mann, in 1996. Since then, the journal has been critical to the Center's vocation: providing intellectual leadership in the global effort to realize the right to health, in particular for children and other vulnerable groups.

Intellectual leadership in human rights, as Jonathan Mann understood, involves more than rigorous research and analysis — although these are indispensable. Leadership on the right to health must be informed by the knowledge that emerges in front-line contexts, where communities confront the consequences of rights failures, and where implementers work to deliver the services without which rights guarantees are empty promises. Jonathan Mann's purpose in launching the journal was not only to bridge academic disciplines, including public health, medicine, law, and ethics, but to connect the FXB Center's teaching, learning, and intellectual work more closely with front-line settings, where the real struggles over health and human rights take place.

Under Jonathan Mann and his successor in the editorship, Sofia Gruskin, the journal advanced in this direction. It became a premier international forum for critical debate and learning on human rights, engaging contributors from many countries and professional horizons. To the extent possible within the constraints intrinsic to the print medium, it brought the voices and analyses of field practitioners into conversation with the results of more formal scholarly research. But the limitations of *HHR*'s publishing format set barriers to how far and how rapidly this agenda could progress.

Today, we are harnessing new technologies to remove those barriers and break fresh ground in driving action on the right to health. Interactive publishing technologies, allied to an open access philosophy, are the prerequisites for this transformation. Moving *Health and Human Rights* to the web as an open access publication means that anyone in the world with a connection to the Internet can now access the journal's entire content free of charge. But that

shift is only the leading edge of a much more ambitious agenda. What the new *HHR* ultimately aims to achieve is a structural change in how, where, and by whom knowledge about health action and human rights is produced and used.

Readers of the new *HHR* are more than readers. They will participate actively in shaping the journal's content on a daily basis: through comments and discussion threads on existing articles, blog postings, and the submission of "Perspectives" texts for rapid electronic publication, as well as the submission of complete articles through an expedited electronic review process that actively solicits the contributions of field practitioners. Increasingly, *Health and Human Rights* will become the enabling frame for a horizontal knowledge-sharing process among an emerging community of rights practitioners, especially in low-income settings. Increasingly, their discussions will be focused on strategies for solving concrete problems in rights implementation on the ground.

The transformation in process at *HHR* is not an isolated event. It is part of a broader pattern. Teaching and learning in global health are now on the edge of the most profound methodological transformation in their history. That transformation involves many aspects: new pedagogical strategies, such as case-based teaching methods; new uses of interactive technologies to foster critical knowledge-sharing through practitioner networks in real time; the progressive forging of a whole new multidisciplinary framework, vocabulary, and methodology that can finally do justice to the complex challenges of health care implementation in real-world settings.

These transformations, if carried through successfully, may at last allow us collectively to solve — rather than perpetually re-describe — the fundamental problems with which global public health has struggled since its inception: for example, the challenge of delivering disease-specific public health programs in low-income settings in a way that strengthens national health systems rather than undermining them.

Producing, validating, and disseminating the knowledge required to solve these problems may even require the building of an entirely new field focused

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on improving “global health delivery.” Our collective success in building this field is the key to moving the right to health for children and other vulnerable groups from the realm of moral entreaty to the realm of action.

In its new format, *Health and Human Rights* will be on the leading edge of this effort. I warmly invite the readers of this first issue to join us in the ongoing work.

Jim Yong Kim