

VIEWPOINT

Reflections on 25 Years of Health and Human Rights: History, Context, and the Need for Strategic Action

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When we launched the Health & Human Rights Journal 25 years ago it was a heady time for health and human rights conceptually, empirically, and politically. I had just moved to Boston to begin working with Jonathan Mann and Daniel Tarantola at the newly created FXB Center for Health and Human Rights. In those early years, we hosted two international conferences on health and human rights and began to put together education and training materials, but our primary concern was establishment of the Journal. In our internal meetings, we all agreed the thing most crucial to development and establishment of this new field was the launching of a credible peer reviewed and accessible journal. Sandwiched between the Vienna Conference on Human Rights and the Cairo International Conference on Population and Development, its creation occurred in the years where not only was there programmatic work establishing and documenting the linkages between health and rights, but most importantly, from all corners of the globe, it seemed there was general political willingness to “do the right thing.” Perhaps naively, the big issue as we saw it then was the lack of a home where relevant work could be published.

It was HIV that had initially brought us all together and helped us to illuminate the links between health and human rights. What was immediately clear, however, was that if the Journal was to succeed it needed to bring into play other health topics and areas of focus. In many ways, the conferences we held were critical to this effort, highlighting work being done, and that needed to be done, not only in HIV but in other areas such as reproductive health, tobacco control, and humanitarian crises. We worked internally to draw parallels between the concepts and issues we were seeing. Out of that came the famous (at least to us) language of inextricable linkages and three relationships. Under Jonathan’s guidance the first issue of the journal laid out the three relationships as we saw them then: the positive and negative impacts of health policies and programs on human rights; the impacts of human rights violation or promotion on health; and “the inextricable linkages” between the two.

I served as associate editor for the first two years of the Journal’s existence and as its editor until 2006. Throughout that time for each issue we produced, whatever the theme, we strove to ensure we were fostering a coherent body of work, and we worked with authors to ensure all of the articles accepted helped in some way to further clarify these relationships. Those years helped us to move from the conceptual meaning of these linkages across different domains of health, to what these links mean in practice.

In the decade or so that followed, we saw UN agencies and small grassroots organizations alike taking on the ubiquitous “rights-based approach” (whether in rhetoric or reality) as a framework for doing their

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health-related work. A focus on process, more than simply outcomes, was understood to be crucial. It was increasingly recognized that paying attention to rights concerns prior to implementation could not only help to ensure violations did not occur but might actually result, ultimately, in better outcomes and lived experience for the communities most affected. This period also saw the growth of courses and academic institutions around the world engaged in health and human rights training, increased documentation of successes and failures in bringing human rights into health work, and importantly a significant growth in journals open to publishing work at this intersection.

Until recently, it seemed as though the original ideas at the heart of the creation of the Journal and the FXB Center were flourishing. Health and human rights had become an established field, with trainings, publications, new generations of researchers and activists, and even significant differences in methodologies and approach amongst many who see themselves/ourselves as part of what was once called the health and human rights movement. A field was established.

And that takes me to the present moment. Within the larger world within which we live, it is no exaggeration to say that we are all fighting to address increased conservatism, nationalism, populism, and related violence. Outright resistance and ideological attacks against gender equality, sexuality, reproductive freedom, and self-determination increasingly go unchecked, not only in the words of some politicians, but in the words of some media, and even some colleagues and students. Within the health field, there is a visible decline in the willingness to take on these issues once considered acceptable or even crucial. One can only posit this is because they are now considered too controversial or even radical. All of which threaten the very foundations of the health and human rights movement established 25 years ago with the launch of the Journal. National spaces are becoming increasingly constrained, with immediate and direct impacts also on the larger geopolitical space. As I have noted elsewhere, this

is leading, in some cases deliberately, but also in some cases inadvertently, towards our agreement with—or complicity in—reductionist approaches to the health and human rights project. Important issues are being dropped, or de-emphasized, often with technocratic justifications, but with the same ultimate outcome: a decrease in visibility, attention, funding, and action.

At a global level, the Sustainable Development Goals, the most positive blueprint we have for our future, are limited in what they can explicitly offer health and human rights concerns. There are, of course, continuing efforts underway to tease out these dimensions. It is, nonetheless, ironic that 1994's Cairo International Conference on Population and Development (perhaps because it is ostensibly endorsed by a majority of the governments of the world) to this day remains the touchstone undergirding much of health and rights in all spheres, and not only with respect to sexuality and reproduction. It is nothing short of depressing that in the current political moment we are seeking to hold the line on something that happened 25 years ago, and that was recognized even at the time to be inadequate.

The crisis of the moment calls for us to be strategic, not just reactive, and to be able to count on one another whatever our past and present differences. Taking a long view, the stakes are just too high. As a first step we need to support publication of efforts in all domains—research, programming, service delivery, and activism—that can help to ensure the health and human rights of all people. And, however “sensitive” the issue, do not slide off the table simply because it's a complicated political moment. We risk losing not only the gains made so far, but attention and support for the very many tough issues at the crux of health and human rights work. We need more than ever to draw attention to all that is happening to undermine health and rights, and collectively and directly take this on wherever we work. This is not simply a matter of academic concern. It tangibly matters for the health and lives of people around the globe. Twenty-five years since its inception, the importance of the Journal, and the

space it provides to keep critical issues on the table in academic, policy, and programmatic discussions, has never been greater.

