

## COMMENTARY

# A Personal Commentary on the Two Conferences on Health and Human Rights

STEPHEN P. MARKS

This 30th anniversary of *Health and Human Rights (HHR)* is an extraordinary moment to think back on how far we have come. The enormous debt we all owe to Jonathan Mann will no doubt be expressed by all contributors to this commemoration. I was privileged to participate in the first two health and human rights conferences in 1994 and 1996 and to have been profoundly influenced by them in both my intellectual development and my professional career. I no doubt owe the invitation to the first conference to Sofia Gruskin, my former teaching assistant, who had taken up a position at the newly created FXB Center for Health and Human Rights (founded thanks to the vision and generosity of Albina du Boisrouvray) and contributed her background in international human rights to the launch of the Center and the organization of the conferences. Jonathan's inspiring vision that emerged from his experience dealing with the HIV/AIDS pandemic was expressed so eloquently in this passage of his report for the Hastings Center:

*Modern human rights, precisely because they were initially developed entirely outside the health domain and seek to articulate the societal preconditions for human well-being, seem a far more useful framework, vocabulary, and form of guidance for public health efforts to analyze and respond directly to the societal determinants of health than any inherited from the biomedical or public health traditions.<sup>1</sup>*

It is truly extraordinary for me as a participant to look back at who was there and the spirit that prevailed in our deliberation and outcome documents. The First International Conference on Health and Human Rights (September 1994) was an elaborate event, involving 72 individuals from the health and human rights fields from 23 countries and 21 "affiliated organizations," including local, national, and international health and human rights groups. It concluded with the adoption of a document enumerating five tasks, along with "actions and follow-up ... for each."<sup>2</sup> Rereading that list, I realize how the five tasks exemplify the clear purposefulness of our deliberations and the keen desire to launch a multipronged effort to translate the

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conceptual linking of health and human rights into a set of meaningful actions.

Expanding and facilitating communication among health and human rights workers and organizations (task 1) has made enormous progress since 1994. Of course *HHR* and its free, online, open-access availability, as well as the World Health Organization website on human rights (<https://www.who.int/news-room/fact-sheets/detail/human-rights-and-health>), contribute to that communication. This task was further promoted when the American Public Health Association adopted six “Principles on Public Health and Human Rights” in November 2000 as just one example of engaging health practitioners to work with scholars and activists.<sup>3</sup>

Collecting and publishing examples and suggestions of actions linking health and human rights (task 2) is of course also what *HHR* and similar publications—such as the *International Journal of Human Rights in Healthcare*, the *International Journal for Equity in Health*, and the *International Journal of Social Determinants of Health and Health Services*—have done.

The education of health workers by disseminating a registry of courses and programs, developing model curricula, and publishing articles (task 3) has also expanded. Not surprisingly, Sofia Gruskin, who was instrumental in organizing both conferences, created a database of health and human rights syllabi as part of her creative initiatives as director of the Program on Global Health and Human Rights and the USC Institute on Inequalities in Global Health. I had the pleasure of working with her when she created, in 1997, the Program on International Health and Human Rights at the FXB Center and admire deeply how she has contributed to the shared vision from the conferences at Harvard (including as editor of *HHR*) and her current leadership at USC. Another example of task 3 achievement is the continuing efforts of the International Federation of Health and Human Rights Organisations, which “supports the mobilization of health professionals for human rights through: 1) advocacy on social media, and 2) information, education and communication activities.”<sup>4</sup> It is cur-

rently developing a *Right to Health Toolkit*, which is designed for health care workers.<sup>5</sup>

Task 4 was quite ambitious, as it covered “advocacy, education and research on specific health and human rights issues” through six actions, such as forming interest groups, engaging with the international human rights system, developing methodologies, and negotiating and funding strategies. It even identified the need to address “emerging areas such as environmental health and rights,” which has become a priority area in human rights, reflected in the mandate of the United Nations Special Rapporteur since 2012 and a United Nations declaration on the human right to a clean, healthy and sustainable environment in 2022.<sup>6</sup>

The final task was to organize a second international conference on the topic within two years, and that is precisely what happened in October 1996, fulfilling the aspiration to expand participation by bringing together 500 participants.<sup>7</sup> I was honored to present to the conference my thoughts on “Common Strategies for Health and Human Rights: From Theory to Practice.”<sup>8</sup> Little did I know that my explorations on that topic would change my life.

Acknowledging the mobilizing force of these two conferences is not a polite expression of support for this journal. It is an honest assessment of the impact the conferences had on the intellectual framing of health and human rights, on the professional careers of many participants, on institutional growth in this field, and on related national and international policies. But it is also deeply personal for me. Indeed, I came to the two conferences from my position as director of United Nations studies at the School of International and Public Affairs and lecturer at the Law School at Columbia University, being deeply anchored in the field of international law and organizations. By participating in follow-up events that Jonathan, Daniel Tarantola, and Sofia Gruskin organized at the FXB Center, I realized the value of engaging the mutually reinforcing character of the health and human rights paradigms. The two conferences motivated me to see a future in professional engagement in implementing the action plan adopted at the first conference and

considerably expanded upon in the second. As I noted at the time, “It is truly extraordinary that five hundred people have come to explore a theme that, a few short years ago, might have appeared esoteric and marginal.”<sup>9</sup>

After Jonathan’s tragic death in 1998, I advised the Harvard School of Public Health that his successor should follow the same formula of success—namely, a medically trained person with considerable experience in public health and an interest in integrating human rights into public health teaching, research, and advocacy. My recommendation was rejected, and the position of FXB Center director was offered to me, quite surprisingly. I was fortunate to work with the outstanding staff Jonathan had assembled and to take inspiration from giants in the field, such as Larry Gostin, Anthony Fauci, Jack Geiger, Nahid Toubia, and Mathilde Krim, and leading human rights scholars and practitioners, also committed to this vision, such as Virginia Leary, Michael Kirby, Paul Farmer, Jennifer Leaning, Alicia Ely Yamin, and Paul Hunt, to name a few.

“Transformative” is an overused and abused term in modern parlance, but I feel confident applying it to the effort made by the two conferences. Indeed, Jonathan wrote, “Only with the passage of several years will this newborn’s relationship to the intellectual and pragmatic work of the world become evident.”<sup>10</sup> Frankly, my life was transformed, literally. Not only did I move to Harvard and spend 23 years as the FXB Professor of Health and Human Rights (six years as the FXB Center’s director), but my teaching and research shifted to the precise set of tasks identified in the 1994 and 1996 conferences. Starting with a 1999 study on the public health and human rights implications of economic sanctions, I published on the health and human rights approach in the Carnegie Council’s *Human Rights Dialogue* magazine, the *Journal of Law, Medicine and Ethics*, the *American Journal of Public Health*, and the *Proceedings of the American Society of International Law*.<sup>11</sup> This new focus of my scholarship led me to explore a range of fascinating intersections of health and human rights, such as genetic manipulation and cloning, tobacco control,

medical experimentation, access to medicines, the right to health, the right to benefit from advances in science and technology, and mental health.<sup>12</sup> I beg the reader not to misinterpret this enumeration of publications; my sole purpose is to illustrate the direct connection between my participation in the two conferences and my subsequent scholarship.

My professional life was profoundly changed, and that continues to this day in my current functions as founding dean of the Jindal School of Public Health and Human Development in India. With newly recruited faculty and students dedicated to the values articulated at the conferences, I feel proud to be continuing to heed the call to action I expressed at the 1996 conference “that we will not remain bystanders while millions upon millions of children, women, and men continue to live in ignorance, poverty, and deprivation of their fundamental dignity and integrity. Ideas,” I concluded, “do change the world, and the linkage of human rights and health work is one of those ideas.”<sup>13</sup>

## References

1. J. Mann, “Medicine and Public Health, Ethics and Human Rights,” *Hastings Center Report* 27/3 (1997), reprinted in J. Mann, S. Gruskin, M. A. Grodin, and G. J. Annas (eds), *Health and Human Rights: A Reader* (New York: Routledge, 1999), p. 444.
2. *Conference Report: First International Conference on Health and Human Rights* (September 22–24, 1994, Harvard University), <https://www.hhrjournal.org/wp-content/uploads/sites/2469/2020/08/4-First-International-Conference.pdf>.
3. See C. E. Easley, S. P. Marks, and R. E. Morgan, “The Challenge and Place of International Human Rights in Public Health,” *American Journal of Public Health* 91/12 (2001).
4. IFHHRO, “About Us,” <https://www.ifhhro.org/about-us/>.
5. IFHHRO, “Right to Health Toolkit,” <https://www.ifhhro.org/home/dignity-by-the-bedside-project/>.
6. Human Rights Council, Human Rights and the Environment, UN Doc. A/HRC/RES/19/10 (2012); United Nations General Assembly, The Human Right to a Clean, Healthy and Sustainable Environment, UN Doc. A/RES/76/300 (2022). See Office of the United Nations High Commissioner for Human Rights, United Nations Environment Programme, and United Nations Development Programme, *What Is the Right to a Healthy Environment? Information Note* (2023), <https://www.undp.org/sites/g/files/>

zskgke326/files/2023-01/UNDP-UNEP-UNHCHR-What-is-the-Right-to-a-Healthy-Environment.pdf.

7. J. M. Mann and S. Gruskin, "The 2nd International Conference on Health and Human Rights: Bridge to the Future," *Health and Human Rights Journal* 2/3 (1997).

8. S. P. Marks, "Common Strategies for Health and Human Rights: From Theory to Practice," *Health and Human Rights Journal* 2/3 (1997).

9. *Ibid.*, p. 95.

10. J. Mann, "A New Journal: A New Beginning," *Health and Human Rights Journal* 1/1 (1994), p. 1.

11. S. P. Marks, "Economic Sanctions as Human Rights Violations: Reconciling Political and Public Health Imperatives," *American Journal of Public Health* 89/10 (1999); S. P. Marks, "The New Partnership of Health and Human Rights," *Human Rights Dialogue* (Spring/Summer 2001); S. P. Marks, "Jonathan Mann's Legacy to the 21st Century: The Human Rights Imperative for Public Health," *Journal of Law, Medicine and Ethics* 29/2 (2001); Easley et al. (see note 3); S. P. Marks, "Health and Human Rights: The Expanding International Agenda," *Proceedings of the Annual Meeting (American Society of International Law)* 95 (2001); S. P. Marks, "The Evolving Field of Health and Human Rights: Issues and Methods," *Journal of Law, Medicine and Ethics* 30/4 (2002).

12. S. P. Marks, "Tying Prometheus Down: The International Law of Human Genetic Manipulation," *Chicago Journal of International Law* 3/1 (2002); S. P. Marks, "Human Rights Assumptions of Restrictive and Permissive Approaches to Human Reproductive Cloning," *Health and Human Rights Journal* 6/1 (2002); C. Dresler and S. P. Marks, "The Emerging Human Right to Tobacco Control," *Human Rights Quarterly* 28/3 (2006); S. Marks, "Human Rights-Based Approach to Tobacco Control," invited commentary in *Tobacco Control* 21/2 (2012); S. Marks, "Medical Experimentation," in *Encyclopedia of Genocide and Crimes Against Humanity* (New York: Macmillan Reference, 2004); S. P. Marks, "Access to Essential Medicines as a Component of the Right to Health," in A. Clapham and M. Robinson (eds), *Realizing the Right to Health* (Zurich: Rüfer and Rub, 2009); S. Marks and A. Lee Benedict, "Access to Medical Products, Vaccines and Medical Technologies," in J. M. Zuniga, S. P. Marks and L. O. Gostin (eds), *Advancing the Human Right to Health* (Oxford: Oxford University Press, 2013); S. P. Marks, "Normative Expansion of the Right to Health and the Proliferation of Human Rights," *George Washington International Law Review* 16 (2016); S. P. Marks, "Out of Obscurity: The Right to Benefit from Advances in Science and Technology and its Implications for Global Health," in *Proceedings of the 3rd Conference on Law, Science, and Technology: Health and Science: Human Rights and Legal Issues* (Taipei: Aca-

demia Sinica, 2012); S. P. Marks, L. Verdelli, and S. Willis, "Mental Health and Human Rights: International Standards and Clinical Practice," in N. S. Rubin and R. I. Flores (eds), *Cambridge Handbook of Psychology and Human Rights* (Cambridge: Cambridge University Press, 2020).

13. See Marks (1997, see note 8), p. 104.