

## GLOBAL HEALTH LEADERSHIP AND MANAGEMENT

Edited by William H. Foege, Nils Daulaire, Robert E. Black, and Clarence E. Pearson. 241 pp. San Francisco, Jossey-Bass, 2005. \$47. ISBN 0-7879-7153-7.

IT IS A WELCOME BREATH OF FRESH AIR TO read William H. Foege's preface to *Global Health Leadership and Management*. He zeroes in on the looming crisis in global public health with a tiger's instinct for the jugular vein.

Bridging the huge gap between the knowledge of medical science and the delivery of public health is the focus of this book. From the standpoint of global public health, medical science that goes undelivered is the same as no medical science at all. To Foege, the effective and sustainable delivery of medical science is critical to achieving better world health. He believes that the key is creative and effective leadership and management.

Foege declares that

science is not enough, good intentions do not change the health picture, and resources are easily wasted. We need the same constant attention that is absolutely expected in the business community, with a focus on developing objectives, working out strategies for reaching those objectives, organizing all components of a program to pursue the strategy, pushing for continuous quality improvement, and developing the ability to measure both process and outcome goals for constant midcourse corrections.

He goes on to state that "global health waits expectantly for management to match its science" (and, I might add, for more leaders and commentators who can match Foege's insight and vision). With that, the powerfully written preface ends.

What follows, in a well-organized fashion, is a collection of 17 essays of varying quality, each 6 to 18 pages in length, written by some of the most prominent figures in international public health. A few of the contributors merely restate the problem or recite the obvious and do not build particularly well on Foege's excellent foundation — perhaps understandably, because this book charts truly new territory. It must have been difficult to organize such an army of prominent explorers and to keep them marching in the same

direction. Editing the book must have been a considerable challenge. Overall, however, it has come out well. The occasional and probably unavoidable unevenness does not really matter, because many contributors have delivered pure diamonds. These essays alone are well worth the price of the book and the time it takes to read it.

Harlan Cleveland's essay regarding the broad effects that the global information revolution may be having on global public health is particularly thoughtful, as well as thought-provoking. Nils Daulaire presents a powerful analysis of the striking similarities between the characteristics of successful leaders at the local level in global health and those of managers at the level of individual business enterprises. Susan Dentzer details the important lessons to be taken from Brazil's approach to HIV and AIDS. Jo Ivey Boufford effectively addresses the critical problem of how to find, train, retain, and motivate the extraordinary people who will be the agents and leaders of change. She examines this problem from the standpoint of what has worked well in the business world.

When I began reading the short contribution from Jeffrey D. Sachs, I was prepared to be disappointed with a brief summary of what he has often expressed before — how could he present anything really new in only six pages? I was wrong. The last half of his essay should be published in the opinion and editorial pages of major newspapers everywhere. It is a precise, four-step blueprint for poor countries to obtain more financing for health services from donors. It is also a practical and politically savvy prescription that incorporates the best of business planning and management.

This collection does not (and as structured, obviously could not) address in depth many of the obstacles of structure, politics, and values that confront global public health. But it does offer important new ideas and ways of thinking that will be essential to incorporate if substantial progress is to be made. In that respect, it is a must-read for anyone who has a stake in global public health, which means everyone.

A particular challenge is that many of the changes that are needed could be perceived to threaten the niches of global health professionals. The changes will need to be spearheaded by "transformational leaders" in the field, as Cleveland refers to them. As he says, "It takes an unusual measure of both self-confidence and tact for

[such leaders] . . . to muscle into the policy domains of more conventional colleagues.” I hope these leaders will be successful. It will be ironic if the final analysis shows that, as Pogo said, “We have met the enemy and he is us.”

Kenneth E. MacWilliams, M.B.A.

Woodrow Wilson Associates  
New York, NY 10022  
macwilliams@post.harvard.edu

## PERSPECTIVES ON HEALTH AND HUMAN RIGHTS

Edited by Sofia Gruskin, Michael A. Grodin, George J. Annas,  
and Stephen P. Marks. 649 pp. New York, Routledge, 2005.  
\$34.95. ISBN 0-415-94807-X.

**D**URING THE PAST DECADE, A GROWING body of interdisciplinary academic literature has explored the relationship between health and human rights. Not surprisingly, much of that scholarship has focused on either the health implications of human rights violations or the effect of health policies and programs on human rights. Another dominant theme is the synergy between health and human rights. Contributors have sought to substantiate the hypothesis of the late Jonathan Mann that the promotion and protection of health and human rights are “inextricably linked.” A selection of articles in this new field was reprinted in *Health and Human Rights: A Reader*, edited by Mann et al. (New York: Routledge, 1999), and this book soon became a popular teaching aid at schools of public health offering courses on health and human rights. *Perspectives on Health and Human Rights* is described as a “follow-up” and companion volume to this earlier collection.

Like its predecessor, *Perspectives* reproduces already published work. It opens with a broad analysis of the links between health and human rights. (For those unfamiliar with the field — and, in particular, with human rights treaties, law, and institutions — the first chapter is a useful primer.) Articles exploring these links are then arranged into four substantive sections: development, emerging technologies, sexual and reproductive health, and violence. Although these categories provide a helpful framework, they are necessarily broadly construed and tend to lead to some unusual bedfellows. The section on emerging technologies begins with two articles on cloning and genetic manipulation, before drawing attention to less

glamorous but far more important work on patents and access to essential drugs. In the section on violence, a persuasive article by Joan LeGraw and Michael Grodin condemning the participation of medical personnel in executions by lethal injection rubs shoulders with a report by Physicians for Human Rights on maternal mortality in the Herat Province of Afghanistan.

Two subsequent sections explore the use of qualitative and quantitative methods in health and human rights and analyze recent case law from South Africa and Venezuela on the “right to health” — a concept alien to U.S. jurisprudence. The book ends with a discussion of human rights advocacy, education, and mobilization that makes clear the editors’ commitment to health and human rights as something more than an intellectual discipline. The editors emphasize the responsibility of health professionals to protect and promote human rights, and one editor observes that “medical ethics devoid of human rights become no more than hollow symbols.” This is all the more poignant in light of the recent revelations concerning the role of health care personnel in aggressive interrogations at Abu Ghraib and Guantanamo Bay.

It is easy to criticize collections for errors of omission, but there is a conspicuous absence here. Although the events of September 11, 2001, and the severe acute respiratory syndrome epidemic of 2003 are mentioned briefly in the introduction, none of the chapters in the book focus on the tensions between the protection of human rights and public health in the context of public health emergencies, whether due to terrorism or acts of God. The significance of these issues has been highlighted by Hurricane Katrina (and its aftermath) and by the emergence of avian flu as a global threat, but important developments and debates in both domestic and international arenas predate these occurrences.

That said, *Perspectives on Health and Human Rights* is a handy compendium of some of the recent literature. It will also be a valuable teaching aid for anyone seeking to bring health and human rights into the curriculum of a school of public health, law, medicine, or nursing.

Jonathan H. Marks, M.A., B.C.L.

Georgetown University Law Center  
Washington, DC 20001  
jm486@law.georgetown.edu

*Book Reviews Copyright © 2005 Massachusetts Medical Society.*