

USC Law and Global Health Working Group - Meeting Notes
January 29th, 2015
12:30pm-1:30pm PST

Participants

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Meeting Summary

The second meeting of the Law and Global Health working group began with a brief summary of points agreed on at the inaugural meeting. Key points relevant to the group's work going forward to understand and explore the intersection of law and global health are noted below.

- A broad view of Global Health is important in how the group works together. Thus the scope of Global Health for the purposes of the working group includes not only global norms and institutions, work in countries other than the US, but also work happening here.
- Regarding law, the group is not limiting its focus to any particular kind of law (e.g. international human rights law, trade law, domestic law within countries, etc.). A very broad remit in how the group looks at law is vital.
- Some participants work directly at the intersection of law and global health. Others touch on the intersection in more diffuse ways, but all are concerned with the impacts of their work on the health of populations in a global context. It is this combination of viewpoints and disciplines that makes the work of this group very exciting.

As a group, we are still in the process of determining what can be the “value added” of coming together. All of the usual options are on the table—Zumberges, doctoral committees, joint courses etc.—but the group has recognized the potential for deeper, more interesting collaboration, but to accomplish this we need to get a better sense of who is at the table, how we think, and what we all do.

For this second meeting, the group agreed to engage critically on a few general conceptual areas, beginning with a discussion on law and global health as it sits within the larger global health research agenda, and the implications of various definitions of “evidence” across disciplines.

Participants discussed questions of jurisdiction and authority, and who is in charge of the global health research agenda? Participants observed that often, medicine and health-related disciplines end up leading in terms of shaping research questions and defining the contours of the dialogue, and that this has a very real impact regarding how we think about global health. A partial explanation discussed is that some of this is related to funding streams. The implications for how this shapes how law is understood to be part of the global health agenda was touched on, and recognized as relevant to the engagement of lawyers, social scientists and others in any global health-related discussion.

A key question explored was what counts as evidence in the Global Health context. A number of examples were discussed, bringing to light the differences in disciplines represented at the meeting. Participants noted that our respective disciplines very much affect our thoughts in defining evidence, but that the answer to “what counts as evidence” also varies based on the question one is exploring. For those with a legal entry point, adding scientific backing to assertions was a critical role of evidence but even beyond the implications for research what counts as evidence could range from facts or information indicating whether an assertion is truthful to questions of admissibility. While for those with a health entry point, evidence can often deal with the impact of a medical or health intervention, think of RCTs as an extreme example, but evidence is often also about trying to determine the value for health of an intervention (for example a change in law) being undertaken. Participants also noted that an important issue in working across disciplines is the weight accorded to different types of evidence by different types of researchers. Different types of evidence really count for different things, and participants discussed that there really cannot be one standard; building in qualitative evidence, quantitative evidence, theoretical models, and other types of evidence may individually and collectively be ideal for addressing a research question at the intersection of law and global health. These differences would need to be explicit in any discussion going forward.

The group then linked this discussion to prior points made about different disciplines working together. Participants noted sometimes a sociologist or economist can address a problem perfectly well and there isn't a need to take a multidisciplinary approach, noting however that to take a multidisciplinary approach may be most effective when addressing large scale global health problems which bring in questions of law and policy. Finally, participants emphasized that their interest at this point in relation to this group is a multidisciplinary approach (in which knowledge is drawn from different disciplines that stay largely within their own boundaries) as opposed to an interdisciplinary one (in which disciplinary boundaries are broken down far more).

The meeting closed with agreement that a good way to move forward would be for two people to tackle the same topic but from different disciplinary entry points—e.g. criminalization of HIV—and then briefly present to the group to jumpstart a conceptual conversation which could lead to some decisions about ways for the group to move forward over the next year.

Action Items

- For those that have not done so, **please fill out the Law and Global Health Working Group matrix**
- Laura and Neeraj have kindly agreed to present on criminalization of HIV transmission as a way to jumpstart the conversation **on March 9th at 12:30pm in Room 118/120 at the law school**

We look forward to seeing everyone there!