


EDITORIAL

HUMAN RIGHTS, LIFE WITH DIGNITY, AND PUBLIC POLICIES

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REFLECTION PLANS

From the perspective of upholding human rights, a dignified life necessitates deliberate, timely, and effective public policy implementation. Despite acknowledging significant progress, historically and structurally unresolved critical issues remain that impede the advancement of improved and more dignified conditions for individuals. Emerging developments also contribute to these discussions—such as health, gender-related issues, and artificial intelligence—all serving as areas for reflection. Here, a fundamental tension is recognized between promises of efficiency or access, risks of new exclusions, informational asymmetries or automated biases, and increased complexity in the extension and application of human rights at the global level (Hernández et al., 2025; Quintero et al., 2025; Petrov et al., 2024; Russo, 2024; Caraballo et al., 2024; Arrieta, 2018).

A global perspective is presented regarding the discourse on human rights and dignified life, which necessitates clearly distinguishing these areas within public policy—in terms of gender, violence prevention, health, coverage, and artificial intelligence (AI) and analyzing their specific obligations without subsuming one into another.

VIEWS ON...GENDER AND PREVENTION OF VIOLENCE. Autonomous and measurable obligations

The magnitude of violence against women is incontrovertible. In this context, the WHO (2024) estimates that one in three women has experienced physical and/or sexual violence during their lifetime, resulting in significant repercussions on their health and the exercise of other rights. These statistics underscore the necessity of prioritizing



primary prevention, specialized services, and comprehensive pathways concerning budgets, targets, and public monitoring.

At the global level, the obligation to ensure a life free from violence is both autonomous and binding. To bridge the gap between legal frameworks and practical realities, it is essential to establish a system of records and comparable data on violence with appropriate safeguards. Additionally, mechanisms for the periodic evaluation of the state's response in terms of coverage and quality, as well as minimum-maximum standards for access to justice and protection are necessary. Furthermore, the impact of preventive measures should be evaluated. Public policy on gender is mandated to ensure a life free from violence, encompassing the duties of prevention, protection, investigation, punishment, and reparation.

General Recommendation No. 35 revises the framework on gender-based violence, establishing stringent compliance requirements that necessitate comprehensive policies addressing structural causes, such as stereotypes, inequality, and impunity, through an intersectional approach and the use of comparable data ([CEDAW Committee, 2017](#)). Consistent with these principles, the Istanbul Convention integrates the four Ps: prevention, prosecution, protection, and coordinated policies, providing replicable frameworks applicable beyond Europe ([Council of Europe 2011/2014](#)).

In contexts involving automated tools, it is imperative to implement safeguards to prevent revictimization, bias, and disproportionate surveillance risks, as outlined by [UNESCO \(2021\)](#) and [OECD \(2024\)](#). Recent criminological research on femicide and other forms of violence highlights enduring patterns of justification, normalization, and control over women, which extend beyond punitive measures and necessitate educational, psychosocial, and intersectoral coordination efforts ([Cunha et al., 2024](#)). Consequently, it is essential to evaluate substantive outcomes, such as the reduction in lethality, timeliness of responses, and effectiveness of protection measures, rather than merely quantifying activities ([D'Ignazio et al., 2022](#)). Within the Inter-American context, the standards of substantive equality, contextual analysis, and the requirement of heightened obligations inform this structural interpretation.

UNIVERSAL HEALTH COVERAGE. From the AAAQ to Universal Health Coverage

The right to health extends beyond the mere provision of health services as an isolated category; it necessitates guarantees that encompass accessibility, quality, non-discrimination, privacy, and patient safety ([WHO, 2021](#)). From a human rights perspective, General Comment No. 14 of the [CESCR Committee \(2000\)](#) articulates the AAAQ standard (availability, accessibility, acceptability, and quality) and imposes obligations on states to respect, protect, and fulfill these rights to health. In the context of global monitoring, the report "Tracking Universal Health Coverage" (2023) indicates stagnation in essential services since 2015 and an increase in catastrophic household spending, thereby diverging from the objective of Sustainable Development Goal (SDG) 3.8 on Universal Health Coverage ([WHO/World Bank, 2023](#)).

Addressing these gaps is imperative, as they remain unresolved and extend beyond mere technicalities; they manifest as risks to dignity when issues such as false negatives,

biases, lack of explanatory clarity, or unjustified or unexplained scores in metrics impact the care pathway (UNESCO, 2021; OECD, 2024). In translating these concerns into policy, with the aim of global replication, priority must be accorded to universal coverage that ensures explicit benefit packages based on the criteria of need and cost-effectiveness. This includes reducing financial barriers by seeking protection against out-of-pocket expenses and consolidating sustainable health financing. Furthermore, public measurement of quality through clinical indicators and patient experience data is essential to support independent audits and effective redress. The creation of visible and transparent metrics (WHO, 2021) is crucial, with the sole aim of guaranteeing, rather than compromising, safety and equity within the system.

From this perspective, it is feasible to cultivate the highly sought-after regulatory coherence and logically address the OECD principles (2019, updated in 2024) and the UNESCO (2021) recommendation, both of which emphasize that the foundation of human rights is centered on dignity, transparency, and human oversight. The WHO operationalizes these principles within the health sector through six specific areas of governance, including transparency, accountability, and inclusiveness (OECD, 2024; WHO, 2021; UNESCO, 2021).

Consequently, when systems or organizations engage in processes that impact the health or integrity of women and girls, global political frameworks should mandate impact evaluations, independent audits, documentation, and mechanisms for redress. These safeguards are not substitutes for gender or health obligations but serve to reinforce them. The provision of health information and protection of sensitive personal data necessitate careful equilibrium between the right to information, privacy, and equity (Panteli et al., 2025). The digitalization of health records, telemedicine, and data analytics raises concerns regarding biases, secondary uses, data retention periods, explainability, and accessible channels for contesting automated decisions with clinical implications (Alhammad et al., 2024). Transparency and traceability are essential to ensure that the promise of improved care does not result in new disparities or technocratic opacities.

ARTIFICIAL INTELLIGENCE (AI). From technological marvel to public responsibility:

Artificial intelligence (AI) has transitioned from a mere promise to a vital component of decision-making. In this context, the discourse surrounding principles has achieved significant cross-cutting consensus, now evident in comparative regulations and prevalent in international recommendations and program documents. However, this consensus risks becoming ineffective unless the principles are translated into operational rules, institutional capacities, and budgetary allocations. Principles alone are inadequate if they do not evolve into regulations, capacity, or budgets. The European Union's AI Act (2024), as the inaugural horizontal framework for regulating this tool, introduced a tiered, risk-based structure that mandates graduated obligations for data management, technical documentation, record-keeping, and ex-post monitoring, alongside certain prohibitions. This recent regulatory development in Europe signifies a pivotal shift that is not merely rhetorical but results from the influence exerted by stakeholders

with decision-making authority, where society plays a crucial role within that social ecosystem. This necessitates bridging the historical gap between formal and actual policies. In essence, there is a need to establish a systematic operational process, which is an essential element of effective policy management: identifying accountability, evidence requirements, thresholds, and consequences ([Regulation \(EU\) 2024/1689](#)).

The lesson for Latin America is not to replicate this framework but to draw inspiration from it, and importantly, to adapt the actual decision-making challenges that determine access to essential public sector goods to the local contexts of health and social protection, where the asymmetry between technology providers and institutional users is pronounced, and where Latin America ranks high after the Eastern Mediterranean, Africa, and Asia ([WHO, 2024](#)). Currently, every sphere of human activity coexists with proctoring systems, learning analytics, and administrative automation.

Without vilifying or idealizing the tool, it is recognized that non-discrimination, data protection, and the right to meaningful human review represent the fundamental principles necessary for the coexistence of technology and human rights ([Bartsch & Seidel, 2025](#)).

FROM THE PERSPECTIVE OF POLITICS, LAW, AND HUMAN DIGNITY

While not seeking to exhaust the debate, a foundational framework is proposed to facilitate the interpretation of policies and regulations, thereby avoiding oversimplifications:

- **People-centeredness:** Public initiatives gain significance when they enhance the capabilities and mitigate the vulnerabilities of historically marginalized groups. During periods of disruption, this focus on people-centeredness must be maintained through data use and active listening.
- **Non-discrimination and intersectionality:** Disadvantages often intersect, encompassing factors such as gender, class, ethnicity, age, disability, rurality, and sexual orientation. Recognizing these intersections is not merely descriptive; it enables statistics, budgets, and procedural safeguards to reflect real-life conditions more accurately.
- **State due diligence:** The processes of prevention, investigation, punishment, and redress are not straightforward formulas. Regional experiences indicate that structural violence necessitates differentiated territorial approaches to achieve substantive equity in health.
- **Rights-oriented data and technological governance:** At the intersection of epistemic validity, ethical legitimacy, and political responsibility, it is imperative to deliberate on the capabilities and legitimate applications of knowledge. Artificial intelligence and digital systems in health and education challenge this boundary.
- **Participation and accountability:** The perspectives of women, incarcerated individuals, students, patients, workers, and local communities reveal blind spots in technical design.

The primary opportunity, along with the associated risk, resides in the translation of principles into actionable procedures, including clear secondary rules or regulations, mandatory formats, allocated, executed, and auditable budgets, and corrective

mechanisms. The emphasis is on the “how” of policy during its implementation phase, as this is where effective governance of the rule of law is validated. Ultimately, public performance is assessed by the disparity between what is formulated and what is executed; the smaller this disparity, the greater the assurance of the rights. The transition from programmatic to operational policy dimensions determines its legitimacy and is evaluated through its procedures (such as full participation, traceability, and control), rather than solely through its stated objectives ([Ziritt et al., 2022](#)).

Life with dignity should not be regarded as a mere technological externality but as the foundational principle guiding institutional design. The disparity does not lie in the principles themselves, considering our substantial normative coherence: the OECD provides a framework of values and public governance; UNESCO emphasizes dignity and human oversight; the WHO outlines the six pillars of the health sector; and the EU offers a risk-based architecture and ex-post surveillance. Rather, a gap exists in operational institutionalization, which necessitates external validation, standardized reporting, independent audits, registries, and monitoring with enforceable consequences, alongside a gender perspective to prevent the encoding of inequity within models. The immediate task is to translate this guiding principle into operational secondary regulations, such as resolutions, circulars, and decrees. From this foundation, the health and gender sectors can integrate cases, metrics, and evidence to complete the human rights guarantee cycle for women with disabilities.

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In this context, the notion of living with dignity encompasses values such as justice, freedom, differentiated equality, development, and human welfare. These values necessitate the presence of verifiable institutions, including a democratic system. Legal and political traditions have long suggested that, in the absence of state capacity, independent evaluation, and citizen oversight, the disparity between promises and outcomes widens. Moreover, both national and supranational levels—such as regional cooperation and integration, trade protection, data protection, banking, consumer protection, legal, financial, and digital security, conflict management, and labor interests—must be prioritized without disregarding the specificities of diverse cultural contexts.

Scientific knowledge and the field of science, with an increased focus on addressing these paramount challenges through the proposal of complex and inclusive solutions, are now being transformed by continuous advancements in cybernetics, artificial intelligence, and biotechnology, which are revolutionizing all contexts and realities ([Hernández, 2022](#)).

The articles published in Volume 2025 align with these diverse strategies, in harmony with these diverse plans for human dignity, rights and politics, from their relationship, construction, application and execution.

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