

Beyond national resilience: liability for sanctions impact

Rodríguez and colleagues¹ offer compelling evidence linking sanctions to age-specific mortality. The authors showed that US-imposed unilateral sanctions significantly increase mortality in children and people aged 60–80 years. These findings align with previous evidence and have profound global health implications. Gibson and Darmstadt² place these results in four decades of evidence linking both general and aid-related sanctions. Notably, the study by Gutmann and colleagues,³ which analyses both UN and US sanctions, concludes that sanctions substantially reduce life expectancy, with UN sanctions taking a greater toll than US sanctions. This disparity highlights the need for transparent comparative analysis to precisely distinguish the impacts of different sanctioning authorities and to clarify the implications of sanctions. Furthermore, Gibson and Darmstadt² argue that the easing of sanctions on Syria reflects growing awareness in sanctioning states of the unintended humanitarian consequences of sanctions. However, in the absence of robust evidence, such a shift can be plausibly attributed to geopolitical realignment, rather than to humanitarian intent.

A broad consensus now recognises the severe health consequences of economic sanctions; however, effective strategies to mitigate these ramifications are elusive. *The Lancet Global Health* August Editorial⁴ urges sanctioned countries to adopt domestic reforms, such as progressive taxation and efficiency gains. Our research supports that national efforts can mitigate health consequences.⁵ Nevertheless, such strategies raise two concerns. First, prioritising domestic action shifts attention away from the legal and ethical responsibility of the sanctioning states for the harm caused.

Second, expecting transformative change from nations with fragile health systems, without international accountability, is unrealistic. A meaningful global response should include accountability mechanisms for sanctioning states and should empower international institutions to uphold and enforce rights protections.

Calls for national self-reliance under structurally imposed constraints obscure the legal duties of sanctioning states and unjustly shift the burden onto affected populations. Both unilateral and multilateral sanctions can infringe on core human rights—including access to health, livelihood, and due process—often without adequate oversight.⁶ Legal concern does not stem solely from the presence of harm, but also from the failure of sanctions to observe the principle of proportionality. This principle requires that any infringement of rights be justified by a reasonable balance between the intended aims and the human costs imposed. Despite these risks, no global system exists to monitor the health and rights impacts of sanctions. A coordinated international response should address this gap by ensuring transparency, enabling access to justice, and supporting reparations and relief for affected communities.

Reflexivity statement: all four authors of this Correspondence are originally from Iran. Drawing on our lived experience of sanctions, we have observed how they compromise health and health systems—due to shortages of medicines and equipment, weakened service delivery, and added pressures on the wider social and environmental realities we have lived in. Our professional trajectories have likewise been shaped by these constraints. Sanctions have restricted academic mobility, curtailed international collaboration, and obstructed research on sanctions themselves, as access to funding for joint work with sanctioned countries has been denied. These experiences underpin our commitment to documenting the unintended social and health consequences of sanctions. However, we recognise that proximity to places that are sanctioned provides both valuable insight and potential bias. Accordingly, we stress methodological rigour and reflexivity, with the aim of providing evidence that contributes to international dialogue and supports efforts to mitigate the harmful, unintended health effects of sanctions.

We declare no competing interests.

During the preparation of this work the authors used ChatGPT and OpenAI in order to improve the grammar and style. After using these tools, the authors reviewed and edited the content as needed and take full responsibility for the content of the publication.

Copyright © 2025 The Author(s). Published by Elsevier Ltd. This is an Open Access article under the CC BY-NC-ND 4.0 license.

**Haniye Sadat Sajadi,
Maziar Moradi-Lakeh,
Mohammad Reza Farzanegan,
*Reza Majdzadeh
reza.majdzadeh@essex.ac.uk**

Knowledge Utilization Research Center, Tehran University of Medical Sciences, Tehran, Iran (HSS); University Research and Development Center, Tehran University of Medical Sciences, Tehran, Iran (HSS); Gastrointestinal and Liver Diseases Research Center, Iran University of Medical Sciences, Tehran, Iran (MM-L); Preventive Medicine and Public Health Research Center, Iran University of Medical Sciences, Tehran, Iran (MM-L); Economics of the Middle East Research Group, Center for Near and Middle Eastern Studies, Philipps-Universität Marburg, Marburg, Germany (MRF); School of Health and Social Care, University of Essex, Colchester CO43SQ, UK (RM)

- 1 Rodríguez F, Rendón S, Weisbrot M. Effects of international sanctions on age-specific mortality: a cross-national panel data analysis. *Lancet Glob Health* 2025; **13**: e1358–66.
- 2 Gibson RM, Darmstadt GL. Sanctions and humanitarian outcomes: four decades of academic scholarship. *Lancet Glob Health* 2025; **13**: e1328–29.
- 3 Gutmann J, Neuenkirch M, Neumeier F. Sanctioned to death? The impact of economic sanctions on life expectancy and its gender gap. *J Dev Stud* 2021; **57**: 139–62.
- 4 The Lancet Global Health. The health toll of economic sanctions. *Lancet Glob Health* 2025; **13**: e1327.
- 5 Sajadi HS, Majdzadeh R. Health system to response to economic sanctions: global evidence and lesson learned from Iran. *Global Health* 2022; **18**: 107.
- 6 United Nations Human Rights Council. The negative impact of unilateral coercive measures on the enjoyment of human rights: resolution adopted by the Human Rights Council on 3 April 2024. 2024. <https://digitallibrary.un.org/record/4045694?ln=en&v=pdf> (accessed Aug 28, 2025).



Lancet Glob Health 2025

Published Online
September 24, 2025
[https://doi.org/10.1016/S2214-109X\(25\)00366-3](https://doi.org/10.1016/S2214-109X(25)00366-3)