



Health Diplomacy Meets Science Diplomacy

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New frontiers in science diplomacy

Navigating the changing balance of power
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3 dimensions of relationship between science & diplomacy:

Diplomacy for science

Diplomacy is a mechanism for advancing a scientific goal, particularly extensive and expensive research programmes that need to leverage the participation of multiple countries.

Science in diplomacy

Science is necessary for the conduct of diplomacy or to inform issues of diplomatic concern. This includes the capacity of diplomats and diplomacy institutions to understand scientific and technical knowledge as related to bilateral and multilateral issues such as cross-border public health and food safety.

Science for diplomacy (or ‘science diplomacy’)

Science is a mechanism for enhancing or building bridges between countries (i.e. diplomatic purposes). Science diplomacy is especially relevant in helping develop positive engagement between countries that have strained, limited, or non-existent relationships.

Dr Margaret Chan (132nd session of WHO Executive Board, January 2013):
“Health diplomacy works”

The ascent of global health diplomacy:

Perspectives

Global health diplomacy: the need for new perspectives, strategic approaches and skills in global health

Ilona Kickbusch,¹ Gaudenz Silberschmidt² & Paulo Baus³

Introduction

"In the past" — said Robert Cooper, one of Europe's pre-eminent diplomats — "it was enough for a nation to look after

— it is where the compromises are found and the agreements are reached, in multilateral venues, new alliances and in bilateral agreements. In a world in

an Tobacco Control and the International Health Regulations. But the venue of global health diplomacy has shifted to include other areas of negoti-

Perspectives

Global health diplomacy: training across disciplines

Ilona Kickbusch,¹ Thomas E Novotny,² Nico Dräger,³ Gaudenz Silberschmidt⁴ & Santiago Alcazar⁵

Introduction

In the March 2007 issue of the Bulletin, cross-cutting issues involving health and foreign policy were examined from a broad range of perspectives: conceptual, educational, military, trade, development and humanitarian aid, national

Switzerland has prioritized health in foreign policy by emphasizing policy coherence through mapping global health across all government portfolios.⁶ Through the Department of Justice (Public Health) and Foreign Affairs, an agreement on the objec-

initiative (available at: <http://www.biaf.ca/english/index.asp>).
⁵The ministers of foreign affairs of Brazil, France, Indonesia, Norway, Senegal, South Africa and Thailand established an initiative on Global Health and Foreign Policy in 2006.

Global health diplomacy: five years on

Ilona Kickbusch¹ & Mihály Kikényi²

In the 132nd session of the Executive Board of the World Health Organization (WHO), held in January of this year, the phrase "health diplomacy" was mentioned time and time again. Indeed, the Director-General used it in his opening remarks: "Health diplomacy works". In two papers published in this Bulletin in 2007, we underscored the importance of global health diplomacy, particularly the need to build capacity in this domain within WHO and its WHOIS Member States, in line with changes in the global environment.¹ During the years that have since transpired, it has become amply clear that health diplomacy is not a transient fashion. In fact, the Global Health Programme 2012, launched by the Graduate Institute in Geneva to promote research and knowledge translation and diffusion, represents a turning point in global health diplomacy training. This training takes the form of face-to-face as well as online courses for diplomats, health attaches and staff of international organizations. WHO staff at headquarters, regional offices and country offices take part in the programme, and China, Hungary, Indonesia and Turkey are now co-hosting courses with the Institute or WHO.²

Four elements have contributed to the ascent of global health diplomacy. First, foreign affairs ministries are becoming more involved in health because of its relevance for soft power, security policy, trade agreements and environmental and development policy. Countries need to address trans-boundary challenges that can undermine global stability, such as pandemics and climate change.³ Health touches on matters of national and economic interests, it embodies the tensions between national sovereignty and global collective action. New skills are needed to negotiate global regimes. Some countries have addressed this by seeking greater coherence "at home" between foreign policy and health policy through national global health strategies that bring together different ministries concerned with

domestic and global issues so they can speak with one voice in the global arena.⁴ Second, the venues of health diplomacy are expanding: many new actors outside WHO have become (health) diplomats. "Global health diplomacy" refers to both a system of organization and to communication and negotiation processes that shape the global policy environment in the sphere of health and its determinants. Health is part of summit diplomacy in the United Nations and of club and head-of-state diplomacy involving countries such as the group of eight (G8), the group of twenty (G20) and BRICS (Brazil, the Russian Federation, India, China and South Africa). The European Union (EU) has adopted the European Council's conclusions on the EU role in global health in 2010 and the Organisation of Islamic Cooperation has recently established a unit for health issues. Global issue diplomacy continues in connection with human immunodeficiency virus infection, children's health and non-communicable diseases — and it is particularly in this area that non-governmental organizations, foundations and companies have become health diplomats. The ministries of health now play a dual role: to promote the country's health and to advance the health of the global community.

Third, globalization, new donor-recipient relationships, new types of health diplomacy.⁵ More long-term negotiation processes for both binding and non-binding agreements are taking place. One example is the WHO Pandemic Influenza Preparedness Framework. Approved by the World Health Assembly in 2010, it is a milestone in global health governance.⁶ The 2011 United Nations (UN) High-Level Meeting on Non-Communicable Diseases adopted the Political Declaration on the Prevention and Control of Non-communicable Diseases. The Protocol to Eliminate Illicit Trade in Tobacco

Products was adopted by the parties to the WHO Framework Convention on Tobacco Control in 2012. New challenges are in the wings: negotiating ways to implement the recommendations of the Consultative Expert Working Group on Research and Development, Financing, Decisions on the WHO reform process, embedding health within a UN Framework Convention on Climate Change and, of course, establishing health goals in the post-2015 development agenda.⁷ Fourth, we need competent health diplomats more than ever. Fly-in, fly-out negotiations for health no longer suffice.⁸ The many health negotiations taking place in different venues involve interactions at many levels of governance and a new interface between domestic and foreign policy. Representatives of countries and other interested actors are continuously engaged in negotiations in hubs such as Geneva, New York, Brussels and Addis Ababa, and health attaches play an important role, but not many countries can dedicate substantial resources to these negotiation processes, as the recent session of WHO's Executive Board, Member States underscored the importance of good preparation at the national and, increasingly, at the regional level.

Global health diplomacy, if well conducted, results in improved global health, greater equity, better relations and trust between states and a strengthened commitment on the part of stakeholders to work together to improve health nationally and globally. We hope that there will be increasing willingness to support countries seeking to strengthen their capacity not only in the governance of health systems, but also in global health diplomacy. ■

References

¹ Available at: <http://www.waohit.org/whodoc/wk100107111006>

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⁷ <http://www.un.org/News/Press/docs/2011/11/111106.html>

⁸ <http://www.un.org/News/Press/docs/2011/11/111106.html>

Editorial

1. Foreign affairs ministries becoming more involved in health because of its relevance for soft power, security policy, trade agreements and environmental and development policy.

2. Venues of health diplomacy expanding: many new actors outside WHO have become (health) diplomats. Health is part of summit diplomacy in the UN, G8, G20, BRICS, EU, Organisation of Islamic Cooperation, etc.

3. Globalization, new donor-recipient relationships, new types of health alliances and the rise of cooperation between low- and middle-income countries have heightened the need for health diplomacy.

4. Competent health diplomats are needed more than ever. Fly-in, fly-out negotiations for health no longer suffice. The many health negotiations taking place in different venues involve interactions at many levels of governance and a new interface between domestic and foreign policy. Representatives of countries and other interested actors are continuously engaged in negotiations in hubs such as Geneva, New York, Brussels and Addis Ababa.

GHP-GIIDS programme: Global Health Diplomacy

- **Case study and training centre**, providing a unique approach to knowledge transfer involving leading academics and experienced practitioners.
 - executive courses for diplomats, health attachés and staff of international organisations
 - Masters' training
- **Series of linked activities** to illuminate the evolving and dynamic relationships and exchanges within the health diplomacy-science diplomacy domain. Elements include:
 - Paper on *Science diplomacy meets health diplomacy* – in preparation.
 - Dialogue in the World Health Summit 2013 Symposium
 - Extended dialogue on Health Diplomacy in the 2013 GHP-GIIDS **annual High-Level Symposium, Geneva, 12 November 2013**

Exploring how diplomacy can contribute to health sciences, but also how health sciences will allow the advance of a diplomatic agenda and how it can build new relations across countries. The aim is to build partnerships with Academies of Science to take this agenda forward.