

## UK Partnership for Global Health Diplomacy

- UK interests in global health and other post 2015 agenda goals require a focus on the processes of global governance.
- The UK is well placed to lead the evolution of new processes for engaging the whole of society in such issues
- By creation the of networks across Government, NGOs, CSOs, Business and Academic groups in the UK and partner countries
- This represents a step towards the diplomacy of global governance required in the 21<sup>st</sup> Century
- It would be a practical step towards the realisation of our potential for “Persuasion and Power in the Modern World”

In recent years there have been many attempts to improve the structures and institutions of global governance for health and the performance of multilateral aid agencies. Less attention has focussed on the processes whereby international agreements are established and implemented. This brief summary suggests that a focus on improving skills and relationships at this level offers a practical way to strengthen governance for global health and the Post 2015 Sustainable Development Goals.

The UK is well placed to lead this field, it has a wealth of experience in government, NGOs, academic, professional and business interest groups and cross society relationships with European, Commonwealth and US partners. The UK was one of the first countries to produce a global health strategy, it meets its 1970 commitment to contributing 0.7% of GDP to Official Development Aid and is a source of significant philanthropy from other sources. Moreover there are already established thought leaders in this field, including: The Lancet, Chatham House, The London School of Hygiene and Tropical Medicine, the Royal Society of Medicine, Oxfam and many others. European partners include the Global Health Programme of the Graduate Institute, Geneva

Support for the further evolution of such networks to support the development of a whole society approach to global health in the UK and partner countries could pave the way for a reformation of global governance for the Sustainable Development Goals. This is a practical step towards the realisation of the UK’s potential for the application of “Persuasion and Power in the Modern World” identified by the House of Lords Select Committee on Soft Power and the UK’s Influence in 2014. It has been recognised by the authors that health should have featured in the report . Health and biomedical science, education, products and services are major areas of the UK economy facing growing demand from the emerging economies. Global health and security is a focus of global goals and a major threat to the UK. Moreover it is a field in which global evidence and values are more readily accepted than most others. As Hillary Clinton noted when she was the US Secretary of State:

*‘What exactly does maternal health, or immunizations, or the fight against HIV and AIDS have to do with foreign policy? Well, my answer is everything.’*

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## Global Health Programme



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#healthsecurity discussions in Berlin pic.twitter.com/dl75jZJwpK



The Global Health Programme, led by Professor Ilona Kickbusch, is based at the Graduate Institute Geneva. We have run executive courses on global health diplomacy supported by WHO and DfID in: Geneva - Beijing - Nairobi -Washington DC - Ottawa -Jakarta – Cairo – Debrecen- Ankara. We have also produced books, training manuals and regional training programmes and are partnered with WHO -EURO and EMRO Regional Offices and with HQ on reform and training issues.

A programme of 10 week online courses was developed for WHO Heads of Country Offices and delivered through the DiploFoundation web site to 120 participants. A further 8 week open access course was developed and delivered to 20 participants mostly from NGOs. I helped to develop and run these courses supported by a range of experienced tutors. They received very good feedback, because they recognise the realities faced by front line staff and enabled them to share experiences. For the WHO this was also an element of the reform of their working practices, strengthening support for country led initiatives and improving in-country and cross border coordination. I also help the International Federation of Medical Students Associations (IFMSA) run their Youth Pre-WHA Workshop on Global Health Diplomacy and Advocacy at the Graduate Institute.

This experience shows that the processes of global governance for health and other global public goods can be improved by developing a shared understanding of the values, processes and practices of modern technical and humanitarian diplomacy and advocacy. Moreover building on-line networks enhances the capacity to work together and resolve differences. This is an important aspect of modern “mega diplomacy”, involving the creation of networks and partnerships to work together, to advocate for global health agreements and to follow up and implement action on the ground. It is the process that links local engagement and action to global challenges.

Promoting partnerships and learning networks for UK and perhaps Commonwealth partners could enhance the effectiveness of the implementation of the next phase of “Health is Global” and make a major contribution to the development of global governance processes required for the implementation of the Post 2015 Agenda Goals.

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“ There is no greater sense of dynamism than to explore developments as they unfold. ”

Anna Durante  
Crown Counsel,  
Government of the  
Virgin Islands



The course for WHO Heads of Country Office that we ran with the Diplo Foundation provided a series of on-line narratives, including links to a glossary and other resources such as videos, published papers and hand outs. Participants were required to contribute on-line comments using hypertext entries. This encouraged the sharing of experience and reflections on how to improve local and international practice. Weekly on-line “chat” sessions were modelled on seminar discussions for groups of about 10 participants. These discussions were led by guest experts and tutors and were summarised and fed back to participants. Individual and group exercises, usually in the form of short essays or analysis of particular issues were reviewed and fed back to participants. On-line material and shared discussions were kept open so that they could be referred to after the course. This helped to build cross organisational networks, for example sharing experience of working in fragile states from different regions, negotiating for action on the FCTC in tobacco producing countries or addressing women’s health in countries with cultural barriers. There were also many issues on which participants from widely different countries could learn from shared experience, for example, preparing delegations to the World Health Assembly, writing policy briefs and recording decisions taken so that action could be monitored and followed up.

This last point was followed up in Moldova, where the WHO Country Office and EU Representative Office asked for GHP assistance in running a seminar (led by Mihály Kókény, Michel Kazatchkine and me) to introduce the concepts of global health diplomacy and a programme, I ran, to develop skills in preparation for and follow up to international health events.



+ Globalisation and Negotiation

## News

### *Global Health Diplomacy*

I first became involved in global health issues when my friend John Wyn Owen of the Nuffield Trust asked me to lead the first UK programme on this topic, called [Global Health: a local issue](#). We



The principles of guided on-line learning were taken a step further in the blended learning materials prepared for the IFMSA pre WHA Youth Health workshop. I developed these learning materials with students in mind, to help them choose issues to focus on and coalitions and partnerships to join.



The UK Canada Colloquium on 2013 on “New Realities for Global Health”, for which I was the rapporteur, proposed a series of joint measures to address global health issues including the development of Commonwealth partnerships to exchange knowledge and experience of global health diplomacy and whole society approaches to health and wellbeing. Both these resources are available from <http://www.building-leadership-for-health.org.uk/global-health-diplomacy/>



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## **Global Health Strategy 2014 to 2019**

The Global Health Technical Sub Committee of the Health Protection Agency showed that international exchanges can contribute greatly to building a common understanding of global health issues, such as: global health security, emergency preparedness and capacity building. These lessons have been taken forward by Public Health England's Global Health Strategy for 2014-2019. We also learnt that it is important to prepare technical and aid staff working overseas for the health and diplomatic context in which they will work, to share lessons with colleagues while they are overseas and to share the lessons they learn with their diplomatic and technical colleagues in the UK.

### **Health is Global: An outcomes framework for global health 2011-2015**



The outcomes framework for "Health is Global: 2011-2015" stresses the importance of responding to the changing diplomatic and economic world, recognising the importance of emerging powers, focusing on global health security, development and trade for health. The framework includes the objectives of ensuring that health and domestic and foreign policy are mutually supportive and contribute to global sustainability. It also calls for measures to strengthen global health governance at home and in international institutions and to engage cross government and whole of society partnerships for global health. We suggest that these objectives can be supported by measures to engage communities of practice from government, NGOs business and academic sources in sharing their knowledge and experience of global health diplomacy. Furthermore we suggest that a similar approach could help develop partnerships for the implementation of the post 2015 Goals.

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## Global Health Security

The Centre on Global Health Security at Chatham House, headed by Dr David Heymann, examines how global health challenges and how they manifest themselves as foreign policy and international affairs.



OP-ED

### Ebola: Learn from the Past

Writing in *Nature*, David Heymann draws on his experience of Ebola outbreaks, calling for rapid diagnosis, patient engagement and clinical trials.

Since John Wyn Owen of the Nuffield Trust initiated the first national UK programme “Global Health: a local issue” in 1999, that I coordinated with Kelly Lee of the London School of Hygiene and Tropical Medicine, a great many UK universities and think tanks have developed programmes in this field. In addition to LSHTM there are now at least 25 UK universities offering some form of global health course or research programme. However, many of these programmes ignore the political and global diplomatic context and reflect previous programmes on international health. The Chatham House Centre on Global Health Security combines a focus on both health and diplomacy.

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Medsin is a student network and registered charity tackling global and local health inequalities through education, advocacy and community action.

We have over 30 branches in universities across the UK, many nationally run activities and several national working groups alongside collaborating with numerous external partner organisations both nationally and internationally.

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John Wyn Owen and I helped Emily Spry of Medsin to stage their first international conference in 2001 which borrowed our title “Global Health: a local issue” in Cardiff, they understand the link between health and diplomacy and the need to work through partnerships, not least because I provide training on this topic and they have their own advocacy programmes.



A report on overseas volunteering and international partnerships  
by the All-Party Parliamentary Group on Global Health

# Improving Health at Home and Abroad

## How overseas volunteering from the NHS benefits the UK and the world

The All Party Parliamentary Committee on Global Health Chaired by Lord Nigel Crisp and Meg Hillier MP has pointed out that overseas secondments not only aid partner organisations and countries but also build and maintain the UK's reputation in biomedical science and healthcare. These are major areas of the UK economy which are particularly important areas of trade for the rapidly growing markets of the emerging economies such as Brazil, India, China and South Africa. Moreover it builds the knowledge and confidence of volunteers. As Nigel Crisp has said "Everyone has something to teach and everyone has something to learn".

Their report "Improving Health at Home and Abroad" recommends practical steps to strengthen volunteering partnerships by renewal of the Department for International Development Health Partnerships Scheme beyond 2015. It proposes measures to build on the strength of this scheme by growing a network of regional health volunteering centres hosted by Health Education England in Local Education and Training Boards. This could help people prepare for work in the political, cultural and economic circumstances of partner countries, by education in aspects of global health and diplomacy. It could also help to spread the benefits of innovative thinking and international experience by building support networks.



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## Health Partnership Scheme



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## Next Steps?

- Network diplomacy is a process that links local engagement and action to global challenges
  - It is an essential element of global governance
- The UK can help guide this reformulation of global governance by sharing skills and values
  - For health and other post 2015 global goals
- A UK workshop at Chatham House could build on national and international experience
  - Following the international meeting in Geneva

I am not suggesting that training in global diplomacy, will resolve all global health and development issues or that I, or anyone else, has a monopoly on knowledge in this field, but I believe this is an important issue for which we need to draw on international and UK expertise. It is a key process that links local engagement and action to global challenges to health and sustainable development.

The Department of Health, Foreign and Commonwealth Office, Department for International Development have considerable experience they can bring to address this issue, as have our leading International Non-Government Organisations, Business Interest Groups, Think Tanks and Academic Centres. Acting in partnership we could help to redefine the processes that shape global governance for health and sustainable development, emphasising the values and priorities that have been forged by “Health is Global” in the UK and by the World we Want dialogue.

In early November 2015 the Global Health Programme of the Graduate Institute, Geneva will bring together international thought leaders on this topic, which will provide a further stimulus to partnership in this field. Following this we need to draw on both international and UK experience and to develop a UK approach to global diplomacy and governance. This could be an important practical low cost contribution to the implementation of the 2015 update of Health is Global and to measures to implement the Post 2015 Sustainable Development Goals. A workshop at Chatham House is proposed as a first step in creating a common approach and building networks and partnerships to carry forward such an initiative that could be launched at the All Party Parliamentary Committee on Global Health in 2016.

Thereafter it might be considered appropriate either to develop a single partnership focussed on global health diplomacy, or to develop a network of partnerships sharing knowledge with groups focussed on other aspects of the post 2015 agenda. Similarly it might be decided to start with a focus on UK perspectives and interests or to take broader Commonwealth or EU perspectives.