Foreign policy, trade and health: at the cutting edge of global health diplomacy

Nick Dragera & David P Fidlerb

Under its Constitution, the World Health Organization (WHO) works with its members towards the attainment by all peoples of the highest possible level of health. The context in which WHO and its Members pursue this goal has radically changed since 1946. The interdependence produced by globalization has broken down traditional ways of conceptualizing and organizing the medical, economic, political and technological means to improve health. Nowhere is this transformation more apparent than in the rise of health as a foreign policy concern.

As the papers in this issue of the Bulletin demonstrate, the relationship between health and foreign policy is vital, complex and contested. To craft health policy today, governments, international institutions and non-governmental organizations must find mechanisms to manage health risks that spill into and out of every country. These endeavours create the new world of global health diplomacy.

Critical to global health diplomacy is the relationship between health and foreign policy. Even though much of what affects health today is transnational in nature, countries remain core actors that must reorient their health and foreign policies in ways that align their national interests with the diplomatic, epidemiological and ethical realities of a globalized world. This alignment involves governments adjusting to globalization by overcoming fragmented policy competencies in national governance systems.

The trade and health relationship unfolds on the cutting edge of global health diplomacy and offers lessons for the health and foreign policy nexus. The World Health Assembly recognized this significance in a May 2006 resolution on International Trade and Health, in which the Assembly called for foreign, trade and health ministries to move towards coherency in formulating national policies on trade and health. The Assembly tasked WHO to collaborate with other international organizations to generate and share evidence on ways to align trade and health.

This trade and health linkage highlights the new prominence of health within foreign policy; however, the linkage itself is not new. These enquiries allow us to see how countries historically dealt with health in their trade and foreign policies, particularly with respect to ensuring that health measures did not unnecessarily restrict international commerce. The trade and health relationship is also at the centre of international lawmaking, particularly in the World Trade Organization. International trade law allows us to analyse how countries calibrate their national interests regarding economic growth and protection of health. The trade and health arena has also seen involvement by nongovernmental entities promoting trade and health interests; these actions provide avenues for understanding how countries adjust their foreign policy strategies when non-state actors intervene.

The window into global health diplomacy provided by the trade and health relationship reveals controversy, but also increasing efforts between those in trade and health ministries towards coherent policies within and among countries. WHO’s work on trade and health policy coherence reveals increasing country-level commitment to, and sophistication about, strategies to promote trade and protect health in ways that are politically feasible, economically attractive, epidemiologically informed and ethically sound. Through these efforts, health ministries are identifying how they can best inform pre-negotiation trade positions, provide input during negotiations, analyse the health costs and benefits of proposed compromises and monitor the health impacts of trade agreements.

WHO is collaborating with its members and other international organizations to advance this integrated approach to foreign policy by developing a new trade and health diagnostic tool. This tool is being designed to help health and trade ministries more systematically assess trade and health issues, to empower health ministries to give better advice to their trade counterparts and to enhance health policy input into the trade community’s pursuit of integrated frameworks, trade policy reviews and aid initiatives to bolster trade capacities in developing countries.

The cutting edge of global health diplomacy raises certain cautions regarding health’s role in trade and foreign policies. Competition among countries’ national interests sometimes impedes policy coherence, which makes attainment of health goals more difficult. As the trade and health relationship makes clear, health ministries, experts and advocates can affect this competition constructively by combining their epidemiological skills and ethical principles with sharpened political and economic sensibilities about global politics. Securing health’s fullest participation in foreign policy does not ensure health for all, but it supports the principle that foreign policy achievements by any country in promoting and protecting health will be of value to all.