Foreign policy and global public health: working together towards common goals
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Pandemics, emerging diseases and bioterrorism are readily understood as direct threats to national and global security. But health issues are also important in other core functions of foreign policy, such as pursuing economic growth, fostering development, and supporting human rights and human dignity. Health is today a growing concern in foreign policy.

Public health has often been placed in a reactive role in dealing with the consequences of policies it had no influence in shaping. This remains true of the current crisis caused by soaring food prices. Applying a “health lens” to this crisis reveals the hidden impacts: more malnutrition in women and children, and silent deaths. These are realities every bit as important to foreign policy as the more visible protests and social unrest.

When foreign-policy-makers do pay attention to public health, it has tended to be in times of crisis such as with SARS and avian flu. Health competes poorly with other priorities in the absence of crisis. The interdependence that globalization brings results in a common vulnerability that requires a collective response. This has transformed the foreign policy–health linkage.

To move towards foreign policy that accounts for public health concerns is the mission of the Foreign Policy and Global Health (FPGH) initiative launched by the foreign ministers of Brazil, France, Indonesia, Norway, Senegal, South Africa and Thailand.

This initiative seeks to promote the use of a health lens in formulating foreign policy to work together towards common goals.

The FPGH issued the Oslo Declaration and Agenda for Action in March 2007. Pursuing this agenda, FPGH held a meeting with foreign ministers in New York during last year’s UN General Assembly and last month, WHO and FPGH held a symposium in Geneva to further analyse this health-foreign policy nexus. At this symposium, both health and foreign policy-makers reviewed how diplomacy is changing and the opportunities and challenges that these changes present for foreign policy and global health. Participants examined ways to increase compliance of health commitments made in international fora, how the better integration of health issues in foreign policy priorities can move these forward, and how foreign policy can accelerate consensus-building in high-level health negotiations.

We feel that there is a need to move towards a more sustainable relationship between foreign policy and health. This requires more strategic inputs from policy analysis and research. It also requires improved training opportunities for both diplomats and public health specialists in the interface between health and foreign policy.

Academic institutions and think tanks have critical roles to play in raising the profile of health as a foreign policy concern. A key event in this new era of global health diplomacy was the recent World Health Assembly resolution on public health and intellectual property (WHA 61.21) demonstrating what can be achieved when public health experts and diplomats work together. The successful outcome of the Intergovernmental Working Group on Public Health, Innovation and Intellectual Property was due to the flexibility Member States demonstrated in negotiating the global strategy and plan of action. The resolution means a more proactive approach can be taken in the quest for innovation of, and equitable access to, life-saving and health-promoting interventions.

The current interest in global health as a foreign policy concern offers a window of opportunity. We need to embed the use of the health lens in foreign policy while we have this chance. Protecting and promoting public health as part of the foreign policy agenda makes sense. However, this changing relationship between foreign policy and health requires careful management for mutual benefit.

References