

MMS Bulletin #113 Culture and Condoms. Integrating approaches to HIV and AIDS

The Global Health Programme at the Graduate Institute of International and Development Studies

Innovation in Global Health Governance

Von Ilona Kickbusch, Michaela Told

The Global Health Programme at the Graduate Institute of International and Development Studies (IHEID) in Geneva was established after the merger of the former Institut de Hautes Etudes Internationales (HEI) and the Institut Universitaire d'Etudes du Développement (IUED). Since 2009, IHEID is replacing IUED as a member of Medicus Mundi Switzerland, the Network Health for all.

The policy landscape of global health governance is changing rapidly. A wide range of approaches crowd the field: global health as foreign policy, global health as security, global health as charity, global health as investment, and global health as public health (Stuckler/McKee, 2008). But at least two major approaches are missing from this analysis: global health as a market and global health as social justice. Yet these have probably been the most important driving forces of the 21st century global health agenda.

Increasing influence of non-state actors

Much of the debate has focused on the first seminal power shift in global health: the increasing influence of non-state actors in many spheres of global policy-making driven by discourse based and resource based power. Strong non-governmental organizations had the ability and means to shape the issues at stake and benefited from the historically unique availability of significant new funds through foundations, private sector contributions, as well as new commitments by nation-states and regional organizations such as the European Union. One result of this shift has been the emergence of a new form of governance best described as market multilateralism (Bull/McNeill, 2007)which combines multilateralism and the approaches of market actors. Health is the global policy arena in which this form of collaboration is found to be most advanced: it has led to a redefinition of the role of international organizations, the political strategies of transnational corporations and the engagement rules of non-governmental organizations. But while it has led to a wide range of diverse approaches and solutions to global health challenges and included a continuously growing set of actors it has

not fundamentally changed the asymmetry of power between the North and the South. The new 'shopping mall' of global health does not provide the recipient 'customers' in the South a real choice.

New constellations

But another – less discussed - second seminal power shift is under way. Increasingly nation states are returning in new constellations to establish their spheres of influence on a global scale in what Parag Khanna has analysed as a new geopolitical marketplace (Khanna 2008). Today the global health arena is marked by the growing influence of the emerging economies such as China, India, Brazil, South Africa and Indonesia and of regional organizations such as the European Union. These are all undergoing many transitions at home and in the regional and global sphere. Many of these states have moved health higher on their political agendas in many different spheres of policy recognizing its role in overall economic development; poverty reduction and social stability. The emerging economies are increasingly using both the decision-making power and the legal power provided to them in the global arena through the universalistic and legal structures of the South, including their participation in the global health interests of the South, including their participation in the global health market. Many of them practice sophisticated forms of multi alignment and diplomacy and in consequence they are redefining the global health priorities.

These two powershifts are a defining feature of global health governance at present. They open up new alliances and make for tougher negotiations than in the past. The key trend in global health governance at this point is the expansion of health into many areas of policy and politics – it is clearly gaining a strategic place in the international agenda. In consequence, many global health issues move out of the purely technical arena of global public health and have become highly politicized.

The Global Health Programme addresses these dynamics through its three key research areas:

- [~] Innovation in global health diplomacy and governance
- $\,\,\,$ The powershift in global health
- $\tilde{}$ The role of Switzerland in global health governance

The Global Health Programme within the Graduate Institute of International and Development Studies as one of the first research programmes of its kind in an institute devoted to international relations and development. It examines which characteristics and mechanisms define successful global health governance. Since its inception, the Global Health Programme has built a wide-range of partnerships with different actors at international, regional and national levels and engages closely with the World Health Organisation.

Indeed, this positions the Global Health Programme uniquely to act as applied policy research centre, to analyse trends in various key research areas and to provide reform proposals for global health governance, to regularly organize executive education in global health diplomacy, to prepare in-depths case studies, to publish research findings, and to organise conference and debates.

* Prof Dr Ilona Kickbusch is Director of the Global Health Programme and Michaela Told is the Programme coordinator. For more information on the programme, please contact: globalhealth@graduateinstitute.ch, www.graduateinstitute.ch/globalhealth

References

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Khanna, P. (2008) The Secod World: Empires and Influence in the New Global Order, New York: RandomHouse.

UPCOMING:

Save the date

of the third high-level symposium to be held on 15 October 2009 at the Graduate Institute Geneva entitled

"Negotiating Health in the 21st Century: Regional Voices in Global Health Governance"

For more information, please check the website under: www.graduateinstitute.ch/globalhealth

Kontakt

Deutschschweiz Medicus Mundi Schweiz Murbacherstrasse 34 CH-4056 Basel Tel. +41 61 383 18 10 info@medicusmundi.ch

Suisse romande

Route de Ferney 150 CP 2100 CH-1211 Genève 2 Tél. +41 22 920 08 08 contact@medicusmundi.ch