

POLICY BRIEFING

BUILDING REGIONAL CAPACITY IN GLOBAL HEALTH: THE ROLE OF THE SOUTH-EASTERN EUROPE HEALTH NETWORK



HEALTH DIPLOMACY COURSE GROUP PHOTO
(© WHO/STUDIUM)

***Neda Milevska Kostova, Elke Jakubowski,
Mihaly Kokeny, Ilona Kickbusch***

UNDERSTANDING GLOBAL HEALTH DIPLOMACY

Complex issues such as health require shared efforts: health challenges cannot be resolved comprehensively by any part of a government alone. At the same time, global and regional influences on health are evolving rapidly and require new skills of leadership and coherent governance – for actions related to issues ranging from climate change to emerging epidemics. Global health challenges create a necessity for everybody to step in and strengthen the joint effort in response to those challenges and opportunities – this call needs to be widely recognizable within and relevant to society as a whole.

In response, the South-eastern Europe Health Network (SEEHN), with its partners the WHO Regional Office for Europe and the Global Health Programme of the Graduate Institute of International Studies, Geneva, Switzerland, and with the generous financial support of the Swiss Development and Cooperation Agency (SDC), has taken steps to fortify existing and to build new expertise in health diplomacy.

“Global health diplomacy in the multilateral context means negotiating for health in the face of other interests, including economic, foreign policy, trade and development.”

Professor Ilona Kickbusch, Course Co-director and Director
of the Global Health Programme

REGIONAL DIMENSION: THE SEEHN AS A TOOL FOR HEALTH DIPLOMACY

The SEEHN is a government public health network of 10 member countries¹ with established long-term partnerships with partner countries² and intergovernmental and nongovernmental organizations. Existing for over a decade, the SEEHN's role has evolved from fostering peace and reconciliation and protecting the most vulnerable populations in south-eastern Europe in its early years to a sustained public health partnership that increasingly helps to shape public health agendas in the WHO European Region.³ At the same time, the Network has been faced with numerous challenges at regional and subregional levels, requiring collaborative efforts to address them that include intercountry collaboration both within the health sector and especially between the health and non-health sectors. One such example was the coordinated subregional efforts to mitigate the damage and hasten the return to normality of life during and after the flooding in four SEEHN member countries⁴ in 2014: this involved mobilising all government sectors and civil society, resulting in the successful prevention of large numbers of casualties and mass epidemics.

“We face a fuel crisis, a food crisis, a severe financial crisis and a climate that has begun to change in ominous ways. All of these crises have global causes and global consequences. All have profound, and profoundly unfair, consequences for health.”

Margaret Chan, WHO Director-General, at the Second High-level Symposium on Global Health Diplomacy, 2008

It has thus become of paramount importance to build capacity for health diplomacy in the region. The first global health diplomacy course for the 10 SEEHN member states was held in Debrecen, Hungary, in August 2012. Its objective was to build on existing institutional, human and knowledge resources in the south-eastern Europe region and to continue to

¹ The 10 SEEHN member states are Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Israel, Montenegro, the Republic of Moldova, Romania, Serbia and the former Yugoslav Republic of Macedonia.

² The SEEHN partner countries are Belgium, France, Greece, Hungary, Italy, Norway, Slovenia, Switzerland and the United Kingdom.

³ Ruseva M, Chichevalieva S, Harris M, Milevska-Kostova N, Jakubowski E, Kluge H, Martin-Moreno JM (2014). The South Eastern Europe Health Network: a model for regional collaboration in public health. *SEE Journal of Public Health*. DOI: 10.12908/SEEJPH-2014-34.

⁴ Bosnia and Herzegovina, Bulgaria, Croatia and Serbia.

support the SEEHN as a viable, self-reliant mechanism capable of serving the goals endorsed by the ministers of health of SEEHN countries in the Banja Luka Pledge.⁵

Building on the success of the initial course, the WHO Regional Office for Europe, Global Health Programme of the Graduate Institute of International Studies and SEEHN organized a second course in 2014. This gathered together public officials and experts in the fields of health, economy and foreign affairs to discuss, exchange experiences of and develop skills for addressing complex issues beyond the scope of health systems or public health services. Held on 15–17 October 2014 in Chisinau, Republic of Moldova, it was an opportunity for over 30 professionals to understand and further expand their knowledge about how to make human health and well-being a high priority on already very busy political agendas. The role of global health diplomacy was discussed in the context of countries' size and geopolitical location, exploring new means and technologies for diplomacy, and the prospects for strengthening intercountry collaboration using the subregional cooperation mechanism of the SEEHN as part of the regional cooperation process.

“Crisis is always an opportunity for health diplomacy.”

Laszlo Nikicer, Course Lecturer and Senior Diplomat



COURSE OPENING SESSION WITH DR ANDREI USATII, MINISTER OF HEALTH OF THE REPUBLIC OF MOLDOVA, THE HOST COUNTRY
(© WHO/STUDIORUM)

⁵ See: Founding documents. In: South-eastern Europe Health Network [website]. Skopje: SEEHN; 2015 (<http://seehn.org/category/fdocs/>, accessed 9 February 2015).

“Health diplomacy has to be seen in its broadest context, outside the country’s boundaries: for small states in particular, size is not a destiny and can be turned into an opportunity.”

Dr Mihaly Kokeny, Former Minister of Health of Hungary,
Course Co-director, Global Health Programme

FOSTERING REGIONAL COOPERATION FOR A GLOBAL IMPACT

Health diplomacy is wide-ranging. It can and needs to be applied in a variety of contexts and political or economic settings – as a driver and a means of addressing health as part of a holistic approach, focusing not solely on curing disease but also on preventing ill health and poor well-being. This is a proven method for improving economic growth and prosperity, based on ample practice and evidence. For example, the Member States in the WHO European Region have ratified the Framework Convention on Tobacco Control (FCTC); however, without the involvement and joint actions of ministries of health, finance, education and others within and between countries, the achievements of the FCTC might be diminished. The health and well-being tolls would become too high to be managed by health systems and public health alone, requiring multisectoral cooperation and actions. Global health diplomacy is an advocate for such actions – including, for example, increasing prices and taxation, changes in tobacco production and subsidy policies, educational campaigns and so forth – that need to be taken simultaneously by governments and all sectors to ensure benefits across nations.



PROFESSOR MIHALY KOKENY AND PARTICIPANT DISCUSSING THE SEE 2020 STRATEGY (© WHO/STUDIORUM)

“Social and economic integration in south-eastern Europe is fast becoming a reality. We should take this situation as an opportunity also to address both health challenges and opportunities in our subregion. Working together is part of the history of our populations, and that is the only way for us to respond to challenges, embrace opportunities and create a climate for innovative mechanisms to enhance our collaboration in the best interest of our populations’ health.”

Nikola Todorov, Minister of Health of the former Yugoslav Republic of Macedonia, at the Extraordinary Ministerial meeting of SEEHN countries, 18 November 2014

~

“As health moves beyond the purely technical to become an ever more critical element in foreign policy, security policy and trade agreements, new skills are needed to negotiate global regimes, international agreements and treaties, and to maintain relations with a wide range of actors.”

Professor Roza Adany, Co-director of the first health diplomacy course, Debrecen, Hungary, 2012

NEW OPPORTUNITIES FOR HEALTH DIPLOMACY: THE SEE 2020 STRATEGY

In 2010 the SEEHN took over ownership of regional cooperation for health and development under the auspices of the Regional Cooperation Council (RCC). The Network became a leader of the process, advocating and managing to place health on the agendas for economic development and growth, exemplified by the inclusion of health as one of the dimensions of the new south-eastern Europe 2020 growth strategy “Jobs and prosperity in a European perspective”.⁶ The SEEHN succeeded in repositioning health, changing perceptions of the sector as narrow and money-consuming into recognition that it is a

⁶ South East Europe 2020: jobs and prosperity in a European perspective. Sarajevo: Regional Cooperation Council; 2013 (<http://www.rcc.int/pages/62/south-east-europe-2020-strategy>; accessed 28 November 2014).

productive sector that creates jobs, promotes prosperity and offers governments the opportunity to advance their goals for fairer, more inclusive and cohesive societies. The global health diplomacy course elaborated on considering the south-eastern Europe 2020 growth strategy as an opportunity for health diplomacy in the region, using health as an entry point to advance, maintain and protect the south-eastern European goals of solidarity, sustainable development and inclusive growth.

“Diplomacy is undergoing profound changes in the 21st century and global health is one of the areas where this is most apparent. The negotiation processes that shape and manage the global policy environment for health are increasingly conducted not only among public health experts representing health ministries of nation states but also by diplomats, philanthropists, business people, civil society and many new forms of public–private partnerships.”

Professor Ilona Kickbusch, Course Co-director,
Global Health Programme

NEW TOOLS FOR HEALTH DIPLOMACY: DIGITAL DIPLOMACY

New information technologies have affected the way that economies and societies function. Opportunities to use the new technologies for health diplomacy are potentially enormous but have not yet been widely explored. The social media outreach of the Croatian Prime Minister during his cabinet’s efforts to gather and channel assistance for the public health emergency of the spring 2014 floods, for example, gained massive attention, technical and financial support. Through such case studies, the course highlighted the potential use of new technologies, especially to address challenges faced by small states to respond to emergencies within their limited resources and capacities. From local to regional to national and international, all levels of governance need to be brought together in a discussion of how health improvement is embedded into regional frameworks for growth and development. The new tools do not solely provide technological options for such endeavours; they also raise the level of public attention and ownership of achievements, which it is hoped will lead to strong and lasting partnerships for health for the future.

“Reaching out to people using social media means enabling prime ministers and ministers to personally engage in the prevention of hazardous effects on the health of populations by effectively calling people to action. This is also an important example of how a critical and potentially hazardous situation was turned into a good example of coordination between governments and civil society.”

Ivana Ivankovic, Course Lecturer

THE WAY FORWARD: LESSONS FOR THE SEEHN IN HEALTH DIPLOMACY

Global health begins and ends at home, but partnerships in governance to reduce health inequalities and social exclusion are crucial to the advancement of health and well-being. The course gave the participants the skills and knowledge to be able to advocate health and well-being, taking home the following messages as new health diplomats.

- ▶ Public health and health goals cannot be reached by health systems alone and are thus not the sole responsibility of health systems. They concern the whole of society and all sectors, especially in efforts to prevent rather than cure, and should therefore be shared across government and civil society.
- ▶ Small states face numerous challenges, but their lack of size does not make them unimportant or uninfluential: regional collaboration can be a great opportunity to identify common priorities and joint action, making a difference at both regional and global levels.
- ▶ The SEEHN has great potential to speak with a common voice, to influence regional health priorities and to participate in global health negotiations.
- ▶ The opportunities presented to the region with the south-eastern Europe 2020 growth strategy and the advantage of the SEEHN’s regional coordination role within this process offer an exemplary learning experience. They are also an excellent chance to practise health diplomacy and achieve strategic goals and visions in a simultaneous policy of economic development and improvement of health and well-being.

