



Address by
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to the
FOURTH SEMINAR ON HEALTH DIPLOMACY
Cairo, Egypt, 2-4 May 2015

Your Excellencies, Ladies and Gentlemen,

Let me first welcome you to WHO and the fourth annual seminar on health diplomacy. This year we have a distinguished group of high-level officials representing health and foreign affairs – ambassadors from capitals and from Geneva, deans of diplomatic institutes and public health schools, heads and members of parliamentary health committees, as well as eminent experts in the field. Thank you for accepting our invitation to this event.

Global health has become an increasingly important topic during the last decade. Health has been recognized as one of the key goals of foreign policy and it is also a leading contributor to development, peace, poverty reduction, social justice and human rights.

The level of foreign policy involvement and interest in global health has grown dramatically over the past 10–15 years. The inclusion of health diplomacy in WHO governing bodies' agendas, as well as those of the United Nations General Assembly, is testimony to this importance. Health diplomacy has led to a number of international negotiations that have resulted in key treaties and declarations. These include the United Nations political declarations on noncommunicable diseases and on HIV and AIDS, both of which were endorsed by heads of state and government at the General Assembly. They also include the WHO Framework Convention for Tobacco Control (2005); the International Health Regulations (IHR 2005); and, most recently, the 2014 United Nations resolution on global health and foreign policy, focused on ensuring the safety of health workers in conflict and emergency situations and their protection from violence .

Our message of commitment to this area has been echoed by Member States, who have realized the imperative role of health diplomacy in today's globalized world, and have requested the support of WHO in strengthening capacity at national level.

It is becoming clear, in many areas, that issues which were once confined to national policy are now issues of global concern, with implications that extend beyond national boundaries.

As countries become more informed on health diplomacy, they become more equipped to play a bigger role in influencing global health decisions.

The beauty of health diplomacy is that it expands health issues to areas beyond the health sector, to address challenges from a political, economic and social perspective. But for health diplomacy to succeed, stakeholders from different disciplines – government, non-State actors and parliament – need to come together, mindful of the global health agenda and its impact on national health.

Let me share with you some practical examples of health diplomacy in action.

In last year's seminar, I mentioned how the Ebola virus outbreaks that were being reported from Africa were a clear demonstration of the close link between health and foreign policy. A few months later, we witnessed the overwhelming increase in magnitude of the Ebola crisis in the three West African countries concerned and its devastating socioeconomic impact, as well as the threat it posed for national and global security. Communicable diseases and emerging infections know no boundaries. International cooperation to achieve national, regional and global security is higher now than it has ever been because it is recognized that action from one country alone is not enough to halt the spread of epidemics. This is a clear example of the importance of health diplomacy in the context of global health security.

The United Nations political declaration on noncommunicable diseases (NCDs) is another living example of health diplomacy. Acknowledging the burden of these diseases, for economies and for well-being, heads of state and government came together to address a health issue under the auspices of the United Nations. The global discussions on this subject moved from the World Health Assembly, where ministers of health meet, to the UN General Assembly where heads of state and ministers and high-level officials from foreign affairs and other sectors discuss the multisectoral dimensions of addressing such a global threat. Thus, foreign policy and global health joined together in negotiating solutions to an epidemic that threatens both global health and socioeconomic development.

The WHO Eastern Mediterranean Region is undergoing conflicts and crises affecting more than half of its 22 Member countries. Health diplomacy can play a major role in cessation of hostilities to allow humanitarian assistance to take place, as well as contribute to creating a positive environment for political dialogue. Health diplomacy can also contribute to the rebuilding of devastated health systems, by emphasizing the importance of universal health coverage for sustainable and equitable development.

Indeed, it has been my belief for some time that this area deserves attention in this rapidly changing world of ours. There is a need for those of us in the health sector to have a better

understanding of the links between health and the broader policy environment, including foreign policy. We see how important it is for this region to be more engaged with, and present in, negotiations that are critical for health, as well as in discussions in many different regional and global political venues. That is why, over the past three years, we have continued to bring together distinguished policy-makers in health, foreign affairs, parliament and other sectors – so that we can help in raising awareness and building capacity and in order to ensure that our countries are engaged in global discussions on the challenges that face health and socioeconomic development in this region.

I have become increasingly convinced that the need to address this issue has become more pressing, especially for us in this region, which is witnessing great changes, and experiencing major crises: political, social, economic and also natural disasters, all with a major impact on health, all with an increasingly important role for foreign policy.

We are progressively recognizing that the solutions to major health challenges require action and engagement from other sectors within government and from stakeholders outside government, including industry. At the same time, as globalization progresses, it is becoming clear in many areas that matters which were once confined to national policy are now issues of global concern, with impact that extends beyond national boundaries. Here again, areas like the health-related Millennium Development Goals (MDGs), the new sustainable development goals, HIV/AIDS, noncommunicable diseases and environmental health are no longer considered purely health issues, but are also subjects of major global concern.

As I have already noted, the global dimension in communicable disease and emerging infections or epidemics is a clear example. The Ebola crisis and other similar experiences, such as the outbreak of severe acute respiratory syndrome (SARS) 12 years ago, show us again and again that a single country on its own cannot have a response sufficient to protect the health and security of its population. Now, looming over all nations is the global threat of antimicrobial resistance, a threat that will require comprehensive and coordinated efforts from all countries to address overuse and irrational use of antibiotics, not only in human health but also in animal husbandry.

At the national level, health diplomacy operates in a different way. I think most of us have seen that it is not just different countries that have different positions on certain issues. Reaching consensus on the different aspects affecting health is often a complex matter within the same country. Different interests and different positions exist, and often compete, between the health sector, foreign affairs, finance, industry, development cooperation and other sectors. It is remarkable too, to see how the positions and strategies of countries vary, according to who represents the country in international negotiations. I have personally seen

how, on certain issues, what is accepted unanimously by Member States in Geneva becomes controversial and contentious in New York.

This situation happens, probably, because there are several factors that influence foreign policy. Pandemics, emerging diseases and bioterrorism are easily understood as direct threats to national and global security, but this is not the only reason. There are other important considerations in the foreign policy sector. These include pursuing economic growth, protecting national interests, fostering development, and supporting human rights. We have seen health initiatives create controversy because of divergent economic interests. We have seen tensions between trade and health, some arising within the World Trade Organization in the areas of tobacco, food safety, technical barriers to trade, trade in services, access to medicines and the protection of intellectual property rights.

As I said, our Region is unfortunately disproportionately affected by crises, both manmade conflicts and natural disasters; more than half the countries are in situations of acute emergency, unrest or chronic protracted crisis. And here again, we know that both health concerns and foreign policy operate, and often interact, in these situations, including in providing humanitarian assistance. We have living examples of difficult political situations arising from this interaction. I hope we can have a lively and productive discussion on this issue today.

At the same time, we also have interesting experiences, in many countries of this Region, suggesting how health interventions can actually contribute to resolution or amelioration of political crisis and conflict. This is what some people call “health as a bridge for peace”, and the idea that health interventions can be specifically designed in such a way as to have a positive effect on the health of the population and, at the same time, contribute to peace-building.

Some people may ask: How important is health diplomacy to our work in WHO?

The Member States in our region agreed in 2012 to endorse five priority areas for collaboration with WHO. These areas are health system strengthening towards universal health coverage, health security and the unfinished agenda of communicable diseases, the epidemic of noncommunicable diseases, maternal and child health, and preparedness and response to emergencies and crises. These five areas indeed represent the main challenges to health development in the Region. But we are convinced that our region cannot achieve a comprehensive strategy to address them without strengthening capacity in health diplomacy. Engaging the non-health sectors in managing health priorities needs to receive strategic priority in our work. Our negotiation skills need strengthening. Of great importance is shared understanding, the achievement of common positions, coordination and the conduct of

effective joint work between foreign policy and health. Likewise, legislation, policy development and the observation of executive function are the responsibility of parliaments, and the role of parliamentarians is key to supporting and monitoring health development. But interaction, coordination and joint work between health and foreign policy is weak in many countries of the Region. I, myself, see that health is often absent or weak in some ministries of foreign affairs in the Region and an outcome of last year's seminar was a call for all ministries of foreign affairs to have focal points or units on global health in their structures.

In addition to these emerging health priorities and their impact on global security, current deliberations in the Health Assembly, and elsewhere, focus on the increasing importance of new non-State actors (including nongovernmental organizations, private commercial enterprises, philanthropic foundations and academic institutions), and the challenge of engaging them.

I am pleased that directors and heads of national public health institutes in the Region have joined us in the fourth round of these seminars. If we really want to strengthen health diplomacy in the Region, the discipline needs to be integrated into graduate public health education. National public health institutes and diplomatic institutes can join hands to play a major role in promoting this.

Over the next few days I hope that we can all work together: first, to strengthen the capacity of Member States to understand, act upon and positively influence health diplomacy, with a focus on health issues of highest priority and relevance to the Region; and, second, to integrate the concepts and approaches of health diplomacy within foreign policy platforms, to address critical health challenges that are of global nature and cross national and regional borders.

We have a rich agenda that includes panel discussions to allow exchange of ideas and experiences among the participants. We will discuss the concept of health diplomacy, why it is important and its link with foreign policy; and the leadership role of WHO in public health, and how governing bodies have given due importance to the area of health diplomacy in recent years. We will focus on the area of health security as a rising concern and how to ensure a balance through foreign policy between health issues of national concern and those of global nature.

Specific priority issues have been selected for concerted discussion: noncommunicable diseases; the post-2015 development agenda; health security with a focus on issues like antimicrobial resistance, poliomyelitis, Ebola and Middle East respiratory syndrome coronavirus (MERS-CoV); and crises and humanitarian response.

The seminar will conclude with a session on communicating for impact. I hope that this session will extract the key messages from the discussions and propose means to more effectively and efficiently communicate our health messages in the diplomacy arena.

The presentations will be kept as short as possible to allow ample time for discussions. Your presence here, from different disciplines and sectors, will enrich the discussions. I encourage you to share your experiences and express your views so that we can all benefit.

I thank you for your attention and look forward to a fruitful seminar.