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Panel discussion on "Globalization and Health" Luvuyo Ndimeni – South Africa



Overview

- Globalization context
- Relevance with global health
- Main actors in global health
- Basic premises and shared values of the FPGH
- Background and outcomes of the FPGH
- Shepherding (priority areas)
- Purpose and status of draft resolution
- Questions



Globalization context

- Globalisation-rapid change in the perception of foreign policy and international relations (migration, integration, financial systems, transport, communication, culture)
- New actors gaining influence (non-state actors' influence)
- Speed of communication and growing interdependence
- Giving rise to new relationships, networks, and alliances
- These factors are creating new opportunities and new challenges (current financial crisis requiring coordinated action)



Globalization context

- National security focuses on defence of the state from external attack
- National health security relates to defence against internal and external public-health risks and threats
- Implication health risks and threats do not respect borders
 (people, animals, and goods travel around the world faster than ever before)



Globalization context

- Health is deeply interconnected with the environment, trade, economic growth, social development, national security, and human rights and dignity
- In a globalized and interdependent world, the state of global health has a profound impact on all nations—developed and developing
- Powerful synergies arise when national interest coincides with the need for concerted regional and global action
- An unprecedented convergence of global health and foreign policy



Relevance with global health

Two ways:

- a) by exploring how foreign ministers and foreign policy could add value to health issues of international importance, and
- b) by showing how a health focus could harness the benefits of globalisation, strengthen diplomacy and respond to new thinking



Relevance with global health

- Health is a main component of the Millennium Development Goals (MDGs), which point to the interconnectedness of the structural causes of poverty and under-development
- New and re-emerging infectious diseases (avian influenza, severe acute respiratory disorder, extensively drug-resistant tuberculosis, malaria) do not respect geographical borders
- Can be tackled successfully only if nations work together, hence the FPGH
- Cross-regional nature and focussed



Main actors in global health (optional)

- Civil society now represents a major force for change
- Main actors involved in global health (governments, regional organisations, non-governmental organisations, foundations, private-public partnerships, the World Bank, the International Monetary Fund (IMF), and the UN and its agencies, specifically WHO, UNICEF, UNAIDS, and UNDP)
- New partnerships and alliances emerging that include multiple stakeholders, networks, and movements, within countries and across borders and regions



Basic premises and shared values to the FPGH

- Initiative based on the recognition that life is the most fundamental of human rights, and that life and health are the most precious assets
- Both technical and political dimensions to protecting and promoting global health
- This means that health issues do not only belong to ministries of health and the WHO, especially when they are cross-cutting in nature



Background to the FPGH

- FPGH-outlined the broad linkages between global health and foreign policy
- Using this linkage, ten priority areas identified to offer a new scope for foreign policy
- In Oslo on March 20, 2007 the seven ministers agreed to an ambitious and progressive agenda for action that details its future work in each of the priority areas



Shepherding (priority areas)

- Preparedness Brazil and Norway
- Control of infectious diseases Indonesia and Thailand
- Human resources for health South Africa and Thailand
- Conflict and health Norway
- Natural disasters and other crises Norway/ Senegal?
- Response to HIV/AIDS Brazil and France
- Health and the environment France
- Health and development Brazil and France
- Trade policies and agreements Indonesia and Thailand
- Governance Indonesia and Norway



Outcomes

- MOFA's meetings September 2006
- MOFA representatives (Paris-NY-Dakar-Geneva-Oslo-Chiang Mai-Bali)
- UNGA62 presentation
- Symposium in Geneva
- Draft UNGA63 resolution



Purpose and status of draft resolution

- Link with the work of the major organs such as ECOSOC (cross-cutting approach on issues)
- Placement on the agenda of UNGA plenary
- Report
- Coordination and inclusivity on health-related initiatives



Objective...





Conclusion

Questions...

