

The Chatham House  
Centre on Global Health Security

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# Health: an issue in global politics and international affairs



CHATHAM HOUSE

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‘In today’s era of globalisation and interdependence there is an urgent need to broaden the scope of foreign policy... Health is deeply interconnected with the environment, trade, economic growth, social development, national security, and human rights and dignity. In a globalised and interdependent world, the state of global health has a profound impact on all nations – developed and developing. Ensuring public health on a global scale is of benefit to all countries.’

*Oslo Ministerial Declaration (2007)*

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Cover image: A child being administered polio vaccine by a health worker in a door-to-door initiative on the outskirts of New Delhi. In February 2012 India was removed from the list of countries where polio is considered endemic.

# Message from the Head

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Health is an important foreign policy and diplomatic concern that has implications for security, economic wellbeing and international development. Conversely, policy decisions made on such matters influence health outcomes and how health threats emerge and spread.

The recognition of health as an important issue in global politics can be seen in the adoption of the first-ever health treaty – the Framework Convention on Tobacco Control; the successful negotiation of a framework for international sharing of flu virus samples and the vaccines and medicines developed using them; the decision of the United Nations General Assembly to hold a high-level meeting on non-communicable diseases in 2011; and the 2007 Oslo Ministerial Declaration, in which the foreign affairs ministers of Brazil, France, Indonesia, Norway, Senegal, South Africa and Thailand pledged to bring health issues more strongly into foreign policy discussions and decisions.

These initiatives clearly illustrate that improving global health security – essentially the protection from threats to health – demands greater policy coherence both domestically and internationally. Achieving that coherence requires better understanding and collaboration between the international affairs, health and other communities.

At the Centre on Global Health Security, we seek to foster that understanding and collaboration, and to generate new ideas for enhancing global health security, by stimulating discourse among the



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relevant communities in the internationally recognized, politically neutral forum of Chatham House; conducting independent research and analysis on key global health challenges and how they manifest themselves as problems of international affairs and global politics; and recommending policy options.

The Centre addresses both the collective and individual aspects of health security. Our work focuses on key issues around reducing collective vulnerability to disease threats that transcend national borders, and on increasing personal access to technologies and services necessary for protecting individual health as part of the movement towards universal health coverage. We pay particular attention to the political and economic determinants and implications of health security and of efforts to improve it, and to the governance and other systemic concerns critical for success. This prospectus provides a brief introduction to who we are, the scope of our work and how we approach it.

A handwritten signature in black ink, which appears to read "D. Heymann".

*Professor David L. Heymann  
Head and Senior Fellow, Centre on Global Health Security  
Chatham House (The Royal Institute of International Affairs)*

# About Chatham House

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**The mission of Chatham House, the Royal Institute of International Affairs, is to be a world-leading source of independent analysis, informed debate and influential ideas on how to build a prosperous and secure world for all.**



Each year Chatham House hosts around 100 public events for members, 20 one- or two-day conferences and numerous private workshops and roundtable discussions.

The Centre's location within Chatham House provides it with a unique combination of strengths:

- The convening power of Chatham House, internationally recognized as a neutral forum for the free exchange of ideas;
- The ability to bridge the gap between the global health and international affairs communities; across sectors such as health, trade, finance, agriculture and environment; and between groups such as academia, business, governments and international organizations, by drawing together multidisciplinary expertise from within the pool of Chatham House experts and the Centre's extensive network of Associate Fellows and other collaborators.

# What we do

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## Objective

Chatham House established the Centre on Global Health Security in 2009 in recognition of the fact that matters of individual and collective health security are increasingly interlinked with other aspects of international affairs. It seeks to inform policy by offering evidence-based, politically feasible solutions and related policy options that help decision-makers around the world take actions that improve global health security. It does so by:

Stimulating discourse between the international affairs and public health communities.

Contributing to knowledge on global health challenges and how they manifest themselves as problems of international affairs and global politics.

## Strategy

The Centre takes a distinctive approach to addressing global health issues, focusing on their political and economic determinants and implications. Governance issues and other challenges at the interface between health and international affairs are aspects of global health security that are integrated across the Centre's portfolio.

The Centre also pays attention to global health issues that have encountered, or could encounter, serious difficulties in bilateral relations, international organizations and diplomatic negotiations because of a divergence of political, economic or social interests.

# How we work

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## **Convening**

We seek to understand the viewpoints of all by drawing together key academics, business leaders, practitioners, policy-makers and representatives of international and non-governmental organizations in health, international affairs and other disciplines in an independent, neutral environment that facilitates uninhibited dialogue and generation of ideas.

## **Analysing**

We conduct independent research on key challenges for health security by examining and analysing current policies, practices and mechanisms that deliver global health, while drawing on expertise from the fields of international affairs and security.

## **Recommending**

We propose evidence-based solutions and new ideas for improving standards of individual and collective health security over the next 10-20 years.

## **Informing**

We share our findings through research reports, briefing papers, peer-reviewed journal articles and conference presentations aimed at both health and international affairs audiences.

## **Collaborating**

We work with a variety of partners and stakeholders to conduct our research and to determine the feasibility and sustainability of policy recommendations.



# Areas of research

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**Our activities focus on three often interlinked aspects of global health security:**



# Disease threats and determinants that transcend borders

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**This area explores ideas for reducing the collective vulnerability to health threats by addressing their politically and economically sensitive determinants. It also examines the political and economic effects of threats from both communicable and non-communicable diseases, and of efforts to combat them.**

The international spread of infectious disease outbreaks has clearly illustrated their political and economic ramifications and how political and economic decisions can influence their emergence and movement across national borders.

Similarly, non-communicable diseases are becoming an increasingly important global health problem, and recognition of their political, economic and social determinants and cross-border implications is growing.

Dr Margaret Chan, Director-General of the World Health Organization, outlined the implications of global health for international development in a June 2011 event titled 'The Rise of Global Health in International Affairs' hosted by Chatham House.



In 2011, Hong Kong culled 17,000 chickens and suspended live poultry imports for 21 days after three birds tested positive for the deadly H5N1 strain of avian flu virus.

### **Strengthening collaboration between animal and human health sectors**

Public health authorities traditionally respond to emerging infectious disease outbreaks that result from a breach in the species barrier between animals and humans with an emergency response once the infections have been detected in humans. However, the need for a ‘One Health’ approach that recognizes the interrelatedness of human, animal and environmental health is increasingly being recognized.

Chatham House convened experts and policy-makers to examine the relevant economic and political tensions between the human health and animal sectors and identify options for resolving them in order to strengthen global health security. The meeting concluded that better prevention and control could be achieved by addressing the underlying factors that facilitate the emergence and spread of these diseases by changing the nature of interactions among and between wildlife, livestock and humans. The meeting also made recommendations on identifying the most cost-effective and feasible intervention strategies for reducing emerging infectious disease risk and mobilizing the necessary political and financial support to implement them.

**Preventing the spread of diseases between wildlife, livestock and humans.**

Professor Nigel Lightfoot CBE has a long and distinguished career in public health. Until recently he was the Chief Advisor for Emergency Response at the UK Health Protection Agency. As an Associate Fellow, he leads the Centre's work on biosecurity. In addition, he is Executive Director of CORDS, Connecting Organizations for Regional Disease Surveillance.



Above: Stray dogs are seen inside the gates of The Turf Club in Mumbai. There are thought to be some 70,000 stray dogs in India's financial and entertainment capital, causing widespread concerns about their role in spreading disease, including rabies.

Right: A herder prepares flatbread for an evening meal while surrounded by her livestock on a pasture along the Bagodra-Lindi highway, some 65 km from Ahmedabad, in August 2012.



# Access to health-related products and services

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**This area focuses on how to achieve more sustainable and equitable access to health care products and services needed to protect against and manage illness.**

One of the most difficult challenges in contemporary global health politics is increasing access to medicines, vaccines and other health-related products while at the same time ensuring that the systems that provide access are sustainable.

In some cases, even when new products can be developed to specifically suit developing-country needs or existing products can be made available, political and economic issues can make it difficult for them to enter the market at levels people and governments can afford. Likewise, access to health services can be hindered by political, economic and governance barriers.



Sir George Alleyne, Director Emeritus, Pan American Health Organization, speaking at a Chatham House conference in December 2011 titled 'The Commission on Macroeconomics and Health: Ten Years On'.



In Burma, 85,000 people in urgent need of life-saving antiretroviral therapy do not have access to it. The cancellation of a round of grant-making by the Global Fund to Fight AIDS, Tuberculosis and Malaria in November 2011, owing to insufficient funds, was a setback for efforts to expand access to treatment.

### **Counterfeit, falsified and substandard medicines**

The threat from counterfeit, falsified and substandard medicines is ever present, particularly in poorer countries with weak regulatory mechanisms and poorly monitored distribution networks. Efforts to combat them on a global level have been hampered by controversy over the definition of counterfeit medicines and the proper role of the World Health Organization (WHO) in addressing a public health problem which is inextricably linked to intellectual property issues.

To facilitate resolution, in 2010 the Centre published an analysis of the definitional issue and convened a meeting of representatives of key concerned governments, the brand-name and generic pharmaceutical industries, non-governmental organizations and major international organizations. The meeting helped to move the debate forward by identifying the key issues which continue to prevent an international consensus over a suitable definition of counterfeit medicines.

**Help generate consensus  
over a suitable definition of  
counterfeit medicines, in  
order to facilitate progress.**



Dr Charles Clift has been a Senior Research Consultant at the Centre since 2010. His work has focused on counterfeit medicines, and he currently leads the Centre's work that follows up on the WHO Commission on Macroeconomics and Health.



Seized counterfeit medicines at the customs building in Zaventem, north-east of Brussels, in 2008. Customs authorities at Brussels airport impounded more than two million counterfeit pills that were in transit from India to Africa in the biggest seizure ever of counterfeit medicines in Europe. Blister packs of copies of Tramal, a strong analgesic, and antimalarial treatment Fansidar were discovered in large bags.

# International affairs, governance and health

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**While the Centre's other two work streams examine governance issues and international affairs concerns in specific contexts, this area focuses on the intersection of health, governance and international affairs in the context of the wider global political landscape.**

This involves examining the shape and nature of global health governance itself and proposing solutions to problems identified. Included are issues such as shifts in power and influence and the challenges and opportunities presented by an increasingly crowded global health field.

This research stream also examines how, and how far, efforts to improve global health serve foreign policy interests such as security and economic growth.

Dr. Devi Sridhar is a lecturer in Global Health Politics and Fellow at Wolfson College, University of Oxford. She has worked with a number of UN agencies, civil society organizations and Ministries of Health in emerging and developing countries and contributes to the work of the Centre as an Associate Fellow.



Leaders and academics in the field of health gather at the 2009 international conference 'Rethinking Global Health', held at Chatham House.

### Macroeconomics and health

In December 2011, to mark the 10th anniversary of the publication of the report of the Commission on Macroeconomics and Health, the Centre held a major conference to consider what countries and donors need to do in today's very different circumstances.

It was clear that deeper thinking and collective analysis were needed of the ways in which health care is funded and the sustainability of funding mechanisms – along with the viability of current models of development assistance. In addition, the implications of the greatly enhanced complexity of the global health architecture, and the proper role of WHO within it, required further careful consideration. The Centre subsequently established two high-level working groups comprising some of the leading actors in the field of global health, including participants from major international organizations, health ministries and world-leading academic institutions. The initiative aims to identify sustainable methods for improving global health security and access to health care, and to influence international and national policy-makers both directly by participation in the process and indirectly through the dissemination of a series of working papers and reports.

- Working Group One – WHO and the International System
- Working Group Two – Commitments to Sustainable Financing: Need for a New Model?

**Identify sustainable methods for improving global health security and access to health care.**

Professor Jeffrey Sachs, Director of The Earth Institute, Columbia University, giving the keynote speech at the 'Commission on Macroeconomics and Health – Ten Years On' international conference hosted by Chatham House in December 2011.



A doctor examining a young male patient in Kenya. The total number of people worldwide without access to essential medicines remains between 1.3 and 2.1 billion. Lack of access is particularly concentrated in Africa and India.

# Structure of the Centre

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**In addition to its core staff, the Centre is structured around an extended team that includes Associate Fellows, Fellows in Residence, PhD candidates, academics and an Advisory Group. The structure, which fosters close links with academic centres, is designed to maximize the Centre's ability to draw on the multidisciplinary expertise needed for its work.**

## **Head and Senior Fellow**

The Centre is headed by Professor David L. Heymann. Until April 2009, he served as Assistant Director-General for Health Security and Environment at the World Health Organization, where he coordinated the global containment of the 2003 SARS outbreak and served as the Director-General's Special Representative for Polio. Prior to his 20-year tenure at the WHO, he spent 13 years as a medical epidemiologist for the US Centers for Disease Control and Prevention in Sub-Saharan Africa and two years in India with the WHO Smallpox Eradication Programme. He has published more than 150 scientific articles in peer-reviewed journals and is a member of the Institute of Medicine of the US National Academies and the Academy of Medical Sciences (UK). In 2009 he was awarded a CBE for services to global public health. Besides leading the Centre, he is also Chair of the UK Health Protection Agency and Professor of Infectious Disease Epidemiology at the London School of Hygiene & Tropical Medicine.



The Rt Hon Stephen O'Brien, UK Parliamentary Under-Secretary of State for International Development, speaking at a meeting titled 'Innovation in Antiretrovirals to Meet Developing Country Needs', hosted at Chatham House in July 2011.



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### **Associate Fellows**

Associate Fellows – academics or practitioners who have distinguished themselves in their fields – conduct research and analysis for the Centre, prepare related publications, collaborate with other experts working with the Centre, and assist with project development, oversight and fundraising.

### **Fellows in Residence**

Fellows in Residence are Associate Fellows or other academics or practitioners who contribute to the Centre's long-term goals while on sabbatical or other leave by pursuing an area of research at Chatham House that is among the Centre's strategic priorities.

### **PhD candidates**

The Centre collaborates with PhD candidates studying at a range of universities, particularly those that are connected to the Centre through faculty positions held by its staff or Associate Fellows. Students are assigned to projects in the Centre's research portfolio, or are supported to produce other research of interest to the Centre.

### **Advisory Group**

The Centre operates in association with a group of advisers active in public health and/or international affairs. Advisers assist in setting strategic priorities, and in developing and reviewing new project ideas.

# Contacts

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# Independent thinking on international affairs



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