

Global health diplomacy and the issue of forming a multilateral system to strengthen global health governance after COVID-19

Ass. Prof. Mohamed Aziz Abdul-Hassan Al-BAYATI

*College of Political Science, University of Baghdad
research field: political science: international studies*

Al - JADRIYA Complex, Baghdad, Iraq

Ass. Prof. Basma Khaleel Namuq M.

*College of Political science, University of Baghdad research field: political
science: international studies*

E-Mail: karbala2070@gmail.com

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Abstract

The impact of the COVID-19 pandemic on international relations and caused diplomatic tensions due to problems related to some countries' attempt to monopolize medical supplies and prevent their export outside their borders, or tensions over trade and transportation of medicines, diagnostic tests and hospital equipment for Coronavirus disease 2019. The pandemic was one of the reasons for the issuance of a United Nations Security Council resolution calling for

a global ceasefire. The pandemic is likely to lead to major changes in the international system and may necessitate a significant rethinking of current approaches to international relations, with a greater focus on issues such as health diplomacy, crisis politics, and border politics. Leaders of some countries have accused other countries of not containing the disease effectively, which has led to the uncontrolled spread of the virus. Developing countries in Asia, Latin America and Africa cannot find

sufficient materials to test for Coronavirus disease, in part because the United States and countries in Europe are spending resources in a manner to protect their citizens and by monopolizing trade and transport of medicines and all other supplies of the COVID-19 pandemic to third world countries This research aims to shed light on the concept of the method of exercising the powers of good governance, Or what has been termed as “governance,” especially global health governance There is no doubt that governance has become of great importance worldwide now Recently, after the spread of Covid-19, there has been an increase in talk about global health governance and its role in improving the general performance of health institutions operating under the management of the World Health Organization. The necessity to implement and monitor its regulations in most international health activities has emerged to ensure that The rights of full coordination between these health institutions operating in various countries to reduce the size The Covid 19 pandemic and preventing its spread through a harmonious series of preventive health measures in addition to laboratory coordination to measure the effectiveness of the vaccines in circulation and study their positive

results and reduce side health effects And the concept of governance in general as a set of procedures and processes that take place from During which organizations are directed and controlled, so that the general framework of governance includes identification And the distribution of rights and responsibilities to the various parties in the organization or institution from The board of directors, directors, shareholders and other stakeholders, in addition to working to formulate and establish the rules and procedures for decision-making in that organization A good governance system is based on achieving the optimum level of examination, control and oversight Balanced and include effective internal and external lines of communication, in addition to Promote a culture of responsibility and accountability through setting up and developing a system for measurement and evaluation. And given the absolute chaos inflicted on global public health and the international economic system - dominated by US trade and Chinese industrialization fueled by oil and gas producing countries, in the Middle East There was debate about the impact of the Coronavirus pandemic on the existing power structures in the international system. For change, global political events are not dictated

by one or two superpowers, but governments everywhere are now racing to meet the same challenge, adopting different methods from complete quarantine and lockdown to fortification of the herd. Although the virus originated in Wuhan, China, it was one of the world's greatest global equivalents. Unlike humans, viruses are not concerned with where their victims come from, the religion they follow, or the ideology they believe in. All of them are at risk, and with economies closed and resources exhausted, the dynamics of international power could see a shift in the era of the coronavirus. To improve preparedness for health governance, countries should quickly : -Re-establishing global norms for multilateral solidarity and cooperation, including through crucial matters for establishing general rules for the reforms of the International Health Regulations, implementing regular review by holding international health conferences and considering new international instruments or mechanisms to support them through the sharing of international data, research and development and equitable access. To diagnostics, treatments, vaccines, and medical goods. Immediately address the funding constraints of WHO through

increases in assessed contributions and prioritizing investment in the multilateral strengthening of accessible, affordable, acceptable and high-quality health systems . Developing frameworks and processes for a more coherent and responsive coordination among international health institutions and implanting epidemic preparedness in all policies at the international level; -Effective incorporation of the principles of good governance into international and national health decision-making bodies and processes, particularly processes to ensure accountability, transparency, fairness, participation and the rule of law. The problematic of our research stems from the following main questions: Has the COVID-19 pandemic revealed the failure of global and national health governance to prepare for emergencies as an important component of preparedness in addressing the impact and dimensions of the spread of the pandemic in all parts of the world? Is the failure to prepare to confront Corona due to the failure of governance in global collective action, as a result of the lack of investment in preparedness, including coordination and participation with multilateral systems, and financing?

Keywords: Global health, diplomacy forming, a multilateral system strengthen, global health governance, COVID-19

* Introduction

Global health diplomacy is a burgeoning field that combines the priorities of global health with those of foreign affairs. Health challenges of various kinds have acquired an urgency that is unprecedented in the long history of international health activities. Developments in the field of health are affecting the way in which normative concepts and international legal rules are applied in diplomatic negotiations. Global health diplomacy involves a number of disciplines, ranging from public health, law and international affairs to management and economics. Understanding and using concepts from different disciplines consistently is therefore essential.

The ABC of Diplomacy is a glossary of alphabetically ordered keywords produced by the Swiss Federal Department of Foreign Affairs. It explains frequently used terms, and provides information The World Health Organization and the changing field of global health The World Health Organization is the key venue for

global health negotiations. An intergovernmental organization in which all decision-making power is vested in its Member States, WHO is the United Nations specialized agency tasked with coordinating and steering global health efforts. In its early years, WHO dealt mainly with State actors, that is the ministries of health and ministries of foreign affairs, often through States' diplomatic representations in Geneva and, especially in later years, the health attachés based there. The latter are a mixture of representatives of States' foreign and health ministries. The Member States are the key actors at WHO: it is they that govern the Organization and negotiate major agreements. However, as the global health landscape has become more and more complex, WHO has had to reconsider its relationship with a wide range of actors.

Accordingly, WHO has adopted a policy on its relationship with non-State actors in line with its constitutional mandate: the Framework of Engagement with Non-State Actors (FENSA), which was approved at the Sixty-ninth session of the World Health Assembly in May 2016. The Framework seeks to strengthen WHO's engagement with non-State

actors, including NGOs, private sector entities, philanthropic foundations and academic institutions. At the same time, the Framework is meant to protect WHO and its work from potential risks, such as conflicts of interest, reputational risks and undue influence.

Non-State actors are not involved formally in global health negotiations at the WHO governing bodies, but they attend consultations and are often asked to provide input and comments. They come to Geneva on occasion of the meetings of the WHO governing bodies (that is, the World Health Assembly and the Executive Board) in order to engage in advocacy, hold informal discussions with negotiators and – if in official relations with WHO – to give statements at the meetings of the governing bodies. Such participation can seem like a pro forma gesture at best, particularly in comparison to other parts of the UN system. The WHO Constitution, FENSA and the Rules of Procedure of the World Health Assembly lay down the type of engagement which the various actors may have. The WHO leadership is committed to a more open approach, and the present Director-General reaches out to civil society more

extensively than many of his predecessors. Yet, the Organization's culture as a whole often seems somewhat "closed" and risk-averse. Global public goods of health: In an increasingly interconnected world, many public goods (that is, goods which generate benefits shared by all and from which no one can be excluded) can no longer be defined in exclusively national terms. Global public goods generate benefits – such as a safer world, protection against the impacts of climate change, and improved health – that are vital to the well-being of those living now and to the survival of future generations. Examples of global public goods for health include shared scientific knowledge (such as the sequencing of the human genome), the eradication of smallpox, global surveillance systems for influenza and other diseases, the WHO International Health Regulations and support for the development of new vaccines.

Governance for global health: The institutions and mechanisms established at the national and regional level to contribute to global health governance and/or to governance for global health, such as national or regional strategies on global health. It

may also cover governance at the level of local communities.

Humanitarian diplomacy: The International Federation of Red Cross and Red Crescent Societies defines humanitarian diplomacy as “persuading decision-makers and opinion leaders to act, at all times, in the interests of vulnerable people, and with full respect for fundamental humanitarian principles.”

Instruments of global health: International law, treaties, agreements, conventions, protocols, declarations, strategies, action plans and codes that concern global health.

Multilateralism in global health diplomacy: “Multilateralism” is the term used to describe cooperation among States: multilateralism in global health diplomacy is an approach based on the premise that, by working together, countries can find solutions to global health problems without renouncing their sovereignty.

First: The importance of research

The impact of the COVID-19 pandemic on international relations and caused diplomatic tensions due to problems related to some countries' attempt to monopolize medical supplies and prevent their export outside their borders, or tensions over

trade and transportation of medicines, diagnostic tests and hospital equipment for Coronavirus disease 2019.

The pandemic was one of the reasons for the issuance of a United Nations Security Council resolution calling for a global ceasefire.

The pandemic is likely to lead to major changes in the international system and may necessitate a significant rethinking of current approaches to international relations, with a greater focus on issues such as health diplomacy, crisis politics, and border politics.

And leaders of some countries have accused other countries of not containing the disease effectively, which has led to the uncontrolled spread of the virus.

Developing countries in Asia, Latin America and Africa cannot find sufficient materials to test for Coronavirus disease, in part because the United States and countries in Europe are spending resources in a manner to protect their citizens and by monopolizing the trade and transportation of medicines and all other supplies of the COVID-19 pandemic to third world countries.

Second: The objectives of the research

This research aims to shed light on the concept of the method of exercising the powers of good governance, Or what has been termed as “governance,” especially global health governance There is no doubt that governance has become of great importance worldwide now Recently, after the spread of Covid-19, there has been an increase in talk about global health governance and its role in improving the general performance of health institutions operating under the management of the World Health Organization.

The necessity to implement and follow up its regulations in most international health activities has emerged to ensure that The rights of full coordination between these health institutions operating in various countries to reduce the size The Covid 19 pandemic and preventing its spread through a harmonious series of preventive health measures in addition to laboratory coordination to measure the effectiveness of the vaccines in circulation, study their positive results and reduce side health effects And the concept of governance in general as a set of procedures and processes that take place from During which

organizations are directed and controlled, so that the general framework of governance includes identification And the distribution of rights and responsibilities to the various parties in the organization or institution from The board of directors, directors, shareholders and other stakeholders, in addition to working to formulate and establish the rules and procedures for decision-making in that organization A good governance system is based on achieving the optimum level of examination, control and oversight Balanced and include effective internal and external lines of communication, in addition to Promote a culture of responsibility and accountability through setting up and developing a system for measurement and evaluation.

And given the absolute chaos inflicted on global public health and the international economic system - dominated by US trade and Chinese industrialization fueled by oil and gas producing countries, in the Middle East There was debate about the impact of the Coronavirus pandemic on the existing power structures in the international system.

For change, global political events are not dictated by one or two superpowers, but governments

everywhere are now racing to meet the same challenge, adopting different methods from complete quarantine and lockdown to fortification of the herd.

Although the virus originated in Wuhan, China, it was one of the world's greatest global equivalents.

Unlike humans, viruses are not concerned with where their victims come from, the religion they follow, or the ideology they believe in.

All of them are at risk, and with economies closed and resources exhausted, the dynamics of international power could see a shift in the era of the coronavirus.

To improve preparedness for health governance, countries should quickly:-

1- Re-establishing global norms for multilateral solidarity and cooperation, including through crucial matters for establishing general rules for the reforms of the International Health Regulations, implementing regular review by holding international health conferences and considering new international instruments or mechanisms to support them through international data sharing, research and development, and equitable access. To diagnostics, treatments, vaccines, and medical goods

2- Immediately address the funding constraints of WHO through increases in assessed contributions and prioritizing investment in the multilateral strengthening of accessible, affordable, acceptable and high-quality health systems.

3- Developing frameworks and processes for a more coherent and responsive coordination among international health institutions and implanting epidemic preparedness in all policies at the international level;

4- Effective incorporation of the principles of good governance into the international and national health decision-making bodies and processes, especially the processes of ensuring accountability, transparency, justice, participation and the rule of law

Third: The problem of research:-

The problematic of our research stems from the following main questions Has the (COVID-19) pandemic revealed the failure of global and national health governance to prepare for emergencies as an important component of preparedness in addressing the impact and dimensions of the spread of the pandemic in all parts of the world?

Is the failure to prepare to confront Corona due to the failure of

governance in global collective action, as a result of the lack of investment in preparedness, including coordination and participation with multilateral systems, and financing?

Fourth: Research Hypothesis:-

Our research hypothesis starts from the following:-

First: COVID-19 demonstrated the failure to adequately consider the importance of health governance globally and nationally, as pandemic preparedness measures undermined the success of any efforts to correct it.

Failure, including reform of existing health governance arrangements, will depend on effectiveness

A multilateral system committed to providing adequate financial and political support to global institutions, laws and norms.

Second: The marginalization of the World Health Organization, as the axis of global health governance, with US President Donald Trump's move to withdraw all US funding for the World Health Organization on April 14, 2020, has led to the failure of the global health system.

Which was developed to provide a global response to epidemics a

catastrophic failure Covid-19 has spread around the world, resulting in the closure of entire countries, and the same countries are competing fiercely for scarce medical stocks, while vital supply chains have been disrupted due to government export restrictions.

Fifth: Research structure

The first axis: what is governance?

*** The concept of governance is a language**

It is the judgment and what it requires of commitment, discipline and control by setting the rules and controls that govern behavior, in a manner that ensures strong management and leadership and disciplined firm control.

Wisdom as it requires guidance, guidance, awareness, and awareness of all internal and external conditions for working in organizations.

The appeal and its requirements for the existence of legal, ethical, administrative and cultural references to be referred to, as well as the accumulation of experiences and expertise that can be used.

*** The concept of governance idiomatically**

Governance is the activity undertaken by management. It relates

to decisions that set expectations, grant authority, or verify performance. It consists of either a separate process or a specific portion of management or leadership processes. Sometimes a group of people forms a government to manage these processes and systems.

Governance is a set of rules, laws, standards and procedures by which organizations are managed and effectively monitored, and it is responsible for regulating the relationship between the actors in the institution and the stakeholders, and it helps those in charge to determine the direction and performance of the organization, and through it the interests and financial investments of the shareholders can be protected. As well as maximizing the profits of the organization and its market value in the long run, and organizing the relationship between the top management, which includes (executive management and the board of directors) and between the shareholders and stakeholders associated with the organization.

In terms of the distinction between governance and government - “governance” is what the “government” does.

It may be a geopolitical government (nation state), government companies (a commercial entity), socio-political government (tribe, family, etc.), or any number of different types of government.

But governance is the dynamic exercise of management and policy power, although government is the vehicle (in aggregate) that carries out this practice.

The term government is also used abstractly as a synonym for the term governance, as in the Canadian slogan, "peace, order and good government".

Good governance is about balancing strategic and operational responsibilities in an orderly and deliberate manner.

Governance is also related to leadership and ensuring that the organization is managed and its business is conducted in an efficient and proper manner. It is also known as the systems and processes concerned with ensuring overall direction, effectiveness of supervision and accountability of the organization.

* **Benefits of good governance**

Assist board members and influential managers in achieving goals and making decisions in the best way.

Ensures compliance with the organization and adherence to laws and regulations.

Ensure the protection of interests and assets.

Defines responsibilities and tasks.

Ensures a balance between strategic and operational responsibilities.

Governance is based on important foundations

The first rule: the clear strategy.

The second rule: the documented system.

The third rule is appropriate institutional culture.

Participation is the cornerstone of good governance

Good governance requires fair legal structures to be imposed impartially that include full protection of human rights, especially minorities.

Transparency means that information is available and available to the people affected by decisions and

its content, and it means that there is sufficient institutional information available and easy to access.

Response: Good governance requires responding to the requirements of all segments within reasonable and specific time frames.

Efficiency and effectiveness: the work of institutions in society is directed towards achieving the needs of society. As for efficiency, it means the optimal use of available resources.

Governance is considered the final result of multi-faceted and long-term processes that must be well planned and carefully executed, and that those in charge of the institution have faith in the positive impact of the application of these principles in the organization, so that it includes a structure, elements and processes that are linked and arranged as foundations for good rational management, and through which the best use is made. Of existing resources, and their proper management, according to certain criteria, such as efficiency, effectiveness, sustainability, and impact

The second axis: Definition of health governance for epidemiological preparedness

The main negotiating forum for health diplomats at WHO comprises the two governing bodies

the World Health Assembly and the Executive Board – and the many formal and informal platforms that provide inputs to their work. Since WHO deals with many different areas, it is important to be aware of the Organization's core functions. Article 2 of the WHO Constitution lists 22

functions, which may be summarized as follows:-

Providing leadership on matters critical to health, and engaging in partnerships when joint action is needed; Proposing conventions, agreements and regulations, and making recommendations on international health matters; Setting norms and standards, and promoting and monitoring their implementation; Shaping the research agenda and stimulating the generation, transfer and dissemination of valuable knowledge; Articulating ethical and evidence-based policy options ; Providing technical support, catalysing change and building sustainable institutional capacity; Monitoring the global health situation and assessing health trends; and Responding to health emergencies.

* Decision-making at WHO

Decision-making is formally governed by the principle of one vote per Member State. The Rules of Procedure of the World Health Assembly and those of the Executive Board provide for decision making by a simple majority except for decisions on important questions, such as the adoption of conventions or agreements, amendments to the Constitution and suspension of the voting privileges of Member States, for which a two-thirds majority of the Member States present and voting is required. However, virtually all negotiations are conducted with the goal of reaching consensus, and almost all decisions are indeed adopted by consensus. In WHO practice this means the adoption of decisions without a formal vote. Consensus does not imply unanimity, that is, a situation in which all Member States have formally accepted a decision, but, rather, that no Member State actively opposes the decision.

The adoption of new policies often requires a difficult and long process of consensus building. It may be necessary to drop strong wording from the draft text or to abandon certain policy options in order to secure

the adoption of a resolution that proves acceptable to all 194 Member States.

Briefings and consultation sessions are held to support the consensus-building process – these are often for Member States only. Global health governance is important to prepare for the Coronavirus pandemic at the practical and technical levels. From a procedural point of view, the rational management of the preparedness process itself is critical to ensuring global and national systems are best equipped to respond to the pandemic. Fundamentally, establishing elements of good governance in various aspects of epidemic preparedness may contribute to increasing the speed, effective and flexible response systems to the epidemic.

There is a set of definitions of governance and global health, depending on the institutions involved and whether health is their primary mandate.

Global health governance may be broadly defined as “the use of formal and informal institutions, rules and processes by states, intergovernmental organizations, and non-state actors to deal with health challenges that require collective

action across borders to effectively address”, as it is primarily involved across an organization. Global health (WHO) with preparation in forums such as the World Health Assembly (WHA) and with international agreements including the International Health Regulations (2005) (International Health Regulations). In addition to global health governance. These global institutions play an active role in global health governance of preparedness measures. Regarding COVID-19, there are five common elements of good global health governance with special consideration: accountability, transparency, fairness, participation and the rule of law.

Because the International Health Regulations are a central instrument for establishing an international legal system for preparedness and response, it is codifying the rules for the expected behavior of states parties and the World Health Organization. For public health emergencies of international concern to ensure clarity of responsibility and improve future decision-making.

Ensuring accountability may be coupled with mechanisms to address failures in non-compliance or to monitor compliance with obligations and rules.

The third axis: global health management and restrictions on the World Health Organization “as a specialized organization for emergencies and preparedness in order to address the impact and dimensions of the spread of epidemics”

The WHO's role in managing global health has become a flashpoint in the COVID-19 pandemic of tensions between WHO expectations and the limits of authority granted to it by member states, and this has been exacerbated by existing geopolitical tensions and the willingness of member states to participate in multilateralism.

This research has highlighted the preparedness gaps inherent in management expectations and restrictions on the World Health Organization in order to prepare for and respond to the epidemic, with its ability to invite member states, other international organizations and non-governmental organizations to cooperate with it to confront the pandemic with regard to the first two months of the start of the epidemic it was believed that the epidemic was still It is mostly limited to China.

This made the World Health Organization restricted in the powers

granted to it under the International Health Regulations by the States Parties, as the World Health Organization was restricted in its practical and legal ability to search for epidemiology and genetics and the sequence of data necessary to understand the new pathogen, conduct risk assessments, and develop measures. Antibody, like vaccines. The timing and process for declaring public health and declaring an international health emergency, and hence using the term pandemic, However, the rapid collapse of the health rules in place for health control measures, such as non-pharmaceutical interventions from various medical bodies, health restriction measures and international travel bans, as the pandemic revealed the existence of gaps in preparedness for global health governance with regard to international obligations and reliance on the experience of the World Health Organization Global and technical guidelines.

Preparedness loopholes for future global health governance remain for COVID-19. In particular, the role of the World Health Organization in facilitating a fair global distribution of personal protective equipment, diagnostics, treatments and vaccines.

The first six months of the COVID-19 pandemic demonstrated how the global health government's failure must be accounted for. After global health governance was previously considered the first health preparedness measures, but rather one of the most important barriers to an effective pandemic, responding, protecting human health and saving lives.

In particular, it is clarified in the following main areas:-

First, separating the most devastating COVID-19 pandemic from the death rates in the pandemic to date, and the cases assessed as the most prepared in the leading metrics for assessing pandemic preparedness show an underestimation or underestimation of management in the pandemic preparedness process.

Second, weak global health governance has led to major failures in global coordination and collective action

Third, failures in global health governance as a result of poor financial funding for preparedness preparations

In addition to these challenges, COVID-19 has demonstrated a general lack of preparedness. Multilateral

system works coherently and cooperatively.

When a public health situation was declared a state of emergency of international concern (PHEIC), and even when COVID-19 became a pandemic, international institutions did not fully transition into an adequate response pattern to provide support to WHO and national governments and facilitate cross-organizational cooperation.

In preparation, procedures and mechanisms have been established for rapid and comprehensive global cooperation and collective action, including protecting and ensuring the global supply of health supplies to protect individuals.

Especially protective equipment (PPE) and other essential materials including food and research department and development for - and equitable distribution - of diagnoses, treatments and vaccines the third axis: the potential strengths of the multilateral health institutions - their experience on the subject, and the legal obligations related to it. States and standards - not rapidly mobilized or shared in a coordinated or collective manner.

Additionally, group-based coordination exists within the United Nations system. The Covid-19 epidemic has shown that preparing for it as a pandemic requires mechanisms of collective international action, not a single international party, and this is the most positive feature of the pandemic, the total inability of individual countries to confront it.

And recognition of the critical role of international health institutions not affiliated with the United Nations, such as the World Trade Organization, and public and private institutions international partnerships play a role in addressing this fragmentation in preparation for a pandemic Through global health governance it may be necessary to facilitate and ensure greater coordination of international collective action.

The broader global governance of health includes the set of international institutions of its own Influencing international cooperation, cooperation and participation in multilateral systems. COVID 19 highlighted the challenges of global health governance preparedness for two agencies in particular:-

First: The United Nations Security Council

In April 2019, the United Nations General Assembly adopted Resolution 74/270 "Global Solidarity To combat Coronavirus Disease 2019 (COVID-19) ", calling for intensified international cooperation, Implement WHO recommendations, and call on the UN system to mobilize coordination Global response to the epidemic and its harmful effects 9. The size of the pandemic and its complications Risk of relocation and vulnerability of displaced or conflict-affected populations, and the threat Covid-19 is being brought to bear on international peace and security under the leadership of the Secretary-General of the United Nations, Antonio Guterres Call for a UN Security Council resolution calling for a global ceasefire.

While it was an unprecedented moment in Global peace and security, and escalating tensions between two permanent members of the Security Council, the United States and China, on alleged COVID-19 origins, compliance with International Health Regulations obligations, and the role of the World Health Organization delayed the adoption of Resolution 11. On 1 July 2020, the UN Security Council

came unanimously Resolution 2532 (2020) has been adopted, which expresses grave concern about the devastating impact of the Coronavirus At the global level, especially in countries affected by armed conflict, countries emerging from conflict, and humanitarian conflicts Crises, demanding a general and immediate cessation of all hostilities, and recognition The disproportionate social and economic impact of COVID-19 on women, girls, children and refugees, Internally displaced persons, the elderly and people with disabilities.

While the role of the UN Security Council in public health emergencies has been limited, it has been around since the Ebola epidemic The outbreak in West Africa, the UN Security Council's recognition of the risks posed by the outbreak to the world have demonstrated peace and security and the founding goals of the United Nations.

This indicates the Security Council Inability to act as a result of the veto powers of permanent members, despite the great threat The COVID-19 pandemic is a threat to stability and security. This removes one of the most powerful Multilateral forums under international law from

the Department of Global Epidemiology Preparedness

Second: The World Trade Organization

COVID-19 has led to unprecedented disruption to global trade and economies, internationally the travel ban limits the movement of people and goods, reduces consumption, and transforms production Need. Countries have introduced a range of international trade and trade-related measures COVID-19 Response. Roughly 57% of the measures sought to eliminate tariffs and expedite Customs measures, but governments have also moved to restrict exports, leading to a critical disruption Obtaining food and medical supplies by implementing 109 trade restrictive measures The global trade regime, lack of clarity about export restrictions, new tariffs and customs regulations It was implemented in response to COVID-19 that could cause unnecessary disruptions through uncertainty and Faulty, including preventing medical goods at the border or being interrupted in transit.

The World Trade Organization has been criticized for not responding adequately quickly or explicitly to respond to the measures Imposed by members to ensure the global

movement of commodities during the first months of the epidemic. In response to the measures, the World Trade Organization called for increased transparency Information sharing, with transparency mechanisms built into a number of agreements and Operations within the WTO system. Under these agreements, members have notification obligations, With the WTO receiving 219 notifications as of 4 August 2020. 15 However, the WTO also has Create non-exhaustive repositories to track trade and trade-related measures for goods, services, 17 and intellectual property, 18 official sources collected and verified by the World Trade Organization The secretariat is on an ad hoc basis.

The World Trade Organization is a member-led organization. As a result, there have been a number of COVID-19 responses Led by members of the World Trade Organization, including a joint ministerial statement calling for "intensified cooperation".

Among the WTO and other international organizations to support a coherent response to this and Future health crises, the role of the World Trade Organization in monitoring the implementation of trade-related measures, and more the concrete

actions taken by the World Trade Organization "aim to facilitate cross-border flows of vital medical supplies".

Other essential goods and services. ”19 In addition, the WTO's dispute settlement system relies on Members have filed disputes against other members who allegedly have trade barriers to settle Through the dispute resolution process. However, running this process was previously hindered The United States refused to approve new members of the Appeals Panel for the system necessary to it to work, with reference to the intention to withdraw from the WTO dispute settlement system

Meanwhile, 16 members have created a new dispute settlement system that is in line with the current system international laws, known as the Multilateral Interim Appeal Arrangement (MPIA). As European In announcing the initiation of the MPIA, the union cited broader trade reform, including the dispute Resolving operations, "is more important now that I reaffirm the state of public health The need for a multilateral and rules-based global trading system.

The WTO also conducts periodic reviews of members through its Trade Policy Review Mechanism,

such as in addition to the semi-annual production for trade policy review. These processes don't just improve Transparency but also accountability and rule of law within the WTO system. Pandemic preparedness depends on the commitment and support of multilateral and global institutions. Besides those who have a health mandate. However, the fragmentation of global institutions across domains of international law highlights potential preparedness gaps. Member of the World Health Assembly Countries adopted Resolution WHA73.1 on the response to the Coronavirus, which included an international call for organizations to facilitate timely, equitable and affordable access to diagnostics, treatments, and Vaccines Compliant with TRIPS.

(TRIPS Agreement) and flexibilities in the Doha Declaration on the TRIPS Agreement Public Health. However, from a preparedness perspective, the inclusion of this consideration in the decision of the World Health Assembly is unlikely to preempt potential conflicts arising under the TRIPS Agreement.

Despite seeking to withdraw membership from the World Health Organization and the World Trade Organization, the United States Has

submitted his objection to this ruling and this reflects the current and future challenges with global Trade and its effects on health and the role of the World Trade Organization in support of the World Health Organization and global health governance.

However, while portability may be limited given the incentives for participation and to support the philosophies, there may be lessons in the normative and legal context of the WTO Members' obligations to transparency, accountability and the rule of law for global governance of the health.

Third: The impact of international partnerships as a multilateral system in increasing the effectiveness of medical teams in the control, diagnosis, treatment and vaccines of Covid 19. The COVID-19 pandemic has demonstrated significant gaps in the current global health governance of research, Development and equitable distribution of diagnostics, treatments and vaccines for a range of groups Diseases, including COVID-19. In April 2020, a number of countries and a group of global health Organizations - WHO, the Bill & Melinda Gates Foundation, and the Coalition for the Pandemic Preparedness Innovations (CEPI), Global Alliance for Vaccines

and Immunizations (GAVI), Global Fund to Fight AIDS, Tuberculosis and Malaria, UNITAID, The Foundation for Innovative New Diagnostics (FIND), the Wellcome Trust, the World Bank Group, and the World Health Organization have all launched the Access program To the COVID-19 Tool Accelerator (ACT). ACT Accelerator is a governance framework for Collaborate for the development and equitable distribution of diagnosis, treatments and treatments for COVID-19 (COVAX) vaccines and strengthening health systems.

Although not a formal decision-making body, the need for the ACT Accelerator illustrates that Failure to ensure adequate governance frameworks for rapid and facilitating cooperation Research and development in epidemic preparedness and response. While the individual is international Institutions responded sooner, and the collaboration took several months before it was made public That may be diminished if countries put in place governance frameworks for cooperation in combating epidemics Before COVID-19. For example, the threat of the influenza pandemic, and concerns about equity, access to diagnostics, treatments and vaccines has previously led to negotiations and adoption by the World Health Assembly from the

Pandemic Influenza Preparedness Framework (PIP) in 2011. No similar framework the governance framework for non-pandemic influenza has been referenced in the PIP framework reviews, As well as with regard to other developments in international law such as the impact of access and benefits Participation systems Collaboration between the public and private sectors is critical in diagnostic research and development.

Medication, vaccination, and requires careful consideration of good governance, including clear Rules for transparency, accountability, participation and fairness, especially in decisions related to Distribution of diagnostics, treatments and vaccines that rely heavily on trust to achieve effectiveness Epidemiological response.

Governance for global health: gaps in national decision-making in the absence of approved treatments or vaccines, the efforts of the national government to reduce transmission of COVID-19 depends on the use of non-pharmaceutical interventions, such as physical Requirements for spacing, banning of collective gatherings, and closing non-essential businesses. These Measures were vital to stop disease transmission and ensure healthcare systems were not

Overwhelmed, while implementing public health measures in place for testing, contact tracing, Quarantine, isolation and support of patients. However, many countries failed to act Quickly despite the WHO Director-General declaring a health emergency or appropriate national behavior risk assessment. As a result, national decision-making regarding timing, scope, and purpose of Non-pharmaceutical interventions were in many cases contrary to public health or the World Health Organization This included tensions arising due to the scientific uncertainty inherent in New pathogen (like mask requirement), public health misconceptions versus economics Dichotomy (e.g. delaying imposition of physical distancing restrictions) and scale of the pandemic Challenging previously accepted rules (such as international travel bans, generally used or country specific). In addition, government responses, particularly early in the pandemic, have failed to accommodate them Consider the unique vulnerabilities and needs of specific populations, and the disproportionate impact of COVID-19 and measures on different populations.

Ensuring accountability relies on transparency in decision-making, while good governance It requires appropriate inclusiveness in participation in advisory bodies. In

Australia and the United States Saudi Arabia, and national scientific advisory bodies have been criticized for their lack of transparency Membership or the specific nature of advice provided to government. 25 Preparedness includes prior identification of training (including representation requirements) and scope of issues and restrictions from the authority of advisory bodies. Explicitly activate analysis of governance bodies to provide scientific advice Regarding COVID-19, decision-makers in 24 countries found a lack of transparency about who was responsible Decision-making, how to choose them, and how to make decisions (procedural and substantive The exact positions of the advisors, the breadth and nature of the expertise consulted, 26 It raises more questions about the level of participation in national advisory bodies. To prepare, A representative participation may be created appropriately prior to an outbreak in terms of A reference for decision-making bodies, including interdisciplinary expertise for an entire community Consider response measures and their impacts.

The analysis of the national advisory bodies also revealed a stark gender disparity in representation.

Where this information is available, with a minority of women sitting on advisory bodies, or not being represented Absolutely. 27 Further study of individuals' participation across race, ethnicity, and disability, and Religion in advisory bodies will also be relevant to determine participation in related decision-making Of the disproportionate and different effects of the measures and the associated political responses to them Vulnerable population groups.

For democratic countries, accountability is also achieved through the electoral process. Whatever is here It is the danger that governments will use the pandemic to justify postponing elections, legally or illegally Or failing to provide safe alternatives (such as postal voting). In the first four months of the pandemic, At least 62 countries and territories worldwide have postponed national and subnational elections due to COVID-19, including 18 countries postponing national elections and referendums28 Risk of accountability opportunities for national decision-making during COVID-19 Undermined or lost, with governments unable or unwilling to impose the least restrictive measures Necessary to protect health, such as providing safe alternative voting methods that meet international standards Obligations under

international human rights law to protect civil and political rights, as well The right to health.

*** Responding to public health crises**

Crisis diplomacy has been defined as the interactions between States (and other actors) under a heightened threat of systemic change. As global interdependence and integration increase, health diplomacy is used more and more often in dealing with local, regional and global health crises. In recent years the international system has been experiencing a range of crises arising mainly from power politics, economic and strategic interests, and globalization. Global public health crises belong to the latter category.

Multilateral health diplomacy has been practiced since the 19th century, notably during major cholera pandemics. However, “modern” health crisis diplomacy emerged in the early 2000s, when the HIV epidemic, a global cross-border health threat, was placed on the agenda of the UN General Assembly and Security Council, notably in the Declaration of Commitment on HIV/AIDS “Global Crisis– Global Action”, adopted on 27 June 2001 at the special session of the General Assembly on HIV/AIDS.

Multilateral cooperation and diplomacy have further helped in responding effectively to tuberculosis and malaria, and they have paved the way for large-scale vaccination campaigns in fragile settings.

Over the past 20 years, outbreaks of avian influenza, severe acute respiratory syndrome (SARS), Middle East respiratory syndrome (MERS), Ebola and COVID-19 have posed further challenges to the international multilateral order, international organizations and to crisis diplomacy in general .

*** Conclusion**

Improving relations between countries through health and well-being soft power refers to a country's ability to influence the actions of others without the use of force or coercion. The use of health aid in foreign policy is a widely used soft-power strategy through which the donor country can assert its influence. Thus, Tommy G. Thompson, former US Secretary of Health and Human Services, argued over 15 years ago that medical diplomacy was “a way to further America's causes around the world” that could accomplish a lot more than the use or projection of military power (Iglehart, 2004).

Earlier initiatives such as the launching of vaccination programmes (“vaccine diplomacy”) to tackle childhood mortality in Central American and African countries won the United States a great deal of trust and respect worldwide (see also Section 13.2). The United States President's Emergency Plan for AIDS Relief (PEPFAR) has invested over US\$ 85 billion in the global response to HIV/AIDS since its launch in 2003, the largest financial commitment by any country to tackle a single disease in all of history. Similarly, Cuba and China have over many decades strengthened their international standing through “medical diplomacy” by sending medical personnel to developing countries and supporting medical education. Under the Belt and Road Initiative, officially launched in 2013, China is developing an approach referred to as the Health Silk Road (see Box 5). More recently, China's “mask diplomacy” in the early period of the COVID-19 pandemic attracted much attention, especially in Europe and Latin America .

Some form of international health governance has existed since at least the outbreak of cholera in Europe in the mid-nineteenth century. But it was only after the outbreak of severe

acute respiratory syndrome (SARS) in 2002-03 that global governance mechanisms to address epidemics emerged.

Until now, international regulations have been somewhat limited. Focus on managing international borders - airports, ports, and border checkpoints - and require governments only to monitor the spread of a small number of infectious diseases.

Countries with all their political systems use quarantine, isolation and support for patients. However, many countries failed to act Quickly despite the WHO Director-General declaring a health emergency or appropriate national behavior However, the error was in assessing the risks. As a result, national decision-making regarding timing, scope, and purpose of Non-pharmaceutical interventions were in many cases contrary to public health or the World Health Organization This included tensions arising due to the scientific uncertainty inherent in New pathogen (like mask requirement), public health misconceptions versus economics Dichotomy (e.g., delaying imposition of physical distancing restrictions) and scale of the pandemic Challenging previously accepted rules (such as international travel bans,

generally used or country specific). In addition, government responses, particularly early in the pandemic, have failed to accommodate them Consider the unique vulnerabilities and needs of specific populations, and the disproportionate impact of COVID-19 and measures on different populations.

Ensuring accountability relies on transparency in decision-making, while good governance It requires appropriate inclusiveness in participation in advisory bodies. In Australia and the United States Scientific and national health advisory bodies have been criticized for their lack of transparency Membership or the specific nature of medical advice provided to governments.

Preparedness includes prior identification of training (including representation requirements) and scope of issues and restrictions From the authority of advisory bodies.

Regarding COVID-19, decision-makers in 24 countries including the five permanent members of the Security Council found a lack of transparency about who was responsible.

Making healthy decisions, how to choose them, and how to make decisions (procedural and substantive)

The exact positions of the advisors, and the breadth and nature of the experience consulted.

This It raises more questions about the level of participation in national and health advisory bodies. To prepare, appropriately representative participation may be established in terms of an outbreak A reference for decision-making bodies, including interdisciplinary expertise for an entire community Consider response measures and their impacts.

For democratic countries, accountability is also achieved through the electoral process. Whatever is here It being the danger that governments will use the pandemic to justify postponing elections, legally or illegally or failing to provide safe alternatives (such as postal voting). In the first four months of the pandemic, At least 62 countries and territories worldwide have postponed national and subnational elections due to COVID-19, including 18 countries postponing national elections and referendums Risk of accountability opportunities for national decision-making during COVID-19 Undermined or lost, with governments unable or unwilling to impose the least restrictive measures Necessary to protect health, such as providing safe

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The institutional repository of the Global Health Centre at the Graduate Institute of International and Development Studies contains two resources that explain commonly used concepts.