

**GLOBAL HEALTH DIPLOMACY**

**A THESIS SUBMITTED TO**

**THE GRADUATE SCHOOL OF SOCIAL SCIENCES**

**OF**

**MIDDLE EAST TECHNICAL UNIVERSITY**

**BY**

**SELCAN KARABEKTAŞ**

**IN PARTIAL FULFILLMENT OF THE REQUIREMENTS**

**FOR**

**THE DEGREE OF MASTER OF SCIENCE**

**IN**

**THE DEPARTMENT OF INTERNATIONAL RELATIONS**

**AUGUST 2018**

Approval of the Graduate School of Social Sciences

\_\_\_\_\_  
Prof. Dr. Tülin GENÇÖZ  
Director

I certify that this thesis satisfies all the requirements as a thesis for the degree of Master of Science.

\_\_\_\_\_  
Prof. Dr. Özlem TÜR  
Head of Department

This is to certify that we have read this thesis and that in our opinion it is fully adequate, in scope and quality, as a thesis for the degree of Master of Science.

\_\_\_\_\_  
Prof. Dr. Oktay Fırat TANRISEVER  
Supervisor

**Jury Committee:**

Prof. Sencer İMER (Ufuk University, SİBU)

Prof. Oktay TANRISEVER (METU, IR)

Prof. Afsun Ezel ESATOĞLU (Ankara University, SY)

**I hereby declare that all information in this document has been obtained and presented in accordance with academic rules and ethical conduct. I also declare that, as required by these rules and conduct, I have fully cited and referenced all material and results that are not original to this work.**

**Name, Last Name : Selcan, KARABEKTAŞ**

**Signature :**

## **ABSTRACT**

### **GLOBAL HEALTH DIPLOMACY**

**KARABEKTAŞ, Selcan**

M.S., Department of International Relations

Supervisor: Prof. Dr. Oktay Fırat Tannısever

August 2018, 86 pages

Contrary to the views of some scholars, who argue that global health has been argued to constitute a technical issue area, where interests of all countries converge. However, this thesis argues that states pursue sometimes cooperative sometimes conflictual health diplomacies at the national and global levels, since they have their own diverse self-interests regarding their health policies. In order to argue this, the thesis seeks to examine the characteristics and forms of global health diplomacy. The thesis explores various cases in which health diplomacy is practiced differently. In this respect, the cases of the United States of America, Switzerland, Brazil and Turkey have been analyzed. The thesis demonstrates that states increasingly tend to use health as a foreign policy tool in order to promote their national and security interests when they cooperate or have conflicts over finding solutions to global health problems.

This thesis has seven main chapters. The first chapter is the introduction. In each of the following chapters, the cases of WHO and countries such as US, Switzerland, Brazil and Turkey are discussed with their global health policy, respectively. The seventh chapter is the conclusion.

Keywords: health diplomacy, US, Switzerland, Brazil, Turkey

## ÖZ

### KÜRESEL SAĞLIK DİPLOMASİSİ

KARABEKTAŞ, Selcan

Yüksek Lisans, Uluslararası İlişkiler Bölümü

Tez Yöneticisi: Prof. Dr. Oktay Fırat Tanrısever

Ağustos 2018, 86 sayfa

Bu tez, küresel sağlık diplomasisinin özelliklerini ve şekillerini incelemektedir. Bu tez, sağlık diplomasisinin farklı uygulamalarının yapıldığı çeşitli örnekleri araştırmaktadır. Bu bağlamda, ABD, İsviçre, Brezilya ve Türkiye örnekleri incelenmiştir. Sağlıkın ülkelerin çıkarlarının örtüştüğü teknik bir alan olduğunu savunan birçok bilim adamının görüşlerinin aksine, bu tez, devletlerin sağlık politikalarına yönelik farklı çıkarlarının olduğunu ve duruma göre ulusal ve uluslararası düzeyde, bazen müşterek, bazen ise çelişkili bir sağlık diplomasisi izlediklerini savunmaktadır. Bu tez, devletlerin küresel sağlık problemlerine çözüm bulma adına işbirliği yaptıkları ya da çatıştıkları durumda ulusal ve güvenlik çıkarlarını gözetmek adına sağlığı bir dış politika aracı olarak kullanma eğilimlerinin arttığını açıklamaktadır.

Bu tez yedi bölümden oluşmaktadır. İlk bölüm giriş kısmıdır. İkinci bölüm DSÖ ve küresel sağlık diplomasisini incelemektedir. Üçüncü bölüm ABD örneği bağlamında küresel sağlık diplomasisini ele almıştır. Dördüncü bölümde İsviçre ve küresel sağlık diplomasisi analiz edilmiştir. Beşinci bölüm Brezilya örneği kapsamında küresel sağlık diplomasisini araştırmıştır. Altıncı bölüm Türkiye ve küresel sağlık diplomasisini incelemektedir. Yedinci bölüm ise sonuç kısmıdır.

Anahtar kelimeler: Sağlık diplomasisi, ABD, İsviçre, Brezilya, Türkiye

*To my mother Neriman Karabektaş and my father Muhammer Karabektaş...*

## ACKNOWLEDGEMENTS

I would firstly like to express my gratitude to my thesis advisor, Prof. Oktay Tanrısever for all of his support, effective guidance and continuous encouragement through the process of researching and writing this thesis. I would also like to thank the members of thesis committee: Sencer İmer from Ufuk University and Afsun Ezel Esatođlu from Ankara University for their guidance, advice, criticism, encouragements and valuable suggestions and comments.

I want to express my sincere gratitude to Prof. Mümtez Kaya for his support and encouragement since my higher education. Without its guidance and motivation, I could not have the courage to follow my dreams and objectives after graduation. My sincere thanks also go to Dr. Sezen Yaraş for her strong support and her presence at each time I felt uncomfortable and her kind comments, advice and criticism during my research.

Last but not least, I would finally thank my family and my friends for supporting me spiritually throughout writing this thesis and my life in general. I am so grateful for their encouragements and patience during this process. I would also like to give a special thanks to my housemate Esmâ and my precious friends Gülşah and Gamze for their kind support and patience in thourgher times.

## TABLE OF CONTENTS

PLAGIARISM.....	iii
ABSTRACT.....	iv
ÖZ.....	v
DEDICATION.....	vi
ACKNOWLEDGEMENTS.....	vii
TABLE OF CONTENTS.....	viii
LIST OF TABLES.....	xi
LIST OF FIGURES.....	xii
LIST OF ABBREVIATIONS.....	xiii
CHAPTER	
1.INTRODUCTION.....	1
1.1 Scope and Objective.....	1
1.2 Literature Review.....	2
1.3 Argument.....	7
1.4 Methodology.....	7
1.5 Organization of the Thesis.....	8
2.WORLD HEALTH ORGANIZATION.....	9
2.1 Introduction.....	10
2.2 Historical Background.....	14
2.3 Global Health and WHO.....	17
2.4 Global Health Diplomacy and WHO.....	20



2.5 WHO and Member States.....	20
2.6 Conclusion.....	21
3.US AND GLOBAL HEALTH DIPLOMACY.....	23
3.1 Introduction.....	23
3.2 US and Global Health.....	24
3.3 US Foreign Policy and Health.....	25
3.4 Health Diplomacy Strategy.....	25
3.5 Foreign Aid in Health Perspective.....	28
3.6 Relation and Cooperation with WHO and other Regional and IO's.....	31
3.7 Conclusion.....	33
4. SWITZERLAND AND GLOBAL HEALTH DIPLOMACY.....	35
4.1 Introduction.....	35
4.2 Switzerland and Global Health.....	35
4.3 Swiss Foreign Policy and Health.....	37
4.4 Health Diplomacy Strategy.....	40
4.5 Foreign Aid in Health Perspective.....	42
4.6 Relation and Cooperation with WHO and other Regional and IO's.....	44
4.7 Conclusion.....	46
5. BRAZIL AND GLOBAL HEALTH DIPLOMACY.....	48
5.1 Introduction.....	49
5.2 Brazil and Global Health.....	50
5.3 Brazil Foreign Policy and Health.....	53

5.4 Health Diplomacy Strategy .....	56
5.5 Foreign Aid in Health Perspective.....	58
5.6 Relation and Cooperation with WHO and other Regional and IO's.....	60
5.7 Conclusion.....	62
6. TURKEY AND GLOBAL HEALTH DIPLOMACY.....	64
6.1 Introduction.....	64
6.2 Turkey and Global Health.....	65
6.3 Turkish Foreign Policy and Health.....	66
6.4 Health Diplomacy Strategy.....	68
6.5 Foreign Aid in Health Perspective.....	71
6.6 Relation and Cooperation with WHO and other Regional and IO's.....	76
6.7 Conclusion.....	78
7.CONCLUSION.....	80
REFERENCES.....	86
APPENDICES.....	121
A. TÜRKÇE ÖZET / TURKISH SUMMARY.....	122
B. TEZ FOTOKOPİSİ İZİN FORMU/ THESESES PHOTOCOPY PERMISSION FORM.....	129

## **LIST OF TABLES**

Table 1 Switzerland's funding for WHO, by funding source, 2010–2011...44

Table 2 Net Official Development Assistance of Turkey 2014-2015.....77

## LIST OF FIGURES

Figure 1: WHO Universal Health Coverage index of countries 2015.....	17
Figure 2: US Global Health Funding 2006-2018.....	31
Figure 3: US Contribution to WHO by type of contribution 2010-2016.....	33
Figure 4: Switzerland's ODA for health provided to international and multilateral organizations in 2011.....	46
Figure 5: Brazilian Technical Assistance towards developing countries of the Community of Portuguese Speaking Countries 2005-2010.....	59
Figure 6: Brazilian Annual Budget for Technical Assistance to Africa 2003- 2010).....	60

## **LIST OF ABBREVIATIONS**

<b>US/USA</b>	United States of America
<b>WHO</b>	World Health Organization
<b>UN</b>	United Nations
<b>HIV/AIDS</b>	Human Immunodeficiency Virus
<b>USD</b>	United States Dollar
<b>PEPFAR</b>	President's Emergency Plan for AIDS
<b>SHD</b>	Strategic Health Diplomacy
<b>CDC</b>	Center for Disease Control
<b>PAHO</b>	Pan-American Health Organization
<b>SDC</b>	Swiss Agency for Development and Cooperation
<b>GAVI</b>	Global Alliance for Vaccines and Immunization
<b>GFATM</b>	Global Fund to Fight AIDS, Tuberculosis and Malaria
<b>MSF</b>	Medecins Sans Frontiere
<b>CPCP</b>	Community of Portuguese Speaking Countries
<b>UNASUR</b>	Union of South American Nations
<b>SSC</b>	South-South Cooperation
<b>BRICS</b>	Brazil Russia China India and South Africa
<b>JICA</b>	Japan International Cooperation Agency
<b>GIZ</b>	Gesellschaft für Internationale Zusammenarbeit
<b>OIC</b>	Organization for Islamic Cooperation
<b>TİKA</b>	Türk İşbirliği ve Kalkınma Ajansı
<b>OECD</b>	Organization for Economic Cooperation and Development
<b>UNEP</b>	United Nations Environmental Program
<b>UNICEF</b>	United Nations International Children's Emergency Fund
<b>EU</b>	European Union

## CHAPTER 1

### INTRODUCTION

This thesis argues that states pursue sometimes cooperative sometimes conflictual health diplomacies at the national and global levels, since they have their own diverse self-interests regarding their health policies. One of the issues affecting humanity that necessitates global action and cooperation is the spread of diseases and health-related troubles. The diseases and epidemics such as cholera and plague crossing national borders had negative impacts on different areas, especially in trade.<sup>1</sup> This issue will push states and non-states actors to tackle global health issues on an international platform. The World Health Organization, founded in 1945, has been the alone institution of all international health works and global health coordination for a long time. The first decades of the agenda of WHO was occupied by trying to diminish the worst effect of HIV/AIDS virus touching the entire world and also having irreversible impact on the global public health.<sup>2</sup> With the beginning of the 21st Century, the changing demands of the world have also touched on the way to solve global health issues. “The rapid changes in the global health landscape have been accompanied by an increasing role of health in international politics; the implication of civil society in global health diplomacy has been extraordinarily successful in positioning health in a multitude of ways in many negotiations under way in the general system of diplomacy.”<sup>3</sup> Health has also been the subject of important international conferences.

---

<sup>1</sup> World Health Organization. “The first 10 years of the World Health Organization.” World Health Organization. 1958. Available at: <http://apps.who.int/iris/handle/10665/37089> (Accessed on Jan. 20, 2017).

<sup>2</sup> McCarthy, Michael. “A brief history of the World Health Organization.” Special Report, *The Lancet* Vol. 360, October 12, 2002.

<sup>3</sup> Raphael Lencucha, Anita Kothari and Ronald Labonte. “The role of non-governmental organizations in global health diplomacy: negotiating the Framework Convention on Tobacco Control.” Oxford University Press, *Health Policy and Planning* 2011;26:405–412 doi:10.1093. 2010.

The last ten years have also had a strategic importance on the development of foreign health policies of states. The foreign ministers of seven countries issued the Oslo Declaration after their Ministerial Summit in 2006, emphasizing the importance of integrating health into foreign policy and promised to include health on their foreign policy agendas.<sup>4</sup> According to

Iliona Kickbusch, there are some “important keystone points on the development of global health diplomacy efforts of world’s governments.”<sup>5</sup> The Oslo Declaration is one of them that pushed governments to be more aware of the importance on including health diplomacy strategies on the agenda of foreign policy goals, as it necessitates to eliminate every single threat against their security and national interests, transborder challenges, among which health is an important one. This is only surmountable through global cooperation, as they also affect global security and economy, while also shaping foreign policy interests.<sup>6</sup>

### **1.1 Scope and Objective**

The principal objective of this thesis is to analyze how states use health as a foreign policy tool, usually for national and security concerns, and sometimes for the purpose of contributing to international cooperation. The case of the United States of America, Switzerland, Brazil and Turkey have been analyzed. USA and Switzerland have already implemented a foreign health policy. Brazil through the Oslo Declaration has committed to integrate health into its foreign policy in the upcoming years. Turkey, as an emerging economic power, pursues outreach policies especially towards Africa and “health is an important part of its foreign aid” and a field on which bilateral agreements are made. Countries’ foreign health policies are handled in detail to compare how

---

<sup>4</sup> Oslo Ministerial Declaration on Global Health. “A pressing foreign policy issue of our time, Ministers of Foreign Affairs of Brazil, France, Indonesia, Norway, Senegal, South Africa, and Thailand.” *The Lancet*, Volume 369, Issue 9570, 1373 – 1378. 2006.

<sup>5</sup> Kickbusch, Iliona. “Global health diplomacy: How foreign policy can influence health.” *BMJ* 342: d3154. 201104. 2011.

<sup>6</sup> Iliona Kickbusch, Nick Drager, Graham Lister, Michaela Told. “Global Health Diplomacy: Concepts, Issues, Actors, Instruments, Fora and Cases.” DOI 10.1007/978-1-4614-5401-4\_2. 2013.

relevant are within the objectives of their national interests. It is attempted to define the motivations behind health diplomacy strategies of the countries. Therefore, it is tried to find answers to these questions:

- 1) Is health a foreign policy tool or a moral responsibility for better lives of world's citizens?
- 2) Are not any self-interests on foreign health aid of countries, on their interventions to unstable countries?
- 3) Is that economic and security interests or just a willingness for global cooperation on health behind foreign health policies?

## **1.2 Literature Review**

According to the realist view, one of the major theories in international relations, the main actors in the anarchic international system are states who pursue their own interests; they seek to increase their power through guaranteeing their security and seek to pursue national goals among relations with foreign states, by focusing on absolute sovereignty, national power and national interest.<sup>7</sup> According to this, political realism considers diplomacy as “the art of bringing the different elements of the national power to bear with maximum effect upon those points in the international situation which concern national interest most directly.”<sup>8</sup> Besides security concern, economic interest is also another reason for funding on global health. For example, China's investments in African countries through health programs can explain their willingness to gain access to strategic resources and market within the continent.<sup>9</sup>

---

<sup>7</sup> Korab Karpowicz, W. Julian. "Political Realism in International Relations. " The Stanford Encyclopedia of Philosophy Summer 2018, Edward N. Zalta (ed.). available at: <https://plato.stanford.edu/archives/sum2018/entries/realism-intl-relations>. (Accessed on May 15, 2018).

<sup>8</sup> Pashakhanlou H. Arash "Realism and Fear in International Relations: Morgenthau, Waltz and Mearsheimer Reconsidered." Palgrave Macmillan, Cham. 2017.

<sup>9</sup> Segal, Gerard. "China and Africa." The Annals of the American Academy of Political and Social Science. (1992) Vol 519, Issue 1, pp. 115 – 126.



Rebecca Katz and Daniel Singer highlight that diseases which may have negative impact on countries' national interests are placed on the foreign strategies agendas of states. Believing that "promoting economic development and preventing political instability are core priorities for every government and are generally the primary motivations underlying national security policy", the authors defend that health is a foreign policy tool that enhances national security.<sup>10</sup>

According to Ronald Labonte and Michelle, global health is related with the six basic areas that make foreign policy which are "security, development, global public goods, trade, human rights and ethical/moral reasoning."<sup>11</sup> They argue that the first three ones are subjects of high politics, whereas the last three of them are subjects of low politics. However, health is related to all of them; to security by "giving global health interventions greater traction across a range of political classes than a rights-based argument alone"; to trade by emphasizing that it can "improve health through global market integration, economic growth and positive health externalities"; to development as it remains "the invitation to global governance debates"; to human rights, by having "advocacy traction and legal potential within national boundaries"; to global public goods by providing "a language by which economists of one market persuasion can convince economists of another that there is a sound rationale for a system of shared global financing and regulation" and to moral/ethical reasoning, as "a necessary addendum to the legalistic nature of human rights treaties."<sup>12</sup>

According to liberalists, prosperity of states can ensure a stability in the anarchical system; through economic interdependence, the spread of democracy for global peace and international cooperation, it is possible to prevent conflicts and wars.<sup>13</sup> Liberal

---

<sup>10</sup> Rebecca Katza and Daniel Singer A. "Health and security in foreign policy." Bulletin of the World Health Organization (2007) Special Theme Vol. /85/3/06-036889.

<sup>11</sup> Labonté, Ronald and Michelle Gagnon "Framing health and foreign policy: lessons for global health diplomacy." Globalization and Health Review (2010). Volume 6, Number 1, Page 1.

<sup>12</sup> Ibid.

<sup>13</sup> Stephen M. Walt. "International Relations: One World, Many Theories." Foreign Policy. No. 110, Special Edition: Frontiers of Knowledge (1998), pp. 29-32 and 34-46.

views give importance to the presence of multinational actors and non-governmental organizations, as players for increasing international collaboration. Leigh Haynes, David Legge, Leslie London, David McCoy, David Sanders, and Claudio Schuftan propose in their article to develop a “Framework Convention for Global Health under the auspices of the World Health Organization”; they argue that foreign aid does not be a tool for achieving national interests, but it should a more humanitarian objective deriving from international solidarity.<sup>14</sup>

Professor Iliona Kickbush stated that global health diplomacy needs “to include other spaces of negotiation and influence, and the number of organizations dealing with health has increased exponentially.”<sup>15</sup> She emphasizes the importance of actors other than states and highlights that cooperation and efforts to contribute to development of countries can be realized through the mutual works of multi-national organizations.<sup>16</sup> According to Richard Smith, the role of non-governmental actors is increasing and cannot be underestimated in the effectiveness of global health diplomacy; he argues that “while governments are tasked with agreeing priorities and negotiating agreements to protect and promote global health, as formal representatives of their domestic constituencies, how these tasks are achieved are influenced by the decisions of non-state actors which are not similarly accountable” and this “gives it the ability to maneuver in global health diplomacy largely on its own terms.”<sup>17</sup> Thus, states, as the primary actors on the international arena, are the main policy makers, however the

---

<sup>14</sup> Leigh Haynes, David Legge, Leslie London, David McCoy, David Sanders, Claudio Schuftan. “Will the struggle for health equity and social justice be best served by a Framework Convention on Global Health?” (2013). *Health and Human Rights*, Vol. 15.

<sup>15</sup> Ibid.

<sup>16</sup> Kickbusch, Iliona. “Global health governance: some new theoretical considerations on the new political space.” From: Lee, Kelley. “Globalization and health.” London: Palgrave; 2003:192-203. 2002.

<sup>17</sup> Smith, Richard and Kelley Lee. “WHO Network on Global Health Diplomacy.” *Global Health Diplomacy Research* (2010) *Global Health Governance* Vol.5 p.1.

implementation and realization of them are in strong relations with the works of non-states actors.

Hanii Mamudu and Stalton Glantz argue that World Health Organization has a crucial importance in pushing states to implement policies adapted.<sup>18</sup> Considering this, they highlight that civil society organizations facilitate the global cooperation for global common issues and as a result, “they should be involved in international negotiations on public health issues; civil society organizations involved in international negotiations on any public health issue should focus on providing and sharing scientific information on the issue with national delegates.”<sup>19</sup>

### **1.3 Argument**

This thesis seeks to examine the characteristics and forms of global health diplomacy and explores various cases in which health diplomacy is practiced differently. In this respect, the cases of the United States of America, Switzerland, Brazil and Turkey have been analyzed. The main argument of this thesis is that, contrary to the views of some scholars, who argue that global health constitutes a technical issue area, where interests of all countries converge, this thesis argues that states pursue sometimes cooperative sometimes conflictual health diplomacies at the national and global levels, since they have their own diverse self-interests regarding their health policies.

US has been the first country to adopt a foreign health strategy by integrating health in its foreign policy agenda, under the Administration of Carter in 1978.<sup>20</sup> Stating that more US foreign policy attention on international health would contribute to US interests in national security, economic power and opportunities, political and economic stability in the international system, and as well as in the advancement of

---

<sup>18</sup> Mamudu, Hanii and Stalton Glantz. “Civil society and the negotiation of the Framework Convention on Tobacco Control.” *Global Public Health*. (2009). 4(2):150-68. doi: 10.1080/17441690802095355.

<sup>19</sup> Ibid.

<sup>20</sup> Bourne, Peter. “A Partnership for International Health Care.” *Center for Disease Control. Public Health Reports* (1978). 93(2): 114-23.

human rights, US Government has initiated the official entrance of health on the international political agenda through the politicization of health.

#### **1.4 Methodology**

While the main objective of this thesis is to attempt to analyze and explain how states approach and consider global health with different objectives depending their own interests; sometimes this interest can be from a national and security concern, or from the desire to contribute to global health through international cooperation.

While doing research, web resources as well as library resources including books, academic journals, newspaper archives, views of important scholars and databases from official websites and report of governments and ministries have been reviewed and referred. Moreover, in the country cases chapters of this thesis, a case study methodology, which provides the understanding and analysis of complex issues, has been applied from trying to answer to the questions “how” and “why”. Yin explains the concept of case study methodology as “an empirical inquiry that investigates a contemporary phenomenon within its real-life context; when the boundaries between phenomenon and context are not clearly evident; and in which multiple sources of evidence are used.”<sup>21</sup> As also stated by Tellis, case study “helps to explain both the process and outcome of a situation through complete observation, reconstruction and analysis of the cases under investigation.”<sup>22</sup> Data collection from various documents and books has been made in order to analyze the case of four major countries chosen with a strategic objective; Switzerland, as the first country implementing a foreign health policy, deserves to be examined how and why it has realized such an initiative. With the first foreign health strategy in the world, US is the first state practicing health diplomacy. Brazil and Turkey, as the two emerging regional powers with a willingness to have more voice on international politics, have designed a national strategy that will

---

<sup>21</sup> Yin, Robert K. “Case Study Research: Design and Methods.” (2009). Sage Publications ISBN: 0803956622 0803956630 (PBK.).

<sup>22</sup> Tellis, Winston. “Introduction to Case Study.” (1997). *The Qualitative Report*, Volume 3, Number 2. (<https://nsuworks.nova.edu/tqr/vol3/iss2/>)

permit them to contribute to global health while at the same time pursuing and protecting self-interests.

### **1.5 Organization of the Thesis**

This thesis contains of 7 chapters; the first chapter begins with the introduction part which describes the scope and objective, literature review, argument and research argument of the thesis. The second chapter describes the World Health Organization, as the global actor and governor on global health and its practices of global health diplomacy. The third, fourth, fifth and sixth chapters analyze the country cases of respectively US, Switzerland, Brazil and Turkey. The relations and positions of these states towards global health diplomacy are examined under seven sub-titles, which are the introduction part, the relation between the country case analyzed and global health, their foreign policies and health, their health diplomacy strategy, their foreign aid in health perspective, their relations and cooperation with WHO and other regional and international organizations and a conclusion part to terminate. The last chapter concludes the entire work with some general analysis and comparisons as well as observations.

## CHAPTER 2

### WORLD HEALTH ORGANIZATION

#### 2.1 Introduction

This chapter attempts to analyze WHO, the unique intergovernmental organization for promoting global health in international relations' perspectives. The historical background of WHO, its structure, its position and contribution to global health and diplomacy are examined. WHO is the key actor in supporting governments to improve their public health.<sup>23</sup> Founded with a strong belief in improving all people's health in need, WHO defends itself as the unique universal actor to contribute governments in their initiatives on health issues.<sup>24</sup> This provides WHO to be the central system on global health with the participation of all UN Member States which assures its universalism.<sup>25</sup>

Last events on the developing aspect of foreign policy that initiate to include health has also shaped the vision of WHO towards global health diplomacy. Researchers and experts on the field have declared and called to WHO Member States for the necessity to include health in their foreign policy agenda.<sup>26</sup> This will also give another responsibility to WHO, as the global governor on health issue, to gather states and support them in conducting diplomatic relations on health issues. Considering this,

---

<sup>23</sup> Richard Dodgson, Kelley Lee and Nick Drager. "Global Health Governance: A Conceptual Review." WHO, Department of Health and Development. Discussion Paper No 1. 2002.

<sup>24</sup> Ibid.

<sup>25</sup> Julio Fren and Suerie Moo. "Governance Challenges in Global Health." *The New England Journal of Medicine*. 2013. DOI: 10.1056/NEJMra1109339.

<sup>26</sup> Kickbusch Iliona, Nick Drager, Graham Lister, Michaela Told. "Global Health Diplomacy: Concepts, Issues, Actors, Instruments, Fora and Cases." (2013). DOI 10.1007/978-1-4614-5401-4\_2.

WHO remains as the basic institutional mechanism to provide such an environment. The following lines will explain how it is relevant to associate WHO, as the main mechanism to ensure international cooperation for global health, with global health diplomacy.

## 2.2 Historical Background

Even if officially the World Health Organization was founded in 1948 as the health body of the United Nations, many international conferences and organizations lie behind it. The increasing spread of communicable diseases affected the flow of global trade and as a result, deteriorated states' situations in economic and social terms. Especially the epidemics of cholera that killed tens of thousands in Europe in the 1800's had been one of the precipitating cause of the call for action.<sup>27</sup> These lead to try to find common solutions for common health problems and as a result, some international sanitary conferences have been organized in order to discuss the issue.<sup>28</sup> The first International Sanitary Conference was convened in Paris in 1851.<sup>29</sup> This was followed by the adoption in 1892 of the International Sanitary Convention aiming to control communicable diseases across the continent.<sup>30</sup> At the same years, the International Sanitary Bureau, which was transformed to the Pan American Health

---

<sup>27</sup> Howard-Jones, Norman. "The scientific background of the international sanitary conferences." World Health Organization, 1975. [http://apps.who.int/iris/bitstream/handle/10665/62873/14549\\_eng.pdf?sequence=1](http://apps.who.int/iris/bitstream/handle/10665/62873/14549_eng.pdf?sequence=1).

<sup>28</sup> McCarthy, Michael. "A brief history of the World Health Organization." Special Report on World Health Organization. (2002) The Lancet, Volume 360, Issue 9340, 1111 – 1112.

<sup>29</sup> Kickbusch Iliona, Nick Drager, Graham Lister, Michaela Told. "Global Health Diplomacy: Concepts, Issues, Actors, Instruments, Fora and Cases." (2013). DOI 10.1007/978-1-4614-5401-4\_2.

<sup>30</sup> World Health Organization. "The first ten years of the World Health Organization." (1958). Available at: [http://apps.who.int/iris/bitstream/handle/10665/37089/a38153\\_eng\\_LR\\_part1.pdf?sequence=14](http://apps.who.int/iris/bitstream/handle/10665/37089/a38153_eng_LR_part1.pdf?sequence=14) (Accessed on Feb. 24, 2018).

Organization (PAHO) later on, was established in 1902 in America for the same purpose.<sup>31</sup>

In the beginning of the 1900's, L'Office International d'Hygiene Publique was established in Paris and the Health Organization of the League of Nations in Geneva within the view to discuss health issues in a structural basis in Europe.<sup>32</sup> Many international sanitary conferences were held until the establishment of the United Nations in 1945.<sup>33</sup> Through the meetings of this international organization made up of currently 193 Member States, a health division of UN was aimed to be founded. Within this purpose, at the UN Conference held in San Francisco in 1945, it was decided to establish an international organization specially dealing with health issues.<sup>34</sup> Three years later, UN Members approved the WHO Constitution, with a budget of 5 million US Dollars and the L'Office International d'Hygiene Publique, the Health Organization of the League of Nations and the Pan American Health Organization have been associated under the roof of the World Health Organization in 1948, with its headquarter in Geneva.<sup>35</sup> The first issues of the first Conference of WHO discussed in the meeting at Geneva in 1948 were malaria, tuberculosis, venereal diseases, maternal and child health, sanitary engineering, and nutrition.<sup>36</sup>

---

<sup>31</sup> McCarthy, Michael. "A brief history of the World Health Organization." Special Report on World Health Organization. (2002) *The Lancet*, Volume 360, Issue 9340, 1111 – 1112.

<sup>32</sup> The Editors of Encyclopedia Britannica. "World Health Organization." *Encyclopedia Britannica*. (2017) Available at: <https://www.britannica.com/topic/World-Health-Organization> (Accessed on Feb. 24, 2018).

<sup>33</sup> Kickbusch Iliona, Nick Drager, Graham Lister, Michaela Told. "Global Health Diplomacy: Concepts, Issues, Actors, Instruments, Fora and Cases." (2013). DOI 10.1007/978-1-4614-5401-4\_2.

<sup>34</sup> Ibid.

<sup>35</sup> McCarthy, Michael. "A brief history of the World Health Organization." Special Report on World Health Organization. (2002) *The Lancet*, Volume 360, Issue 9340, 1111 – 1112.

<sup>36</sup> Yannick, Jean. "Organisation Mondiale de la Santé." *Perspective Monde*, 2016. Available at : <http://perspective.usherbrooke.ca/bilan/servlet/BMDictionnaire?iddictionnaire=1600> (Available at: May 18, 2018).



Working actively in more than 150 countries, the World Health Organization's principal objective is to fulfill of being the directing and coordinating global authority on international health within the United Nations' system.<sup>37</sup> It explains its aims as providing necessary support for the implementation of health policy and leadership on gathering the international community on health issues, giving assistance in technical matters and monitoring the world health situation and while doing this, WHO also has the objective to focus on important areas such as governments' health systems, noncommunicable and communicable diseases, promoting world population health and corporate services in order to have sustainable and concrete results.<sup>38</sup>

WHO's structure is composed of four main bodies which are the World Health Assembly, the Executive Board, the Directorate General and the Secretariat.<sup>39</sup> The main decision-making body of WHO is the World Health Assembly, where all WHO Member States are represented by their delegations. Policies are determined and budgets are approved by this unit. It also has the authority to appoint the Director General.<sup>40</sup> The Assembly meets in May each year, at WHO headquarter in Geneva, Switzerland. The Executive Board, composed of health experts, usually doctors, is elected for three-year terms by the Assembly and has the main duty of preparing the agenda for being submitted to the Assembly and giving advice to accelerate the works of WHO.<sup>41</sup> The Director General nominated by the Executive Board and appointed by

---

<sup>37</sup> Theodore M. Brown, Marcos Cueto, Elizabeth Fee. "The World Health Organization and the Transition From "International" to "Global" Public Health." *American Journal of Public Health* 96, no. 1 (2006): pp. 62-72. DOI: 10.2105/AJPH.2004.050831.

<sup>38</sup> McCarthy, Michael. "A brief history of the World Health Organization." *Special Report on World Health Organization*. (2002) *The Lancet*, Volume 360, Issue 9340, 1111 – 1112.

<sup>39</sup> Yannick, Jean. "Organisation Mondiale de la Santé." *Perspective Monde*, 2016. Available at: <http://perspective.usherbrooke.ca/bilan/servlet/BMDictionnaire?iddictionnaire=1600> (Available at: May 18, 2018).

<sup>40</sup> Beigbeder, Yves. "L'Organisation mondiale de la santé." *Nouvelle édition*. Genève: Graduate Institute Publications, 1995.

<sup>41</sup> World Health Organization. "Constitution of the World Health Organization." (2006) *Basic Documents*, Forty-fifth edition, Supplement. [http://www.who.int/governance/eb/who\\_constitution\\_en.pdf](http://www.who.int/governance/eb/who_constitution_en.pdf)

the Assembly is responsible for the administration of health policies approved and implemented all around the WHO offices in the world.<sup>42</sup> It is assisted by many different general directorates which focus on a specific area of work. The Director is elected for a five-year term. The last election was on 23 May 2017 and an Ethiopian health officer, Dr. Tedros Adhanom Ghebreyesus was elected as the Director-General of WHO.<sup>43</sup> The Secretariat is headed by the Director General, who has to coordinate the worldwide WHO offices from the headquarters, Geneva and the technical and administrative personnel of the organization. It organizes meetings and provides necessary assistance to implement policies adopted by the Assembly.<sup>44</sup>

Six main regional offices are on function around the world, related to the headquarter, these are; the Pan American Health Organization (PAHO), based in Washington, USA; the Regional Office for Europe (EURO) in Copenhagen, Denmark; the Regional Office for the Western Pacific (WPRO) in New Delhi, India; the Regional Office for Africa (AFRO), in Brazzaville, Republic of Congo; the Regional Office for the Eastern Mediterranean (EMRO), in Cairo, Egypt and the Regional Office for South-East Asia (SEARO), in Manila, Philippines.<sup>45</sup> The regional offices work in close relations with the headquarters and are the main point from where activities around the continents are carried out. The newest Action Plan of WHO has been implemented for a five-year long term, the period of 2014-2019 and has set important priorities and goals to be

---

<sup>42</sup> Ibid.

<sup>43</sup> World Health Organization News Release. "World Health Assembly elects Dr Tedros Adhanom Ghebreyesus as new WHO Director-General." 23 May 2017. Available at: <http://www.who.int/en/news-room/detail/23-05-2017-world-health-assembly-elects-dr-tedros-adhanom-ghebreyesus-as-new-who-director-general> (Accessed on Feb. 24, 2018).

<sup>44</sup> Beigbeder, Yves. "L'Organisation mondiale de la santé." Nouvelle édition. Genève: Graduate Institute Publications, 1995.

<sup>45</sup> World Health Organization. "Constitution of the World Health Organization." (2006) Basic Documents, Forty-fifth edition, Supplement. [http://www.who.int/governance/eb/who\\_constitution\\_en.pdf](http://www.who.int/governance/eb/who_constitution_en.pdf)

achieved for improving global health and providing necessary assistance to all countries and population in need.<sup>46</sup>

### **2.3 Global Health and WHO**

Working effectively within the view of improving global health, WHO, the unique international health organization in this kind, sets its priorities for five years, approved by the Assembly.<sup>47</sup> For the period of 2014-2019, WHO has identified some important priority areas for improving global health. The first priority of WHO is to provide universal health coverage for all countries in need, specially the developing one which are in insufficiency for providing basic healthcare for their population.<sup>48</sup> The second important priority is to facilitate the access to medicines for all individuals; to enhance public health of countries for ameliorating the social, economic and environmental situations of populations and to get under control and diminish the spread of communicable and non-communicable diseases are the other important key points of the agenda.<sup>49</sup> The last priority refers to the Millennium Development Goals of UN, by which it is aimed to achieve the Sustainable Development Goals on health determined by UN.<sup>50</sup>

---

<sup>46</sup> Pan American Health Organization Regional Office of the World Health Organization. "Strategic Plan of the Championing Health: Sustainable Development and Equity: 2014-2019." Official Document (2014). Available at: [http://www.paho.org/hq/index.php?option=com\\_docman&task=doc\\_view&gid=38002&Itemid=270&lang=en](http://www.paho.org/hq/index.php?option=com_docman&task=doc_view&gid=38002&Itemid=270&lang=en) (Accessed on May 15, 2018).

<sup>47</sup> Organisation Mondiale de la Santé. "Plan stratégique de l'OMS sur six ans visant à réduire l'impact des situations d'urgence et des catastrophes." Plan Stratégique. WHO/PEC/ERM/ERX/2015.6/STR.

<sup>48</sup> Rumbold, Benedict and Baker, Rachel and Ferraz, Octavio and Hawkes, Sarah and Krubiner, Carleigh and Littlejohns, Peter and Norheim, Ole Frithjof and Pegram, Thomas and Rid, Annette and Venkatapuram, Sridhar and Voorhoeve, Alex and Wang, Daniel and Weale, Albert and Wilson, James and Yamin, Alicia Ely and Hunt, Paul. "Universal health coverage, priority setting and the human right to health." (2017). *The Lancet*, 390 (10095). pp. 712-714. ISSN 0140-6736.

<sup>49</sup> Organisation Mondiale de la Santé. "Plan stratégique de l'OMS sur six ans visant à réduire l'impact des situations d'urgence et des catastrophes." Plan Stratégique. WHO/PEC/ERM/ERX/2015.6/STR.

<sup>50</sup> Ibid.

While studying WHO in a general perspective, it becomes also necessary to analyze some important achievements on solving global health issues made up until today. Among the important works of this international organization, one of the greatest achievements during its first years of activity is the eradication of smallpox.<sup>51</sup> The plan was proposed in 1958, and the worldwide efforts until 1977 gave fruitful results and WHO has focused on the elimination and control of other worldwide communicable diseases after the eradication of smallpox.<sup>52</sup> The campaigns conducted especially in developing countries for the vaccination of all vulnerable populations against communicable diseases is estimated to enhance the capacity of eliminated and stopping their spread in the nearly future.

The Declaration of Alma-Ata adopted in 1978 aimed to make a call for all governments of countries to improve their public health and facilitate the access of healthcare for each individuals.<sup>53</sup> Highlighting that primary healthcare is essential for everyone, WHO emphasized that governments are the main responsible authorities in providing this, through the promotion, preventive, curative, and rehabilitative services as appropriate.<sup>54</sup> After this Declaration, WHO adopted in 1981 a global strategy to promote health for all until 2000. Even if this aim has not been globally achieved, it has pushed many states to enhance the capacity of their public health systems and to adopt some health reforms.<sup>55</sup>

---

<sup>51</sup> Beigbeder, Yves. "L'Organisation mondiale de la santé." Nouvelle édition. Genève: Graduate Institute Publications, 1995.

<sup>52</sup> McCarthy, Michael. "A brief history of the World Health Organization." Special Report on World Health Organization. (2002) *The Lancet*, Volume 360, Issue 9340, 1111 – 1112.

<sup>53</sup> Gillam, Stephen. "Is the Declaration of Alma Ata Still Relevant to Primary Health Care?" *BMJ: British Medical Journal* 336.7643 (2008): 536–538. PMC.

<sup>54</sup> Ibid.

<sup>55</sup> McCarthy, Michael. "A brief history of the World Health Organization." Special Report on World Health Organization. (2002) *The Lancet*, Volume 360, Issue 9340, 1111 – 1112.

WHO has launched and adopted important programs within the view to fight against major global diseases such as HIV/AIDS virus and the tobacco control to prevent mortality due to cancer and use of tobacco. The WHO Framework Convention on Tobacco Control (WHO FCTC), having 168 Signatories and adopted in 2003, is one of the most comprehensive treaty of WHO.<sup>56</sup> It aims to regulate the tobacco trade worldwide by increasing campaigns on awareness and controlling its legal use. Many countries have been engaged in increasing taxes on all tobacco products, widening awareness and education on the effects of tobacco on health and bringing some restrictions on the use of tobacco in public areas.<sup>57</sup> The WHO Framework Convention on Tobacco Control still remains as the primary global program on the use of tobacco that regulates and controls it.

In 1996, due to the ineffectiveness of existing programs, UNAIDS, the Joint United Nations Programme on HIV/AIDS was initiated by the mutual efforts of WHO and UN, as well as other related UN bodies.<sup>58</sup> Considering that the first case of HIV/AIDS was detected 35 years ago and 35 million people have died from it, it was necessary to implement a major program.<sup>59</sup> Aiming to prevent the spread of the virus, to provide necessary support for all affected individuals and to control the current situation, the program has been implemented in about 155 countries.<sup>60</sup> Operating with an annual budget of 70 million USD, this program has achieved to control the spread of HIV and

---

<sup>56</sup> WHO Framework Convention on Tobacco Control, Official Text on the Conference of the Parties to the WHO FCTC. Available at: [http://www.who.int/fctc/text\\_download/en/](http://www.who.int/fctc/text_download/en/) (Accessed on Feb. 24, 2018).

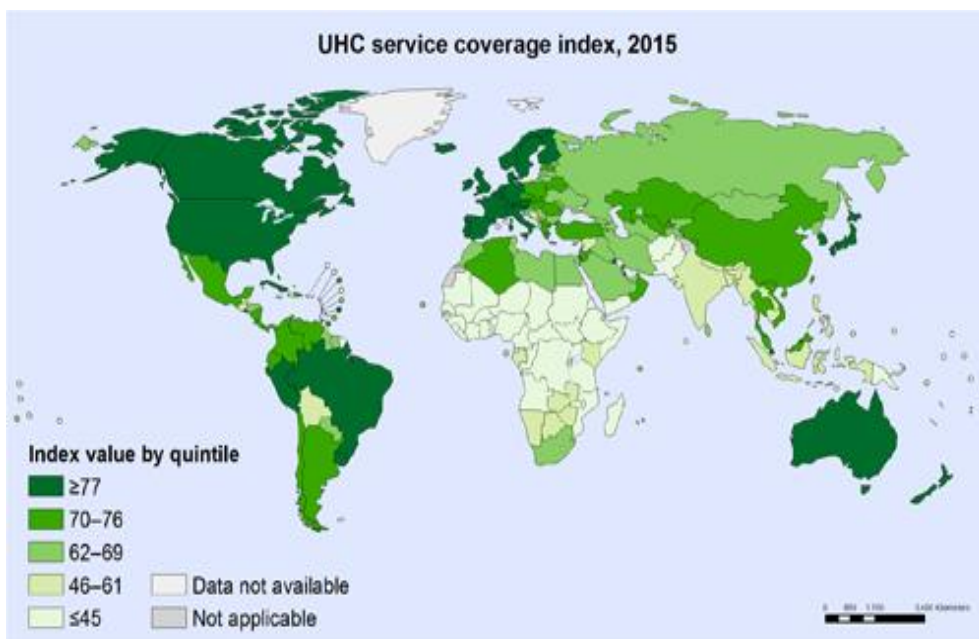
<sup>57</sup> Gilbert A, Cornuz J (2003). Which are the most effective and cost-effective interventions for tobacco control? Copenhagen, WHO Regional Office for Europe, Health Evidence Network report, Available at: <http://www.euro.who.int/document/e82993.pdf> (Accessed on Feb. 24, 2018).

<sup>58</sup> Lindsay Knight, "UNAIDS; The First 10 Years." Joint United Nations Programme on HIV/AIDS (UNAIDS). WHO Library Cataloguing-in-Publication Data. 2008.

<sup>59</sup> Ibid.

<sup>60</sup> United Nations Special Session on HIV/AIDS. "What is UNAIDS?" Fact Sheets. Available at: <http://www.un.org/ga/aids/ungassfactsheets/html/fsunaid en.htm>, (Accessed on Feb. 24, 2018).

to provide necessary health supports especially in the most vulnerable societies, majorly in the African continent.<sup>61</sup> WHO also conducts important programs on mother-child health, women’s major diseases and other programs on world primary health issues working in close cooperation with UN Bodies and other regional and international organizations as well as states’ governments.<sup>62</sup>



The map above shows the Universal Health Coverage index of countries by quintile in 2015.<sup>63</sup> It can be clearly deduced that the amount is higher on the North Hemisphere than the South except Central Latin America and Australia.

## 2.4 Global Health Diplomacy and WHO

“Issues of international trade impinge on health, often in significant ways. This is an especially challenging area for foreign diplomacy.”<sup>64</sup> These were the words of the

<sup>61</sup> Ibid.

<sup>62</sup> The Partnership for Maternal, Newborn and Child Health in support of Every Woman Every Child. Strategic Plan 2016-2020. Geneva, Switzerland: PMNCH.

<sup>63</sup> WHO Global Health Observatory. Universal Health Coverage Data Portal. World Health Organization. Available at: <http://apps.who.int/gho/cabinet/uhc.jsp?lang=en> (Accessed on Feb. 24, 2018).

<sup>64</sup> World Health Organization Official Website. “Global Health Diplomacy.” 13 February 2007. Available at: <http://www.who.int/trade/diplomacy/en/> (Accessed on Feb. 24, 2018).

former General Director of WHO, Margaret Chan. The changing landscape of foreign policy and diplomacy, the effects of globalization that gather different areas such as health, environment and climate change on the same table in international fora and the advancing technological tools have provided a different vision for states on global health.<sup>65</sup> Now, countries, aware of the importance of integrating health in foreign policy agenda, either for increasing their soft power effects abroad, or to support international solidarity, conduct close relations with WHO in terms of practicing global health diplomacy.<sup>66</sup> The main and most extended international organization dealing with global health issues, WHO, has naturally become the basic mechanism by and through which Members States practice health diplomacy.<sup>67</sup>

Even if global health diplomacy has been carried out since the 19th Century through many international sanitary conferences, it was the Oslo Ministerial Meeting in 2006 that marked a turning point by gathering some WHO Members States' Ministers of Foreign Affairs under the Initiative on Global Health and Foreign Policy.<sup>68</sup> Through the Oslo Declaration stated after the Meetings, Ministers of Foreign Affairs affirmed their engagement and committed to work in close cooperation in order to fight against global diseases, to promote health within societies, to broaden health in their foreign policy agenda and to strengthen global health security.<sup>69</sup> Following this Declaration, WHO General Assembly adopted a comprehensive note on the close relation and coherence between foreign policy and health in 2009 highlighting the urgent need to

---

<sup>65</sup> Kickbusch Iliona, Nick Drager, Graham Lister, Michaela Told. "Global Health Diplomacy: Concepts, Issues, Actors, Instruments, Fora and Cases." (2013). DOI 10.1007/978-1-4614-5401-4\_2.

<sup>66</sup> Michaud, Josh and Kates Jennifer. "Global health diplomacy: advancing foreign policy and global health interests." 2013;1(1):24-28. [http:// dx.doi.org/10.9745/GHSP-D-12-00048](http://dx.doi.org/10.9745/GHSP-D-12-00048).

<sup>67</sup> Kickbusch Iliona, Nick Drager, Graham Lister, Michaela Told. "Global Health Diplomacy: Concepts, Issues, Actors, Instruments, Fora and Cases." (2013). DOI 10.1007/978-1-4614-5401-4\_2.

<sup>68</sup> Oslo Ministerial Declaration on Global Health. "A pressing foreign policy issue of our time, Ministers of Foreign Affairs of Brazil, France, Indonesia, Norway, Senegal, South Africa, and Thailand", *The Lancet*, Volume 369, Issue 9570, 1373 – 1378. 2006.

<sup>69</sup> *Ibid.*

bring together foreign policy makers and health experts in order to draw common goals within the view to bring global sustainable solutions against global health issues.<sup>70</sup> While giving some recommendations for Member States' foreign policy makers in order to better understand the necessity to include health issues in foreign policy agenda, the report also finds out seven important key challenges that show the importance of relating and acting in common on global health and foreign policy.<sup>71</sup> At the core of UN policies, where health has gained more importance in recent years, Member States are now aware of the crucial need to make coherence between foreign policy and health.<sup>72</sup> It is within this view that WHO has given particular focus on global health diplomacy and occasionally reiterates the importance of gathering foreign policy makers and health experts in order to draw attention to the need to cooperate and coordinate.<sup>73</sup>

Within this view, WHO has organized many intra and extra continental activities on health diplomacy through its regional offices with health and foreign policy experts. One of this was the Seminar on Health Diplomacy held on Cairo, Egypt, in 2014, with the participations of experts on health and foreign policies, including personnel from Embassies and Ministries, as well as non-governmental and international organizations.<sup>74</sup> So many similar activities have been organized all around the world

---

<sup>70</sup> United Nations General Assembly. Note on Global health and foreign policy: strategic opportunities and challenges. Sixty-fourth session. <http://www.who.int/trade/foreignpolicy/FPGH.pdf> Agenda item 123, 2009, A/64/365.

<sup>71</sup> United Nations General Assembly. Note on Global health and foreign policy: strategic opportunities and challenges. Sixty-fourth session. <http://www.who.int/trade/foreignpolicy/FPGH.pdf> Agenda item 123, 2009, A/64/365.

<sup>72</sup> World Health Organization Official Website, Global Health Diplomacy. 13 February 2007. Available at: <http://www.who.int/trade/diplomacy/en/> (Accessed on Feb. 24, 2018).

<sup>73</sup> Kickbusch Iliona, Nick Drager, Graham Lister, Michaela Told. "Global Health Diplomacy: Concepts, Issues, Actors, Instruments, Fora and Cases." (2013). DOI 10.1007/978-1-4614-5401-4\_2.

<sup>74</sup> World Health Organization. "Summary report Fourth Seminar on Health Diplomacy." 2015, Egypt. Available at: [http://applications.emro.who.int/docs/IC\\_Meet\\_Rep\\_2015\\_EN\\_16400.pdf?ua=1](http://applications.emro.who.int/docs/IC_Meet_Rep_2015_EN_16400.pdf?ua=1) (Accessed: Feb on 24, 2018).



by WHO offices in order to broaden the diplomats and health experts' visions and horizons. WHO believes that integrating health issues in foreign policy agenda is also a major duty that will enhance the capacity building of global health security by focusing on common and communicable diseases, care, prevention and research and monitoring.<sup>75</sup> Moreover, considering that health has transboundary dimensions, to strengthen the dialogue and cooperation of health experts and diplomats as well as foreign policy makers will enhance, contribute and facilitate health diplomacy.<sup>76</sup> Efforts of WHO are successful within the view of enhancing global health diplomacy but not enough; much more is needed to be done in the upcoming years, considering that health issues are taking a biggest part in UN priority objectives.<sup>77</sup>

## **2.5 WHO and Member States**

With its headquarters in Geneva, Switzerland, the World Health Organization operates in 148 countries with a total of 4009 staff members to support its 194 Member States and has 6 regional offices.<sup>78</sup> The countries' offices are coordinated by the Regional Office, which is itself directed by the headquarter. WHO works accordingly to a country strategy, adopted by prioritizing the needs of the Member State.<sup>79</sup> The budget of WHO for supporting countries are submitted to the General Assembly in order to

---

<sup>75</sup> World Health Organization Media Center. "Health diplomacy seminar highlights importance of engaging in global health issues for countries of the Region." Regional Office for the Eastern Mediterranean, 2015. Available at: <http://www.emro.who.int/media/news/seminar-highlights-engagement-global-health-issues.html> (Accessed on Feb. 24, 2018).

<sup>76</sup> Paillette, Céline. « Épidémies, santé et ordre mondial. Le rôle des organisations sanitaires internationales, 1903-1923. » *Monde(s)*, vol. 2, no. 2, 2012, pp. 235-256.

<sup>77</sup> Ibid.

<sup>78</sup> WHO Presence in Countries, Territories and Areas Report 2017: World Health Organization; 2017 (WHO/CCU/17.04). Licence: CC BY-NC-SA 3.0 IGO.

<sup>79</sup> Ibid.

be voted and approved.<sup>80</sup> The table below shows the comparison of the programme budget for 2016–2017 and the proposed programme budget for 2018–2019.<sup>81</sup>

For the period of 2018-2019, the General Assembly approved a budget of 4421.5 million US Dollars as voluntary contributions. The budget is allocated to countries depending on the priorities. This is managed by the Directorate General that reports all financial acts. The budget is distributed among the main issues of areas of works; 805.4 million USD for Communicable diseases; 351.4 million USD for non-communicable diseases; 384.3 million USD for promoting health through the life course; 589.5 million USD for Health systems and 554.2 million USD for WHO Health Emergencies Programme. The main sources of finances come from state and non-state actors and from assessed contributions.<sup>82</sup> Considering their current socio-economic situations, the principal recipient countries are from the African continent.<sup>83</sup> The following table shows the distribution of the budget amount to the different major regional offices of WHO.

## 2.7 Conclusion

As the basic principles of the United Nations, WHO gives importance to transparency, accountability and evaluation.<sup>84</sup> In order to better understand the works, efforts, the

---

<sup>80</sup> Beigbeder, Yves. “L’Organisation mondiale de la santé.” Nouvelle édition. Genève: Graduate Institute Publications, 1995.

<sup>81</sup> World Health Organization. “Programme Budget: 2018-2019.” Seventieth World Health Assembly. May 2017. Available at: <http://www.who.int/about/finances-accountability/budget/en/> (Accessed on Feb. 25, 2018).

<sup>82</sup> World Health Organization. “Programme Budget: 2018-2019.” Seventieth World Health Assembly. May 2017. Available at: <http://www.who.int/about/finances-accountability/budget/en/> (Accessed on Feb. 25, 2018).

<sup>83</sup> Gardier, Stéphanie. “Malgré une forte mobilisation internationale, l’argent manque encore contre le paludisme.” Le Monde Afrique. Journal d’information. 2018. Available at :[https://www.lemonde.fr/afrique/article/2018/04/25/malgre-une-forte-mobilisation-internationale-l-argent-manque-encore-contre-le-paludisme\\_5290492\\_3212.html](https://www.lemonde.fr/afrique/article/2018/04/25/malgre-une-forte-mobilisation-internationale-l-argent-manque-encore-contre-le-paludisme_5290492_3212.html) (Accessed on Feb. 25, 2018).

<sup>84</sup> World Health Organization. “Evaluation.” 2018. Available at: <http://www.who.int/about/evaluation/en/> (Accessed on Feb. 25, 2018).

sustainability and achievements of WHO's activities, an evaluation office conducts necessary operations under the Directorate General.<sup>85</sup> In solving health issues through direct technical and non-technical assistance, advising states to develop their health systems according to an agenda on their priorities and ameliorating individuals' health and facilitating the access of healthcare services for everyone are, in general, fields of works where WHO has a unique well-developed system.

With a perspective of international relations, WHO is the key global actor in global health diplomacy. This is why, even if its activities and works have undeniable contributions to the diplomatic relations through enhancing and supporting the integration of health into foreign policies agenda, efforts should further continue within all of the countries in collaboration with its regional offices, states and other non-states actors. The initiative of the Oslo Meeting that gathered Ministries of Foreign Affairs to discuss the necessity of integrating health into foreign policy is a concrete example on the relevant approach to WHO as the sole intergovernmental organization to promote global health diplomacy. As discussed in this chapter, WHO's extensive networking capacity is a strong tool that can provide the association of multi-stakeholders, states and non-states actors who are the main actors of health diplomacy. Through this chapter, the principal actor in providing necessary environment for global health diplomacy, WHO, has been studied. The next chapters discuss the country cases, trying to understand states' conflictual approaches towards global health diplomacy. It begins with the case of United States of America, one of the better examples of states having a national interesting view on health diplomacy.

---

<sup>85</sup> Beigbeder, Yves. "L'Organisation mondiale de la santé." Nouvelle édition. Genève: Graduate Institute Publications, 1995.



## CHAPTER 3

### US AND GLOBAL HEALTH DIPLOMACY

#### 3.1 Introduction

Through this chapter, it is attempted to study the case of US towards global health diplomacy, as a contributor to global health and a seeker for foreign policy interests. Its position towards global health, the scope of health under its foreign policy agenda and its diplomatic strategies, which means health diplomacy are discussed. The chapter is composed of 6 sub-heading such as US and Global Health, US Foreign Policy and Health, Health Diplomacy Strategy, Foreign Aid in Health Perspectives, US relations with WHO and other organizations. The chapter ends with a conclusion on the trends and challenges for the future.

Recent academics' articles on the field have argued that there are two main objectives in the development of international health program of states. One aims to align foreign policy and diplomatic objectives with global health<sup>86</sup>, and the other is searching for making the state at the position of a leader in global health governance with national security interests, without any health-related objectives.<sup>87</sup> While opinions and scholars' views are divergent on the subject, it has been necessary to analyze the case of important world's leading states such as the United States of America.

#### 3.2 US and Global Health

Global health cannot be an area where US does not have any implications, not only for national interests, but also for security concerns, as diseases have become more

---

<sup>86</sup> Kevany Sebastian, Khumalo-Sakutukwa Gertrude, Murima Olivia, et al. "Health diplomacy and the adaptation of global health interventions to local needs in sub-Saharan Africa and Thailand: Evaluating findings from Project Accept." (HPTN 043). BMC Public Health 2012; 12: 459.

<sup>87</sup> Ibid.

transmissible and globally effective in a negative way such as having a destructive side and causing huge economical expenses in the 21<sup>st</sup> century.<sup>88</sup>

The involvement of US in improving global health, by its governmental and non-governmental institutions as well as through supporting regional and international organizations, aims to improve health at international level, but also to support “national and global security interests by fostering political stability, diplomacy, and economic growth worldwide.”<sup>89</sup> US foreign policy concerns remain basically on security issues; this is why health activities are related to national security.<sup>90</sup> The US National Intelligence Council defends that it is important not to underestimate “the potential relevance of chronic disease, water and sanitation, and access to basic health care on the security, economic stability, and legitimacy of governments.”<sup>91</sup> This is why health activities are perceived by the Department of Defense as a tool to head “threats” off.<sup>92</sup>

### **3.3 US Foreign Policy and Health**

The main goal of the *US Department of Health and Human Services* is to develop and ameliorate US citizens’ health and to protect national health security; to achieve this,

---

<sup>88</sup> Kickbusch Iliona, Nick Drager, Graham Lister, Michaela Told. “Global Health Diplomacy: Concepts, Issues, Actors, Instruments, Fora and Cases.” (2013). DOI 10.1007/978-1-4614-5401-4\_2.

<sup>89</sup> Office of Disease Prevention and Health Promotion. “Global Health: 2020 Objectives.” Available at: <https://www.healthypeople.gov/2020/topics-objectives/topic/global-health> (Accessed on Apr. 28, 2018).

<sup>90</sup> Eugene Bonventre, Kathleen Hicks, and Stacy Okutani. “U.S. National Security and Global Health an Analysis of Global Health Engagement by the U.S. Department of Defense”, Report of the CSIS Global Health Policy Center Working Draft, 2009.

<sup>91</sup> Institute of Medicine (US) Committee on the US Commitment to Global Health. *The US Commitment to Global Health: Recommendations for the New Administration*. Washington (DC): National Academies Press (US); 2009. Progress in global health can be achieved now. Available at: <https://www.ncbi.nlm.nih.gov/books/NBK32625/> (Accessed on Apr. 28, 2018).

<sup>92</sup> Eugene Bonventre, Kathleen Hicks, and Stacy Okutani. “U.S. National Security and Global Health: An Analysis of Global Health Engagement by the U.S. Department of Defense.” Report of the CSIS Global Health Policy Center Working Draft, 2009.

a global strategy was also launched in 2012, taking into consideration that health security is not only about the works conducted within the country's borders, but also abroad. The Global Strategy for 2015-2019 is composed of three main goals and ten objectives to achieve these goals.<sup>93</sup> The Department of Health and Human Services works in strong collaboration with other US governmental agencies and its subdivisions have all a foreign health goal.

The Office of Global Affairs also has the mission to appoint *health diplomats* around the world. Health attachés are the key point of contact in the countries where they are designated on issues concerning global health and health diplomacy. They play the role of a mediator between US and hosting countries; they share US foreign health policy and try to contribute to health issues concerning the country where they represent US.<sup>94</sup> They also participate to organizations and meetings at national, regional and international levels in order to follow the current situation on world health's and share experience of US through its global health strategy.

### **3.4 Health Diplomacy Strategy**

Global health remains an important issue area that US considers strategically important for ensuring national and international security.<sup>95</sup> Besides its crucial importance on national security interests, health diplomacy is perceived for the American Government as a foreign policy tool that can help to gain "hearts and minds" of people receiving aid and assistance in health.<sup>96</sup> This strategic view has developed the idea to

---

<sup>93</sup> US Department of Health and Human Services. "Office of Global Affairs." US Government. Available at: <https://www.hhs.gov/about/agencies/oga/index.html> (Accessed on Apr. 15, 2018).

<sup>94</sup> Ibid.

<sup>95</sup> Eugene Bonventre, Kathleen Hicks, and Stacy Okutani. "U.S. National Security and Global Health: An Analysis of Global Health Engagement by the U.S. Department of Defense." Report of the CSIS Global Health Policy Center Working Draft, 2009.

<sup>96</sup> Thompson Tommy G. (2011). "Health diplomacy is critical to US foreign policy. Huffington Post World. Available at: [https://www.huffingtonpost.com/tommy-g-thompson/the-case-for-health-diplo\\_b\\_823382.html](https://www.huffingtonpost.com/tommy-g-thompson/the-case-for-health-diplo_b_823382.html) (Accessed on 9 Apr. 2018).

focus on increasing foreign aid assistance in terms of health. Through gaining support of receiving countries, it is also aimed to strengthen national security of US. Thus, projects conducted under the name of improving health of other countries' people and the activities of US on global health serve to the foreign and national security goals of the state.<sup>97</sup>

The PEPFAR Initiative explained in details above is one of the clearer examples of American health diplomacy that has great impact on countries where AIDS was very expansive and affecting a huge number of populations. Through these similar initiatives and activities conducted within the view to contribute to global health, US aims to develop further strategies in health diplomacy. based on its experiences, it considers six main points such as having clear goals and identifying policies needed to achieve them, addressing real needs with visible effect, being sensitive to local contexts, being in it for the long-term, building capacity, being transparent and accountable.<sup>98</sup> US Government has a strong belief in the role played by global health diplomacy in pursuing national foreign interest. Global health activities are perceived as a field in which US can play a global leadership role by its technical assistance and foreign aid.<sup>99</sup>

Through defining a broad strategy in health diplomacy, US believes that making commitments in health is concretized, which gives the state to play the role of leadership in this field. As emphasized by H. Gayle, "US have the chance to accelerate its recent historic success in advancing global health. If Americans seize this moment, take the long strategic view, make the commitment with their friends and allies and lives of millions, will be lifted in the coming decades, the world will be safer and

---

<sup>97</sup> Santa Barbara, Joanna and MacQueen Graeme. "Peace through health: Key concepts." *The Lancet*. DOI: 10.1016/S0140-6736(04)16729-9. 2004.

<sup>98</sup> Institute of Medicine (US) Committee on the US Commitment to Global Health. *The US Commitment to Global Health: Recommendations for the Public and Private Sectors*. Washington (DC): National Academies Press (US); 2009. 1, Introduction. Available at: <https://www.ncbi.nlm.nih.gov/books/NBK23794/> (Accessed on Apr. 6, 2018).

<sup>99</sup> Ibid.



healthier.”<sup>100</sup> Thus, US gives a priority to strategies for contributing to global health while pursuing its national and security interests, put at the center of their health diplomacy’s goals.

One of the important challenges on treatment towards diseases is the non-communicable diseases that are the major cause of mortality and morbidity in developed and developing countries. According to the Council on Foreign Relations task force on global health, the non-communicable diseases epidemic will cost approximately USD 21.3 trillion in the upcoming 20 years in losses in developing countries, which “will undercut potential US trade partners and allies and may reduce domestic support for governments of US strategic interest.”<sup>101</sup> Moreover, to prepare appropriately countries to fight against this sort of diseases is a crucial issue and the way to realize it is only through strengthening their health systems. At this point, one of the priorities of the US Strategic Health Diplomacy is to initiate programs on fighting against diseases such as hepatitis C and malaria. To enlarge this initiative from US level to global scale will be an important contribution for global health diplomacy. These specific points provide to US to develop and strengthen its efforts and contributions to global health diplomacy. The sub-divisions of the Department of Health and Human Services have all a foreign health strategy perspective within the view to reach security and national interests. The US Center for Disease Control and Prevention is another good example of US health diplomacy strategy; this Center established under the Department of Health and Human Services aims for “America from health, safety and security threats, both foreign and in the US, whether diseases start at home or abroad, are chronic or acute, curable or preventable, human error or deliberate attack, CDC fights disease and supports communities and citizens to do the same.”<sup>102</sup> The CDC has 6 main priorities which are to contribute to international

---

<sup>100</sup> William J. Fallon and Helene D. Gayle. “A Healthier, Safer, and More Prosperous World.” Report of the CSIS Commission on Smart Global Health Policy. ISBN: 978-0-89206-597-4 (pb). 2010.

<sup>101</sup> Mitchell E. Daniels Jr., Thomas E. Donilon, Thomas J. Bollyky, and Christopher M. Tuttle. “The Emerging Global Health Crisis.” Council on Foreign Relations Press. 2014. ISBN 978-0-87609-616-1.

outbreak assistance, develop a global approach to disease surveillance, make applied research on diseases of global importance, develop an application of proven public health tools, undertake global initiatives for disease control and increase public health training and capacity building.<sup>103</sup> Through this national public institution, US is capable of engaging in foreign health assistance that will also provide it to cover its national and security interests under the roof of global health security and to share experience and knowledge on the field.<sup>104</sup> The Global Strategy launched in 2012 is the main illustration of the initiative of US that wants to have a greater voice on international health fora and play a leading role for developing countries.

### **3.5 Foreign Aid in Health Perspective**

US, one of the biggest donor and leader in humanitarian aid, defines its role in global health activities as acting as a donor, providing financial and other health development assistance to developing countries, engaging in global health diplomacy through negotiations and agreements with other nations and parties, providing technical assistance and staff expertise and capacity to other countries, supporting training programs and international agencies' organizations in the field of health and cooperating with other governments, non-governmental organizations and civil societies.<sup>105</sup>

---

<sup>102</sup> US Department of Health and Human Services. Center for Disease Control and Prevention. 2018. Available at <https://www.cdc.gov/about/organization/cio.htm> (Accessed on Apr. 15, 2018).

<sup>103</sup> Peter M. Schantz, Victor C.W. Tsang. "The US Centers for Disease Control and Prevention (CDC) and research and control of cysticercosis." Division of Parasitic Diseases, National Center for Infectious Diseases, Centers For Disease Control and Prevention, Atlanta, GA, USA. Science Direct, 2003.

<sup>104</sup> Frist, William H. "Medicine as a Currency for Peace Through Global Health Diplomacy." Yale Law and Policy Review: 2007. Vol. 26 : Iss. 1 , Article 5.

<sup>105</sup> The Global Strategy of the U. S. Department of Health and Human Services. <https://www.hhs.gov/sites/default/files/hhs-global-strategy.pdf> The Secretary of Health and Human Services Washington, Dc 20201.

The United States of America's engagement in global health activities dates back from the 18th Century. Today, US health diplomacy is based on an institutional strategy supported by governmental agencies and non-governmental organizations. US involvement in global health diplomacy has its root on two main structures of the government such as the foreign assistance structure, which is predominantly development-oriented and has close links to foreign policy and the public health structure, which has its roots in disease control and surveillance efforts.<sup>106</sup> While these domains have very different purposes, cultures and strategies, they are historically linked in responding to global health, although most funding for and oversight of global health resides within foreign assistance agencies and programs.

US agencies conduct global health activities in more than 100 countries throughout the world, however, they focus their works in the region and countries where health problems are more urgent and necessitate immediate assistance, as in sub-Saharan Africa hit by HIV.<sup>107</sup> Economic situations of countries and US strategic interests are also other important criteria for giving priority in aid, as in the case of the assistance provided to Afghanistan, Pakistan, China, which all have strategical importance for US.<sup>108</sup> The US government, through its related agencies discussed above, conducts many global health initiatives around the world that directly contribute to the improvement of global health issues. They generally aim to fight against global diseases and implement projects to eradicate their propagation or expansion. Some of these important initiatives are briefly explained in the following lines.

Originally announced in 2003 by President Bush, *President's Emergency Plan for AIDS Relief* is the largest commitment and the first in the world on combatting a global

---

<sup>106</sup> Brainard, Lael. "Security by other means: Foreign Assistance, global poverty and American leadership." Brookings Institution. Library Congress Catalogue. 2007.

<sup>107</sup> The Global Strategy of the U. S. Department of Health and Human Services. <https://www.hhs.gov/sites/default/files/hhs-global-strategy.pdf> The Secretary of Health and Human Services Washington, Dc 20201.

<sup>108</sup> Gates, Robert. "Helping Others Defend Themselves: The Future of U.S. Security Assistance." Council on Foreign Relations. Foreign Affairs, 2010. Vol. 89, No. 3, p.2-6.

disease. It is targeted to fight against HIV/AIDS in 80 countries, especially in 15 major countries where risks and numbers of cases are high. These are Botswana, Cote d'Ivoire, Ethiopia, Guyana, Haiti, Kenya, Mozambique, Namibia, Nigeria, Rwanda, South Africa, Tanzania, Uganda, Vietnam, and Zambia.

The *President's Malaria Initiative* announced by President Bush in 2005 is a five-year expansion of the existing US government efforts to address malaria in hard hit countries with an additional USD 1.2 billion commitment.<sup>109</sup> The PMI's goal was to reduce malaria-related deaths by 50% in 15 focus countries which are Angola, Benin, Ethiopia, Ghana, Kenya, Liberia, Madagascar, Mali, Malawi, Mozambique, Rwanda, Senegal, Tanzania, Uganda, and Zambia through supporting works and supply on malaria.<sup>110</sup> The project was conducted and funded by USAID.

The Senator Paul Simon *Water for the Poor Act* of 2005 passing in 2005 was the extension of the US international water and sanitation programs.<sup>111</sup> The aim of this project is to increase access to the effective use of safe drinking water and sanitation to improve human health, while trying to identify priority water countries, and to provide assistance through capacity building activities, institutional strengthening and policy/regulatory reform; diplomatic engagement, direct investment; investments in science and technology and through partnerships.<sup>112</sup> This is also an initiative funded by USAID. As it can be seen in Figure above, the amount of health funding of US was 5,3 billion USD. This number has increased to 7,9 billion USD in 2018 with a peak of 10,4 billion USD in 2017.

---

<sup>109</sup> US Agency for International Development. President's Malaria Initiative. 12<sup>th</sup> Annual Report to Congress. Available at: <https://www.pmi.gov/docs/default-source/default-document-library/pmi-reports/2018-pmi-twelfth-annual-report.pdf?sfvrsn=5> (Accessed on 17 May 2018).

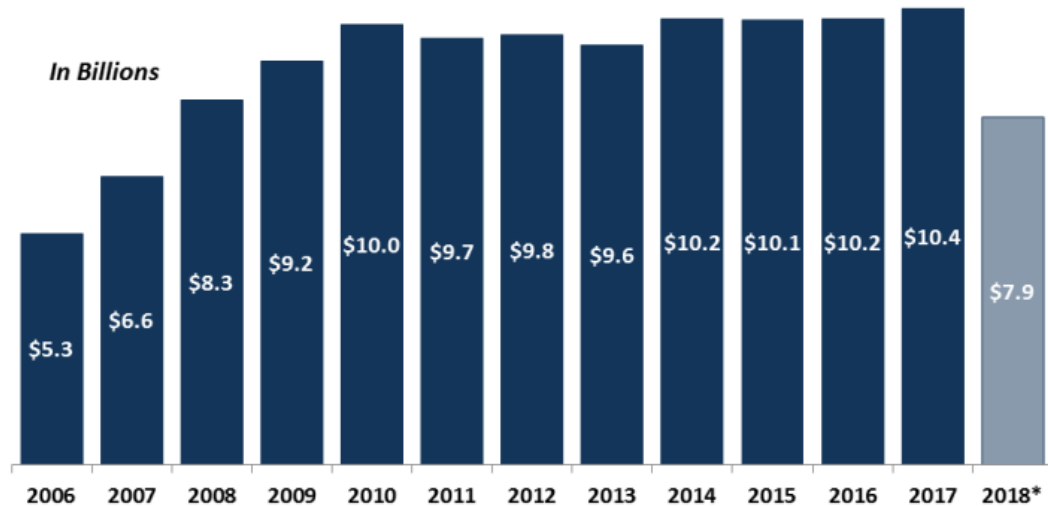
<sup>110</sup> Ibid.

<sup>111</sup> Paul, Simon. "Water for the Poor Act." Report to Congress, 2010. Bureau of oceans, environment, and science US Department of State.

<sup>112</sup> Ibid.

Figure 1

## U.S. Global Health Funding, FY 2006-FY 2018\*



NOTES: FY18 represents the budget request only.

SOURCE: Kaiser Family Foundation analysis of data from the Office of Management and Budget, Agency Congressional Budget Justifications, Congressional Appropriations Bills, and U.S. Foreign Assistance Dashboard.



### 3.6 Relation and Cooperation with WHO and other Regional and International Organizations

Besides its governmental agencies' related departments' initiatives and works, the United States of America's government cooperates closely with international organizations such as WHO, in which US is a founding member and the Pan American Health Organization (PAHO), the oldest international health agency founded originally as the International Sanitary Bureau in 1902.<sup>113</sup> It became the Pan American Health Bureau in 1924 when the US, as founding member, also joined it. PAHO "works to improve health and living standards of the people of the Americas" and serves as the Regional Office for the Americas of the WHO and as the health organization of the Inter-American System.<sup>114</sup> The Global Fund to Fight AIDS,

<sup>113</sup> World Health Organization. Department of Emergency and Humanitarian Action Sustainable Development and Healthy Environments. "Humanitarian Supply Management and Logistics in the Health Sector." PAHO Library Catalogue. ISBN 92 75 12375 6. 2001.

<sup>114</sup> Ibid.

Tuberculosis and Malaria (Global Fund) is another international organization created in 2001 and working within the aim to combat HIV, TB, and malaria programs in world's poorest countries.<sup>115</sup> US is also an active member of and the largest contributor to WHO and provides it with financial and technical support as well as participates in its governance structure.<sup>116</sup>

Figure 2 below shows the amount of US contributions to WHO; reaching 341 million USD in 2016 including voluntary and assessed contributions. 438 million USD is the peak amount of contributions to WHO, which is marking the peak level of the last ten years.

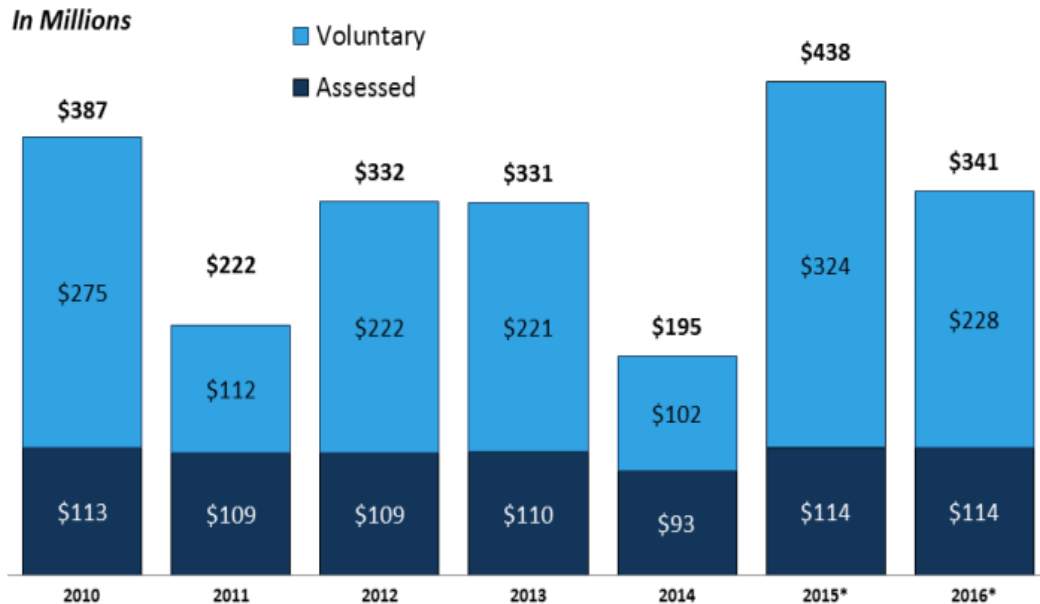
---

<sup>115</sup> World Health Organization. Department of Emergency and Humanitarian Action Sustainable Development and Healthy Environments. "Humanitarian Supply Management and Logistics in the Health Sector." PAHO Library Catalogue. ISBN 92 75 12375 6. 2001.

<sup>116</sup> World Health Organization. Scale of Assessments for 2016-2017. 26 May 2015. Available at: [http://www.who.int/about/finances-accountability/funding/A68\\_R12\\_en.pdf?ua=1](http://www.who.int/about/finances-accountability/funding/A68_R12_en.pdf?ua=1) (Accessed on Jan. 17, 2018).

Figure 2

## U.S. Contributions to the World Health Organization, by Type of Contribution, FY 2010-FY 2016



NOTES: Does not include contributions to the Pan American Health Organization (PAHO).  
 SOURCES: Kaiser Family Foundation analysis of data from the State Department Congressional Reports on U.S. Contributions to International Organizations, <https://www.state.gov/p/rio/rls/rpt/>, and WHO Budget Sources on Voluntary and Assessed Contributions <http://www.who.int/about/finances-accountability/en/>.  
 \*FY2015 and FY2016 U.S. assessed contribution amounts are those reported in WHO Assessed Contribution Invoices 2016-2017 [http://www.who.int/about/finances-accountability/funding/invoices-2016-17/usa\\_en.pdf](http://www.who.int/about/finances-accountability/funding/invoices-2016-17/usa_en.pdf).



Compared with other years, US contributions were the highest in 2015 (\$324 million), which majorly consists of additional support for WHO’s response to the West African Ebola epidemic. The next highest amount in 2010 (\$275 million) during the fight against H1N1 influenza pandemic.

### 3.7 Conclusion

Despite the fact that some scholars argue that US health interventions and foreign assistance is a part of their collaborative and cooperative desire, US government does not deny that “health and stability of countries around the world have a direct impact on the security and prosperity of the United States.”<sup>117</sup> Even for using it as the securitization of national or international health for the Department of Defense, a

<sup>117</sup> US Department of State. “Implementation of the Global Health Initiative: Consultation Document.” 2014. Available at: <https://reliefweb.int/sites/reliefweb.int/files/resources/2760E0ED9BDB5FB9492576C4001C08CD-govt.usa-feb2010.pdf> (Accessed on Apr. 29, 2018).

technical foreign assistance for USAID, or a diplomatic tool for the Department of State, global health diplomacy is included in the scope of different governmental agencies and huge importance is dedicated to it.<sup>118</sup>

US seems to continue to support countries and organizations to strengthen surveillance systems so as to ensure national security interests. Through programs applied around the world, contributing to the achievement of Global Health Initiatives goals, focusing efforts on country ownership and integration and coordination, health system engineering and the integration of public health services for prevention and control are the main objectives to be achieved in the near future of US health diplomacy. While achieving the objectives of some foreign policy goals in global health, which is argued as “enlightened self-interest” such as national security, international relations, conflict resolution, world peace, and the prevention or mitigation of armed conflict by some scholars, US health diplomacy is also perceived as a common end of contributing both to diplomatic and foreign policy as well as to global health.<sup>119</sup>

On the next chapter, through another case of a developed country, it is attempted to analyze the position of Switzerland towards global health. Its national interests and cooperation willingness to contribute to solving health issues and its health diplomacy strategy are examined to try to determine the root causes and objectives of its engagement in global health through its foreign health policy.

---

<sup>118</sup> US Department of State. “Implementation of the Global Health Initiative: Consultation Document.” 2014. Available at: <https://reliefweb.int/sites/reliefweb.int/files/resources/2760E0ED9BDB5FB9492576C4001C08CD-govt.usa-feb2010.pdf> (Accessed on Apr. 29, 2018).

<sup>119</sup> Kevany, Sebastian. “Global health diplomacy, ‘smart power’, and the New world order.” *Global Public Health* 2014; 9: 787–807.



## **CHAPTER 4**

### **SWITZERLAND AND GLOBAL HEALTH DIPLOMACY**

#### **4.1 Introduction**

This chapter analyzes Switzerland's attitude towards global health and its implemented foreign health policy as well as health diplomacy. While the conflictual debate remains on whether Switzerland has only national interests, thanks to its pharmaceutical industry that serves Swiss economy and trade all around the world, the Swiss foreign health policy describes a position trying to equalize the contribution to the global health community and the pursuit of national interests. Switzerland's relations with WHO was not exuded, as Geneva is the headquarter of many regional, international and inter-governmental organizations.

Switzerland is a good example of states that tries to adopt new mechanism especially in policy implementation in order to intertwine national and global health issues. The approach of Switzerland is more closed to equalizing its national interests and the global responsibility of contributing to the development of global health. Such an approach, supported by Switzerland, as the leading country in the world having an extended health coverage system with free access to its citizens, has made necessary to study its contribution to global health diplomacy. The national interest driven by Switzerland on global health issue is more probabilistic than self-seeker; it is more concerned by global health security than the politicization of health for foreign policy objectives.

#### **4.2 Switzerland and Global Health**

As argued by Slaughter, "understanding domestic issues in a regional or global context must become part of doing a good job. Increasingly, the optimal solution to these issues will depend on what is happening abroad, and the solutions to foreign issues, in a

corresponding measure, will depend on what is happening at home.”<sup>120</sup> This is why many scholars consider that national systems are core components of the global system.<sup>121, 122</sup> Switzerland is a good example of this shift, believing that national health policies should be adopted to global health mechanisms, as health is the right for everyone.

The citizens of Switzerland have the right to direct access to health care services through the mandatory health insurance system-MHI-which is mandatory since 1996. Cantons are required to provide subsidies for people on low incomes who cannot afford to insurances by themselves. They are also responsible on the implementation of health policies and the conduction of health activities. According to OECD data’s, Switzerland’s citizens health indicators are highly good and the majority of the population is satisfied on the health care services and insurance system of their country.<sup>123</sup> Either for the view to improve human beings health as health is the right of everyone, or for reaching national interests and foreign policy goals, Switzerland has been the first country to adopt a foreign health policy within the view to prioritize negotiations on global health issues on a strategic framework. Adopted in 2012, Swiss Foreign Health Policy is a common efforts’ result of both the Federal Department of Home Affairs and the Federal Department of Foreign Affairs.<sup>124</sup>

### **4.3 Swiss Foreign Policy and Health**

In the briefing of the Global Health Programme from the Graduate Institute at Geneva, three points are important for conducting a well-functioning global health diplomacy; a better health security and population health for every countries and an improved

---

<sup>120</sup> Slaughter, Anne M. *A New World Order*. Princeton University Press. 2004.

<sup>121</sup> Spiegel, Jerry M. *Daring to learn from a good example and break the Cuba taboo.* 2006. *International Journal of Epidemiology* 2006;35:825–826 doi:10.1093/ije/dyl144.

<sup>122</sup> Vanderwagen, William. “Health diplomacy: Winning hearts and minds through the use of health interventions.” *Mil Med.* 2006;171(10 Suppl 1):3-4.

<sup>123</sup> Carlo De Pietro, Paul Camenzind, Isabelle Sturny, Luca Crivelli, Suzanne Edwards-Garavoglia, Anne Spranger, Friedrich Wittenbecher, Wilm Quentin. “Switzerland: Health system review. *Health Systems in Transition.*” 2015; 17(4):1–288.

<sup>124</sup> *Ibid.*

global health situation; an improved relation between states and the commitment of different actors to work together to improve health.<sup>125</sup> As mentioned by J. Frank, in the global health system, policy coherence is critical as the global health issues cannot be separated from domestic health issues.<sup>126</sup> This policy coherence forms the basis of Switzerland foreign health policy.

When discussing on global health efforts of states, the primary country deserving to be studied is Switzerland, as it became the first state in the world to define common objectives for health and foreign policy between the Federal Department of Home Affairs, in charge of health and other domestic issues, and the Federal Department of Foreign Affairs through integrating health into foreign policy. Especially the HIV/AIDS epidemic of the end of the 20th century, severe acute respiratory syndrome in 2003, the spread of avian influenza in 2005 and the Ebola outbreak in 2014 have proved that global health issues need global cooperation in order to be solved and foreign policy objectives could not be designed without determining priorities in health as it affects states' economic and social development.<sup>127</sup>

Swiss Foreign Policy is based on five major objectives; maintaining and promoting peace and security; enhancing human rights, democracy and the rule of law, advancing prosperity; reducing social inequalities and protecting the natural environment.<sup>128</sup> Taking this into consideration, health is considered as a human right for everyone and

---

<sup>125</sup> Global Health Programme. "Policy Coherence at National Level." Policy Briefing, Graduate Institute of Geneva, 2012.

<sup>126</sup> Frenk, Julio. "The global health system: Strengthening national health systems as the next step for global progress." PLoSMed7(1). Available at: <http://www.plosmedicine.org/article/info%3Adoi%2F10.1371%2Fjournal.pmed.1000089> (Accessed on Jan. 20, 2018).

<sup>127</sup> Swiss Federal Department of Home Affairs and Federal Department of Foreign Affairs. "Swiss foreign health policy: Agreement on foreign health policy objectives." [https://www.eda.admin.ch/dam/eda/en/documents/das-eda/organisation-eda/broschuere\\_gesundheitsaussenpolitik\\_EN.pdf](https://www.eda.admin.ch/dam/eda/en/documents/das-eda/organisation-eda/broschuere_gesundheitsaussenpolitik_EN.pdf). 2006.

<sup>128</sup> Kloti, Ulrich et al. (eds). "Handbook of Swiss Politics and Policies." Zurich: Verlag Neue Zürcher Zeitung. 2003.

health issues at international level should be reduced, as it directly affects the socio-economic level of countries. The Swiss Health Foreign Policy, implemented in 2012, presents the political coherence of health-related interventions and defines the common objectives and roles of governmental actors. What makes important and gives ways to success in the implementation of Swiss Health Foreign Policy is the fact that it works with the coordination and contribution of different governmental agencies and non-governmental organizations and invites citizens of Switzerland to consider global health issues at national level.

Besides these internal entities, many other agencies are related. Civil societies are also implemented in discussing and moderating Swiss Foreign Health Policy at global scale. Through its cooperation and networking activities, Switzerland has a huge capacity and impact on the international fora in managing and advising states on global health issues. By strengthening health systems of these countries and being able to reach diverse social layers through cooperation between different national and international agencies, the Swiss Health Foreign Policy also supports Geneva to be the center of health diplomacy.

Another important key point is the contribution action of diverse government bodies to the Swiss Health Foreign Policy. Even if the last decisions and higher achievements are conducting by the Foreign Policy Division, the other departments' activities and efforts are undeniable. These joint contributions facilitate works on combatting over global diseases such as HIV/AIDS, tuberculosis and malaria, the rise of noncommunicable diseases, the ageing of populations, the shortage of health personnel and the increasing costs related to health care.<sup>129</sup> Through regional and international cooperation on health, Switzerland also conducts strong relations with neighboring countries and world' states.

The well-functioning communication between related bodies and the permanent delegates within the international organizations, through which foreign health policy

---

<sup>129</sup> Agreement on foreign health policy objectives. Adopted by the Swiss Federal Department of Foreign Affairs and the Swiss Federal Department of Home Affairs in Berne, Switzerland, on 9 October 2006. Available at: [www.bag.admin.ch/international](http://www.bag.admin.ch/international) (Accessed on Apr. 16, 2018).

is shaped, contribute to the establishment of a regular and effective system. What differentiates Swiss Health Foreign Policy is the fact that discussions and negotiations are key elements in Switzerland's culture; the harmony at national level among different official language speaking populations, the respect for democracy and diversity has contributed to Switzerland's ability and achievements in international negotiations.<sup>130</sup> The approach of the society to the urgent need to take action against global health issues permits the government to have a strong support from its citizens for implementing foreign health policy.

Most Swiss policies have been recognized as successful and taken as example by regional and international organizations as well as countries. For example, the illicit drugs and the rising epidemic of HIV/ AIDS are two main global health challenges against which Switzerland has developed a coherent policy at national and international level based on four pillars: prevention, therapy, harm reduction and law enforcement.<sup>131</sup> Switzerland co-facilitated the negotiations, which led to the adoption of a new and actionable political declaration, including a set of specific, time-bound targets to help for achieving this aim. The importance of including the fight against HIV/AIDS within a broader agenda for sexual and reproductive health and rights has been recognized, as have the links between the HIV/AIDS epidemic and the use of illicit drugs. These initiatives have positive return to achieving Swiss foreign health policy through its health diplomacy strategy.

#### **4.4 Health Diplomacy Strategy**

Aware of the importance of being an influential actor on global health governance, Switzerland has been the first country to integrate health into its foreign policy.

---

<sup>130</sup> Swiss Federal Department of Home Affairs and Federal Department of Foreign Affairs. "Swiss foreign health policy: Agreement on foreign health policy objectives." [https://www.eda.admin.ch/dam/eda/en/documents/das-eda/organisation-eda/broschuere\\_gesundheitsaussenpolitik\\_EN.pdf](https://www.eda.admin.ch/dam/eda/en/documents/das-eda/organisation-eda/broschuere_gesundheitsaussenpolitik_EN.pdf). 2006.

<sup>131</sup> Swiss Health Policy. Federal Department of Foreign Affairs FDFA and Federal Department of Home Affairs FDHA. <https://www.admin.ch/gov/en/start/departments/departement-foreign-affairs-fdfa.html> Official Document, 2015.

Through taking active part on international resolutions conferences on soft issues and conducting healthy negotiations for enhancing international cooperation, Switzerland has a highly reputable value on global health governance. Thus, the principal strategy of Switzerland' health diplomacy is to upgrade its successful model of public health policy at an international level and make it an example for other countries.

Robert Cooper argued that “diplomacy needs a post-modern perspective; the objective of foreign policy is taken to be peace and prosperity rather than power and prestige, diplomacy opened in the 1950s to economy and trade, enlarged in the 1980s to the environment and starts the 21st century with health as its focus.”<sup>132</sup> Switzerland notes that through participating actively in debates on global health and foreign policy, strengthening intersectoral coherence and concrete results and integrating health as a part of the training of Swiss diplomats will facilitate to reach this objective. Switzerland, aware of the importance of the lack of global health governance, acts within the aim of integrating its national health policy as a model for other countries.<sup>133</sup> Besides this cooperation, thanks to the internal strategy which consists on emphasizing coherence through putting global health on the agenda of all government sectors, the Swiss Federal Council has assured the coordination development assistance, trade policies and national health policies that serve global health. The fact that Switzerland is the leading country on implementing a foreign health policy will give it the privilege to have a biggest role in global health governance.

Besides the strategic initiative of the Office of Foreign Health of the Federal Department of Foreign Affairs, the Global Health Center within the Graduate Institute of Geneva is also strongly supported by the Swiss Government, providing necessary options to develop the skills of policy and decision makers for negotiations at the

---

<sup>132</sup> Cooper, Robert. “The breaking of nations. Order and chaos in the 21st century.” New York: Atlantic Monthly Press; 2003.

<sup>133</sup> Kickbusch I. The Graduate Institute of International and Development Studies; 2012. Good global health begins at home: policy coherence at national level. Global Health Diplomacy Brief. Available at: <http://repository.graduateinstitute.ch/record/16587/files/policy-coherence-brief-v7%2020022013-2.pdf> (Accessed May 20, 2018).

international, regional and national level. Among its different pillars, the courses and training on global health diplomacy is an important tool on bringing together health and foreign policy professionals and academics to improve global health through negotiations and international forum. By these different executive courses, training program and case studies, global health issues are handled and how to enlarge the capacity of improving it at national and international level, on the foreign policy scope, by training diplomats on global health, are discussed. This Center contributes to Switzerland on making it a regional and international actor on global health diplomacy and encourages the concerning actors on improving their actions in the way to contribute concretely on solving global health issues.<sup>134</sup>

For the period of 2016-2019, the Federal Council has approved Swiss Foreign Policy' strategies based on four main priorities. These are; developing and strengthening relations with the European Union and EFTA member states; bolstering its network on global scale through its relations with global partners; playing an active role in crisis and conflict resolution to sustain peace and security for an equal international order and providing sustainable development and prosperity through contributing to the eradication of poverty.<sup>135</sup> Its objectives in foreign health policy highlight the importance of giving priorities to the health of Swiss population, the making of coherence between national and international health policy, the strengthening of international health cooperation, the improvement of the global health situation, and the strengthening of the Swiss commitment as a host country to WHO are in harmony with foreign policy interests.<sup>136</sup>

---

<sup>134</sup> Kickbuck Iliona, Drager Nick and Novotny Thomas. "Global Health Diplomacy: Training across Disciplines." *World hospitals and health services: the official journal of the International Hospital Federation* · February 2007 DOI: 10.2471/BLT.07.045856. PubMed.

<sup>135</sup> Swiss Foreign Policy Strategy 2016–19: Federal Council report on the priorities for the 2016–19 legislative period. Report from Swiss Agency for Development and Cooperation. Available at: <https://reliefweb.int/report/world/swiss-foreign-policy-strategy-2016-19-federal-council-report-priorities-2016-19> (Accessed on May 17, 2018).

<sup>136</sup> Ibid.

#### 4.5 Foreign Aid in Health Perspective

Switzerland gives priorities to foreign health aid which is performed through different governmental and non-governmental bodies by emphasizing the importance to enhance the capacity building at global level on health issues.<sup>137</sup> The main governmental institution responsible for this objective is the *Swiss Agency for Development and Cooperation*. The Swiss Agency for Development and Cooperation (SDC) is the agency for international cooperation of the Federal Department of Foreign Affairs (FDFA) responsible for the overall coordination with other federal authorities of development and cooperation with Eastern Europe as well as for humanitarian aid delivered by the Swiss Confederation.<sup>138</sup> Being an integral part of the Federal Council's foreign policy, SDC aims to contribute to reduce global poverty and enhance in peace through sustainable development and fosters economic self-reliance and state autonomy. SDC strategies focus on the promotion of healthy lifestyles, disease prevention, locally adapted community-based approaches, and multisectoral collaborations to support policies of relevant government sectors and the creation of supportive environments. It also envisages to contribute to the improvement of production conditions, helps to addressing environmental problems, and ensures better access to education and basic healthcare services.<sup>139</sup> It actively works in low and middle-income countries, as the representing of Switzerland Confederation. The works and efforts of SDC on health are based on three main points; the strengthening of health systems, the fight against communicable and noncommunicable diseases and the improvement of sexual, reproductive, maternal and child health.<sup>140</sup>

---

<sup>137</sup> Schümperli Younossian, Catherine. «Aide humanitaire », *Annuaire suisse de politique de développement*. 2003. Available at : <https://journals.openedition.org/aspd/> (Accessed on May 17, 2018).

<sup>138</sup> Conseil fédéral, Message concernant la continuation de l'aide humanitaire internationale de la Confédération, du 14 novembre 2001 (message 01.072).

<sup>139</sup> Schümperli Younossian, Catherine. «Aide humanitaire », *Annuaire suisse de politique de développement*. 2003. Available at : <https://journals.openedition.org/aspd/> (Accessed on May 17, 2018).

<sup>140</sup> Martin, Jacques. “La coopération internationale suisse à la recherche d'un nouveau paradigme.” *Annuaire suisse de politique de développement*. Available at : <http://books.openedition.org/iheid/> (Accessed on Jan. 20, 2018).



SDC has implemented a Health Policy in 2003, which is relevant with the Swiss Health Foreign Policy, made by the Federal Department of Foreign Affairs and the Federal Department of Home Affairs.<sup>141</sup> The SDC works area focuses on low and middle income countries; especially Sub-Saharan Africa and Eastern Europe including Central Asia.<sup>142</sup> Within the scope of its health policy, it aims to achieve three main objectives in these areas; firstly, to strengthening health systems to extend universal coverage by which it is envisaged to provide necessary resources with the qualified staff and ameliorating the equitable distribution of health facilities, as well as establishing a quality assurance systems.<sup>143</sup>

The second objective of SDC health policy consists on reducing the trouble of communicable and non-communicable diseases, mainly HIV and AIDS, malaria and tuberculosis, in the region affecting with high level of mortality.<sup>144</sup> The fact that SDC works in close cooperation with different actors such as international and Swiss NGOs and networks, secondments and public-private development partnerships through bilateral and multilateral projects and programs facilitate to contribute to national health systems of countries in need and the recovery from diseases, as well as the training and education of health specialists and population's awareness.

---

<sup>141</sup> Martin, Jacques. "La coopération internationale suisse à la recherche d'un nouveau paradigme." *Annuaire suisse de politique de développement*. Available at : <http://books.openedition.org/iheid/> (Accessed on Jan. 20, 2018).

<sup>142</sup> Annexe C : Evaluation de l'aide humanitaire de la Suisse », *Revue de l'OCDE sur le développement* 2005/3 (no 6), p. 337-347.

<sup>143</sup> Martin, Jacques. "La coopération internationale suisse à la recherche d'un nouveau paradigme." *Annuaire suisse de politique de développement*. Available at : <http://books.openedition.org/iheid/> (Accessed on Jan. 20, 2018).

<sup>144</sup> Federal Department of Foreign Affairs FDFA Official Website. Swiss Agency for Development and Cooperation SD. Available at: <https://www.eda.admin.ch/sdc> (Accessed on Jan. 20, 2018).

Table 1

**Overview of SDC expenditures 2012-2016 (million CHF)**

	2012	2013	2014	2015	2016
<b>Swiss Agency for Development and Cooperation (SDC)</b>	<b>1'848.7</b>	<b>2'045.1</b>	<b>2'228.2</b>	<b>2'357.3</b>	<b>2'222.2</b>
Humanitarian aid	337.7	387.2	463.0	539.9	481.1
Development Cooperation	1'338.8	1'419.5	1'496.8	1'562.9	1'523.3

#### **4.6 Relation and Cooperation with WHO and other Regional and International Organizations**

Switzerland hosts important institutions for global health, such as WHO, GAVI, GFATM, ICRC and others, all of which are based in Geneva.<sup>145</sup> Besides regional and international organizations, key Swiss private actors form a major part of health sectors. Switzerland hosts also prestigious academic institutions that conduct research, teaching and training and provide services in the area of global health. Many non-governmental organizations such as the Swiss Red Cross, Solid armed or MSF play a significant role in raising public awareness on relevant global health issues in Switzerland. Most of these Swiss NGOs interact within the Medicus Mundi Switzerland network, which is a member of the Medicus Mundi International Network.<sup>146</sup> The aidsfocus.ch platform brings together Swiss NGOs working in the

<sup>145</sup> Republic and State of Geneva Official Website. "Geneve Internationale: Peace, Rights and Well-Being." 2018. Available at: <http://www.geneve-int.ch/faq> (Accessed on Jan. 20, 2018).

<sup>146</sup> Medicus Mundi Switzerland. "Global Health and Switzerland." Available at: <http://www.medicusmundi.ch/en/priorities/global-health-and-switzerland> (Accessed on Jan. 20, 2018).

area of HIV and AIDS; the Swiss Malaria Group brings together the SDC, NGOs, the private sector and academia to raise awareness on malaria and its impacts among decision makers and the public, and to increase Swiss support for organizations that are actively involved in the fight against malaria.<sup>147</sup>

Geneva's environment provides necessary framework on bringing related actors and policy makers on a global scale in order to further study and develop policies on global health. The fact that the headquarter of the World Health Organization is on the center of Switzerland is another important opportunity that provides contribution on the leading role on health diplomacy. The Swiss Government works closely with these actors and tries to apply the national health policy at international level. On supporting academic research and training health diplomats, Switzerland shows a unique example on this issue. Besides its cooperation and collaboration of many different organizations at regional and international level, the Swiss Government has a country cooperation strategy with the World Health Organization and works closely with it.<sup>148</sup> Aiming to provide a sustainable collaboration between Switzerland and WHO, the Country Cooperation Strategy has been implemented in 2011 and has a strategic importance especially in the activities conducted abroad.<sup>149</sup> Through this Strategy, there is the objective to collaborate in four main priorities which are; exchanging information and expertise in the fields of noncommunicable diseases, nutrition and food policies, mental health and substance use issues; strengthening cooperation on national health systems with emphasis on health personnel; collaborating towards supporting WHO to strengthen its leadership role in global health governance, in accordance with its constitutional mandate, by making use of the enabling environment available in

---

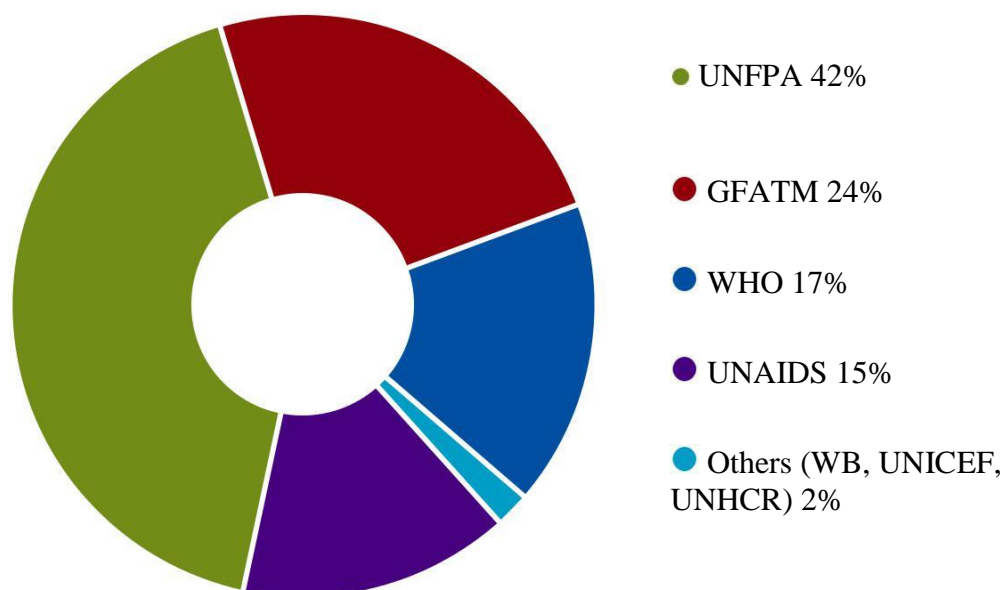
<sup>147</sup> Medicus Mundi Switzerland. "Global Health and Switzerland." Available at: <http://www.medicusmundi.ch/en/priorities/global-health-and-switzerland> (Accessed on Jan. 20, 2018).

<sup>148</sup> Organisation Mondiale de la Santé. « Stratégie de coopération OMS-Suisse. » Bibliothèque de l'OMS. 2013. ISBN 978 92 4 250528 3.

<sup>149</sup> Ibid.

Geneva and enhancing WHO – Swiss collaboration in Swiss Agency for Development and Cooperation (SDC) priority countries.<sup>150</sup> The cooperation with WHO gives the ability to make valuable contributions to global efforts, in terms of economy and sustainable development.

33.2 million Swiss francs



*Source:* Swiss Agency for Development and Cooperation (SDC). Switzerland's funding for WHO, by funding source, 2010–2011. Available at: [http://www.euro.who.int/data/assets/pdf\\_file/0020/189110/Country-Cooperation-Strategy-CCS-WHO-Switzerland-Eng.pdf](http://www.euro.who.int/data/assets/pdf_file/0020/189110/Country-Cooperation-Strategy-CCS-WHO-Switzerland-Eng.pdf) (Accessed on Jan. 20, 2018).

#### **4.7 Conclusion**

This chapter discussed how Switzerland's governmental institutions are strongly designed within the view to apply foreign policy decisions in a structural framework. What makes success in Swiss health diplomacy is the fact that health-related foreign activities are carried out separately and each institution have a distinct foreign health strategy. These characteristics make Swiss foreign health policy unique and prosperous.

---

<sup>150</sup> Organisation Mondiale de la Santé. « Stratégie de coopération OMS-Suisse. » Bibliothèque de l'OMS. 2013. ISBN 978 92 4 250528 3.

With the global vision on health, 20 objectives have been identified, among which the importance of global governance on health issues, the strengthening relations with strategic partner such as WHO and EU to improve regional health diplomacy, to protect Switzerland's economic interests and negotiate and find solutions for global health issues and make a policy coherence between national and foreign health policies are highlighted.<sup>151</sup> The role played by Switzerland on the international stage as a global actor, is undeniable. Rebecca Katz and Daniel Singer noted that “countries often include in their foreign policy strategies the diseases that have the potential to threaten domestic interests” which are primary economic and security concerns.<sup>152</sup> Switzerland, as analyzed in this chapter, prioritizes health issues that threaten the world population. Through its economical medical activities based on its well-developed medical industries, Swiss health diplomacy also serves the country's economy.

Chapter 1 and Chapter 2 have analyzed the case of US and Switzerland, two major developed countries having a systematic and strategic foreign health policy. The next chapter will deal with the case of Brazil, a signatory of Oslo Declaration, where it committed to adopt a foreign health policy. Brazil, one of the world's most important emerging power, has an intensive effect on global health activities at regional and international level that will be discussed on the following lines.

---

<sup>151</sup> Organisation Mondiale de la Santé. « Stratégie de coopération OMS-Suisse. » Bibliothèque de l'OMS. 2013. ISBN 978 92 4 250528 3.

<sup>152</sup> Rebecca Katza and Daniel Singer A. “Health and security in foreign policy.” Bulletin of the World Health Organization (2007) Special Theme Vol. /85/3/06-036889.

## **CHAPTER 5**

### **BRAZIL AND GLOBAL HEALTH DIPLOMACY**

## 5.1 Introduction

Through this chapter, it is attempted to try to analyze how health has been integrated and given a major place into the foreign policy of Brazil, as a key component of the controversial aims of whether achieving foreign policy goals or contributing to developing countries' health issues through its technical assistance strategy.<sup>153</sup> Besides its growing economy making itself the world's 6th largest one, its young population, its social development and diverse society and the view to focus a developmental approach in foreign policy and diplomatic relations, Brazil's role in global health has made it a prominent actor deserving to be studied in this thesis.<sup>154</sup>

Amado Cervo and Antonio Lessa, Brazilian scholars, noted that "the time is past when the decision-making power in international relations was restricted to the understanding among a few developed powers."<sup>155</sup> Despite its lack of strong military power, as the basis of "hard power" in world politics, Brazil, as a strong regional actor, has chosen to shape its foreign policy through forming allies and supporting soft power approach, with increasing its cooperation, multilateral initiatives and diplomacy.<sup>156</sup> Brazil's wish to extend its effect on international stage has opened the pave for giving priority to building cooperation among developing countries and attract them with its leadership and weight on regional and international scene. This has provided to use

---

<sup>153</sup> Kickbusch, Iliona. "Global health diplomacy: how foreign policy can influence global health." *British Medical Journal*, 10 June 2011, p 2.

<sup>154</sup> Centre for Economics and Business Research. "Brazil has overtaken the UK's GDP." News release, 26 December 2011. Available at <http://www.cebr.com/wp-content/uploads/Cebr-World-Economic-League-Tablepress-release-26-December-2011.pdf> (Accessed on May 1, 2018).

<sup>155</sup> Amado, Cervo and Antonio Lessa. "An assessment of the Lula era (2003–2010)." *Revista Brasileira de Politica Internacional*. 2010. Vol 53, p 6.

<sup>156</sup> Dauvergne, Peter and Déborah BL Farias. "The Rise of Brazil as a Global Development Power, *Third World Quarterly*." 2012. 33:5, 903-917, DOI: 10.1080/01436597.2012.674704.

health as a basic tool for its technical cooperation with cooperating countries and a key for developing major issues such as health.<sup>157</sup>

## **5.2 Brazil and Global Health**

Brazil believes that health is the right of each human being and access to medical treatments as well as medicines should be facilitated, as it is the duty of the government to provide it for citizens. Its achievement on the Framework Convention on Tobacco Control (FCTC), adopted in 2003 by UN Members and led by the Tobacco Free Initiative (TFI) of the World Health Organization are also of high importance of Brazil's involvement on global health issues.<sup>158</sup> After this commitment, Brazil has been the second successful country achieving to control the tobacco products by organizing and launching campaigns against tobacco on medias and communications platforms, putting warnings on cigarette packages and using "light" and "mild" terms in describing tobacco products.<sup>159</sup>

Even if its basic cooperation area is constituted on focusing on a South-South Cooperation with special attention to developing countries, Brazil participates and plays an important role in meetings and conferences on global health issues such as agreements on the Framework Convention on Tobacco Control, the Doha Declaration on TRIPS and Public Health, and the IGWG at WHO, G20, IBSA (India, Brazil, South Africa), UNASUL (Union of South-American Nations), and CPLP (Community of Portuguese Speaking Countries).<sup>160</sup> Brazil is a strong negotiator on international fora and through the bilateral cooperation on health, it makes great efforts on trying to make

---

<sup>157</sup> United Nations General Assembly. "Report of the Secretary-General Promotion of South-South cooperation for development: a thirty-year perspective." Doc A/64/504, 2009, p 3.

<sup>158</sup> Lee Kelley, Chagas Luiz C., Novotny Thomas E. "Brazil and the Framework Convention on Tobacco Control: Global Health Diplomacy as Soft Power." 2010. PLoS Med 7(4): e1000232. Doi: 10.1371/journal.pmed.1000232.

<sup>159</sup> Ibid.

<sup>160</sup> Devi, Sridhar. "Foreign Policy and Global Health: Country Strategies." Oxford Health and Foreign Policy Introduction, 2009.



its national health policy as a model on the international stage. Thanks to its global initiative in health, Brazil has been in 2003 the first nation to win the Bill and Melinda Gates Foundation award for having the best model response to AIDS.<sup>161</sup> Through its domestic commitments on the control of tobacco and others diseases' perveances, Brazil has had a remarkable effect at global level that has contributed not only to reach successful negotiations for finding solutions to common health issues, but also serve to its foreign policy goals through the correct use of health diplomacy that will be explained on the following lines.<sup>162</sup>

### **5.3 Brazil Foreign Policy and Health**

Brazil pursues also necessary strategy in foreign health for achieving its objectives. Brazil is one of the seven countries that participated in the Oslo Ministerial Meeting in 2006 by which Ministers of Foreign Affairs have engaged to integrate health into their foreign policy agendas.<sup>163</sup> Thus, its foreign health policy remains under construction. Even if Brazil has not yet a foreign health policy, separately and independent from other national and foreign policies, the foreign relations and cooperation concerning foreign health strategy is conducted under the different bodies of the Brazilian government.

When Brazil's foreign health activities are analyzed, it is easily remarkable that a South-South cooperation and collaboration with developing countries is a priority. Thus, even if some argue that Brazil defends that foreign health should not be considered as a tool through which recipient countries become dependent from the

---

<sup>161</sup> Bill and Melinda Gates Foundation. "2003 Gates Award for Global Health - Brazilian National AIDS Program." Press Release and Statement. Available at: <https://www.gatesfoundation.org/Media-Center/Press-Releases/2003/05/Brazilian-National-AIDS-Program> (Accessed on May 1, 2018).

<sup>162</sup> Lee Kelley, Chagas Luiz C., Novotny Thomas E. "Brazil and the Framework Convention on Tobacco Control: Global Health Diplomacy as Soft Power." 2010. PLoS Med 7(4): e1000232. Doi: 10.1371/journal.pmed.1000232.

<sup>163</sup> Oslo Ministerial Declaration on Global Health. "A pressing foreign policy issue of our time, Ministers of Foreign Affairs of Brazil, France, Indonesia, Norway, Senegal, South Africa, and Thailand", The Lancet, Volume 369, Issue 9570, 1373 – 1378. 2006.

donors, but is a way to increase solidarity, cooperation and collaboration so as to provide sustainability in improving health, others mention that, Brazil has now an effective voice in the international scene on global health issues debates and many contributions are made<sup>164</sup>

It is mainly the Brazilian Ministry of Health and the Brazil Cooperation Governmental Agency that coordinate and conduct foreign health activities. Within this scope, about 137 health cooperation projects worldwide at the stage of implementation and negotiation, with mostly Latin American and African countries in priority.<sup>165</sup> The main goals of these projects consist on fighting against HIV/AIDS, malaria and dengue control, maternal and child health care, enhancing technology transfer for production of medicines, pharmaceutical surveillance and regulation, providing health professionals' higher education and technical training.<sup>166</sup> On the other hand, it is also aimed to establish a sustainable health systems of these countries through collaborating at different level such as Ministries of Health, National Health Institutes, National School of Public Health and Technical Schools of Health.<sup>167</sup>

The Brazilian Government believes that, in spite of enhancing a Western-supported collaboration followed by dependence on foreign aid, a South-South cooperation will be more effective in collaboration with South Hemisphere's countries through mutual aid and exchange of experience and knowledge.<sup>168</sup> However, some academes state that

---

<sup>164</sup> Jordão Horácio da Silva Lima. "Global health and Brazilian foreign policy: the negotiations on innovation and intellectual property." (2017). Faculdade de Saúde Pública, Universidade de São Paulo, vol. 22 no. 7 ISSN 1678-4561.

<sup>165</sup> Ibid.

<sup>166</sup> Almeida Celia, Pires de Campo Rodrigo, Buss Paulo, Ferreira Jose R., Fonseca Luiz E. "Brazil's conception of South-South "structural cooperation" in health." 2010. Review Global Forum Update on Research for Health Innovating for the health of all, 2009, Vol. 6: 100-107. ISBN 978-2-940401-24-6.

<sup>167</sup> Ibid.

<sup>168</sup> Buss Paul M., Ferreira Jose R. "Critical essay on international cooperation in health." 2010. Revista Eletrônica de Comunicação Informação & Inovação em Saúde , 2010, vol. 4 (pg. 86-97).

“Brazil’s engagement in international health cooperation is probably better understood within its use of health-related interventions as soft-power tool for its foreign policy objectives.”<sup>169</sup> Thus, through health activities at global scale, Brazil will be able to provide its foreign policy goals which consist on having more voice on international arena, providing international fame and being one of the most influential emerging power. As mentioned above, Brazil is one of the pioneer countries signing the Oslo Declaration; this is the result of the fact that the Ministry of Foreign Affairs of Brazil is sufficiently aware of the importance and necessity to integrate health on foreign policy agenda. Brazilian governmental technical cooperation projects aim to provide international mutual expertise, training, goods, equipment and typically do not carry either a grant component or conditionalities.<sup>170</sup> Brazilian health cooperation’s main areas of focus are HIV/AIDS, malaria and dengue control, maternal and child health care, technology transfer for production of medicines, pharmaceutical surveillance and regulation, health professionals’ higher education and technical training.<sup>171</sup> With the implementation of a foreign health policy in the near future, Brazil’s foreign health activities will take a better structural form.

#### **5.4 Health Diplomacy Strategy**

Brazil is well known for its successful negotiations on international health discussions with state and non-state actors.<sup>172</sup> Through the bilateral cooperation on health and the

---

<sup>169</sup> Lee Kelley, Chagas Luiz C., Novotny Thomas E. “Brazil and the Framework Convention on Tobacco Control: Global Health Diplomacy as Soft Power.” 2010. PLoS Med 7(4): e1000232. Doi: 10.1371/journal.pmed.1000232.

<sup>170</sup> Almeida Celia, Pires de Campo Rodrigo, Buss Paulo, Ferreira Jose R., Fonseca Luiz E. “Brazil’s conception of South-South “structural cooperation” in health.” 2010. Review Global Forum Update on Research for Health Innovating for the health of all, 2009, Vol. 6: 100-107. ISBN 978-2-940401-24-6.

<sup>171</sup> Ibid.

<sup>172</sup> Gomez, Eduardo. “Understanding Brazilian Global Health Diplomacy: Social Health Movements, Institutional Infiltration, and the Geopolitics of Accessing HIV/AIDS Medication.” 2012. Global Health Governance, Volume Vi, Issue 1.

efforts on trying to make its national health policy as a model for the international community, Brazil has been in 2003 the first nation to win the Bill and Melinda Gates Foundation award for having the best model response to AIDS.<sup>173</sup> Brazil's health diplomacy strategy is in a whole based on a "structuring cooperation" model which has five core pillars; prioritization of horizontal cooperation, focus on the development of capacities in health, initiatives coordinated in the regional context, strong involvement of health ministers in the construction of strategic and political consensuses and stimulation for the domestic partnership between the Ministry of Health and the Ministry of Foreign Affairs.<sup>174</sup> Even if Brazil does not have a foreign health policy yet, it is a signatory of the Oslo Declaration by which it has committed to integrate health into foreign policy; it makes engagement in contributing to global health by being able to speak knowledgeably or authoritatively about the issue at regional and international level.

Brazil has conducted negotiations on global health officially since 2000 within the scope of discussing the Brazilian model of fighting against HIV/AIDS as a global one.<sup>175</sup> The negotiations with international pharmaceutical institutions have given fruitful resolutions for the country which has one of the better models on fighting against this global disease. Through the initiatives of Brazil, the right of free access to medicines against HIV/AIDS has been recognized by United Nations, its related bodies and its Members except the United States.<sup>176</sup> This initiative of Brazil has been recognized as a remarkable contribution to global health diplomacy and thanks to its ability of negotiating, a worldwide support has been made to its global solutions'

---

<sup>173</sup> Bill and Melinda Gates Foundation. "2003 Gates Award for Global Health - Brazilian National AIDS Program." Press Release and Statement. Available at: <https://www.gatesfoundation.org/Media-Center/Press-Releases/2003/05/Brazilian-National-AIDS-Program> (Accessed on May 1, 2018).

<sup>174</sup> Ibid.

<sup>175</sup> Flynn, Matthew. "Brazilian Pharmaceutical Diplomacy: Social Democratic Principles Versus Soft Power Interests." *The Politics of the Pharmaceutical Industry*, 2013.

<sup>176</sup> Ibid.

propositions. This is one of the most eminent factor that proves the ability of Brazil to negotiate on health issues and playing an important role on leading other states to take similar engagement.<sup>177</sup> Another important initiative of Brazil that deserves to be noted is its achievement on the Framework Convention on Tobacco Control (FCTC), adopted in 2003 by UN Members and led by the Tobacco Free Initiative (TFI) of the World Health Organization; Brazil's commitment has provided to be the second successful country achieving to control the tobacco products by organizing and launching campaigns against tobacco on medias and communications platforms, putting warnings on cigarette packages and using *light* and *mild* terms in describing tobacco products.<sup>178</sup>

Brazil, with the strong negotiations' ability of its diplomats and the increasing collaboration of its Ministry of Health and Ministry of Foreign Affairs continues to take active part on international organizations such as WHO and seems to continue to influence global health summits and forum. Brazil turned its experience and knowledge on a geopolitical opportunity within the hope of increasing its influence within regional and international organizations.<sup>179</sup> Brazil aims through technical health cooperation to envisage not only a national independence on technology and pharmaceutical industries, but also an international cooperation among emerging countries on structuring cooperation in health.<sup>180</sup> Regarding this, Brazil will make its health system a model for developing countries and reinforce the capacity building of

---

<sup>177</sup> Kelley, Lee and Gomez Eduardo J. "Brazil's ascendance: The soft power role of global health diplomacy." The World Financial Review. 2011.

<sup>178</sup> Ibid.

<sup>179</sup> Gomez, Eduardo. "Brazil's blessing in disguise. How Lula turned an HIV crisis into a geopolitical opportunity." Foreign Policy. 2009 July. [http://www.foreignpolicy.com/articles/2009/07/22/brazils\\_blessing\\_in\\_disguise](http://www.foreignpolicy.com/articles/2009/07/22/brazils_blessing_in_disguise) (Accessed on Apr. 28, 2018).

<sup>180</sup> Almeida Celia, Pires de Campo Rodrigo, Buss Paulo, Ferreira Jose R., Fonseca Luiz E. "Brazil's conception of South-South "structural cooperation" in health." 2010. Review Global Forum Update on Research for Health Innovating for the health of all, 2009, Vol. 6: 100-107. ISBN 978-2-940401-24-6.

states, by avoiding the dependency to industrialized countries.<sup>181</sup> The Brazilian desire of achieving foreign policy objectives through health policies shows how states may pursue sometimes cooperative sometimes conflictual health diplomacies at the national and global levels.

Two main cooperation projects under the auspice of the Brazilian Government- *the Community of Portuguese-Speaking Countries (CPLP)* and *the Union of South American Nations (UNASUR)* implemented for strengthening the Brazilian South-South Cooperation (SCC) will be analyzed in order to better understand the relations between foreign policy and global health initiatives of Brazil. The Community of Portuguese Speaking Countries is composed of nine states which are; Brazil, Angola, Cabo Verde, Guinea-Bissau, Equatorial Guinea, Mozambique, Portugal, São Tomé and Príncipe, and Timor-Leste. Among its mission of promoting and spreading the Portuguese language and enforcing diplomatic coordination in order to enhance its capacity on the international arena, the Community also aims to cooperate in the field of health, within the initiative of Brazil's government.<sup>182</sup> Considering this, at the 2nd Meeting of Ministers of Health in 2009, a new convention has been adopted in order to establish a "workforce in health", receiving 67% of the total budget of 14 million euros; informing and sharing development and experiences in health issues; providing health research; cooperating in epidemiological surveillance and natural disasters and emergencies and finally promoting and developing health systems and quality of members' countries.<sup>183</sup>

---

<sup>181</sup> Buss, Paulo. "Brazil: structuring cooperation for health." (2011). *The Lancet*, DOI:10.1016/S0140-6736(11)60354-1.

<sup>182</sup> João Leite Ferreira Neto, José Newton Garcia de Araújo. « L'expérience brésilienne du Système unique de santé (sus) : gestion et subjectivité dans un contexte néolibéral. » *Nouvelle revue de psychosociologie* 2012/1 (n° 13), p. 227-239. DOI 10.3917/nrp.013.0227.

<sup>183</sup> João Leite Ferreira Neto, José Newton Garcia de Araújo. « L'expérience brésilienne du Système unique de santé (sus) : gestion et subjectivité dans un contexte néolibéral. » *Nouvelle revue de psychosociologie* 2012/1 (n° 13), p. 227-239. DOI 10.3917/nrp.013.0227.

Founded in 1971 for majorly economic purpose, as the enhancement of trade, the UNASUR-Health Division promotes health cooperation in the Amazon region since 1978.<sup>184</sup> The objective of health-related efforts consists on developing and enforcing health systems of Member States and facilitating the access of population to healthcare services without any obstacles and endowment of social insurances. The Union is composed of three higher Councils; Council of Heads of State, Council of Foreign Ministers and of National Delegates. The office of the Secretary General based in Quito, Ecuador; the five main fields of the Health Unit of the Union are Health Surveillance and Response, Development of Universal Health Systems, Universal Access to Medicines Health Promotion and Action on Social Determinants Human Resources Development and Management.<sup>185</sup> Besides supporting Members, the Union cooperates also with other developing countries in need. Brazil is the leading country of the Union and generally, the position of the Union in international fora and meetings are derived from Brazilian laws.<sup>186</sup>

### **5.5 Foreign Aid in Health Perspective**

Brazil, being among the first ten biggest world's economies, is aware that foreign aid is an important and effective tool of conducting healthier foreign relations within the aim of achieving foreign policy goals. Some argue that Brazil uses foreign aid as a soft power mechanism, other defends that, the main objective is to reinforce solidarity among developing nations through cooperation and collaboration.<sup>187</sup> It is the Brazilian Agency for Cooperation, under the supervision of the Ministry of Foreign Affairs that

---

<sup>184</sup> Dabene, Olivier. « L'UNASUR : Le nouveau visage pragmatique du régionalisme sud-américain. » Political Outlook 2010. Observatoire politique de l'Amérique latine et des Caraïbes. CERI-Sciences Po.

<sup>185</sup> Ibid.

<sup>186</sup> João Leite Ferreira Neto, José Newton Garcia de Araújo. « L'expérience brésilienne du Système unique de santé (sus) : gestion et subjectivité dans un contexte néolibéral. » Nouvelle revue de psychosociologie 2012/1 (n° 13), p. 227-239. DOI 10.3917/nrp.013.0227.

<sup>187</sup> Lídia Cabral, Giuliano Russo and Julia Weinstock. "Brazil and the Shifting Consensus on Development Co-operation: Salutary Diversions from the 'Aid-effectiveness' Trail?" Development Policy Review, 2014, 32 (2): 179-202.

conducts negotiations and is responsible for coordinating, implementing, and monitoring Brazilian programs and projects of technical cooperation and foreign assistance of Brazil's government.<sup>188</sup> According to OECD data's, Brazil's development cooperation's amount is equal to USD 316 million in 2013 and of these USD 316 million, 66%, or USD 208 million, were realized through cooperation with multilateral organizations.<sup>189</sup>

One of the most important foreign aid field is health. Contrary to countries that prefer to make direct aid, Brazil has based its foreign aid policy in health field through seven main principles which are; workforce training, information technology and communication, research and development, health production complex, epidemiological surveillance, disasters and emergency, health promotion and protection, and disease' specific initiatives.<sup>190</sup> Instead of bringing a contemporary recovery, Brazil aims to strengthen the capacity building and self-sufficiency of recipient countries through educational program and training. These countries are generally those from the South Hemisphere and majorly African countries; this is why, it is called a "horizontal cooperation" and a "South-South Cooperation."<sup>191</sup> Instead of making a direct aid with no future sustainability, Brazil aims to provide an "aid's effectiveness" that ensures the self-sufficiency and sustainability of the recipients countries.<sup>192</sup>

---

<sup>188</sup> Brazilian Agency for Cooperation Official Website. Introdução, Agência Brasileira de Cooperação. Available at: <http://www.abc.gov.br/abc/introducao.asp> (Accessed on Feb. 5, 2018).

<sup>189</sup> Organisation for Economic Co-operation and Development (OECD). International Development Statistics on Brazil. Available at: [http://www.oecd-ilibrary.org/development/data/detailed-aid-statistics\\_dev-aid-stat-data-en](http://www.oecd-ilibrary.org/development/data/detailed-aid-statistics_dev-aid-stat-data-en) asp (Accessed on Feb. 5, 2018).

<sup>190</sup> Lídia Cabral, Giuliano Russo and Julia Weinstock. "Brazil and the Shifting Consensus on Development Co-operation: Salutary Diversions from the 'Aid effectiveness' Trail?" *Development Policy Review*. 2014, 32 (2): 179-202.

<sup>191</sup> Buss Paulo M, Ferreira Jose R. "Health diplomacy and South-South cooperation: the experiences of UNASUR" *Salud and CPLP's strategic plan for cooperation in health*. 2010. *Revista Electronica de Comunicacao, Informacao em Inovacao em Sau de* 4: 98–110.

<sup>192</sup> Brazil Federative Republic. "Trends in Development Co-operation: South-South triangular co-operation and aid effectiveness: the Brazilian experience." *Proceedings of the Cairo High-Level*



The Brazilian national model of fighting against AIDS/HIV has been admired by the international community and considered as a global model.<sup>193</sup> Thus, this will lead Brazil to initiate a global model through carrying its national model at an international level. Brazil aims to strengthen the capacity building and self-sufficiency of recipient countries through educational program and training, instead of forming a contemporary recovery.<sup>194</sup> The technology used in pharmacy in order to make able the production of AIDS medicines by countries in need is one of the key points in fighting against this disease.<sup>195</sup> It is also worth to note that Brazil has become the first nation to win the Bill and Melinda Gates Foundation award for having the best model response to AIDS.<sup>196</sup> Brazil also supports regional and international organizations within the view to eradicate diseases and ameliorate health conditions and systems of countries. Even if some problems are present because of the lack of an independent institution and governmental agency, which whereat the promptness of foreign aid activities, Brazil seems to further develop and get a better ranking among the major world's donors. It is worth noting that Brazilian's attitudes towards health policies has a conflictual side; it aims in one hand to contribute to global cooperation for health issues, on the other hand, it pursues national self-interest by trying to achieve national

---

Symposium, 19-20 January 2008. Available at: [http://www.un.org/en/ecosoc/newfunct/pdf/brazil\\_ssc\\_cairo.pdf](http://www.un.org/en/ecosoc/newfunct/pdf/brazil_ssc_cairo.pdf) (Accessed May 15, 2018).

<sup>193</sup> Sotero, Paulo. "Brazil as an Emerging Donor: Huge potential and growing pains." The World Bank Report: Learning for Development. Development Outreach, Vol. 11 no. 1. Feb. 2009.

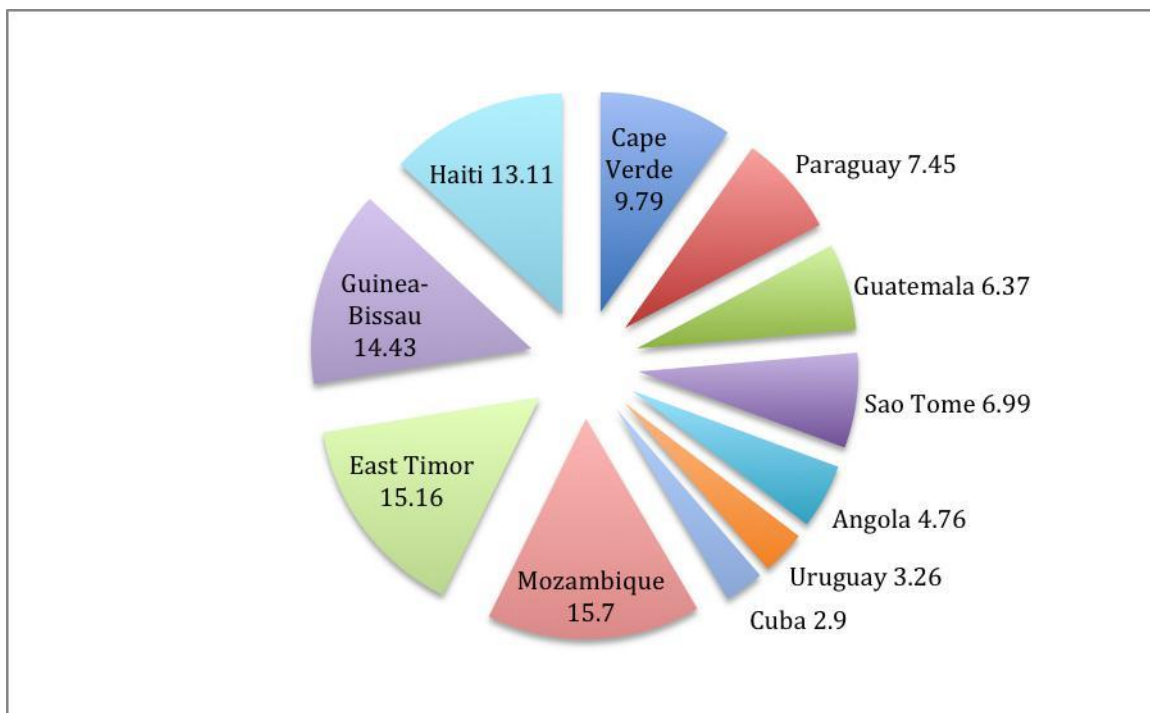
<sup>194</sup> Brazil Federative Republic. "Trends in Development Co-operation: South-South triangular co-operation and aid effectiveness: the Brazilian experience." Proceedings of the Cairo High-Level Symposium, 19-20 January 2008. Available at: [http://www.un.org/en/ecosoc/newfunct/pdf/brazil\\_ssc\\_cairo.pdf](http://www.un.org/en/ecosoc/newfunct/pdf/brazil_ssc_cairo.pdf) (Accessed May 15, 2018).

<sup>195</sup> Sotero, Paulo. "Brazil as an Emerging Donor: Huge potential and growing pains." The World Bank Report: Learning for Development. Development Outreach, Vol. 11 no. 1. Feb. 2009.

<sup>196</sup> Bill and Melinda Gates Foundation. "2003 Gates Award for Global Health - Brazilian National AIDS Program." Press Release and Statement. Available at: <https://www.gatesfoundation.org/Media-Center/Press-Releases/2003/05/Brazilian-National-AIDS-Program> (Accessed on May 1, 2018).

objectives in foreign policy. Brazilian health diplomacy is driven by the aim to cooperate and to make profit regarding its own national objectives.

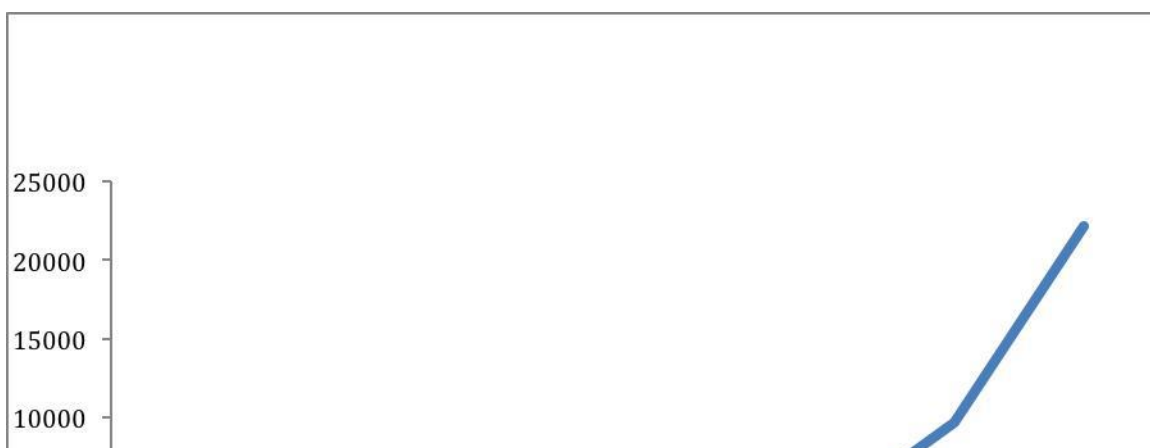
**Figure 1: Developing Countries Receiving Brazilian Technical Assistance (USD % of total budget, 2005-2010)**



Source: IPEA (2010); Exchange rate source: Oanda, annual rates BRL/US\$.

Figure 1 below describes the amount of Brazilian Technical Assistance towards developing countries of the Community of Portuguese Speaking Countries between 2005-2010. The highest amount has been delivered to Mozambique with % 15.7 of the total budget.

**Figure 2: Brazilian Annual Budget for Technical Assistance to Africa (All policy sectors, USD millions, 2003-2010)**



## **5.6 Relation and Cooperation with WHO and other Regional and International Organizations**

Brazil plays an active and increasing leading role within WHO and other international organizations. Its efforts on highlighting the necessity to free access to medicines against HIV/AIDS, its ability to achieve tobacco control after the commitment in 2003 in WHO's conference are the main initiatives that have provided to Brazil to gain international prestige and compliments by Member States.<sup>197</sup> Brazil influences other Members within G-20, IBSA (India, Brazil, and South Africa), UNASUR (Union of South-American Nations), PAHO, (regional body of the WHO), United Nations Children Fund (UNICEF), the Global Fund for AIDS, Malaria and Tuberculosis and CPLP (Community of Portuguese-Speaking Countries) by prioritizing the necessity to cooperate at global level for common issues. The initiatives of Brazil among international organizations have won general approval of Member States. According to the National Institute for Applied Economic Research, Brazil has contributed USD 106.5 million to different bodies of UN such as WHO/ PAHO, UNICEF for international health projects between 2006-2009.<sup>198</sup>

---

<sup>197</sup> Lee, Kelley and Gomez Eduardo J. "Brazil's ascendance: The soft power role of global health diplomacy." The World Financial Review Report 2011.

<sup>198</sup> World Health Organization. UNITAID. Available at: <https://unitaid.eu/how-we-work/countries/#en> (Accessed on Feb. 9, 2018).

Brazil plays also a leading role in BRICS by calling the Members on giving privilege to global health issues. At each opportunity in Meetings and Summits of BRICS, Brazil reiterates the importance on the necessity to enhance the capacity of WHO as a global governor of health and highlights the willingness of BRICS in taking necessary actions for accelerating the process of policy and decisions making.<sup>199</sup> Brazil is also an important strategic partner for major states' development and cooperation agencies such as the Japanese Cooperation Agency (JICA), the United States Aid Agency (USAID) or the German International Cooperation Agency (GIZ), which provide funds for Brazil in order to work together in developing countries.<sup>200</sup> According to Abdenur, this collaboration with Northern countries shows the interest of Brazil to cooperate with world's leading donors and proves its national capacity at global level.<sup>201</sup> These initiatives demonstrate the Brazilian's desire for more international fame as a regional power.<sup>202</sup> According to current researches, it has been notified that BRICS has an important impact on contributing to global health at regional and international level.<sup>203</sup> Through the works conducted by BRICS in the field of health, Brazil aims to increase effective horizontal cooperation and harmoniously develop capacities between the pharmaceutical sectors of the BRICS countries.<sup>204</sup> Efforts are

---

<sup>199</sup> BRICS Health Ministers Meetings. 2011. BRICS Health Ministers Meeting Beijing Declaration. Available at: <http://keionline.org/node/1183> (Accessed 25 Apr. 2018).

<sup>200</sup> Buss Paulo M, Ferreira Jose R. "Health diplomacy and South-South cooperation: the experiences of UNASUR" Salud and CPLP's strategic plan for cooperation in health. 2010. *Revista Electronica de Comunicacao, Informacao em Inovacao em Sau de 4*: 98–110.

<sup>201</sup> Abdenur, Adriana. "The Strategic Triad: Form and Content in Brazil's Triangular Cooperation Practices" 2006. *International Affairs Working Paper 2007-06*. New York: The New School.

<sup>202</sup> Ibid.

<sup>203</sup> Harmer, Andrew, Yina Xiao, Eduardo Missoni and Fabrizio Tediosi. "BRICS without straw"? A systematic literature review of newly emerging economies influences in global health." 2013. *Globalization and Health*, 9:15. doi:10.1186/1744-8603-9-15.

<sup>204</sup> Ventura, Deisy. "Public Health and Brazilian Foreign Policy." 2013. *International Journal on Human Rights*. Vol. 10 no. 19. ISSN 1806-6445.

going to continue with the priority to fight against HIV/AIDS and to protect the circulation of generic drugs between developing countries. Brazil has been the key actor on the formulation of the strategic plan on health of the Community of Portuguese speaking Countries (CPLP) and of the Union of South American Countries (UNASUR).<sup>205</sup>

## 5.7 Conclusion

This chapter on the case of Brazil and global health diplomacy has analyzed the position of Brazil towards global health and examined Brazilian self-interests in health-related activities for foreign policy objectives. Brazil does not have any foreign health policy; however, it has signed the Oslo Declaration and is on the way to implement a foreign health policy within the common efforts of the Ministry of Health and Ministry of Foreign Affairs. The future of the culminating position of Brazil in global health diplomacy depends on the continuation of the methods and ways of its negotiations. Brazil's increasing amount on foreign health activities for international development cooperation represents for some the desire of pursuing foreign policy objectives and be more influential on global health arena.<sup>206</sup> Among the changing nature of its foreign aid through health projects that aim to provide sustainability instead of dependency, Brazil also strengthens its relations and cooperation activities with multilateral health agencies and regional cooperation bodies, providing an increase in the influence on global stage of health debates.<sup>207</sup> Taking its national health model as an example for international adaptation, Brazil's initiatives and negotiations

---

<sup>205</sup> Buss Paulo M, Ferreira Jose R. "Health diplomacy and South-South cooperation: the experiences of UNASUR" Salud and CPLP's strategic plan for cooperation in health. 2010. Revista Electronica de Comunicacao, Informacao em Inovacao em Sau de 4: 98-110.

<sup>206</sup> Bliss Katherine E. "Health in All Policies; Brazil's Approach to Global Health within Foreign Policy and Health Cooperation Initiatives. Key Players in Global Health: How Brazil, China, India, Russia and South Africa are influencing the Game."2010. Washington: Center for Strategic and International Studies Global Policy Center.

<sup>207</sup> OECD. Busan Fourth High Level Forum On Aid Effectiveness: Proceedings. 2011. Available at: <https://www.oecd.org/dac/effectiveness/HLF4%20proceedings%20entire%20doc%20for%20web.pdf> (Accessed May 15, 2018).

on global health have been able to provide a permanent seat and more voices on international health discussions. Its achievements on warning the world and taking necessary actions on important health issues such as fighting HIV/AIDS and Tobacco Control have given fruitful results through its aggressive and successful negotiators on international scene.<sup>208</sup> However, it is necessary to define if Brazil's aim is to transfer its national health policy on a global scale, so as to ensure that health is the right of each individual and its access should be free and facilitated by governments and related bodies, or to increase its international fame and influence. Brazil does not restrain itself from benefitting of the means of health in foreign policy. This conflictual approach can be deducted from its position towards health policies; Brazil supports cooperation for global health and as well as pursues self-interest objectives on global health discussions. The next chapter will deal with the case of Turkey that does not have any foreign health policy, but strongly committed in global health activities and health diplomacy.

## **CHAPTER 6**

### **TURKEY AND GLOBAL HEALTH DIPLOMACY**

---

<sup>208</sup> Eduardo Gómez J. "Understanding Brazilian Global Health Diplomacy: Social Health Movements, Institutional Infiltration, and the Geopolitics of Accessing HIV/AIDS Medication." 2012. *Global Health Governance*, Volume Vol. 1, Issue 1.

## **6.1 Introduction**

Through this chapter, it is attempted to analyze the different aspects of Turkish foreign health activities, as it has not had any specific political structure on the subject yet. The position of Turkey toward global health, its diplomatic strategy, the relation and correlation between its foreign policy and health, its foreign aid, under which health is a comprehensive tool and its relations with regional and international health organizations are the basic headings that will serve to examine the case of Turkey.

Global health issues have been a common study and focus area for all states, on which a strong collaboration and coordination is necessary in order to find sustainable solutions. Trade was one of the first fields under risk based on global diseases, on which states tried to manage a system of sanitary regulations. The fact that in 1839 the Ottoman Empire established the Supreme Health Council of Constantinople in order to control the sanitary regulation of foreign shipping in Ottoman ports is a significant illustration of this statement.<sup>209</sup> This first initiative in Asia Minor on regulating and contributing directly or indirectly to global health issues continued until the 21<sup>st</sup> Century. Today, Turkey's attempts in the health-related works conducted at regional and international level seem to have different aspects for scholars. Not having an institutionalized strategy or policy on foreign health policy, Turkey conducts its foreign health activities according to its foreign policy under the root of humanitarian aid and sometimes, according to some scholars, it uses health as a source of soft power especially in developing countries and in conflictual regions.<sup>210</sup>

## **6.2 Turkey and Global Health**

---

<sup>209</sup> Kickbusch Iliona, Nick Drager, Graham Lister, Michaela Told. "Global Health Diplomacy: Concepts, Issues, Actors, Instruments, Fora and Cases." (2013). DOI 10.1007/978-1-4614-5401-4\_2.

<sup>210</sup> Altunışık, Meliha. "The Possibilities and Limits of Turkey's Soft Power in the Middle East." *Insight Turkey* Vol. 10 / No. 2 / 2008 pp. 41-54.

Turkey achieved a complete transformation to a universal healthcare system by its domestic health reforms made in 2008.<sup>211</sup> The Ministry of Health is the main provider of health services financed through a social security system covering the population.<sup>212</sup> The infantile as well as maternal mortality has dramatically decreased, the life expectancy has raised; Turkish population seems to be satisfied with the health reforms made on the last years.<sup>213</sup> The World Health Organization assesses the healthcare reform of Turkey as successful and epitomist, especially in the autonomization and family medicine system.<sup>214</sup> Turkey, as in the case of Brazil, presents its national health policy as a model for developing countries; this is why, even if it does not have any foreign health policy, health is an integrated part of Turkish foreign policy.

Turkey considers health as a human right that should be provided for everyone by the state when required.<sup>215</sup> At the global level, the same conviction pushes Turkey to share experience and knowledge on health with other states. As a regional power, Turkey's contributions to global health are conducted on regional scale by offering its healthcare system as an example and supporting foreign health-related aid activities of the governmental and non-governmental organizations.<sup>216</sup> Thus, Turkey's contributions to

---

<sup>211</sup> OECD Sağlık Sistemi İncelemeleri Türkiye. "Türkiye'de Yakın Tarihte Yapılan Sağlık Reformları." OECD ve Dünya Bankası. 2008. Available at: <https://sbu.saglik.gov.tr/ekutuphane/kitaplar/oecdkitap.pdf> (Accessed on Apr. 15, 2018).

<sup>212</sup> Mehtap Tatar, Salih Mollahaliloğlu, Bayram Şahin, Sabahattin Aydın, Anna Maresso, Cristina Hernández-Quevedo. "Turkey: Health system review. Health Systems in Transition." 2011, 13(6):1–186.

<sup>213</sup> Yaşar, Gülbiye. "Health transformation programme' in Turkey: an assessment." International journal of health planning and management. 2011; 26: 110–133.

<sup>214</sup> World Health Organization. "Successful Healthcare Reform: The case of Turkey." WHO Regional Office for Europe. 2012. Available at: <https://dosyamerkez.saglik.gov.tr/Eklenti/2106.successful-health-system-reforms-the-case-of-turkeypdf.pdf?0> (Accessed on March 2, 2018).

<sup>215</sup> Pala, Kayıhan. "Sağlık Reformları ve İşyeri Hekimliği: Neler Oluyor?" Türk Tabipler Birliği Mesleki Sağlık ve Güvenlik Dergisi. S. 16-23, Aralık 2009.

<sup>216</sup> Karagül, Songül. "Türkiye'nin Balkanlardaki "Yumuşak Güç" Perspektifi: TİKA." Girişimcilik ve Kalkınma Dergisi (8:1) 2013.



global health may be analyzed at a regional level, as it tries to carry out health activities through its partnerships with its prior and friendly countries and organizations. Its relations and collaboration with the African Union and the Organization for Islamic Cooperation are one of the concrete illustrations of this case. Among the activities aiming to contribute to global health; Turkey hosted African Health Ministers, where an Observer from African Union was present in July 2017 and the Islamic Conference of Ministers of Health of OIC Member States in 2015, where they committed to strongly collaborate to implement global health policies and cooperate for fighting against common health issues.<sup>217</sup> At every occasion, Turkey's governmental authorities declare its willingness of sharing its experience and providing sustainability in public health issues with collaborating countries.<sup>218</sup>

### **6.3 Turkish Foreign Policy and Health**

Turkey does not have a special foreign health policy adopted by the Government. Meanwhile, it is the General Directorate of EU and Foreign Affairs of the Ministry of Health, which conducts relations on cooperation and collaboration in health with the foreign states.<sup>219</sup> Other governmental agencies also contribute to foreign health activities, such as the Primary Turkish Cooperation and Coordination Agency, but, as these actors conduct basically foreign aid activities, the Ministry of Health remains as the main body on developing the diplomatic health strategies.

Among the Health Transformation Program of 2003 of the national health policy of Turkey, it was also mentioned to increase "cross boundary healthcare services" so as to make a remarkable impact on the international arena and strengthen collaboration

---

<sup>217</sup> Organization for Islamic Cooperation. 5th Session of the Islamic Conference of Health Ministers; Istanbul Declaration. OIC/5-ICHM/2015/DECL, 2015. Available at: <https://www.oic-oci.org/docdown/?docID=1666&refID=1070> (Accessed on Apr. 15, 2018).

<sup>218</sup> Sağlık Bakanlığı Resmi İnternet Sayfası. Avrupa Birliği ve Dış İlişkiler Genel Müdürlüğü. Sağlıkta Dış İlişkiler ve AB Bülteni. Sayı 62. Mayıs 2018.

<sup>219</sup> Ibid.

with the international actors.<sup>220</sup> The strategic plan in health also includes the development of the relations with the foreign countries in the field of health; thanks to this statement, the related Department of the Ministry of Health; the General Directorate of EU and Foreign Affairs focuses on developing strategies and policies in order to strengthen cooperation among different Ministries of Health, to which Turkey gives particular importance.<sup>221</sup>

Turkish Foreign Policy's vision is based on "enterprising and humanitarian" initiatives.<sup>222</sup> Thus, Turkey's foreign policy gives priority on reinforcing economic and commercial relations all around the world, strengthening cooperation and collaboration with regional and international organizations and enhancing Turkey's soft power.<sup>223</sup> Even not studied separately as a foreign policy subject, health is an important part of Turkey's humanitarian and enterprising vision. Health is also a component of Turkey's foreign investment and aid; this is why the integration of health as a soft power to achieve foreign policy objectives will be a logical and relevant act.<sup>224</sup> On the other hand, the African Outreach Policy launched in 2005 has pushed Turkey to invest and increase foreign health aid in developing countries giving priority to the

---

<sup>220</sup> Sayan, İpek and Küçük Aziz. "Transformation of Public Personnel Employment in Turkey: Example of Ministry of Health." Ankara Üniversitesi SBF Dergisi, Cilt 67, No. 1, 2012, s. 1710-203.

<sup>221</sup> Sağlık Bakanlığı Resmi İnternet Sayfası. Avrupa Birliği ve Dış İlişkiler Genel Müdürlüğü, 2018. Available at: <http://www.disab.saglik.gov.tr/> (Accessed on March 2, 2018).

<sup>222</sup> T.C. Dışişleri Bakanlığı Resmi İnternet Sayfası. Türk Dış Politikası. "Türkiye'nin Girişimci ve İnsani Dış Politikası." 2018. Available at: <http://www.mfa.gov.tr/dis-politika-genel.tr.mfa> (Accessed on Apr. 22, 2018).

<sup>223</sup> Turan, Yıldırım and Ahmet Karanfil. "Soft Power Fact in Turkish Foreign Policy and the Case of Republic Turkey Prime Ministry Office of Public Diplomacy." International Journal of Political Studies. April 2017. Vol:3, Issue:1 e-ISSN: 2149-8539.

<sup>224</sup> T.C. Dışişleri Bakanlığı Resmi İnternet Sayfası. Türk Dış Politikası. "2018 yılına girerken girişimci ve insani dış politikamız." 2018 Mali Yılı Bütçe Tasarısı Vesilesiyle TBMM Genel Kuruluna Sunum. Available at: <http://www.mfa.gov.tr/dis-politika-genel.tr.mfa> (Accessed on Apr. 22, 2018).

African continent.<sup>225</sup> This has provided to put onto practice its vision of foreign policy based on an enterprising and humanitarian diplomacy and increase its positive image on multilateral fora as an important donor.

Another important component of Turkey's foreign policy is its desire to increase international fame through health diplomacy. To be a global model through raising values necessitates the involvement of many actors at state and non-state levels.<sup>226</sup> Consequently, health interventions and foreign health aid of Turkey cannot be separated from the fact that it will use it as a source of soft power. The fact that Turkey is an important supporter of non-state actors and civil societies in their activities abroad is directly linked to its diplomacy that is shaped and now divided by including multistakeholders' actors.<sup>227</sup> In Turkish global health activities' perspective, these are important assets that contribute to global health diplomacy, as it is an area requiring a collaboration among different actors at a different level.

#### **6.4 Health Diplomacy Strategy**

When Turkey's efforts on contributing to global health diplomacy is analyzed, it firstly has to be mentioned that its active participation in the activities of WHO, its collaboration with the European Union's institutions, its investments and strengthening relations with Africa, as an important part of its foreign policy and the works conducted abroad by the Ministry of Health and TİKA (Turkish Cooperation and Coordination Agency) deserve to be highlighted. On the other hand, despite the large scope of humanitarian aid, under which health takes an important and integrated part, the efforts of Turkey on solving health issues and contributing to health diplomacy are not a notion discussed in detail by Turkish academics and related bodies. Today, Turkey has only one health's attaché in New York that follows the

---

<sup>225</sup> Özkan, Mehmet. "Turkey's Rising Role in Africa." *Turkish Policy Quarterly*. 2010. Vol. 9, No. 4, pp. 93-105.

<sup>226</sup> Saran, Mehmet and Işıl Karpat. "Türkiye'nin İmajı ve Marka Değerinin Arttırılmasında İletişim Çabaları." 2002. *KalDer Derg*, 141, s. 46-50.

<sup>227</sup> Purtaş, Fırat. "Rising Value of Turkish Foreign Policy: Cultural Diplomacy." *Gazi Akademik Bakış* 7 (2015): 1-14.

latest medical developments and tries to enhance collaboration and cooperation in the field of health with developed countries.<sup>228</sup> However, Turkey has an important potential on health diplomacy and this tool should be used at the greatest extent possible. Turkey seems to prefer to share its experience and knowledge with countries that it accepts as a friend and fraternal.<sup>229</sup> While enhancing its political relations, it provides important technical assistance and aid in different fields, among which health investments take an integrated part.

Considering that health activities abroad are an important means of soft power, which is defined by Joseph Nye as “the ability of a country to persuade others to do what it wants without force or coercion” that facilitates to put forward a country’s prestige and good image on foreign societies, activities and operations conducted by Turkish governmental institutions and NGO’s within the aim to improve global health should be studied in order to define clearly its contribution to Turkish foreign policy goals.<sup>230</sup> Turkey tries to strengthen its relations with especially countries, with which it has historical and cultural ties and with those who are in urgent humanitarian needs under adverse circumstances such as the case of Syria.<sup>231</sup> Aware of the importance to contribute to global health by the means of diplomacy and considering the objectives of its foreign policy agenda, Turkey organizes and participates into many regional and international events.<sup>232</sup> Turkey, as a Member, a Partner and a co-Founder, cooperates with the World Health Organization, the Health Committee of the Council of Europe, OECD, the Islamic Development Bank, the Organization of Islamic Cooperation, the

---

<sup>228</sup> T.C. New York Başkonsolosluğu. Başkonsolosluk Resmi Sayfası. Available at: <http://newyork.bk.mfa.gov.tr/Mission/About> (Accessed on Apr. 22, 2018).

<sup>229</sup> Yılmaz Ayhan, Kılıçoğlu Gökmen, “Balkanlar’da YTB ve TİKA’nın Türk Kamu Diplomasisi Kurumları Olarak Faaliyetleri Ve Türkiye’nin Bölgedeki Yumuşak Gücüne Etkileri”, Finans Ekonomi ve Sosyal Araştırmalar Dergisi, 16 Ekim 2017 Cilt : 2 Sayı :2.

<sup>230</sup> Nye, Joseph. “Soft Power: The Means to Success in World Politics. 2004. Foreign Policy No. 80.

<sup>231</sup> Kardaş, Tuncay and Erdağ Ramazan. “TIKA as a foreign policy tool.” Journal of Academic Inquiries Vol.7, No.1 2012.

<sup>232</sup> Ibid.

European Union and the different bodies of the United Nations.<sup>233</sup> Among its activities within these actors, Turkey presided the Health Steering Committee of OIC between 2015 and 2017 and conducted different organizations within the view to contribute to global health in and out of Islamic countries.<sup>234</sup> Turkey hosts many different Ministers of Health in order to explain its “Health Transformation Program”, which has been taken as a good practice and example for many countries of different continents to adapt and apply this system in their own countries.<sup>235</sup> Through these officials visits, protocols and conventions are signed, by which Turkey commits to assist and provide necessary aid and collaborate in different areas of healthcare. In total, Turkey has an agreement with 73 countries and signed 138 conventions and protocols with them.<sup>236</sup> Turkey is aware of its potential on foreign aid and knows that investments on health in foreign aid and assistance’s perspective will provide positive feedback and make the country’s international fame in increase. While trying to develop its public diplomacy through its different governmental agencies’ activities, Turkey will be able to take remarkable steps in health diplomacy by, firstly, developing a strong foreign health policy and then applying it in a concrete and solid framework.

Health tourism is another important component of Turkey’s foreign health activity. It does not only provide economic benefits for the country, but also contributes to the country’s image abroad, especially for developing countries that receive healthcare

---

<sup>233</sup> Gültekin, Bilgehan. “Türkiye’nin uluslararası imajında yükselen değerler ve eğilimler.” *Academic Journal of Selçuk İletişim*, 2005.

<sup>234</sup> Organization for Islamic Cooperation-SESRIC Official Website. “The 11th Meeting of the Steering Committee on Health.” 2016. Available at: <http://www.sesric.org/health/event-detail.php?id=1389> (Accessed on Apr. 22, 2018).

<sup>235</sup> Akinci, Fevzi. “Assessment of the Turkish health care system reforms: A stakeholder analysis.” *Health Policy* Volume 107, Issue 1, 21 – 30, 2012.

<sup>236</sup> T.C. Sağlık Bakanlığı Resmi İnternet Sayfası. 2016 Faaliyet Raporu. Available at: [https://sbu.saglik.gov.tr/Ekutuphane/kitaplar/faaliyet\\_raporu\\_i%C3%A7.pdf](https://sbu.saglik.gov.tr/Ekutuphane/kitaplar/faaliyet_raporu_i%C3%A7.pdf) (Accessed on Apr. 22, 2018).

services in Turkey.<sup>237</sup> 3 % of the world's population moves abroad to receive better healthcare services.<sup>238</sup> Thanks to its geo-politic and strategic position, Turkey's potential in health tourism provides benefit in its health diplomacy activities. As stated by the Vice-minister of Culture and Tourism in the 7th International Forum on Health Diplomacy and Tourism, health diplomacy's importance has increased with the raise of global disease and hence its effective use as a tool in international politics is more than necessary.<sup>239</sup> Not only for combatting diseases, but also for providing sustainable economic development, Turkish health diplomacy includes health tourism that provides an important asset in economic and political terms.

### **6.5 Foreign Aid in Health Perspective**

As highlighted above, an important tool of soft power is the investments of states on foreign aid.<sup>240</sup> This is a source of prestige for donor countries that contributes to their positive image and gain sympathy of local people through foreign aid while keeping national security and economic interests.<sup>241</sup> Especially in African continent, an important issue that remains to be solved is the common disease and emergency health services, which is crucial for the world's health situation. For many years, many African countries have suffered from AIDS and Malaria and continue to deal with these disasters and many others.<sup>242</sup> This is why the important part of foreign aid policy

---

<sup>237</sup> Yazan Tevfik, Girgin Ahmet, Karadağ Erkan. "Health Tourism in Turkey." *Khazar Journal of Humanities and Social Sciences*, Khazar University Press 2017. DOI: 10.5782/kjhss.2017.5.17.

<sup>238</sup> Kördeve, Mustafa K. "Sağlık Turizmine Genel Bir Bakış ve Türkiye'ni Sağlık Turizmindeki Yeri." *Uluslararası Sağlık Yönetimi ve Stratejileri Araştırma Dergisi*. 2016. Cilt 2, Sayı 2. ISSN: 2149-6161.

<sup>239</sup> "Türk Asya Stratejik Araştırmalar Merkezi. "Sağlık Diplomasisi Ve Turizmi Edirne'de". Available at: [www.tasam.org/tr/TR/Icerik/5402/saglik\\_diplomasisi\\_ve\\_turizm\\_edirmede](http://www.tasam.org/tr/TR/Icerik/5402/saglik_diplomasisi_ve_turizm_edirmede) (Accessed on May 26, 2018).

<sup>240</sup> Nye, Joseph. "Public Diplomacy and Soft Power." *The Annals of the American Academy of Political and Social Science*. Vol 616, Issue 1, pp. 94 – 109, 2008.

<sup>241</sup> Lancaster, Carol. "Foreign Aid: Diplomacy, Development, Domestic Politics." *The University of Chicago Press Book*, 2007.

<sup>242</sup> Eline L. Korenromp, Brian G. Williams, Sake J. de Vlas, Eleanor Gouws, Charles F. Gilks, Peter D. Ghys and Bernard L. Nahlen. "Malaria Attributable to the HIV1 Epidemic, Sub-Saharan Africa." *Emerging Infectious Diseases*. 2005;11(9):1410-1419. doi:10.3201/eid1109.050337.

of countries towards Africa remains on health investments. Turkey, at state-level and through non-states actors, makes an important effort on recovering world's most affected countries, particularly in the African continent.<sup>243</sup> The development assistance amount of Turkey to Sub-Saharan African countries was 330 thousand USD in 2000; this increased to 105, 3 million USD in 2008 and achieved 395, 77 million USD in 2015.<sup>244</sup>

As discussed by scholars, either for increasing its effectiveness on soft power in order to achieve to gain international fame, or to give the idea and make their citizens believe to the fact that Turkey will be one of the biggest donor of the world through increasing foreign aid, many states and non-states actors collaborate with international agencies and institutions on promoting the development in healthcare and trying to enhance health capacity building of states.<sup>245</sup> In this regard, Turkish Foreign Policy gives priority to its relations with African countries and since its Policy of Outreach in 2005, many bilateral and multilateral organizations, and conventions have been realized; the Turkish Government supports every single initiative of Turkish state and non-state actors across the continent.<sup>246, 247</sup>

---

<sup>243</sup> Onur, Serhat. "Türkiye'nin Afrika Medikal Diplomasisi." Association of Researchers on Africa. Available at: <https://www.afam.org.tr/turkiyenin-afrika-medikal-diplomasisi/> (Accessed on 24 Apr. 2018).

<sup>244</sup> Organization for Economic Cooperation and Development (OECD). Turkey's Official Development Assistance (ODA). Available at: <http://www.oecd.org/dac/stats/turkeys-official-development-assistanceoda.htm> (Accessed on 24 Apr. 2018).

<sup>245</sup> Evren Mehmet. "Turkey's Foreign Aid: Who Is the Target Audience?" USC Center on Public Diplomacy. 2015. Available at: <https://uscpublicdiplomacy.org/blog/turkey%E2%80%99s-foreign-aid-who-target-audience> (Accessed on March 2, 2018).

<sup>246</sup> Baird, Theodore. "The geopolitics of Turkey's 'humanitarian diplomacy' in Somalia: a critique." 2016. *Review of African Political Economy* 43:149, pages 470-477.

<sup>247</sup> Oğurlu, Ebru. "The African Opening in Turkish Foreign Policy." *Research Journal of Politics, Economics and Management*. October 2017. Vol:5, Issue:5 P-ISSN: 2147-6071.

The most important institutional tool of Turkey in foreign aid is the *Turkish Cooperation and Coordination Agency (TİKA)*, established in 1992, under the root of the Ministry of Foreign Affairs but later transferred to the Prime Ministry. TİKA defines its aims as trying to build up the procreation of the own social structure of the developing countries, their construction of an identity in a sustainable way, and the remedy of deficiencies of their technical infrastructures.<sup>248</sup> Given this circumstance, TİKA conducts diverse projects in 170 countries in order to develop and enhance the capacity building of the socio-economic situations of countries in need; the first TİKA Office was inaugurated in Turkmenistan. Today, there are 48 TİKA Coordination Offices, under the root of which cooperation activities are conducted. The official development assistance of Turkey through TİKA in 2016 is counted as 7, 943 billion USD. Among the 17 Sustainable Development Goals, one of the major issues is the improvement of health in all sectors and in all countries. Especially the maternal and child health which is the greatest problem in African countries causing the death of many people is handled by TİKA under the scope of many projects. The global health services and the economical capacities of reaching medicines are the priorities of Turkey's foreign aid in health areas.<sup>249</sup>

*The Ministry of Health of the Republic of Turkey* also conducts health aid and investment activities as well as cooperates with states.<sup>250</sup> One of the recent and important project was the development assistance to Somalia including the construction of hospitals and orphanages.<sup>251</sup> In Jarabulus city of Syria, a Turkish

---

<sup>248</sup> Denizhan, Emrah. "Türkiye'nin Kafkasya ve Orta Asya Politikası ve TİKA." *Sosyal ve Beşeri Bilimler Dergisi* 2 (2015): 17-23.

<sup>249</sup> Turkish Cooperation and Coordination Agency Official Website. Annual Report, 2016. Available at: [http://www.tika.gov.tr/en/publication/list/tika\\_annual\\_reports](http://www.tika.gov.tr/en/publication/list/tika_annual_reports) (Accessed on 25 Dec. 2017).

<sup>250</sup> T.C. Sağlık Bakanlığı Resmi İnternet Sayfası. 2016 Faaliyet Raporu. Available at: [https://sbu.saglik.gov.tr/Ekutuphane/kitaplar/faaliyet\\_raporu\\_i%C3%A7.pdf](https://sbu.saglik.gov.tr/Ekutuphane/kitaplar/faaliyet_raporu_i%C3%A7.pdf) (Accessed on Apr. 22, 2018).

<sup>251</sup> Akpınar, Pınar. "Turkey's Peacebuilding in Somalia: The Limits of Humanitarian Diplomacy." *Turkish Studies*, 2013: 14:4, 735-757, DOI: 10.1080/14683849.2013.863448.



Hospital with 60 bed capacities was founded.<sup>252</sup> The Turkish Ministry of Health provides many training courses for health personnel of many countries, with whom it has signed Protocols/Conventions. Under the scope of bilateral agreements on the support to treatments in Afghanistan, Soudan, Yemen, Kosovo, Azerbaijan, Albania, Niger and Kirghizstan, about 2000 patients were medically treated in Turkey between 2012-2016.<sup>253</sup> Among the investment and foreign health aids, the Ministry of Health also organizes ministerial sessions under the scope of different congress and meetings in Turkey, where Ministers of Health are hosted in order to discuss current sanitary situations in their regions.<sup>254</sup> The Directorate of Foreign Affairs and EU of the Ministry of Health is the main body that conducts and follows diplomatic relations on health issues with foreign countries and regional as well as international organizations.

The table below shows the amount of Turkey's Official Development Assistance in 2014 and 2015 and the top ten recipient countries. The amount in 2014 as 3591 million USD increased to 3919 million USD in 2015. The majority of the ODA goes to Syrian Arab Republic, considering the current conflictual situation and the geo-strategic position of Turkey, the first recipient country is its neighbor in the difficult situation.

The table below shows the amount of Turkey's Official Development Assistance in 2014 and 2015 and the top ten recipient countries. The amount in 2014 as 3591 million USD has increased to 3919 million USD in 2015. The majority of the ODA goes to Syrian Arab Republic, considering the current conflictual situation and the geo-strategic position of Turkey, the first recipient country is its neighbor in difficult situation.

---

<sup>252</sup> T.C. Sağlık Bakanlığı Resmi İnternet Sayfası. 2016 Faaliyet Raporu. Available at: [https://sbu.saglik.gov.tr/Ekutuphane/kitaplar/faaliyet\\_raporu\\_i%C3%A7.pdf](https://sbu.saglik.gov.tr/Ekutuphane/kitaplar/faaliyet_raporu_i%C3%A7.pdf) (Accessed on Apr. 22, 2018).

<sup>253</sup>Turkish Cooperation and Coordination Agency Official Website. Annual Report, 2016. Available at: [http://www.tika.gov.tr/en/publication/list/tika\\_annual\\_reports](http://www.tika.gov.tr/en/publication/list/tika_annual_reports) (Accessed on 25 Dec. 2017).

<sup>254</sup> T.C. Sağlık Bakanlığı Resmi İnternet Sayfası. 2016 Faaliyet Raporu. Available at: [https://sbu.saglik.gov.tr/Ekutuphane/kitaplar/faaliyet\\_raporu\\_i%C3%A7.pdf](https://sbu.saglik.gov.tr/Ekutuphane/kitaplar/faaliyet_raporu_i%C3%A7.pdf) (Accessed on Apr. 22, 2018).

Table 2

<b>Net ODA</b>	<b>2014</b>	<b>2015</b>	<b>Change 2014/15</b>
Current (USD m)	3591	3919	9%
Constant (2015 USD m)	3101	3919	26%
In Turkish new lira (millions)	7861	10672	36%
ODA/GNI	0,45%	0,50%	
Bilateral share	98%	98%	

Source: OECD, International Development Statistics. Turkey's Official Development Assistance. <http://www.oecd.org/dac/stats/turkeys-official-development-assistanceoda.htm> (Accessed on Apr. 22, 2018).

## **6.6 Relation and Cooperation with WHO and other Regional and International Organizations**

Turkey is one of the founding members of the World Health Organization, the most important international organization focusing on world's health issues and takes actively part in the organization's activities. WHO and Turkey signed the first Convention in 1950, which consists on developing health projects through technical cooperation, on which works deepened after the inauguration of WHO Office in

Ankara.<sup>255</sup> The main basic areas that focused these projects were the fight against tuberculosis, the project on public health, maternal and infant health projects and the eradication of malaria.<sup>256</sup> Turkey also cooperates with the other related bodies of the United Nations such as UNEP and UNICEF on health issues. Turkey respects and achieves the major objectives of WHO on global public health. The international tobacco treaty of WHO can be cited as an example. This treaty was declared in 2003, however, Turkey had already implemented its first Anti-Tobacco Law in 1998 and this has been extended to include public closed areas.<sup>257</sup>

Another important collaborator of Turkey on regional level is the European Union, with which it conducts close socio-economic and political relations and tries to be harmonized with the EU *acquis* in order to acquire full membership.<sup>258</sup> As partners, EU and Turkey has cooperated in important areas of health since the 1950's in order to contribute to global health. Considering this, Turkey, in order to fulfill legislative alignment, has shaped its national health reforms by taking into consideration the EU Conventions on Health, which are defined on the Article 129 of Maastricht Treaty signed between EU Members in 1991 and give priority in the fight against HIV/AIDS, labor safety, fight against pollution and politics on drugs in the field of health.<sup>259</sup> Besides the legal context, Turkey and EU also actively take part in mutual programs on global health and EU is one of the biggest health projects founders in Turkey. Considering that Turkey hosts more than 3 million refugees coming from neighboring

---

<sup>255</sup> T.C. Sağlık Bakanlığı Resmi İnternet Sitesi. Dış İlişkiler Dairesi Başkanlığı “Türkiye-DSÖ İlişkileri”, 2000. Available at: <https://sbu.saglik.gov.tr/Ekutuphane/> (Accessed on Apr. 22, 2018).

<sup>256</sup> T.C. Sağlık Bakanlığı Resmi İnternet Sitesi. Dış İlişkiler Dairesi Başkanlığı “Türkiye-DSÖ İlişkileri”, 2000. Available at: <https://sbu.saglik.gov.tr/Ekutuphane/> (Accessed on Apr. 22, 2018).

<sup>257</sup> Bilir, Nazmi. “Level of Tobacco in Turkey”, *Tur Toraks Dergisi*. 2009;10:31-4, ISSN: 1302-7808.

<sup>258</sup> Schimmelfennig, Frank. “Entrapped again: The way to EU membership negotiations with Turkey.” *ETH Zurich, Center for Comparative and International Studies (CIS), International Politics Vol. 46, 4, 413-431.*

<sup>259</sup> Devlet Planlama Teşkilatı. Avrupa Birliği Genel Müdürlüğü. “Türkiye ve Avrupa Birliği’ndeki Sağlık Politikaları ve Göstergelerinin Karşılaştırılması.” 1997. Available at: <https://sbu.saglik.gov.tr/Ekutuphane/> (Accessed on Apr. 22, 2018).

countries, EU assists in providing health care services and other humanitarian assistances to support Turkey in taking charge of them.<sup>260</sup><sup>261</sup>

As a Member of the Council of Europe, Turkey has sent Delegates within the Social Affairs, Health and Sustainable Development Department of the Parliamentary Assembly of the Council of Europe, which facilitates the report and information and knowledge exchange in issues relating to social rights and policies, public health, sustainable development, economic co-operation and development, local and regional democracy and good governance.<sup>262</sup> Turkey is also an active Member of the Organization of Islamic Cooperation, with which it conducts special programs on health issues. One of the bodies of OIC, the Statistical, Economic and Social Research and Training Centre for Islamic Countries-SESRIC is based in Ankara.<sup>263</sup> Through this institution, an Ibni Sina Health Alliance was initiated in order to organize health training programs and enhance the capacity of Ministries of Health of OIC Members.<sup>264</sup> In this context, every two years since 2007, the Islamic Conference of Health Ministers of OIC Members has been held in order to discuss the current situation of health in their countries and adopt new policies.<sup>265</sup> In their meetings in

---

<sup>260</sup> European Commission Official Website. “European Civil Protection and Humanitarian Aid Operations.” 2018. Available at: <http://ec.europa.eu/echo> (Accessed on March 3, 2018).

<sup>261</sup> Council of Europe Development Bank. “CEB and the European Union sign a Delegation Agreement for a health infrastructure project in Turkey.” News and Publications, November 2017. Available at: <https://coebank.org/en/news-and-publications/news/ceb-and-european-union-sign-delegation-agreement-health-infrastructure-project-turkey/> (Accessed on March 3, 2018).

<sup>262</sup> Council of Europe Official Website. “Social Affairs, Health and Sustainable Development Department of the Parliamentary Assembly.” 2018. Available at: [http://website-pace.net/en\\_GB/web/as-soc/main](http://website-pace.net/en_GB/web/as-soc/main) (Accessed on March 3, 2018).

<sup>263</sup> Organization of Islamic Cooperation. The Statistical, Economic and Social Research and Training Centre for Islamic Countries (SESRIC) Official Website. 2018. Available at: <http://www.sesric.org> (Accessed on March 3, 2018).

<sup>264</sup> Ibid.

<sup>265</sup> Organization of Islamic Cooperation Official Website. “Activities on Health.” 2018. Available at: <http://www.sesric.org/health/activities-health.php> (Accessed on March 3, 2018).

2013, OIC Members' Ministries of Health adopted the Implementation Plan of the OIC Strategic Health Program of Action 2014-2023.<sup>266</sup> Turkey is one of the early achievers of the targets, by which it was aimed to eradicate extreme poverty and hunger, reducing child mortality, improving maternal health, combatting for totally and eradicating HIV/AIDS and Malaria and is ongoing to achieve until 2023 the objective of environmental sustainability promoting the public health safety.<sup>267</sup> Turkey also hosted the 5th Islamic Conference of Health Ministers in 2015 and shared the health report prepared by SESRIC on the state of health in OIC countries.<sup>268</sup> Turkey continues to enhance its cooperation with other national, regional and international state and non-state actors within the view to contribute to global health, but also to its international fame.

## **6.7 Conclusion**

This chapter has examined the case of Turkish health diplomacy, as an extent to global health diplomacy. In the view of international politics, similar to the case of Brazil, Turkey's health diplomacy activities consist mostly on increasing its soft power. Considering this, Turkey's vision on global health is based on offering its national health policy as a model for developing countries. Turkey's desire to increase its power as an emerging economy leads the country to conduct a foreign policy through a humanitarian diplomacy. This is providing the increase in the amount of the foreign aid. Since its Policy of Outreach to the African continent, Turkey has conducted its foreign aid activities in African states. As the "south-south cooperation" strategy of Brazil, Turkey rests on a flexible dimension that defends sustainability for recipient countries instead of dependency. Among these foreign aid activities and humanitarian assistances, health has a great share. The chapter has analyzed that, at a governmental

---

<sup>266</sup> The Statistical, Economic and Social Research and Training Centre for Islamic Countries (SESRIC) Official Website. 2018. "OIC Strategic Health Programme of Action 2014-2023." Available at: <http://www.sesric.org> (Accessed on March 3, 2018).

<sup>267</sup> Ibid.

<sup>268</sup> Organization of Islamic Cooperation Official Website. "Activities on Health." 2018. Available at: <http://www.sesric.org/health/activities-health.php> (Accessed on March 3, 2018).

level, two main bodies, TİKA and the Ministry of Health are the main executors of Turkish health diplomacy. What Turkey needs is a foreign health policy like US and Switzerland, which will facilitate to pursue the foreign policy objectives in a much more structural and formal framework. In the current situation, Turkey's cooperation with regional organizations and its bilateral negotiations underlie its health diplomacy. Through a separate foreign policy strategy on health, Turkey's initiatives on global health and the governance coordination will have a sophisticated aspect. The well-received national health policy of Turkey has been designated as successful by many reputed organizations and states; Turkey has carried out this success at a global stage and showed that it wants to contribute to the global health for the human dignity, considering that health is the right of everyone. With a relevant foreign health policy, Turkey will have a road map to further its diplomatic relations in health-related areas on a more institutional framework.

## CHAPTER 7

### CONCLUSION

The changing landscape of the international scene, the technological development at the end of the 1900's and the beginning of the 21st Century with also the changing world order have made necessary to cooperate and negotiate not only at state-level and on traditional issues such as war, peace or economy, but also on “new” soft areas that necessitate to be handled separately. As a consequence of this shift, diplomacy has become more global and fragmentary. Various factors such as climate change, effects of globalization induced by new technological research, global social change, migration, displaced people's movement and the spread of diseases affect the direction and goals of governments' foreign policy. The outbreak and spread of a disease create a problem that becomes rapidly regional and sometimes global. Considering that health is related with the socio-economic conditions of states, its development and amelioration contribute to all sectors and fragments of societies. Besides this, it plays an important role in states' international relations. The spread of HIV/AIDS is a concrete example of this in that the public health, life quality and economy of Sub-Saharan African countries have been affected and their international relations have deteriorated. Global health issues need global cooperation and coordination; for this reason, to improve health of countries, especially having difficulties to deal with communicable and non-communicable diseases by themselves necessitates a strong collaboration among state and non-state actors as well as multistakeholders' negotiators. The global initiatives of different regional and international actors, independent of political benefits, have contributed to ameliorate health in different countries.

In international politics, one of the important issues that push decision-makers and political actors is health issues; they are connected with national security, as analyzed in the case of US. Not only traditional issues such as peace and war, but also modern subjects such as health are now in the agenda of states' foreign policies. Another important concept dominant in foreign policies is soft power defined as “the ability of

a country to persuade others to do what it wants without force or coercion.”<sup>269</sup> As a component of public diplomacy, soft power is also applicable for a state’s health diplomacy. Today, more and more states are including health in their foreign policy through a specific strategy, like Brazil, but they also implement a foreign health policy prepared within the collaboration of Ministries of Health and Ministries of Foreign Affairs, as in the case of Switzerland. This Swiss initiative was regarded as a model at the international level in 2006.

Discussing global health issues and trying to find common solutions to common problems need the coordination and collaboration among not only states but also different actors such as international and non-governmental organizations. This is why global health diplomacy is today an important subject of international politics that deserve to be more studied and analyzed in order to be able to develop and better understand global actions and practices of state and non-state actors in an institutional framework. Depending on their priorities, many global actors are now actively diplomatizing health at regional and international level. The principal actor in this term is the World Health Organization. As analyzed through this thesis, WHO, as an intergovernmental organization, is the leading global governor to have the capacity to gather members through its network in order to discuss global health issues. It also encourages member states to implement a foreign health policy in order to politically structuralize health-related diplomatic relations of states. WHO’s engagement in health diplomacy as a global actor in health is hold on since its creation.

Considering all of these factors, this thesis has argued that states pursue sometimes cooperative sometimes conflictual health diplomacies at the national and global levels, since they have their own self-interest regarding the health policies. Through the cases of the United States of America, Switzerland, Brazil and Turkey, I have analyzed how world’s powers and emerging economies use health as a foreign policy tool in order to achieve their national objectives. While sometimes cooperation remains at the forefront of foreign health activities of countries such as the case of Switzerland, health diplomacy strategy can also be an important tool that is used to explain countries’

---

<sup>269</sup> Nye, Joseph. “Soft Power: The Means to Success in World Politics. 2004. Foreign Policy No. 80.



national interests and security, as for US. For emerging economies such as Brazil and Turkey, health diplomacy has a more pragmatic aspect aiming to increase international fame through foreign health aid or assistance to developing countries.

From a realistic perspective, as a theoretical framework of international relations, health is a strategic tool that may serve to national and security interests not only to ensure national security, but also to contribute to the positive image of states that give priority to health interventions in foreign policy. One of the US foreign policy's objectives, winning hearts and minds of people and its interventions in Afghanistan under the name of contributing to population's health also have deeper causes such as ensuring national security and economic interests.<sup>270</sup> As a source of prestige, health interventions give states a better image and a stronger voice in international fora, as in the case of Brazil.<sup>271</sup> Scholars have made so much important research that they have defended that it is not random that countries give place in their foreign policy agendas specific issues on global health; they are chosen according to their level of influence to their national security and economic activities.<sup>272</sup>

The first chapter is the introductory part of this thesis. I initiated by describing the scope and objective and the literature review on the subject. Then, I explained the main argument of this thesis, which defends that states have their own self-interests regarding the health policies at the national and international level and explicated the methodology. The first chapter ended with the organization of the thesis.

---

<sup>270</sup> Brigety, Reuben E. "Humanity as a Weapon of War. Sustainable Security and the Role of the US Military." Washington D.C.: Center for American Progress. Available at: [https://cdn.americanprogress.org/wp-content/uploads/issues/2008/06/pdf/sustainable\\_security2.pdf](https://cdn.americanprogress.org/wp-content/uploads/issues/2008/06/pdf/sustainable_security2.pdf) (Accessed on May 15, 2018).

<sup>271</sup> Gomez, Eduardo. "Brazil's blessing in disguise. How Lula turned an HIV crisis into a geopolitical opportunity." *Foreign Policy*. 2009 July. [http://www.foreignpolicy.com/articles/2009/07/22/brazils\\_blessing\\_in\\_disguise](http://www.foreignpolicy.com/articles/2009/07/22/brazils_blessing_in_disguise) (Accessed on Apr. 28, 2018).

<sup>272</sup> Rebecca Katza and Daniel Singer A. "Health and security in foreign policy." *Bulletin of the World Health Organization* (2007) Special Theme Vol. /85/3/06-036889.

In the second chapter, I analyzed the leading role of the World Health Organization as the key actor on global health diplomacy. It is worth noting that, as an inter-governmental organization unique in its case, WHO's global leadership in health governance has a critical role for health. The background, structure and activities as well as relations with state and non-state actors have been explicated in details in order to better understand how relevant and important the presence of such an institution is. Through its international norms and regulations on global health and monitoring functions, WHO is effective in gathering and coordinating multi-stakeholder actors, as a principle and necessity of global health diplomacy.

In the third chapter, I examined the case of US. The perspective of US towards global health seems to have national and security interests' sides. US health diplomacy, while searching for achieving global cooperation for contributing to health issues, also aims to pursue foreign policy interests, which is well-established through a health diplomacy strategy. Through promoting the health and well-being of its nation providing leadership at global level in science and health as well as protecting national interests by the international politicization of health, US both aims to contribute to global health and considers its self-interest.

In the fourth chapter, I handled the case of Switzerland, which has the world's better sanitary system and national health policy. Thanks to its foreign health policy, Switzerland is the first country to implement such a policy, which will enhance its capacity on playing a world's leading role in global health governance. While it ensures its national economic interests by strengthening relations and cooperation on medical industries with state and non-state actors, Switzerland is decisive on making access all individuals to healthcare services. Its national health policy is a road map for making it an example to developing countries. Switzerland contributes to global health but is also successful in protecting its national interests while developing technical assistance and providing foreign aid.

Through the chapter 5, I examined Brazil's positions on global health diplomacy, its policies and actions. Brazil is a signatory of countries committed to implement a foreign health policy that is one of the most important development in Brazil's health

diplomacy. Brazil's national health policies and strategies to fight against common diseases have been internationally well-recognized and accepted as a good example for similar country cases. While increasing its international fame through its technical cooperation assistance to especially Southern countries, inter and extra multi-lateral organizations and bilateral relations, Brazil also aims to transfer its reformed national health policy on a global scale as a model for states.

In the chapter 6, I dealt with the case of Turkey. Turkey has not had a foreign health policy yet; its foreign health activities are mainly based on humanitarian aid. As a core value of its foreign policy, Turkey's foreign aid is generally provided to geo-strategically and diplomatically important countries, by which African countries and its neighbors can be cited as example. Turkey aims to continue to use the soft side of foreign aid in order to gain an international prestige and play a leading role in humanitarian initiatives. Similar to the case of Brazil, Turkey's health diplomacy can be analyzed through its assistance initiatives based on self-sufficiency and sustainability to developing countries.

Fidler argues that states have two main objectives in integrating health into foreign policy; the first one is to make foreign policy as a response to specific health threats, such as the cross-border spread of communicable diseases, that generate international problems; and the second one is to use foreign policy for a health-related cooperation in order to pursue non-health objectives, such as utilizing health assistance to increase a state's influence or secure better relations with other states.<sup>273</sup> Considering this, the approaches of US, Switzerland, Brazil and Turkey to global health diplomacy are seen in this thesis as conflictual with not always the sole objective of contributing to global health.

US seems to pursue national security interests through diplomatic activities in health-related areas. It aims to increase its power and influence in countries where it intervenes through health diplomacy and by gaining hearts and minds of recipient countries' populations. US is the largest donor country in foreign aid and its foreign

---

<sup>273</sup> Fidler, David. "Health as foreign policy: Between principle and power." *The Whitehead Journal of Diplomacy and International Relations* 2004;Summer/Fall:179-94.

aid projects are generally based on providing direct assistance through different schemes instead of developing sustainability. This strategy ensures dependency of recipient countries to the donor. This different approach from Switzerland's case demonstrates the perspective of US towards using health for its own national and security interests while maintaining global leadership in health-related area at the global stage.

Contrary to US, Switzerland, one of the most prosperous country in the world, has a mission not only to achieve national objectives through health, but also to contribute to global health, as it believes that health is the right of everyone. The main motivation of Switzerland is to present its national health policy, which assures a global health coverage of all citizens, to the international level for ensuring the system in every country. The governmental initiatives are majorly based on providing technical cooperation by which self-sufficiency and sustainable development will be achieved. Even if it collaborates with important national and international organizations such as WHO, US acts generally on its own behalf on foreign aid. Contrary to US, believing that it will facilitate cooperation and development, Switzerland prefers to collaborate with third parties. However, it is the economic side of health diplomacy that contributes to national Swiss interests. Thanks to its developed medical industries, Switzerland's medical firms are one of the biggest medicine providers recognized worldwide. Switzerland seems to pursue the first objective argued by Fidler; it is more concerned on the health threats. Considering this, Switzerland has a more cooperative approach to global health diplomacy and is more concerned with global health security, contrary to the other three states. It defends that global health issues threaten all individuals and to solve them needs international cooperation and coordination. This is why the foreign health policy strategy of Switzerland has a realistic and pragmatic vision for protecting health of firstly its own population and then the world's one. The approaches of Brazil and Turkey are similar to US and Switzerland but differentiate in term of practices. These two emerging regional powers pursue a national interest within the view to increase their international fame through the health diplomacy. Their preference in a work area is constituted generally from countries, to which they give privilege in foreign policy. They wish to aim to increase their

influence in recipient countries and use their soft power to achieve this. Like US, Brazil and Turkey want to use the unique opportunity to lead in the area of cooperative international engagement by placing health on the agenda of foreign policy. Brazil seems to have a more structural side as it initiated the implementation of a foreign health policy by committing itself in Oslo to do this in the nearly future. Turkey acts more on developing strategies for foreign health activities and negotiations. Their techniques of cooperation are different from US and much more similar to those of Switzerland. The nature of their foreign aid projects is shaped by initiatives based on developing sustainability.

According to this, as donors, they highlight the importance of providing a technical cooperation rather than an assistance; they believe that this will ensure the self-sufficiency of recipient countries and offer long-term solutions. To achieve this, they give a large amount of foreign aid to health and develop relations under the root of their governmental and non-governmental agencies with states and also cooperate with international organizations. From the perspective of Fidler's approach, health serves to foreign policy of Brazil and Turkey by helping them to achieve their national objectives through health-related initiatives. The fact that Brazil has developed a "South-South Cooperation" especially among Portuguese-speaking countries has provided Brazil to play a leading role among participating countries on the region. Similarly, Turkey gives priority to countries, with which it has historical ties and friendly relations. The strategies of Brazil and Turkey seem to help them to provide the capacity of being a powerful regional actor.

It can be concluded that the prioritization of health in the foreign policy agenda of states depends on their strategic interests, however, it is hereby with this thesis necessary to highlight that a comprehensive foreign health policy prepared in collaboration with Ministries of health and foreign affairs facilitates the coordination of global health activities and the international health negotiations. Countries having a structured foreign health policy can pursue their national interests while claiming that they contribute into global health diplomacy, but where a policy is not developed, the absence of road map will engender difficulties in terms of healthfully progression. This study has analyzed the approach of four important states to global health diplomacy.

Even though some disparities, the main finding in their visions to global health and foreign policy is that they are willing to pursue national interests instead of a concern on global health. More studies are needed to better identify the real cause of states in integrating health into their foreign policies and understand the nexus of health and foreign policy.

## REFERENCES

Abdenur, Adriana. "The Strategic Triad: Form and Content in Brazil's Triangular Cooperation Practices" 2006. International Affairs Working Paper 2007-06. New York: The New School.

Adams Vincanne, Thomas Novotny, and Hannah, Leslie. (2008). "Global Health Diplomacy." *Medical Anthropology* 27(4):315–23.

Agreement on foreign health policy objectives. Adopted by the Swiss Federal Department of Foreign Affairs and the Swiss Federal Department of Home Affairs in Berne, Switzerland, on 9 October 2006. Available at: [www.bag.admin.ch/international](http://www.bag.admin.ch/international) (Accessed on Apr. 16, 2018).

Akinci, Fevzi. "Assessment of the Turkish health care system reforms: A stakeholder analysis." *Health Policy* Volume 107, Issue 1, 21 – 30, 2012.

Akpınar, Pınar. "Turkey's Peacebuilding in Somalia: The Limits of Humanitarian Diplomacy." *Turkish Studies*, 2013: 14:4, 735-757, DOI: 10.1080/14683849.2013.863448.

Almeida Celia, Pires de Campo Rodrigo, Buss Paulo, Ferreira Jose R., Fonseca Luiz E. "Brazil's conception of South-South "structural cooperation" in health." 2010. *Review Global Forum Update on Research for Health Innovating for the health of all*, 2009, Vol. 6: 100-107. ISBN 978-2-940401-24-6.

Altunışık, Meliha. "The Possibilities and Limits of Turkey's Soft Power in the Middle East." *Insight Turkey* Vol. 10 / No. 2 / 2008 pp. 41-54.

Amado, Cervo and Antonio Lessa. "An assessment of the Lula era (2003–2010)." *Revista Brasileira de Política Internacional*. 2010. Vol 53, p 6.

Arne, Ruckert, Ronald Labonte, Raphael Lencucha, Vivien Runnels, Michelle Gagnon. "Global health diplomacy: A critical review of the literature" *Social Science & Medicine, Review Article*, 2016. Available at: <https://sites.sph.harvard.edu/hhrjournal/2013/10/will-the-struggle-for-health-equity-and-social-justice-be-best-served-by-a-framework-convention-on-global-health/>

(Accessed on Apr. 16, 2018).

Baird, Theodore. "The geopolitics of Turkey's 'humanitarian diplomacy' in Somalia: a critique." 2016. *Review of African Political Economy* 43:149, pages 470-477.

Barston, Ronald P. "Modern Diplomacy." Fourth Ed. Routledge 2006.

Beaglehole, Robert, and Ruth Bonita. "What Is Global Health?" *Global Health Action* 3 (2010): 10.3402/gha.v3i0.5142. PMC.

Beigbeder, Yves. "L'Organisation mondiale de la santé." Nouvelle édition. Genève: Graduate Institute Publications, 1995.

Bilir, Nazmi. "Level of Tobacco in Turkey", *Tur Toraks Dergisi*. 2009;10:31-4, ISSN: 1302-7808.

Bill and Melinda Gates Foundation. "2003 Gates Award for Global Health - Brazilian National AIDS Program." Press Release and Statement. Available at: <https://www.gatesfoundation.org/Media-Center/Press-Releases/2003/05/Brazilian-National-AIDS-Program> (Accessed on May 1, 2018).

Bliss Katherine E. "Health in All Policies; Brazil's Approach to Global Health within Foreign Policy and Health Cooperation Initiatives. Key Players in Global Health: How



Brazil, China, India, Russia and South Africa are influencing the Game.”2010. Washington: Center for Strategic and International Studies Global Policy Center.

Bourne, Peter.” A Partnership for International Health Care.” Centers for Disease Control. Public Health Reports 93(2): 114-23. CDC 1978.

Brainard, Lael. “Security by other means: Foreign Assistance, global poverty and American leadership.” Brookings Institution. Library Congress Catalogue. 2007.

Brazilian Agency for Cooperation Official Website. Introdução, Agência Brasileira de Cooperação. Available at: <http://www.abc.gov.br/abc/introducao.asp> (Accessed on Feb. 5, 2018).

BRICS Health Ministers Meetings. 2011. BRICS Health Ministers Meeting Beijing Declaration. Available at: <http://keionline.org/node/1183> (Accessed 25 Apr. 2018).

Brigety, Reuben E. “Humanity as a Weapon of War. Sustainable Security and the Role of the US Military.” Washington D.C.: Center for American Progress. Available at: [https://cdn.americanprogress.org/wpcontent/uploads/issues/2008/06/pdf/sustainable\\_security2.pdf](https://cdn.americanprogress.org/wpcontent/uploads/issues/2008/06/pdf/sustainable_security2.pdf) (Accessed on May 15, 2018).

Buss Paul M., Ferreira Jose R. “Critical essay on international cooperation in health.” 2010. Revista Eletrônica de Comunicação Informação & Inovação em Saúde , 2010, vol. 4 (pg. 86-97).

Buss, Paulo. “Brazil: structuring cooperation for health.” (2011). The Lancet, DOI:10.1016/S0140-6736(11)60354-1.

Carlo De Pietro, Paul Camenzind, Isabelle Sturny, Luca Crivelli, Suzanne Edwards-Garavoglia, Anne Spranger, Friedrich Wittenbecher, Wilm Quentin. "Switzerland: Health system review. *Health Systems in Transition*." 2015; 17(4):1–288.

Centre for Economics and Business Research. "Brazil has overtaken the UK's GDP." News release, 26 December 2011. Available at <http://www.cebr.com/wp-content/uploads/Cebr-World-Economic-League-Tablepress-release-26-December-2011.pdf> (Accessed on May 1, 2018).

Conseil Fédéral Suisse. Message concernant la continuation de l'aide humanitaire internationale de la Confédération, du 14 novembre 2001 (message 01.072).

Constitution of the World Health Organization. Geneva: World Health Organization; 1948. Available at: [http://www.who.int/governance/eb/who\\_constitution\\_en.pdf](http://www.who.int/governance/eb/who_constitution_en.pdf) (Accessed on Feb. 25, 2018).

Cooper, Robert. "The breaking of nations. Order and chaos in the 21st century." New York: Atlantic Monthly Press; 2003.

Council of Europe Official Website. "Social Affairs, Health and Sustainable Development Department of the Parliamentary Assembly." 2018. Available at: [http://website-pace.net/en\\_GB/web/as-soc/main](http://website-pace.net/en_GB/web/as-soc/main) (Accessed on March 3, 2018).

Council of the European Union. EU Council Conclusions on the EU role in global health. 2010. No. prev. 9505/10. Available at [www.europa-eu-un.org/articles/en/article\\_9727\\_en.htm](http://www.europa-eu-un.org/articles/en/article_9727_en.htm) (Accessed on Apr. 30, 2018).

Dabene, Olivier. «L'UNASUR: Le nouveau visage pragmatique du régionalisme sud-américain.» Political Outlook 2010. Observatoire politique de l'Amérique latine et des Caraïbes. CERI-Sciences Po.

Daulaire, Nils. "The Importance of the Global Health Strategy from the U.S. Department of Health and Human Services." The American Journal of Tropical Medicine and Hygiene 87.3 (2012): 382–384. PMC.

Dauvergne, Peter and Déborah BL Farias. "The Rise of Brazil as a Global Development Power, Third World Quarterly." 2012. 33:5, 903-917, DOI: 10.1080/01436597.2012.674704.

Deatsch A., Kratochvil and Thomas Neil Pascual. "The International Atomic Energy Agency's Activities in Radiation Medicine and Cancer: Promoting Global Health Through Diplomacy." Canadian Association of Radiologists Journal 64 (2013) 2e5.

Denizhan, Emrah. "Türkiye'nin Kafkasya ve Orta Asya Politikası ve TİKA." Sosyal ve Beşeri Bilimler Dergisi 2 (2015): 17-23.

Department of Defense. Directive on Military Support for Stability, Security, Transition, and Reconstruction (SSTR) Operations.

[https://fas.org/irp/doddir/dod/d3000\\_05.pdf](https://fas.org/irp/doddir/dod/d3000_05.pdf) November 28, 2005.

Devi, Sridhar. "Foreign Policy and Global Health: Country Strategies." Oxford Health and Foreign Policy Introduction, 2009.

Devlet Planlama Teşkilatı. Avrupa Birliği Genel Müdürlüğü. "Türkiye ve Avrupa Birliği'ndeki Sağlık Politikaları ve Göstergelerinin Karşılaştırılması." 1997. Available at: <https://sbu.saglik.gov.tr/Ekutuphane/> (Accessed on Apr. 22, 2018).

Eline L. Korenromp, Brian G. Williams, Sake J. de Vlas, Eleanor Gouws, Charles F. Gilks, Peter D. Ghys and Bernard L. Nahlen. "Malaria Attributable to the HIV1 Epidemic, Sub-Saharan Africa." *Emerging Infectious Diseases*. 2005;11(9):1410-1419. doi:10.3201/eid1109.050337.

Eric Lief, Julie E. Fischer. "The US Government's Global Health Policy Architecture: Structure, Programs, And Funding." (2009). Report on US Global Health Policy. The Kaiser Family Foundation.

Estimate calculated from data provided in World Health Organization's WHO Programmatic and Financial Report, 2014-2015. Available at: [http://apps.who.int/gb/ebwha/pdf\\_files/WHA69/A69\\_45-en.pdf](http://apps.who.int/gb/ebwha/pdf_files/WHA69/A69_45-en.pdf). (Accessed on Jan. 17, 2018).

Eugene Bonventre, Kathleen Hicks, and Stacy Okutani. "U.S. National Security and Global Health: An Analysis of Global Health Engagement by the U.S. Department of Defense." Report of the CSIS Global Health Policy Center Working Draft, 2009.

European Commission Official Website. "European Civil Protection and Humanitarian Aid Operations." 2018. Available at: <http://ec.europa.eu/echo> (Accessed on March 3, 2018).

Evren Mehmet. "Turkey's Foreign Aid: Who Is the Target Audience?" USC Center on Public Diplomacy. 2015. Available at: <https://uscpublicdiplomacy.org/blog/turkey%E2%80%99s-foreign-aid-who-targetaudience> (Accessed on March 2, 2018).

Federal Department of Foreign Affairs FDFA. International organizationsin

Switzerland, Available at:  
<https://www.eda.admin.ch/eda/en/home/foreign-policy/international-organizations/international-organizations-switzerland.html>  
(Accessed on Jan. 20, 2018).

Feldbaum, Harley and Michaud Josh. “Health diplomacy and the enduring relevance of foreign policy interests.” PLoS Medicine Global Health Diplomacy series. 2010. e1000226. doi:10.1371/journal.pmed.1000226.

Feldbaum, Harvey. “Building U.S. Diplomatic Capacity for Global Health.” Washington, DC. Centre for Strategic and International Studies. 2010.

Fidler, David. “Assessing the Foreign Policy and Global Health Initiative: The Meaning of the Oslo Process.” Chatham House, Centre on Global Health Security. Briefing Paper, 2011.

Fidler, David. “Health and Foreign Policy: Vital Signs.” *The World Today* 65 (2), 2009.

Fidler, David. “Health as foreign policy: Between principle and power.” *The Whitehead Journal of Diplomacy and International Relations*. (2004). Summer/Fall: 179-9.

Fidler, David. “Rise and Fall of Global Health as a Foreign Policy Issue.” *Global Health Governance*, NG 2011.

Fidler, David. “The globalization of public health: the first 100 years of international health diplomacy.” Special Theme, Globalization, *Bulletin of World Health Organization*, 79: 842–849. 2001.

Flynn, Matthew. "Brazilian Pharmaceutical Diplomacy: Social Democratic Principles Versus Soft Power Interests." *The Politics of the Pharmaceutical Industry*, 2013.

Frenk, Julio. "The global health system: Strengthening national health systems as the next step for global progress." *PLoS Med* 7(1). Available at: <http://www.plosmedicine.org/article/info%3Adoi%2F10.1371%2Fjournal.pmed.1000089> (Accessed on Jan. 20, 2018).

Frist, William H. "Medicine as a Currency for Peace Through Global Health Diplomacy." *Yale Law and Policy Review*: 2007. Vol. 26 : Iss. 1 , Article 5.

Gardier, Stéphanie. "Malgré une forte mobilisation internationale, l'argent manque encore contre le paludisme." *Le Monde Afrique*. Journal d'information. 2018. Available at :[https://www.lemonde.fr/afrique/article/2018/04/25/malgre-une-forte-mobilisation-internationale-l-argent-manque-encore-contre-le-paludisme\\_5290492\\_3212.html](https://www.lemonde.fr/afrique/article/2018/04/25/malgre-une-forte-mobilisation-internationale-l-argent-manque-encore-contre-le-paludisme_5290492_3212.html) (Accessed on Feb. 25, 2018).

Gates, Robert. "Helping Others Defend Themselves: The Future of U.S. Security Assistance." *Council on Foreign Relations. Foreign Affairs*, 2010. Vol. 89, No. 3, p.2-6.

Gilbert A, Cornuz J (2003). Which are the most effective and cost-effective interventions for tobacco control? Copenhagen, WHO Regional Office for Europe, Health Evidence Network report, Available at: <http://www.euro.who.int/document/e82993.pdf> (Accessed on Feb. 24, 2018).

Gillam, Stephen. "Is the Declaration of Alma Ata Still Relevant to Primary Health Care?" *BMJ: British Medical Journal* 336.7643 (2008): 536–538. PMC.

Giuliano Russo and Alex Shankland. "Brazil's engagement in health cooperation: what can it contribute to the global health debate?" Oxford University Press in association with The London School of Hygiene and Tropical Medicine, Health Policy and Planning, December 2013.

Global Health Programme. "Good Global Health Begins at Home: Policy Coherence at National Level." Global Health Diplomacy Briefing, Graduate Institute of Geneva, 2012.

Gomez, Eduardo. "Understanding Brazilian Global Health Diplomacy: Social Health Movements, Institutional Infiltration, and the Geopolitics of Accessing HIV/AIDS Medication." 2012. Global Health Governance, Volume Vi, Issue 1.

Gültekin, Bilgehan. "Türkiye'nin uluslararası imajında yükselen değerler ve eğilimler." Academic Journal of Selcuk İletişim, 2005.

Harmer, Andrew, Yina Xiao, Eduardo Missoni and Fabrizio Tediosi. "BRICS without straw"? A systematic literature review of newly emerging economies influences in global health." 2013. Globalization and Health, 9:15. doi:10.1186/1744-8603-9-15.

Hocking, Brian. "The End(s) of Diplomacy." International Journal, 53/1, p. 170. 1998.

Howard-Jones, Norman. "The scientific background of the international sanitary conferences." World Health Organization, 1975. [http://apps.who.int/iris/bitstream/handle/10665/62873/14549\\_eng.pdf?sequence=1](http://apps.who.int/iris/bitstream/handle/10665/62873/14549_eng.pdf?sequence=1)

Iliona Kickbusch, Nick Drager, Graham Lister, Michaela Told. "Global Health Diplomacy: Concepts, Issues, Actors, Instruments, Fora and Cases." (2013). DOI 10.1007/978-1-4614-5401-4\_2.

Ilona Kickbusch, Andrew Cassels, Austin Liu. “New Directions in Governing the Global Health Domain Leadership Challenges For Who.” Global Health Centre Working Paper No. 13, 2016.

Institute of Medicine (US) Committee on the US Commitment to Global Health. The US Commitment to Global Health: Recommendations for the New Administration. Washington (DC): National Academies Press (US); 2009. Progress in global health can be achieved now. Available at: <https://www.ncbi.nlm.nih.gov/books/NBK32625/> (Accessed on Apr. 28, 2018).

International Sanitary Regulations, World Health Organization, No. 2. Geneva, World Health Organization, 1951. WHO Technical Report Series, No. 41.

Jack Eldon, Catriona Waddington, Yasmin Hadi. “Health System Reconstruction: Can it Contribute to State-building?” (2008). Health and Fragile State Network.

João Leite Ferreira Neto, José Newton Garcia de Araújo. « L’expérience brésilienne du Système unique de santé (sus) : gestion et subjectivité dans un contexte néolibéral.” Nouvelle revue de psychosociologie 2012/1 (n° 13), p. 227-239. DOI 10.3917/nrp.013.0227.

John Robert Kelley, “The New Diplomacy: Evolution of a Revolution”, Diplomacy and Statecraft Vol. 21, Iss. 2, 2010.

Jordão Horácio da Silva Lima. “Global health and Brazilian foreign policy: the negotiations on innovation and intellectual property.” (2017). Faculdade de Saúde Pública, Universidade de São Paulo, vol. 22 no. 7 ISSN 1678-4561.

Karagül, Songül. “Türkiye’nin Balkanlardaki “Yumuşak Güç” Perspektifi: TİKA.” Girişimcilik ve Kalkınma Dergisi (8:1) 2013.



Kardaş, Tuncay and Erdağ Ramazan. "TIKA as a foreign policy tool." *Journal of Academic Inquiries* Vol.7, No.1 2012.

Kelley, Lee and Gomez Eduardo J. "Brazil's ascendance: The soft power role of global health diplomacy." *The World Financial Review*. 2011.

Kennedy, John F. Address to the United Nations Security Council, 1963. Available at: <http://www.jfklibrary.org/Research/Research-Aids/Ready-Reference/JFK-Quotations.aspx> (Accessed on Apr. 28, 2018).

Kevany Sebastian, Khumalo-Sakutukwa Gertrude, Murima Olivia, et al. "Health diplomacy and the adaptation of global health interventions to local needs in sub-Saharan Africa and Thailand: Evaluating findings from Project Accept." (HPTN 043). *BMC Public Health* 2012; 12: 459.

Kevany, Sebastian. "Diplomatic advantages and threats in global health program selection, design, delivery and implementation: the development and application of the Kevany Riposte." *Global Health* 2015; 11: 22.

Kevany, Sebastian. "Global health diplomacy, 'smart power', and the New world order." *Global Public Health* 2014; 9: 787–807.

Kickbush Iliona, Drager Nick and Novotny Thomas. "Global Health Diplomacy: Training across Disciplines." *World hospitals and health services: the official journal of the International Hospital Federation* · February 2007 DOI: 10.2471/BLT.07.045856. PubMed.

Kickbusch I. The Graduate Institute of International and Development Studies; 2012. Good global health begins at home: policy coherence at national level. *Global Health Diplomacy Brief*. Available at: <http://repository.graduateinstitute.ch/record/16587/files/policy-coherence-brief-v7%2020022013-2.pdf> (Accessed May 20, 2018).

Kickbusch Iliona, Silberschmidt Gaudenz, Buss Paulo. “Global health diplomacy: the need for new perspectives, strategic approaches and skills in global health.” *Bulletin of World Health Organization*. 85: 230–232. 2007.

Kickbusch, Iliona. “Global health diplomacy: how foreign policy can influence global health.” *British Medical Journal*, 10 June 2011, p 2.

Kickbusch, Iliona. “Global health governance: Some new theoretical considerations on the new political space.” From: Lee, Kelley. “Globalization and health.” London: Palgrave; 2003:192-203. 2002.

Kickbusch, Ilona, and Martina Marianna Cassar Szabo. “A New Governance Space for Health.” *Global Health Action* 7 (2014): 10.3402/gha.v7.23507. DOI: 10.3402/gha.v7.23507.

Kickbush Iliona. “The need for a European strategy on global health.” *Scand. Journal Public Health*, 2006.

Kickbush, Iliona. “Global health diplomacy: the need for new perspectives, strategic approaches and skills in global health.” *The Bulletin of World Health Organization*, 2007.

Kloti, Ulrich et al. (eds). "Handbook of Swiss Politics and Policies." Zurich: Verlag Neue Zürcher Zeitung. 2003.

Koplan Jeffrey P., Bond Christopher T., Merson Michael H., Reddy Srynath K., Rodriguez Mario H., Sewankambo Nelson K. "Towards a common definition of global health." Lancet 2009; 373: 1993.

Korab Karpowicz, W. Julian. "Political Realism in International Relations. " The Stanford Encyclopedia of Philosophy Summer 2018, Edward N. Zalta (ed.). Available at : <https://plato.stanford.edu/archives/sum2018/entries/realism-intl-relations>. (Accessed on May 15, 2018).

Kördeve, Mustafa K. "Sağlık Turizmine Genel Bir Bakış ve Türkiye'ni Sağlık Turizmindeki Yeri." Uluslararası Sağlık Yönetimi ve Stratejileri Araştırma Dergisi. 2016. Cilt 2, Sayı 2. ISSN: 2149-6161.

Labonté, Ronald and Michelle Gagnon "Framing health and foreign policy: lessons for global health diplomacy." Globalization and Health Review (2010). Volume 6, Number 1, Page 1.

Lancaster, Carol. "Foreign Aid: Diplomacy, Development, Domestic Politics." The University of Chicago Press Book, 2007.

Langhorne, Richard. "On Diplomacy." Political Studies Review, 6/1, 2008.

Lee Kelley, Chagas Luiz C., Novotny Thomas E. "Brazil and the Framework Convention on Tobacco Control: Global Health Diplomacy as Soft Power." 2010. PLoS Med 7(4): e1000232. Doi: 10.1371/journal.pmed.1000232.

Lee, Kelley and Smith Richard. ““What is ‘global health diplomacy’? A conceptual review.” *Global Health Governance* V(I). 2011.

Lee, Kelley and Zwi Anthony. “A Global Political Economy Approach to AIDS: Ideology, Interests and Implications in Health Impacts of Globalization” (2002). *New Political Economy* 1(3):13-32.

Leigh Haynes, David Legge, Leslie London, David McCoy, David Sanders, Claudio Schuftan. “Will the struggle for health equity and social justice be best served by a Framework Convention on Global Health?” (2013). *Health and Human Rights*, Vol. 15.

Lídia Cabral, Giuliano Russo and Julia Weinstock. “Brazil and the Shifting Consensus on Development Co-operation: Salutary Diversions from the ‘Aid effectiveness’ Trail?” *Development Policy Review*. 2014, 32 (2): 179-202.

Lindsay Knight, “UNAIDS; The First 10 Years.” *Joint United Nations Programme on HIV/AIDS (UNAIDS)*. WHO Library Cataloguing-in-Publication Data. 2008.

Mamudu, Hanii and Stalton Glantz. “Civil society and the negotiation of the Framework Convention on Tobacco Control.” *Global Public Health*. (2009). 4(2):150-68. doi: 10.1080/17441690802095355.

Maria Regina Soares De Lima and Monica Hirst. “Brazil as an intermediate state and regional power: action, choice and responsibilities.” *International Affairs*. Volume 82, Issue 1, 1 January 2006, Pages 21–40, <https://doi.org/10.1111/j.1468-2346.2006.00513.x>

Martin, Jacques. “La coopération internationale suisse à la recherche d’un nouveau paradigme.” *Annuaire suisse de politique de développement*. Available at : <http://books.openedition.org/iheid/> (Accessed on Jan. 20, 2018).

McCarthy, Michael. “A brief history of the World Health Organization.” *Special Report on World Health Organization*. (2002) *The Lancet*, Volume 360, Issue 9340, 1111 – 1112.

Medicus Mundi Switzerland. “Global Health and Switzerland.” Available at: <http://www.medicusmundi.ch/en/priorities/global-health-and-switzerland> (Accessed on Jan. 20, 2018).

Mehtap Tatar, Salih Mollahaliloğlu, Bayram Şahin, Sabahattin Aydın, Anna Maresso, Cristina Hernández-Quevedo. “Turkey: Health system review. *Health Systems in Transition*.” 2011, 13(6):1–186.

Metzl, Jamie and William Drake. “Lecture Series: Winning Hearts and Minds: Propaganda and Public Diplomacy in the Information Age”, Carnegie Endowment for International Peace, 2001.

Michaud, Josh and Kates, Jennifer. “Global health diplomacy: advancing foreign policy and global health interests.” *Global Health: Science and Practice* 1 (2013) 24-28; DOI: 10.9745/GHSP-D-12-00048.

Mitchell E. Daniels Jr., Thomas E. Donilon, Thomas J. Bollyky, and Christopher M. Tuttle. “The Emerging Global Health Crisis.” Council on Foreign Relations Press. 2014. ISBN 978-0-87609-616-1.

Nye, Joseph. “Public Diplomacy and Soft Power.” *The Annals of the American Academy of Political and Social Science*. Vol 616, Issue 1, pp. 94 – 109, 2008.

Nye, Joseph. "Soft Power: The Means to Success in World Politics. 2004. Foreign Policy No. 80.

OECD Sağlık Sistemi İncelemeleri Türkiye. "Türkiye'de Yakın Tarihte Yapılan Sağlık Reformları." OECD ve Dünya Bankası. 2008. Available at: <https://sbu.saglik.gov.tr/ekutuphane/kitaplar/oecdkitap.pdf> (Accessed on Apr. 15, 2018).

OECD. Busan Fourth High Level Forum On Aid Effectiveness: Proceedings. 2011. Available at: <https://www.oecd.org/dac/effectiveness/HLF4%20proceedings%20entire%20doc%20for%20web.pdf> (Accessed May 15, 2018).

Office of Disease Prevention and Health Promotion. "Global Health: 2020 Objectives." Available at: <https://www.healthypeople.gov/2020/topics-objectives/topic/global-health> (Accessed on Apr. 28, 2018).

Oğurlu, Ebru. "The African Opening in Turkish Foreign Policy." Research Journal of Politics, Economics and Management. October 2017. Vol:5, Issue:5 P-ISSN: 2147-6071.

Onur, Serhat. "Türkiye'nin Afrika Medikal Diplomasisi." Association of Researchers on Africa. Available at: <https://www.afam.org.tr/turkiyenin-afrika-medikal-diplomasisi/> (Accessed on 24 Apr. 2018).

Organisation Mondiale de la Santé. « Fiche D’information DDC Organisations Multilatérales.» 2015. Direction du Développement et de la Copération. Available at : [https://www.eda.admin.ch/dam/deza/fr/documents/partnerschaften-auftraege/217941-factsheet-who\\_FR.pdf](https://www.eda.admin.ch/dam/deza/fr/documents/partnerschaften-auftraege/217941-factsheet-who_FR.pdf) (Accessed on Jan. 20, 2018).

Organisation Mondiale de la Santé. «Stratégie de coopération OMS-Suisse.» Bibliothèque de l’OMS. 2013. ISBN 978 92 4 250528 3.

Organization for Economic Cooperation and Development (OECD). Turkey's Official Development Assistance (ODA). Available at: <http://www.oecd.org/dac/stats/turkeys-official-development-assistanceoda.htm> (Accessed on 24 Apr. 2018).

Organization for Islamic Cooperation. 5th Session of the Islamic Conference of Health Ministers; Istanbul Declaration. OIC/5-ICHM/2015/DECL, 2015. Available at: <https://www.oic-oci.org/docdown/?docID=1666&refID=1070> (Accessed on Apr. 15, 2018).

Organization for Islamic Cooperation-SESRIC Official Website. “The 11th Meeting of the Steering Committee on Health.” 2016. Available at: <http://www.sesric.org/health/event-detail.php?id=1389> (Accessed on Apr. 22, 2018).

Organization of Islamic Cooperation Official Website. “Activities on Health.” 2018. Available at: <http://www.sesric.org/health/activities-health.php> (Accessed on March 3, 2018).

Organization of Islamic Cooperation. The Statistical, Economic and Social Research and Training Centre for Islamic Countries (SESRIC) Official Website. 2018. Available at: <http://www.sesric.org> (Accessed on March 3, 2018).

Oslo Ministerial Declaration on Global Health. “A pressing foreign policy issue of our time, Ministers of Foreign Affairs of Brazil, France, Indonesia, Norway, Senegal, South Africa, and Thailand”, *The Lancet*, Volume 369, Issue 9570, 1373 – 1378. 2006.

Özkan, Mehmet. “Turkey's Rising Role in Africa.” *Turkish Policy Quarterly*. 2010. Vol. 9, No. 4, pp. 93-105.

Paillette, Céline. « Épidémies, santé et ordre mondial. Le rôle des organisations sanitaires internationales, 1903-1923.» *Monde(s)*, vol. 2, no. 2, 2012, pp. 235-256.

Pan American Health Organization Regional Office of the World Health Organization. “Strategic Plan of the Championing Health: Sustainable Development and Equity: 2014-2019.” Official Document (2014). Available at: [http://www.paho.org/hq/index.php?option=com\\_docman&task=doc\\_view&gid=38002&Itemid=270&lang=en](http://www.paho.org/hq/index.php?option=com_docman&task=doc_view&gid=38002&Itemid=270&lang=en) (Accessed on May 15, 2018).

Pashakhanlou H. Arash “Realism and Fear in International Relations: Morgenthau, Waltz and Mearsheimer Reconsidered.” Palgrave Macmillan, Cham. 2017.

Peter M. Schantz, Victor C.W. Tsang. “The US Centers for Disease Control and Prevention (CDC) and research and control of cysticercosis.” Division of Parasitic Diseases, National Center for Infectious Diseases, Centers For Disease Control and Prevention, Atlanta, GA, USA. Science Direct, 2003.

Purtaş, Fırat. “Rising Value of Turkish Foreign Policy: Cultural Diplomacy.” *Gazi Akademik Bakış* 7 (2015): 1-14.

Raphael Lencucha, Anita Kothari and Ronald Labonte. “The role of non-governmental organizations in global health diplomacy: negotiating the Framework Convention on Tobacco Control.” Oxford University Press, *Health Policy and Planning* 2011;26:405–412 doi:10.1093. 2010.



Rebecca Katza and Daniel Singer A. "Health and security in foreign policy." Bulletin of the World Health Organization (2007) Special Theme Vol. /85/3/06-036889.

Republic and State of Geneva Official Website. "Geneve Internationale: Peace, Rights and Well-Being." 2018. Available at: <http://www.geneve-int.ch/faq> (Accessed on Jan. 20, 2018).

Rumbold, Benedict and Baker, Rachel and Ferraz, Octavio and Hawkes, Sarah and Krubiner, Carleigh and Littlejohns, Peter and Norheim, Ole Frithjof and Pogram, Thomas and Rid, Annette and Venkatapuram, Sridhar and Voorhoeve, Alex and Wang, Daniel and Weale, Albert and Wilson, James and Yamin, Alicia Ely and Hunt, Paul. "Universal health coverage, priority setting and the human right to health." (2017). *The Lancet*, 390 (10095). pp. 712-714. ISSN 0140-6736.

Sağlık Bakanlığı Resmi İnternet Sayfası. Avrupa Birliği ve Dış İlişkiler Genel Müdürlüğü, 2018. Available at: <http://www.disab.saglik.gov.tr/> (Accessed on March 2, 2018).

Santa Barbara, Joanna and MacQueen Graeme. "Peace through health: Key concepts." *The Lancet*. DOI: 10.1016/S0140-6736(04)16729-9. 2004.

Sarah-Lea John de Sousa. "Brazil as a development actor: South-South cooperation and the IBSA initiative." *Peace and Security Programme, FRIDE*, 2008.

Saran, Mehmet and Işıl Karpat. "Türkiye'nin İmajı ve Marka Değerinin Arttırılmasında İletişim Çabaları." 2002. *KalDer Derg*, 141, s. 46-50.

Sayan, İpek and Küçük Aziz. "Transformation of Public Personnel Employment in Turkey: Example of Ministry of Health." Ankara Üniversitesi SBF Dergisi, Cilt 67, No. 1, 2012, s. 1710-203.

Schimmelfennig, Frank. "Entrapped again: The way to EU membership negotiations with Turkey." ETH Zurich, Center for Comparative and International Studies (CIS), International Politics Vol. 46, 4, 413–431.

Schümperli Younossian, Catherine. «Aide humanitaire », Annuaire suisse de politique de développement. 2003. Available at : <https://journals.openedition.org/aspd/> (Accessed on May 17, 2018).

Segal, Gerard. "China and Africa." The Annals of the American Academy of Political and Social Science. (1992) Vol 519, Issue 1, pp. 115 – 126.

Shankland, Alex and Cornwall Andrea. "Realizing health rights in Brazil: the micropolitics of sustaining health system reform." In: Bebbington A, McCourt edition: Development Success: Statecraft in the South. Basingstoke: Palgrave Macmillan. 2007.

Slaughter, Anne M. "A new World Order." Princeton and Oxford: Princeton University Press; 2004.

Smith, Richard and Kelley Lee. "WHO Network on Global Health Diplomacy." Global Health Diplomacy Research (2010) Global Health Governance Vol.5 p.1.

Sotero, Paulo. "Brazil as an Emerging Donor: Huge potential and growing pains." The World Bank Report: Learning for Development. Development Outreach, Vol. 11 no. 1. Feb. 2009.

Spiegel, Jerry M. "Daring to learn from a good example and break the Cuba taboo." 2006. *International Journal of Epidemiology* 2006;35:825–826 doi:10.1093/ije/dyl144.

Stephen M. Walt. "International Relations: One World, Many Theories." *Foreign Policy*. No. 110, Special Edition: *Frontiers of Knowledge* (1998), pp. 29-32 and 34-46.

Swiss Federal Department of Home Affairs and Federal Department of Foreign Affairs. "Swiss foreign health policy: Agreement on foreign health policy objectives." [https://www.eda.admin.ch/dam/eda/en/documents/das-eda/organisation-eda/broschuere\\_gesundheitsaussenpolitik\\_EN.pdf](https://www.eda.admin.ch/dam/eda/en/documents/das-eda/organisation-eda/broschuere_gesundheitsaussenpolitik_EN.pdf). 2006.

Swiss Foreign Policy Strategy 2016–19: Federal Council report on the priorities for the 2016–19 legislative period. Report from Swiss Agency for Development and Cooperation. Available at: <https://reliefweb.int/report/world/swiss-foreign-policy-strategy-2016-19-federal-council-report-priorities-2016-19> (Accessed on May 17, 2018).

Swiss Health Policy. Federal Department of Foreign Affairs FDFA and Federal Department of Home Affairs FDHA. <https://www.admin.ch/gov/en/start/departments/departement-foreign-affairs-fdfa.html> Official Document, 2015.

T.C. Dışişleri Bakanlığı Resmi İnternet Sayfası. Türk Dış Politikası. "Türkiye'nin Girişimci ve İnsani Dış Politikası." 2018. Available at: <http://www.mfa.gov.tr/dis-politika-genel.tr.mfa> (Accessed on Apr. 22, 2018).

T.C. Dışişleri Bakanlığı Resmi İnternet Sayfası. Türk Dış Politikası. "2018 yılına girerken girişimci ve insani dış politikamız." 2018 Mali Yılı Bütçe Tasarısı Vesilesiyle

TBMM Genel Kuruluna Sunum. Available at: <http://www.mfa.gov.tr/dis-politika-genel.tr.mfa> (Accessed on Apr. 22, 2018).

T.C. New York Başkonsolosluğu. Başkonsolosluk Resmi Sayfası. Available at: <http://newyork.bk.mfa.gov.tr/Mission/About> (Accessed on Apr. 22, 2018).

T.C. Sağlık Bakanlığı Resmi İnternet Sayfası. 2016 Faaliyet Raporu. Available at: [https://sbu.saglik.gov.tr/Ekutuphane/kitaplar/faaliyet\\_raporu\\_i%C3%A7.pdf](https://sbu.saglik.gov.tr/Ekutuphane/kitaplar/faaliyet_raporu_i%C3%A7.pdf) (Accessed on Apr. 22, 2018).

T.C. Sağlık Bakanlığı Resmi İnternet Sitesi. Dış İlişkiler Dairesi Başkanlığı “Türkiye-DSÖ İlişkileri”, 2000. Available at: <https://sbu.saglik.gov.tr/Ekutuphane/> (Accessed on Apr. 22, 2018).

Tania, Dussey Cavassini. “Switzerland: global health begins at home: 10 years of health foreign policy, 2006–2016.” WHO Health diplomacy: European Perspectives Report, 2017.

Tellis, Winston. “Introduction to Case Study.” (1997). The Qualitative Report, Volume 3, Number 2. (<https://nsuworks.nova.edu/tqr/vol3/iss2/>)

The Editors of Encyclopedia Britannica. “World Health Organization.” Encyclopedia Britannica. (2017) Available at: <https://www.britannica.com/topic/World-Health-Organization> (Accessed on Feb. 24, 2018).

The Global Strategy of the U. S. Department of Health and Human Services. <https://www.hhs.gov/sites/default/files/hhs-global-strategy.pdf> The Secretary of Health and Human Services Washington, Dc 20201.

The Portal of the Swiss Government Federal Council. “UN special session on the world drug problem: Switzerland focuses on human rights.” Media Releases, 2016.

Available at: <https://www.admin.ch/gov/en/start/documentation/media-releases.msg-id-61409.html> (Accessed on May 17, 2018).

The Statistical, Economic and Social Research and Training Centre for Islamic Countries (SESRIC) Official Website. 2018. "OIC Strategic Health Programme of Action 2014-2023." Available at: <http://www.sesric.org> (Accessed on March 3, 2018).

Theodore M. Brown, Marcos Cueto, Elizabeth Fee. "The World Health Organization and the Transition From "International" to "Global" Public Health." *American Journal of Public Health* 96, no. 1 (2006): pp. 62-72. DOI: 10.2105/AJPH.2004.050831.

Thompson Tommy G. (2011). "Health diplomacy is critical to US foreign policy." *Huffington Post World*. Available at: [https://www.huffingtonpost.com/tommy-g-thompson/the-case-for-health-diplo\\_b\\_823382.html](https://www.huffingtonpost.com/tommy-g-thompson/the-case-for-health-diplo_b_823382.html) (Accessed on 9 Apr. 2018).

Tom Daschle and Bill Frist. "The Case for Strategic Health Diplomacy: A Study of PEPFAR." Bipartisan Policy Center. November 2015.

Turan, Yıldırım and Ahmet Karanfil. "Soft Power Fact in Turkish Foreign Policy and the Case of Republic Turkey Prime Ministry Office of Public Diplomacy." *International Journal of Political Studies*. April 2017. Vol:3, Issue:1 e-ISSN: 2149-8539.

Türk Asya Stratejik Araştırmalar Merkezi. "Sağlık Diplomasisi Ve Turizmi Edirne'de". Available at: [www.tasam.org/trTR/Icerik/5402/saglik\\_diplomasisi\\_ve\\_turizm\\_edirne](http://www.tasam.org/trTR/Icerik/5402/saglik_diplomasisi_ve_turizm_edirne) (Accessed on May 26, 2018).

Turkish Cooperation and Coordination Agency Official Website. Annual Report, 2016. Available at: [http://www.tika.gov.tr/en/publication/list/tika\\_annual\\_reports](http://www.tika.gov.tr/en/publication/list/tika_annual_reports) (Accessed on 25 Dec. 2017).

U.S. Department of Health and Human Services. Office of Global Affairs. Available at: <https://www.hhs.gov/about/agencies/oga/global-health-diplomacy/health-attaches/index.html>, (Accessed on 17 Jan. 2018).

UN Secretary-General. Remarks to the General Assembly after being appointed for a second term, New York, Sept. 21, 2011. Available at <https://www.un.org/sg/en/content/sg/speeches/2011-09-21/address-66th-general-assembly-we-peoples> (Accessed on May 10, 2018).

United Nations General Assembly. “Report of the Secretary-General Promotion of South–South cooperation for development: a thirty-year perspective.” Doc A/64/504, 2009, p 3.

United Nations General Assembly. Note on Global health and foreign policy: strategic opportunities and challenges. Sixty-fourth session. <http://www.who.int/trade/foreignpolicy/FPGH.pdf> Agenda item 123, 2009, A/64/365.

United Nations Resolution adopted by the General Assembly: 63/33 Global Health and Foreign Policy. Available at: <http://www.who.int/un-collaboration/health/unga-foreign-policy/en/> (Accessed on May 15, 2018).

United Nations Special Session on HIV/AIDS. “What is UNAIDS?” Fact Sheets. Available at: [http://www.un.org/ga/aids/ungassfactsheets/html/fsunaids\\_en.htm](http://www.un.org/ga/aids/ungassfactsheets/html/fsunaids_en.htm), (Accessed on Feb. 24, 2018).

US Agency for International Development. President’s Malaria Initiative. 12th Annual Report to Congress. Available at: <https://www.pmi.gov/docs/default-source/default-document-library/pmi-reports/2018-pmi-twelfth-annual-report.pdf?sfvrsn=5> (Accessed on 17 May 2018).

US Department of Health and Human Services. "Office of Global Affairs." US Government. Available at: <https://www.hhs.gov/about/agencies/oga/index.html> (Accessed on Apr. 15, 2018).

US Department of Health and Human Services. Center for Disease Control and Prevention. 2018. Available at <https://www.cdc.gov/about/organization/cio.htm> (Accessed on Apr. 15, 2018).

US Department of State. "Implementation of the Global Health Initiative: Consultation Document." 2014. Available at: <https://reliefweb.int/sites/reliefweb.int/files/resources/2760E0ED9BDB5FB9492576C4001C08CD-govt.usa-feb2010.pdf> (Accessed on Apr. 29, 2018).

Vanderwagen, William. "Health diplomacy: Winning hearts and minds through the use of health interventions." *Mil Med.* 2006;171(10 Suppl 1):3-4.

Ventura, Deisy. "Public Health and Brazilian Foreign Policy." 2013. *International Journal on Human Rights.* Vol. 10 no. 19. ISSN 1806-6445.

Weber, Mark and Michael Smith. "Foreign Policy in a Transformed World." Routledge. 2002.

White, Brian. "Diplomacy" in Baylis, J., Smith, S. (ed). "The Globalization of World Politics: An Introduction to International Relations." 3rd edition. Oxford: Oxford University Press, 2005.

WHO Framework Convention on Tobacco Control, Official Text on the Conference of the Parties to the WHO FCTC. Available at: [http://www.who.int/fctc/text\\_download/en/](http://www.who.int/fctc/text_download/en/) (Accessed on Feb. 24, 2018).

WHO Global Health Observatory. Universal Health Coverage Data Portal. World Health Organization. Available at: <http://apps.who.int/gho/cabinet/uhc.jsp?lang=en> (Accessed on Feb. 24, 2018).

WHO Presence in Countries, Territories and Area Report 2017: World Health Organization; 2017 (WHO/CCU/17.04). Licence: CC BY-NC-SA 3.0 IGO.

William J. Fallon and Helene D. Gayle. "A Healthier, Safer, and More Prosperous World." Report of the CSIS Commission on Smart Global Health Policy. ISBN: 978-0-89206-597-4 (pb). 2010.

World Health Organization Media Center. "Health diplomacy seminar highlights importance of engaging in global health issues for countries of the Region." Regional Office for the Eastern Mediterranean, 2015. Available at: <http://www.emro.who.int/media/news/seminar-highlights-engagement-global-health-issues.html> (Accessed on Feb. 24, 2018).

World Health Organization News Release. "World Health Assembly elects Dr Tedros Adhanom Ghebreyesus as new WHO Director-General." 23 May 2017. Available at: <http://www.who.int/en/news-room/detail/23-05-2017-world-health-assembly-elects-dr-tedros-adhanom-ghebreyesus-as-new-who-director-general> (Accessed on Feb. 24, 2018).

World Health Organization Official Website, Global Health Diplomacy. 13 February 2007. Available at: <http://www.who.int/trade/diplomacy/en/> (Accessed on Feb. 24, 2018).



World Health Organization. “Constitution of the World Health Organization.” (2006) Basic Documents, Forty-fifth edition, Supplement. [http://www.who.int/governance/eb/who\\_constitution\\_en.pdf](http://www.who.int/governance/eb/who_constitution_en.pdf)

World Health Organization. “Constitution of the World Health Organization.” (2006) Basic Documents, Forty-fifth edition, Supplement. [http://www.who.int/governance/eb/who\\_constitution\\_en.pdf](http://www.who.int/governance/eb/who_constitution_en.pdf)

World Health Organization. “Evaluation.” 2018. Available at: <http://www.who.int/about/evaluation/en/> (Accessed on Feb. 25, 2018).

World Health Organization. “Framework of engagement with non-State actors.” Sixty-Ninth World Health Assembly Agenda Item 11.3. May 2016. Available at: [http://www.who.int/about/collaborations/non-stateactors/A69\\_R10-FENSA-en.pdf?ua=1](http://www.who.int/about/collaborations/non-stateactors/A69_R10-FENSA-en.pdf?ua=1) (Accessed on Feb. 25, 2018).

World Health Organization. “Global Health and Foreign Policy: Strategic Opportunities and Challenges.” Background Paper for the Secretary-General’s Report on Global Health and Foreign Policy. Available at: [http://www.who.int/trade/events/UNGA\\_Background\\_Rep3\\_2.pdf](http://www.who.int/trade/events/UNGA_Background_Rep3_2.pdf) (Accessed on May 15, 2018).

World Health Organization. “Partnerships and Collaborative Arrangements with WHO involvement.” January 2018. Available at: <http://www.who.int/about/collaborations/partnerships/en/>. (Accessed on Feb. 25, 2018).

World Health Organization. "Programme Budget: 2008-2019." Seventieth World Health Assembly. May 2017. Available at: <http://www.who.int/about/finances-accountability/budget/en/> (Accessed on Feb. 25, 2018).

World Health Organization. "Successful Healthcare Reform: The case of Turkey." WHO Regional Office for Europe. 2012. Available at: <https://dosyamerkez.saglik.gov.tr/Eklenti/2106,successful-health-system-reforms-the-case-of-turkeypdf.pdf?0> (Accessed on March 2, 2018).

World Health Organization. "Summary report Fourth Seminar on Health Diplomacy." 2015, Egypt. Available at: [http://applications.emro.who.int/docs/IC\\_Meet\\_Rep\\_2015\\_EN\\_16400.pdf?ua=1](http://applications.emro.who.int/docs/IC_Meet_Rep_2015_EN_16400.pdf?ua=1) (Accessed: Feb on 24, 2018).

World Health Organization. "The first ten years of the World Health Organization." (1958). Available at: [http://apps.who.int/iris/bitstream/handle/10665/37089/a38153\\_eng\\_LR\\_part1.pdf?sequence=14](http://apps.who.int/iris/bitstream/handle/10665/37089/a38153_eng_LR_part1.pdf?sequence=14) (Accessed on Feb. 24, 2018).

World Health Organization. Country Cooperation Strategy. Switzerland, WHO Library Cataloguing Data Base, 2013.

World Health Organization. Department of Emergency and Humanitarian Action Sustainable Development and Healthy Environments. "Humanitarian Supply Management and Logistics in the Health Sector." PAHO Library Catalogue. ISBN 92 75 12375 6. 2001.

World Health Organization. Final report of the Commission on Social Determinants of Health. Available at: [http://www.who.int/social\\_determinants/thecommission/finalreport/en/](http://www.who.int/social_determinants/thecommission/finalreport/en/) (Accessed on May 15, 2018).

World Health Organization. Scale of Assessments for 2016-2017. 26 May 2015. Available at: [http://www.who.int/about/finances-accountability/funding/A68\\_R12\\_en.pdf?ua=1](http://www.who.int/about/finances-accountability/funding/A68_R12_en.pdf?ua=1) (Accessed on Jan. 17, 2018).

World Health Organization. The Partnership for Maternal, Newborn and Child Health in support of Every Woman Every Child. Strategic Plan 2016-2020. Geneva, Switzerland: PMNCH.

Yannick, Jean. "Organisation Mondiale de la Santé." Perspective Monde, 2016. Available at: <http://perspective.usherbrooke.ca/bilan/servlet/BMDictionnaire?iddictionnaire=1600> (Accessed on: May 18, 2018).

Yaşar, Gülbiye. "Health transformation programme' in Turkey: an assessment." International journal of health planning and management. 2011; 26: 110–133.

Yazan Tevfik, Girgin Ahmet, Karadağ Erkan. "Health Tourism in Turkey." Khazar Journal of Humanities and Social Sciences, Khazar University Press 2017. DOI: 10.5782/kjhss.2017.5.17.

Yılmaz Ayhan, Kılıçoğlu Gökmen, "Balkanlar'da YTB ve TİKA'nın Türk Kamu Diplomasisi Kurumları Olarak Faaliyetleri Ve Türkiye'nin Bölgedeki Yumuşak Gücüne Etkileri", Finans Ekonomi ve Sosyal Araştırmalar Dergisi, 16 Ekim 2017 Cilt: 2 Sayı :2.

Yin, Robert K. "Case Study Research: Design and Methods." (2009). Sage Publications ISBN: 0803956622 0803956630 (PBK.).

## APPENDICES

### A. TÜRKÇE ÖZET / TURKISH SUMMARY

Bu tez, küresel sağlık diplomasisinin özelliklerini ve şekillerini incelemektedir. Bu tez, sağlık diplomasisinin farklı uygulamalarının yapıldığı çeşitli örnekleri araştırmaktadır. Bu bağlamda, ABD, İsviçre, Brezilya ve Türkiye örnekleri incelenmiştir. Sağlıkın ülkelerin çıkarlarının örtüştüğü teknik bir alan olduğunu savunan birçok bilim adamının görüşlerinin aksine, bu tez, devletlerin sağlık politikalarına yönelik farklı çıkarlarının olduğunu ve duruma göre ulusal ve uluslararası düzeyde, bazen müşterek, bazen ise çelişkili bir sağlık diplomasisi izlediklerini savunmaktadır. Bu tez, devletlerin küresel sağlık problemlerine çözüm bulma adına işbirliği yaptıkları ya da çatıştıkları durumda ulusal ve güvenlik çıkarlarını gözetmek adına sağlıklı bir dış politika aracı olarak kullanma eğilimlerinin arttığını açıklamaktadır.

Bu tez yedi bölümden oluşmaktadır. İlk bölüm giriş kısmıdır. İkinci bölüm DSÖ ve küresel sağlık diplomasisini incelemektedir. Üçüncü bölüm ABD örneği bağlamında küresel sağlık diplomasisini ele almıştır. Dördüncü bölümde İsviçre ve küresel sağlık diplomasisi analiz edilmiştir. Beşinci bölüm Brezilya örneği kapsamında küresel sağlık diplomasisini araştırmıştır. Altıncı bölüm Türkiye ve küresel sağlık diplomasisini incelemektedir. Yedinci bölüm ise sonuç kısmıdır.

Uluslararası sistemdeki değişiklikler, 1900'lü yıllardaki teknolojik gelişmeler ve değişen dünya düzeniyle artık sadece devlet düzeyinde savaş, barış veya ekonomi gibi geleneksel meselelerle ilgili işbirliği yapma ve müzakere yürütmenin yanı sıra, yeni “yumuşak” alanlarda da ilişkilerin geliştirilmesi gerekli hale gelmiştir. Bu değişimle birlikte diplomasi daha küresel ve bölünmüş hale gelmiştir. Yeni teknolojik araştırmaların etkisiyle büyüyen küreselleşme, küresel sosyal değişimler, göç ve salgınlar gibi değişik faktörler, devletlerin dış politikadaki hedeflerinin yönünü değiştirmiştir. Bir hastalığın salgını hızlıca büyüyen bölgesel, hatta bazen küresel bir problem haline gelmektedir. Sağlık devletlerin sosyo-ekonomik durumlarıyla ilişkili olduğunu göz önünde bulundurduğumuzda, aslında sağlık alanındaki gelişmelerin toplumun her kesimine ve her sektörün gelişimine katkıda bulunmaktadır. Bununla birlikte, sağlık, devletlerin

uluslararası ilişkilerinde de önemli bir rol oynamaktadır. HIV/AIDS virüsünün yayılmasını bu duruma örnek olarak gösterebiliriz; Sahra-altı Afrika ülkelerinin kamu sağlığı ve ekonomilerinin olumsuz yönde etkilenmesinin yanı sıra, uluslararası ilişkileri de gerilemiştir. Küresel sağlık problemlerini çözme adına küresel çapta işbirliği ve koordinasyona ihtiyaç vardır. Bu sebeple, özellikle bulaşabilir ve bulaşmayan hastalıklarla kendi başlarına mücadele edemeyen ülkelerin sağlığını geliştirme adına devlet düzeyinde ve devlet dışı aktörlerin işbirliği büyük önem taşımaktadır. Bölgesel ve uluslararası aktörlerin girişimleri, siyasi çıkarlardan bağımsız olarak, birçok ülkede sağlığın geliştirilmesine katkıda bulunmuştur.

Uluslararası politikalarda karar vericileri ve politik aktörleri harekete geçiren önemli meselelerden biri sağlık sorunlarıdır çünkü, bunlar, ülkelerin ulusal güvenlikleriyle doğrudan bağlantılıdır. Artık sadece dış politikada geleneksel konular önem taşımamakta, bunlarla birlikte, sağlık gibi çağımızda etkileri çok kapsamlı olan meseleler de uluslararası ilişkilerin gündemine girmiştir. Öte yandan, kamu diplomasisinin bir oluşumu olan yumuşak güç, sağlık diplomasisi için de uygulanabilir hale gelmiştir. Günümüzde, birçok ülke, sağlığı spesifik bir strateji kapsamında dış politikalarına entegre etmekte, hatta bazıları Sağlık ve Dışişleri Bakanlıklarının ortaklaşa çalışmasıyla hazırlanan bir dış sağlık politikası hazırlamaktadır.

Küresel sağlık sorunlarını tartışmak ve ortak sorunlara ortak çözümler üretmek sadece devletler düzeyinde değil, aynı zamanda uluslararası ve hükümet dışı aktörlerin de aktif katılım sağladığı bir işbirliği gerektirmektedir. Bu yüzden, günümüzde küresel sağlık diplomasisi kavramı uluslararası politikaların önemli bir konusu haline gelmiş olup, kurumsal çerçevede devletlerin ve devlet dışı aktörlerin sağlık bağlamındaki küresel faaliyetlerini daha iyi anlayabilmek adına derinlemesine ele alınması ve incelenmesi gereken bir konudur. Sağlık artık siyasallaştırılmıştır. Bu bakış açısından yola çıkarak, uluslararası düzeyde en önemli sağlık aktörü Dünya Sağlık Örgütüdür. Hükümetlerarası bir kuruluş olan DSÖ, küresel ağı sayesinde üye ülkeleri bir araya getirerek sağlık sorunlarının ele alınmasını ve tartışılmasını sağlamaktadır. Aynı zamanda devletlerin sağlıkla ilintili diplomatik ilişkilerini politik bağlamda yapılaştırabilmesi için bir dış sağlık politikasının oluşturulmasını teşvik etmektedir.

Sağlık alanında küresel bir aktör olarak DSÖ, kuruluşundan bu yana sağlık diplomasisi bağlamında önemli bir rol oynamıştır.

Tüm bu faktörleri göz önünde bulundurarak, bu tez, devletlerin sağlık politikalarına yönelik farklı çıkarlarının olduğunu ve duruma göre ulusal ve uluslararası düzeyde, bazen müşterek, bazen ise çelişkili bir sağlık diplomasisi izlediklerini savunmaktadır. Bu tez, Amerika Birleşik Devletleri, İsviçre, Brezilya ve Türkiye'nin örnekleri ışığında, ülkelerin ulusal çıkarları doğrultusunda sağlığı nasıl bir dış politika aracı olarak kullandıklarını incelemektedir. İsviçre örneğinde olduğu gibi, devletler bazen işbirliğini gözetse de, uluslararası sağlık faaliyetlerinde genelde ulusal çıkarları ve güvenlikleri ön plandadır. Brezilya ve Türkiye gibi gelişmekte olan ülkelere ise sağlık diplomasisi söz konusu devletlerin uluslararası prestijine katkıda bulunan pragmatik bir araçtır. Gelişmekte olan ülkelere sağlık yardımları ve teknik destekleri sayesinde, bu araçla dış politika amaçlarına ulaşmayı hedeflemektedirler.

Realist bir bakış açısıyla, sağlıkla ilgili müdahalelerin devletlerin ulusal ve güvenlik çıkarlarına hizmet ettiği ve bu yüzden önem taşıdığı görülmektedir. ABD, dış politikası kapsamında yardımda bulunduğu ülkelerin “sevgilerini de kazanmayı” hedeflemektedir. Bu hedefi doğrultusunda, Afganistan'a yaptığı sağlık yardımlarını incelediğimizde, esas amacının ulusal güvenliğini teminat altına almak olduğunu görmekteyiz. Aynı zamanda Brezilya örneğinde olduğu gibi, sağlık müdahaleleri uluslararası toplantılarda daha çok söz sahibi olma ve ülkenin imajına katkıda bulunma gibi bir amacı da vardır. Araştırmacılar sağlığın dış politikaya dahil edilmesinin bir tesadüf olmadığını, aksine, ulusal güvenlik ve ekonomik faaliyetlerine ne kadar çok katkı sağladığıyla alakalı olduğunu vurgulamışlardır. Sağlığın “az önemli” politikalarından “çok önemli” politikalar konularına geçiş yapması, bu argümanı desteklemektedir zira çok önemli politikalar arasında güvenlik ve ekonomi gibi konularının yer alması, sağlık konusunun da ne denli önem arz ettiğini göstermektedir. Sağlık ve dış politikanın bağlantısı yadsınamaz olup, ayrıntılarıyla ele alınması gereken bir konu haline de gelmiştir.

İlk bölüm tezin giriş kısmını oluşturmaktadır. Yazar tezin amaç ve kapsamını açıklamış, konuyla ilgili de bir literatür taraması yapmıştır. Ardından, tezin ana argümanı olan devletlerin sağlığı ulusal ve uluslararası düzeylerde kendi çıkarları için kullanması açıklanmıştır. Son olarak da tezin metodolojisi ve organizasyonel yapısı anlatılmıştır.

Tezin ikinci bölümü ise küresel sağlık diplomasisinin temel aktörlerinden olan Dünya Sağlık Örgütü'nün rolünü ayrıntılı bir şekilde ele almaktadır. Türünün tek örneği olan bu devletler arası kuruluşun sağlık alanında küresel liderlik rolünü üstlendiği ve bu tez kapsamında incelenmesi gerektiği düşünülmüştür. Bu uluslararası kuruluşun devletler ve devlet dışı aktörlerle ilişkileri, yapısı, geçmişi ve faaliyetleri ayrıntılı bir biçimde incelenmiştir. Küresel sağlık alanında uluslararası normlar ve düzenlemeleriyle DSÖ çok paydaşlı aktörleri küresel sağlık diplomasisinin bir unsuru olarak bir araya getirme gibi önemli bir işlevi vardır.

Tezin üçüncü bölümünde ise Amerika Birleşik Devletinin küresel sağlık ve dış politika ilişkisi incelenmiştir. Uygulamaya koyduğu sağlık diplomasisi stratejisi sayesinde ABD, bir yandan toplumların sağlığını iyileştirmeyi hedeflediğini söylerken, diğer yandan dış politika hedefleri doğrultusunda hareket ederek sağlığı etkin bir dış politika aracı olarak kullanabilmektedir. Sağlık alanında dünya lideri olduğunu iddia etmenin yanı sıra, sağlığı siyasallaştıran ABD, ulusal güvenlik ve çıkarlarının doğrultusunda sağlık diplomasisini etkin bir şekilde uygulayan ülkeler arasında yer almaktadır.

Tezin dördüncü bölümünde ise İsviçre örneği ele alınmıştır. Dünyanın en iyi sağlık sistemine sahip olan İsviçre, ulusal politikasını uluslararası toplum için de örnek teşkil edecek nitelikte olduğunu vurgulayarak, uluslararası mecralarda etkin bir sağlık diplomasisi yürütmektedir. Bir dış sağlık politikası geliştiren dünyada ilk ülke olan İsviçre, küresel sağlık yönetişimi konusunda öncül olmayı hedeflemektedir. Gelişmekte olan ülkelere kendi sağlık modelini örnek olarak sunan İsviçre, gelişmiş ilaç endüstrisi sayesinde de yürüttüğü ticari faaliyetlerle ülkenin ekonomisine de büyük oranda katkıda bulunmaktadır. Sağlık alanındaki dış yardımları ve teknik desteği sayesinde İsviçre küresel sağlığa katkıda bulunurken, aynı zamanda ulusal çıkarlarını da korumaktadır.



Beşinci bölümde Brezilya örneği ele alınmıştır. 2007 yılında Oslo’da düzenlenen Dışişleri Bakanları toplantısında Brezilya bir dış sağlık politikası oluşturup uygulamaya koyacağını taahhüt etmiştir. Brezilya’nın salgın hastalıklara karşı ulusal düzeyde yürüttüğü etkin politikalar, uluslararası mecralarda büyük saygı ve takdirle karşılanmıştır. Geliştirdiği Güney-Güney İşbirliği sayesinde Brezilya, gelişmekte olan ülkelere doğrudan bir yardım sağlamaktan ziyade, teknik işbirliği kapsamında kendi kendine yeterliliği hedefleyen programlar doğrultusunda güney ülkeleri arasında prestij sahibi olup, söz konusu ülkelerin desteğini uluslararası toplantılarda sağlamıştır. İsviçre gibi Brezilya da kendi ulusal sağlık politikasının örnek teşkil edebileceğini düşünerek, teknik işbirlikleri kapsamında ülkelere tanıtıp anlatmaktadır.

Tezin altıncı bölümünde ise Türkiye örneği ele alınmıştır. Türkiye’nin henüz bir dış sağlık politikası uygulamaya konmamıştır. Ülkenin sağlık diplomasisi faaliyetlerini genellikle insani yardım çatısı altında incelediğimizde anlayabilmekteyiz. Bu bağlamda, Türkiye, dış yardımlarında önceliği dost ve kardeş ülke olarak tanıdığı devletlerle ve jeo-stratejik öneme sahip bölgelerde yürütmektedir. Bu doğrultuda, 2005 yılında başlatılan Afrika’ya Açılım Politikası kapsamında Türkiye geliştirmekte olan Afrika ülkeleriyle ilişkilerini geliştirmiş, yüzünü bu coğrafyaya çevirmiştir. Türkiye dış yardımların yumuşak gücünden de yararlanmış, öncelikli olarak uluslararası prestijini ve imajını olumlu yönde artırmayı hedeflemiştir. Brezilya örneğinde olduğu gibi, Türkiye örneğinde de sağlık diplomasisi yapılan dış yardımlarla incelenebilmektedir.

Araştırmacılar, ülkelerin sağlığı dış politikalarına entegre etme hususunda iki önemli hedefin olduğunu vurgulamaktadır; bunlardan birincisi, toplumların sağlıklarını tehdit eden önemli hastalıklara karşı tedbir almak olarak açıklanabilir. Diğeri ise, sağlık adı altında işbirliği yaparak aslında sağlıkla pek alakalı olmayan amaçlara ulaşabilmektir, örneğin, sağlık yardımlarını ülkenin prestijini arttırmak için kullanmak veya ulusal güvenliği tehdit eden unsurları kontrol altında tutmak gibi. Bu durumu göz önünde bulundurarak, ABD, İsviçre, Brezilya ve Türkiye örnekleri bu tez kapsamında incelenmiş olup, ülkelerin aslında sağlık faaliyetleri adı altında kendi öz çıkarlarının peşinde koştukları vurgulanmıştır.

ABD'nin sađlık diplomasisi stratejisini incelediđimizde, yardımda bulunduđu lkelerin toplumlarının sevgisini kazanmanın yanı sıra, ulusal gvenliđine tehdit olarak grdđ blgeleri de kontrol altına aldıđını grmekteyiz. te yandan, ABD'nin dıř yardım oranlarına baktıđımızda, dnyanın en ok yardımda bulunan lkesi olduđunu grmekteyiz. Bununla birlikte, yrttđ yardım projelerinin kendi kendine yeterlilik ve srdrlebilirlikten uzak olduđu ve daha ok alıcı lkelerin bađımlılıđını vericiye arttırdıđını gzlemlemekteyiz. Bu durumun, İsvire'deki dıř sađlık yardımlarının aksine, lkelerin kalkınmasını ve geliřmelerini desteklemekten ziyade, bađımlılıđını arttırarak dıř yardımı devamlı hale getirmektedir. Sađlık yardımları sayesinde ABD, dnya lideri olmayı hedeflediđini ve liderlik zellikleri sayesinde birok lke iin rnek teřkil ettiđini belirtmektedir.

Dnyanın en refah lkeleri arasında yer alan İsvire iin ise sađlık, her bireyin en dođal hakkıdır. Bu yzden İsvire'nin sađlık alanındaki yardımlarını incelediđimizde, ABD'nin aksine, daha insancıl hedeflere sahip olduđu ve, kendi ıkarlarını gzetmenin yanı sıra, aynı zamanda, lkelerin dıř yardımlara bađımlılıđını azaltacak srdrlebilir ve kendi kendine yeterli hale gelmelerini hedeflemektedir. İsvire kendi ulusal sađlık politikasının uluslararası zeminde rnek teřkil edebileceđini savunarak, geliřmekte olan lkelere bir model olarak sunmaktadır. Bunun yanı sıra, DS gibi blgesel ve uluslararası kuruluşlarla iřbirliđi yaparak, devletler dzeyinde iliřkilerin yanı sıra, hkmet dıřı ve ok paydařlı aktrlerle de alıřarak, kresel sađlık diplomasisine katkıda bulunmaktadır. İsvire'nin geliřmiř ila sanayisi sayesinde birok lkeyle yrttđ ticari faaliyetleri sayesinde lke ekonomisine de byk oranda katkı sađlamaktadır. Kresel salgın hastalıklarını kendileri iin de bir tehdit olarak gren İsvire, sađlık sorunlarını zmenin ulusal bir gereklilik olduđunu da savunmaktadır. Bu sebeple, İsvire'nin sađlık diplomasisine yaklařımının daha ok iřbirliđine dayalı bir dođası olduđunu syleyebiliriz. İsvire'nin ncelikle kendi toplumunun daha sonra ise uluslararası toplumun sađlıđına nem ve ncelik vermesi, realist ve pragmatik bir yaklařım olduđunu ifade edebiliriz.

Brezilya ve Trkiye'nin sađlık diplomasisine yaklařımı benzerlik gsterse de aslında uygulama aısından farklılıklar iermektedir. Geliřmekte olan bu iki byk ekonomi, sađlık diplomasisi aracılıđıyla uluslararası prestijlerini arttırmayı hedeflemektedir. Sađlık alanında iřbirliđi yaptıkları lkeler, aslında dıř politikada iliřkilerini geliřtirmeye ncelik

verdikleri devletler olduğunu görmekteyiz. Dış politikada yumuşak güç olarak bilinen kavramı uygulamaya özen gösteren iki ülke, dış sağlık yardımlarına da önem vermektedir. Brezilya Oslo Deklarasyonunu imzalayarak bir dış sağlık politikası geliştirmek istediğini ve sağlık diplomasisini daha yapısal bir zeminde yürütmeyi arzuladığını belirtmiştir. Türkiye ise, dış sağlık yardımları ve yürüttüğü müzakerelerle strateji geliştirme yoluyla ilerlemektedir. Dış yardım teknikleri ise ABD’den ziyade İsviçre örneğine daha yakın durmaktadır; yardımda buldukları ülkelerin kendi kendine yeterliliğini sağlamak ve sürdürülebilirliği esas alan bir amaç doğrultusunda ilerlemeyi hedeflemektedir. Birçok bölgesel ve uluslararası kuruluşla da işbirliği yaparak, sağlık diplomasisi zeminlerini geniş çaplı tutmayı amaçlamaktadırlar. Brezilya’nın “güney-güney” işbirliği, Türkiye’nin ise Afrika’ya Açılım Politikasıyla kıta ülkeleriyle yürüttüğü ilişkiler, gelişmekte olan ülkelerle daha yakın bir işbirliği içerisinde olduklarını göstermektedir. Bir diğer önemli nokta ise ülkelerin dış yardım oranlarıyla gelişmişlik düzeylerinin ilişkisidir. Bu ilişkiyi incelemenin, sağlık diplomasisi ve yardımlarını daha iyi anlamaya yardımcı olacağı kuşkusuzdur. Brezilya ve Türkiye gibi gelişmekte olan ekonomiler, ABD ve İsviçre’ye göre GSMH’nin dış yardıma oranları daha yüksektir.

Sonuç olarak, bu tez sağlığın devletlerin dış politika ajandalarında yer almasının stratejik çıkarlarına bağlı olduğunu, Sağlık ve Dışişleri Bakanlıklarının müşterek çalışmasıyla oluşturulacak bir dış sağlık politikasının küresel sağlık faaliyetlerinin koordinasyonunu kolaylaştırdığını açıklamıştır. Bir dış sağlık politikasına sahip ülkelerin uluslararası sağlık toplantılarında ve müzakerelerde daha somut çözümler sunabildikleri gözlemlenmiştir. Sağlık diplomasisinin devletlerin ulusal çıkarlarını korumada önemli bir araç olduğunu vurgulayan bu çalışma, sağlık ve dış politikanın yakınlaştırılmasını ve bağlantısını ele almıştır.