

Health Diplomacy and Ebola Crisis in West Africa: Lessons Learnt and Perspectives for the Future

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Background to the Study

- Disease has played an important role in human history.
- Ebola virus – devastating to human society.
- Ebola is a Zoonotic viral disease; spreads through contact with bodily fluids of infected animals or humans, consumption of bush meat, human secretions, such as saliva, faeces, semen, breast milk, tears, etc. during the acute phase of infection.
- The fatality rate is 90 percent
- Ebola outbreak in West Africa is unprecedented.

Known Cases and Outbreaks of Ebola Virus Disease, in Reverse Chronological Order:

Year(s)	Country	(#) Cases/Deaths
Aug-Nov 2014	Democratic Republic of the Congo (DRC)	66/49
Mar 2014-2016	Liberia, Guinea & S/Leone	28652/11325
Nov 2012-Jan 2013	Uganda	6*/3
Jun-Nov 2012	DRC	36*/13
Jun-Oct 2012	Uganda	11*/4
May 2011	Uganda	1/1
Dec 2008 – Feb 2009	DRC	3215
Nov 2008	Philippines	6/0(asymptomatic)
Dec 2007-Jan 2008	Uganda	149/37
2007	DRC	264/187
2004	Russia	1/1
2004	Sudan (South Sudan)	17/7
Nov-Dec 2003	DRC	35/29
Dec 2002-Apr 2003	DRC	143/128
Oct 2001-Mar 2002	DRC	57/43
Oct 2001-Mar 2002	Gabon	65/53
2000-2001	Uganda	425/224
1996	Russia, Philippines, USA, South Africa	1/1, 0/0, 0/0, 2/1

1996-1997 (Jul-Jan)	Gabon	60/45
1996 (Jan-Apr)	Gabon	37/21
1995	DRC (formerly Zaire)	315/250
1994	Côte d'Ivoire (Ivory Coast)	1/0
1994	Gabon	52/31
1992	Italy	0/0
1989-1990	Philippines	3/0(asymptomatic)
1990	USA	4/0(asymptomatic)
1989	USA	0/0
1979	Sudan (South Sudan)	34/22
1977	Zaire	1/1
1976	England	1/0
1976	Sudan (South Sudan)	284/151
1976	Zaire (DRC)	318/280

Source: WHO 2016.

Background to the Study (Cont'd.)

- Containment of the epidemic is beyond the capacity of a single country.
- “To control the epidemic, the affected countries need urgent external, technical, financial and logistical assistance from all relevant actors and institutions” – **Obijiofor Aginam**
- Health as a global public good – an infectious disease like Ebola has important externality effects since preventing one person from contracting it reduces the risk of others being infected, locally and internationally
- The employment of health diplomacy in eradicating disease is not novel.
- Global response for Ebola crisis was a failure for health diplomacy.
- The national and international agencies were not able to respond with the required speed and expertise to this complex health emergency



The Context (West Africa)

- Region has the largest number of rebuilding and developing economies in the world
- *Marred by political instability. Populations, infrastructures and institutions have been devastated by conflicts creating a serious refugee situation in the region.*
- Despite development interventions, basic human needs remain unfulfilled across the region.
- *Corruption levels are high; a large part of the population lack access to basic necessities and opportunities*
- Economically, countries in the region do not generate enough income.
- *Fraught with dysfunctional health systems.*
- Child, infant and maternal mortality rates are among the highest in the world.
- *Dearth of health workers.*

Health Diplomacy in International Relations

- What is Diplomacy?
- What then is Health Diplomacy?
- The two broad conceptions of health diplomacy:
 - definitions focusing on globalization, health negotiations and health impact of non-health negotiations. For example, Kickbusch et al defines health diplomacy as the “multi-level and multi-actor negotiation processes that shape and manage the global policy environment for global health.”
 - conceptions that emphasize the use of health interventions as instruments to advance foreign policy interest – health diplomacy as soft power. For example, Anthony Fauci defines health diplomacy as “winning the hearts and minds of people living in poor countries by exporting medical care expertise and personnel to those who need it most ”

Globalisation: Major Driver of Health Diplomacy

- Globalisation has eroded national boundaries
- Globalisation has resulted in increasing frequency and rapidity of international trade and travel as well as other processes, such as increased migration and urbanisation
- Disease pathogens that once took months or years can now circumnavigate the globe in a number of hours.
- Infectious disease could no longer be contained within state borders as national boundaries are obsolete to microbial forces.

Forms of Health Diplomacy

- Health diplomacy manifest itself in three ways:
- First, as Disaster Diplomacy providing relief to areas ravaged by natural disasters like earthquakes, tsunamis and drought. Scott Ratzen “Beyond the 2004 Tsunami: Health Diplomacy as a Response” (2005).
- The second form deals with one country or a group of countries engaged in developing health care infrastructure in a country or group of countries
- The third form concerns international agreements and conventions designed to bring many parties together to address health concerns

- *State Actors – (territorial entity controlled by a government and inhabited by a population).*
- *Non-state Actors – are non-sovereign entities that exercise significant power and influence at both national and international levels.*
- *Examples of non-state actors*
 - *Intergovernmental organisations (Created by nation states)*
 - *Non-governmental organisations (established by group of individuals, business men and other societal forces)*

Ebola and Health Security: Between Global North and South

“ I have never seen a health event threaten the very survival of societies and governments in already poor countries; I have never seen an infectious disease contribute so strongly to potential state failure” – Margaret Chan

African Regional Health Diplomacy and Ebola Crisis

- *African Union and public health challenges*
- *Article 4 of the AU Act established a specialized Technical Committee on Health, Labour and Social Affairs*
- *African Health Strategy, 2007 – 2015; 2015 – 2030*
- *AU response to Ebola crisis*
 - *Diplomatic engagements (Joint meeting of AUC and WHO Luanda, Angola and the Peace and Security Council 450th Meeting, August 2014)*
 - *Establishment of a mission- African Union Support to Ebola outbreak in West Africa (ASEOWA)*

Sub-Regional Dimension: ECOWAS and Mano River Union

- *West Africa is one of the regions in the world with certain experience in regional integration (existence of approximately 50 intergovernmental organizations)*
- *Two intergovernmental organizations featured prominently in the fight against Ebola*
 - *Economic Community of West Africa States (ECOWAS)*
 - *Mano River Union (MRU)*
- *The two organisations initiated high level meetings and consultations to assist the affected States*
- *The meetings mobilized political leadership and partnership to fight the diseases*
- *ECOWAS established a Regional Solidarity Fund to fight Ebola.*

The Global Dimension : Bilateral

- The international community was actively involved in response efforts
- The United States was the leading funder of the international Ebola response.
- The US Global Ebola Strategy goals were carefully implemented through USAID, CDC and US Department of Defence and State.
- The UK Department of International Development coordinated the UK's response alongside the Ministry of Defence, the Foreign and Commonwealth Office and the National Health Service
- Cuba and China were also involved in the containment of the crisis

The Global Dimension : Multilateral

- *Multilateral agencies that played an active role in the fight against Ebola include:*
 - *The World Bank*
 - *European Union*
 - *African Development Bank*
- *Non-Governmental Organisations also played a very strong role in the containment of Ebola:*
 - *Médecins Sans Frontières (MSF)*
 - *The Bill and Melinda Gates Foundation*

The Global Dimension : The United Nations System

- The UNSC passed a resolution declaring the Ebola epidemic a threat to international peace and security
- The UN created a mission for the first time in history to tackle public health emergency
 - United Nations Mission for Ebola Emergency Response (UNMEER)
- WHO served as the lead agency in the mission – played a critical role on technical issues, training support and running Ebola treatment clinics
- World Food Programme provided food assistance and distribution
- UNICEF provided water supply, sanitation hygiene and solid waste disposal as well as counselling and advisory services
- UNDP provided equipment for running of information campaigns, kits for survivors
- UN Mission in Liberia (UNMIL) facilitated the effective deployment of UNMEER

Lessons Learnt

- The Ebola crisis holds a number of lessons for global health and insights into the practice of health diplomacy
- Ebola has shown how inadequate surveillance and response capacity in a single country can jeopardize the public health security of national populations and the rest of the world
- It has also demonstrated how health diplomacy can be a useful tool in pursuing global health efforts through the willingness of the international community to form a united front against a shared threat
- Ebola has brought to the fore the economic and political barriers to individual and collective health security encountered by poor nations
- The Ebola crisis has revealed the challenge of neglected diseases concentrated among the poor
- The recent Ebola crisis has exposed organisational deficiencies in the functioning of the WHO

Perspectives for the Future

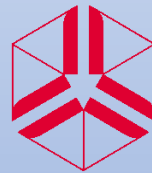
- Ebola crisis has provided an impetus to effect change by cogitating creatively about the future of health diplomacy
- One potential way to enhance health diplomacy would be for future global actions to address the global political and economic determinants of health inequities
- Future health diplomacy should concentrate on mitigating the problem of neglected diseases concentrated among the poor
- It is imperative to strengthen capacity building funded structures within WHO for emergency preparedness and response at the headquarters, regional and country levels.
- It is a key health diplomacy challenge to develop a global health security framework that would ensure both higher investment and compliance.

Conclusion

“In the past... it was enough for a nation to look after itself. Today, it is no longer sufficient.” – R. Cooper

“A global crisis like Ebola outbreak in 2014 reminds the world that there is need to act together because the health of one part of the globe is inextricably linked to the health of another.” – Ilona Kickbusch

Thank You



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