Conclusion: Global Health Governance and the Fight Against HIV/AIDS in a Post-Westphalian World

Wolfgang Hein, Sonja Bartsch, Lars Kohlmorgen and Jan Peter Wogart

The post-Westphalian global polity and the development of global health governance

In modern times, the fight against infectious diseases has always depended on international cooperation, requiring nations to coordinate their health and trade strategies with each other. As we have shown in the previous chapters, however, the need to create a global response has never been stronger than in the case of the HIV/AIDS epidemic, which seems in turn to have heightened global awareness in the cases of more recent epidemic threats like those of SARS and Avian Flu. After neo-liberalism and the early structural adjustment programmes had given primary attention to macroeconomic policies, the need to improve health conditions in poor countries as a precondition for economic growth (CMH 2001), fighting poverty and improving security¹ again became a central part of the global political agenda during the 1990s. This new priority for health, that included the recognition of large inequalities in global health as a threat for rich countries, became one important dimension in framing the public perception of the fight against HIV/AIDS and strengthening the role of global civil society in conflicts around access to medicines.

The new challenges to global health as a result of globalization are the starting point of the academic study of global health governance. The evolving architecture in health, however, must not only identify technical and political responses to those challenges, but it has to do so in a rapidly changing global environment. This change has been characterized
by various authors as a transitional process from a Westphalian to a post-Westphalian structure of international relations (Bull 1995; Keene 2002; related to GHG: Fidler 2004, 2005). The rising importance of transnational interactions compared to relations between nation-states leads to a very complex pattern of global health governance, which makes it difficult if not impossible for international governmental organizations (IGOs) to maintain their dominance in this policy field.

This points to two decisive characteristics of global health governance: (1) we can observe manifold interactions between various fields of global governance, particularly between the world economic and world social order, which are an indication of evolving global social relations, and (2) we find a rapidly increasing number of new non-state actors – both from the for-profit and the non-profit sector – in the global health arena, which implies an increasing importance of private and hybrid governance modes, and a prominent role of advocating civil society organizations as well as new mechanisms of finance and research.

The general debates on global governance have shown that – due to the absence of a global state authority – agreements linking different policy fields and securing universal compliance (for example, to integrate social and environmental standards in WTO agreements) are difficult to reach. Hence there is a need for compromise. This strengthens actors that are active in various political fields. In our case of the global fight against HIV/AIDS and access to medicines, this concerns actors that have an impact in both the public health realm and the field of trade and IPRs. It furthermore presupposes managing a discourse between both fields which allows the development of new frameworks of understanding. In the previous chapters, we have demonstrated that discursive interfaces are a major element of global health governance. Thomas Risse explains the corresponding role of the ‘logic of arguing’ in the understandings of international institutions in a comprehensive way:

First, arguing and persuasion provide micromechanisms for socialization and social learning, irrespective of whether this learning is about acquiring new social knowledge and skills or about getting socialized in the validity of an international norm. Second, an emphasis on arguing sheds light on processes of norm change. Third, a focus on deliberative processes improves our understanding of institutional effects. Institutions serve as discourse arenas enabling deliberative processes geared toward problem solving. They do so by establishing relationships of trust among actors which are deemed crucial for processes of communicative persuasion and consensus seeking. (Risse 2002: 606f.)