EPISODE 21: SCIENCE AND DIPLOMACY FOR GLOBAL HEALTH

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Garry Aslanyan [00:00:08] Hello and welcome to the final episode of season two of the Global Health Matters podcast. I'm your host, Garry Aslanyan. Over the course of season two, we've had discussions with 20 guests from 15 countries on topics ranging from health of migrants, corruption and global health career paths. TDR and I are very excited to announce that, due to strong support from you, our listeners, we will have our third season starting in April this year. I'm thrilled about this news. In the coming months, we will be bringing you even more interesting topics and issues in global health that require reflection, discussion and debate. Just before we start the show, can you do me a big favour? Hit the FOLLOW or SUBSCRIBE button on your podcast app and then you'll never miss an episode.

Garry Aslanyan [00:01:06] In this episode, we discuss the role of science diplomacy in global health action. This is a topic close to my heart as I've seen first-hand how science diplomacy has supported public and global health advancement in several areas. As you will hear from this episode's guests, science diplomacy fosters international cooperation and addresses issues of geopolitical concern. To discuss this topic, I'm joined by Ilona Kickbusch and Aída Mencía Ripley. Ilona is the founding director of the Global Health Centre at the Graduate Institute in Geneva, and a well-regarded global health diplomacy expert. Aída is the Vice-Chancellor for Research and Innovation at Universidad Iberoamericana in the Dominican Republic. She will be sharing an insightful case study of how diplomacy enabled their university to contribute to the national COVID response. Hi Ilona! Hi Aída.

Aída Mencía Ripley [00:02:20] Hi.

Ilona Kickbusch [00:02:21] Hi. Hello.

Garry Aslanyan [00:02:22] Thanks for joining today. So let's start, Ilona and Aída, with you sharing an experience in your career where science and diplomacy complemented each other in achieving a goal or in driving a change?

Ilona Kickbusch [00:02:35] Well, thank you for that. And of course, in global health diplomacy, there are so many situations where science and evidence are absolutely critical to move forward. But the issue that's really on my mind is the Framework Convention on Tobacco Control. And for a long period of time, WHO wanted an international agreement on tobacco regulation, which was very difficult to move forward, despite a lot of research and evidence that was available. And then there was a real breakthrough in the evidence in science related to passive smoking and to the impact on children. And these data and this evidence really made a significant difference in actually getting the negotiations started. And so this issue of, in health, knowing something is dangerous, knowing it needs norms, knowing it needs an international agreement, but not yet having everyone on side; you can really have breakthroughs when a certain type of evidence comes to the table and then takes negotiations to a new level to prevent harm.

Garry Aslanyan [00:03:57] That's a great example. Aída, what's your experience with that?

Aída Mencía Ripley [00:04:01] For us at UNIBE, the COVID pandemic. As you know, in a small country in the Caribbean, we were able to use science diplomacy to build some bridges and provide for the country some of the early data on COVID sequencing, for example, genomic sequencing. We were actually one of the first countries in the region that was able to do this, thanks to some of these international collaborations, and we were then able to use that information as some of our senior scientists were on

the COVID Advisory Board. So we were able to take things from the lab to public policy relatively quickly and of course able to work with the State in the national COVID response.

Garry Aslanyan [00:04:42] Great examples both of you. Ilona, if we were looking at current issues at hand, we have in global health science, research diplomacy. They could come together to contribute to achieving global health. In what other ways we can see that coming together.

Ilona Kickbusch [00:04:59] Well, Garry, science and evidence are so important because many global health issues are also subject to ideology. Therefore, being able to come together and create a global consensus also means we have to overcome ideology and we need to have really, really good data. And we can see that over the years, particularly in issues related to sexual health in the widest sense of the word. If you think of HIV/AIDS, many of the international agreements, the access to medicines, etc. for stigmatized groups of people was only possible because we had the hard science. So many of these issues that we negotiate at a global level where countries come from very different cultural, ideological, religious backgrounds, need the strong evidence and science to be able to reach a diplomatic consensus. And so I think particularly issues also related to equity, where we are able to show which are the vulnerable groups. Why are they vulnerable? Why do we need to focus on a certain issues in a certain way to reach these vulnerable groups? Are dependent on science and evidence. And that, of course, means not only medical evidence, because often when we say science, Garry, we think of medicine and we think of virology and all those kinds of things, like recently during COVID-19, but just as important are the behavioural sciences, the political sciences, in some cases even geography and other things that we need to understand better in order to get a good consensus on health responses.

Garry Aslanyan [00:06:54] Those are great points. To follow up on that, how successful are we in those complex issues? Where is the trend at the moment in terms of more sensitive issues and getting that ironed out by diplomats? And also why that critical role of non-medical science still is lagging and its role or its use is maybe lagging, or at least there is a perception that there is a lag.

Ilona Kickbusch [00:07:28] First of all, I think we must say we're in a difficult situation right now. We have seen during COVID-19 and perhaps Aída also wants to add some things here, that it's been very difficult to convince people, and that includes policy-makers, about certain approaches. And we are in a situation where trust in science and trust in policy-making is not as strong as maybe it was 10 or 20 years ago. So we really need to work on that trust. We need to work on health literacy. We need to work on science literacy, both of the general population and of policy-makers and diplomats. And it's absolutely critical that diplomats increasingly, as they are trained, also gain an understanding of science, because this is not only in relation to health as we talk about it, but for example, climate science. And climate science also is challenged again and again. And of course, climate has significant impacts on health. So that would be one answer to the first part of your question. We are at a critical point and some things are more difficult also because we see that voices from countries that do not accept women's rights, for example, are getting stronger. And we see that the consensus around women and sexual and reproductive health and rights is getting more difficult. And we get very strange bedfellows in this context. Your other question about the behavioural, the social political sciences is a constant problem that is in SARS, in Ebola, in monkeypox, you name it. There has been knowledge, there are experts in how you talk to communities, how you understand culture, but the dominance of the medical sciences is still so strong and this crazy idea that anything social science is weak, its soft. You know, some people have called this the soft sciences, as if these sciences didn't bring incredibly hard data to the table that make a difference. So just to take one example, we have found that trust, trust in government, trust in institutions, trust in your others, your neighbours, your community is one of the major factors for a COVID-19 response, a successful COVID-19 response. Now those are hard data. On these data around

trust, we saw that life and death depended, and these are things that we really need to address seriously as we talk about science.

Aída Mencía Ripley [00:10:23] I just wanted to add some thoughts to that. I completely agree. Global health, I think, is completely over medicalised at this point and I think that some of the nuance that social and behavioural sciences bring to the table are crucial because we have the science and we have the interventions, but we need to be able to understand people's socioeconomic and political contexts in order to make sure that we meet people halfway, especially when we ask them to make major changes to their way of life, such as we did during the pandemic. One of our studies early on in the pandemic, coincidentally, was also related to the issue of trust. We found that trust in public institutions was directly linked to mental health symptoms in people. So the degree of anxiety that they felt in terms of the virus and their ability to cope with it, was very closely linked to how much they were able to trust our public institutions to manage it. So I think that the nuance that social, behavioural and political sciences bring to the table are crucial. And as Ilona was saying, especially with issues of women's rights and women's reproductive rights, these cultural contexts become increasingly important in order for us to make sure that the hard science reaches everyone.

Garry Aslanyan [00:11:40] If I can stay with you Aída. You mentioned how science diplomacy efforts helped the Dominican Republic's response to COVID, I want to know more about what was the role of the university and the critical role that you played and how exactly that happened. I know many of our listeners are based in academia.

Aída Mencía Ripley [00:12:00] Our university has had an international focus from the very beginning, so we've always had a very close relationship with the diplomatic corps in the country. And so really early on in the pandemic, we relied on not just our research programme and also, of course, academic programmes, had to go online and so forth, but we immediately started knocking on doors through international affairs to take a look at our partners and see where we could collaborate. And that included relying on those relationships, but also taking advantage of more direct relationships between researchers. Our embassy, for example, in Italy, was very, very much involved. We kind of played to our strengths there with our close relationship with the diplomatic corps in the country and took these conversations to the diplomatic level. We had never done that and definitely not as aggressively as we did during the pandemic. But we really felt that we needed to work at record time and of course, going through diplomatic channels to make sure that we got to the right people at the right time, which fortunately we did. And those relationships were also crucial in increasing our installed research and clinical capacity. So actually, we were able, and we were the only university actually, that conducted COVID testing at the peak of the pandemic. So at a time when we really needed more resources to meet national testing demands, we were able to plug in to the public network of labs. But that was really the mechanism, that we went directly through diplomatic channels to work on it.

Garry Aslanyan [00:13:43] So the pandemic provided you with a chance to actually do things that maybe you did not plan on doing or it was not..... Ilona, what Aída just shared really demonstrates the need for the relationships and how key they are, do you have any advice for scientists in terms of how they can build capacity for better scientific collaboration, for better global collaboration and as well for linking to that diplomatic world out there?

Ilona Kickbusch [00:14:16] Well, Garry, I think over the last decade or so, one has seen scientific collaboration really expand exponentially. And during COVID-19 one saw a lot of that, and one saw also that some of the usual ways of approaching publication of results, etc., changed significantly. You know, new methods of early publication, peer review, etc. What wasn't significantly done to the extent that it should have happened was that interdisciplinarity. Definitely, while there was a lot of cooperation

between the medical sciences, the virologists, you know, the epidemiologists, etc., etc., the pulling in also in the advisory bodies that international organizations and that countries set up, the integration of the social and behavioural and political sciences was very rarely done. So that expertise was not used sufficiently, and I would hope that the colleagues in the medical sciences have gained a greater understanding how necessary that is. Just think of the impact of false information and of infodemics, an area where you really need the social sciences. I think the other thing that many scientists had to learn during the pandemic was how do you actually communicate with policy-makers, with the general public and with the media? And therefore, you know, this way we have of talking to each other as scientists, challenging each other, saying why not look at it this way, etc., that can be very disorienting, for example, for a general public or for a politician who needs to take a decision. And therefore we need to start to understand how we communicate while we continue to constantly challenge ourselves and each other. There's a new level of transparency and debate here that's absolutely necessary, and now even more so, as we have discussed earlier, that the trust in science has declined and therefore, I think every scientist has the responsibility and every university has the responsibility to actually reach out into the community, not only in times of crises, but in general, to the community, to schools, to parliamentarians, to have dialogs around science. And that, of course, as Aída also said, at the international level, would then mean that scientists who are involved in global health matters also are in regular contact with the diplomats of their countries to be able to advise them. If I think, you know, there were many major negotiations this year at the UN related to health, on pandemics, on universal health coverage, on tuberculosis, I think it would be good if the diplomats who negotiate that knew about the evidence base of these negotiations, and that is not done systematically enough. So the scientists should push for it and not only wait until they are invited to the table.

Garry Aslanyan [00:17:54] Switching a little bit to something that you wrote an article on, Aída. In 2021 in Frontiers, you and your colleagues make a good case there for decolonizing science diplomacy. What are the challenges being experienced by the countries in the South when it comes to their diplomatic efforts, and are they different, and what role could let's say South-South collaboration play in that effort?

Aída Mencía Ripley [00:18:23] I think one of the challenges is that we continue to prioritize North-South collaboration, and a large number of funding sources require that relationship, and I think it has sort of unwittingly led us to ignore South-South collaboration. But there aren't as many funding programmes for South-South collaboration, so you just sort of naturally fall into sort of that previous North-South collaboration, which is fine, which is great, but it shouldn't be the only way we engage. And I think in that sense, some of those relationships, and that's why we talk about decolonizing science diplomacy, some of those relationships sort of establish themselves in a very similar way. It has a very similar sort of aid framework. The authorship and the more sophisticated work is led by Global North countries and our countries act more as research sites. I think that that's a bit of what needs to shift. International rankings also, I think, place some undue pressure on North-South relationships. And again, I think universities in the Global South need to be sort of more intentional in their policies so that they do prioritize South-South collaboration. I think at some point it will also require setting up some funding programmes for South-South collaboration. But I think that those are sort of the main pressures. An interesting thing while we were talking with diplomats during the pandemic was many of them were actually quite delighted that they could go to the countries where they serve as diplomats and discuss collaboration with our country, sort of on more equal terms with academic institutions. Because we were so vocal about what we were doing in science, they felt they could sit at the table and negotiate a more equal terms. So I definitely agree with Ilona about how researchers and academia needs to not wait to be invited, but, you know, take its seat at the table.

Garry Aslanyan [00:20:33] There's probably a lot of misconception among scientists or kind of a barrier in terms of how to really enter that diplomatic world that then helps in that South-South collaboration, for example. Definitely there is a need to break those myths and promote that approach. Thanks for that reflection, Aída. Ilona, the pandemic in general terms was, as you said, a great opportunity for solidarity, scientific collaboration. If you were to reflect on the pandemic and looking forward into the future, what's the role of science and science diplomacy?

Ilona Kickbusch [00:21:13] Aída, has alluded to some of these things that first of all, there has to be a strong support for research and academic institutions and science institutions, they are not always the same. You know, think of labs and other things. Think of strong CDC Centers for Disease Control, for example. So that needs support from international organizations and funding sources. It needs support in terms of bilateral support, both North-South and South-South, but it also needs support within the countries. But that's not only in the public sphere in terms of public universities or public Centers for Disease Control and things like that. There is also, of course, the need to support, we heard, are production centres. We need to look at supply chains in new ways. We need to be sure that also the research that is done in the private sector is taken into account. I'm on the Board of FIND, the Foundation for Innovative Diagnostics, and a fair bit of research for diagnostics is done in the private sector. Think of India, where a lot of the vaccine research is done in private companies. So it's a very mixed bag, if I can call it that, and that should actually, as we decolonize in a way, that should provide fantastic new opportunities for researchers in the Global South to actually stay in their countries, go back to their countries, the diasporas are incredibly important here and I know of some colleagues working in the Global North who regularly go back to their country of origin, spend several months there to train young scientists. So that's the one side of the picture. The other side of the picture, which would be a much larger discussion, is really the question of sharing of the knowledge. And what we are seeing is that as health becomes more geopolitical, also the sharing of health results, of research results, is becoming more political. It has an enormous economic impact. Just think of all the profits that have been made with the production of vaccines. Think of how important vaccine production is for the economy of India. So what we're actually seeing is that because science and research are becoming a part of global competition, the sharing that we talked about earlier in terms of collaboration might actually become more difficult. So it's not just a question of intellectual property, it's also, you know, the whole development process where one is no longer willing to share as much as one did, and you get both a securitization of science and research and in some cases, in the worst cases, a weaponization of that as well. And that's why it's so dangerous if we are sort of decoupling the world again in a way, as we are doing into blocks, where you sort of get science sovereignty in a strange way that actually stops collaboration. As we saw that during COVID, we saw countries not sharing data, we saw countries not sharing their research results. And that is bad for everyone.

Garry Aslanyan [00:24:54] Aída, what is happening let's say if you were to take Dominican Republic and at national level, are there any efforts made in what Ilona mentioned in terms of institutional capacity and when it comes to science diplomacy and what is required do you think? Share that with our listeners please.

Aída Mencía Ripley [00:25:13] Our national grants programme has been very explicit about including the diaspora and diaspora scientists in our national funding schemes. So they've actually come up with specific mechanisms through which those collaborations can be enhanced and they can be included in national grants. That national grant system has always had this very strong desire to connect and has been able to establish some policies to do that. I think institutions, academic institutions are sort of increasingly aware. I think COVID just brought to the forefront the need to do more science diplomacy, but I think at a national level, perhaps a science diplomacy policy, what some of the research shows is that especially Central American, the Caribbean, there's such heterogeneity between countries, and

some countries are doing science diplomacy at the ministerial level, while others have different departments in different ministries, so there's a lot of overlap in roles and functions so I think sort of an organized way to go about this would be for a national science diplomacy policy, where roles and expectations are clear for everyone. I think we're sort of slowly moving into that. The fact that our national grants programme has prioritized science diplomacy is a really, really good sign. I think we'll get there soon enough.

Garry Aslanyan [00:26:33] Maybe a last word. I'll start with Ilona. Are you optimistic or pessimistic about the future of global collaboration and/or science diplomacy?

Ilona Kickbusch [00:26:45] That's very difficult to answer, Garry. I think we are at a turning point. The world has changed. The world has changed through COVID. But the world has also changed because the Global South, if I can just use that term, has a much, much stronger voice. If you look at the agenda, for example, of G20 India, to be followed by G20 Brazil and then G20 South Africa, we are going to see a phenomenal change in how priorities are set in global health and in global science collaboration, because all these three middle-income countries, if I call them that, are absolutely central in and really good in research and science and they are leaders in their field. I mean, just think of Fiocruz in Brazil. I mean, unbelievable expertise. Think of Indian universities. Think of South Africa just during COVID in the contributions that they have made and then were punished for. This is going to be a game changer. So looking at that, I'm optimistic. I'm worried about certain developments in the Global North because we don't know how American politics are going to play out over the next four years. I'm worried, as I indicated, about the extreme competition with China and here also Europe will need to position itself. And science diplomacy and science collaboration are going to be really key hot issues here, because if you think of the past during the Cold War, scientists would come together, even though their politicians didn't and even though their diplomats didn't, but now we are going to see that because science has become so securitized to a certain extent, that it's also going to be difficult to have scientific cooperation if we start to have new blocks that will not work with each other. And of course, through the Russian invasion of Ukraine, there is also a cut-off of Russian science from international cooperation at this point in time. So I think on the Global South side, there is reason to be optimistic and we will see a change of the system. I'm absolutely sure about that. But I see some of these other dangers that are of a larger geopolitical nature that could also influence science and health diplomacy quite significantly and negatively.

Aída Mencía Ripley [00:29:36] I agree completely with Ilona. I think that what we're seeing in the Global South is reason for optimism. I think in the end, if you are in this sort of scientific enterprise it's because you have this sort of stubborn optimism about people moving forward and moving forward together. I think that that's sort of our DNA and that's why we do this. But I think that optimism, of course, has to be tempered by all of these sort of macro geopolitical issues Ilona has mentioned. For me, at an institution in one of the Global South countries, I think we saw a very rapid advance during COVID in terms of how universities engaged with public policy and with international partners. I am concerned that we've become sort of lax about it now. So COVID is not a threat as it used to be and that we sort of make the mistake of not continuing with these efforts. So I think we need to take this installed capacity and make sure that we continue to build on it.

Garry Aslanyan [00:30:41] Thank you Aída, thank you Ilona, for this great conversation and I'm sure we'll be watching this area as we work in achieving the global health goals that we have. Thanks for joining today.

Ilona Kickbusch [00:30:54] Thank you very much for having us.

Aída Mencía Ripley [00:30:56] Thanks for having us.

Garry Aslanyan [00:31:01] Ilona and Aída captured several important aspects for us to consider regarding science diplomacy in global health. First, coming out of the pandemic, it's essential to rebuild the public's trust in science and policy-making. One way of doing so is by enhancing understanding of science by diplomats and policy-makers. Second, fostering strong relationships and good dialog between scientists and diplomats can lead to national level impact. And third, as much as North-South collaboration achieves scientific progress, building South-South collaborations are key towards our efforts to decolonize global health. Before we end this episode, let's hear a message I received from Zulfeya in Tajikistan.

Zulfeya (Tajikistan) [00:31:53] When I met Dr Garry Aslanyan, I know he's a wonderful person, a fantastic host of Global Health Matters podcast and the podcast where Dr Garry raises many public health issues. I like his simple and understandable speech. It's hugely important for me, an epidemiologist from Tajikistan. Transcripts in Russian help me to catch missing messages. For me, Global Health Matters podcast brings an amazing opportunity to learn from dedicated people, change my mind and lead to action. Thank you, Dr Garry.

Garry Aslanyan [00:32:35] Thank you, Zulfeya, and thank you to all our listeners for your continued support of this podcast. To learn more about the topics discussed today, visit the episode webpage where you will find additional readings, show notes and translations. Don't forget to get in touch with us via social media, email or by sharing a voice message with your reflections on this episode.

Elisabetta Dessi [00:33:02] Global Health Matters is produced by TDR, an infectious diseases research programme based at the World Health Organization. Garry Aslanyan, Lindi Van Niekerk and Maki Kitamura are the content producers and Obadiah George is the technical producer. This podcast was also made possible with the support of Chris Coze, Elizabetta Dessi, Izabela Suder-Dayao, Noreen O'Gallagher and Chembe Collaborative. The goal of Global Health Matters is to produce a forum for sharing perspectives on key issues affecting global health research. Send us your comments and suggestions by email or voice message to TDRpod@who.int, and be sure to download and subscribe wherever you get your podcasts. Thank you for listening.