

## **PS3.3**



### | BACKGROUND

Governance has become a well-established sub-field in global health over the past two decades, in part because the tradition of governance based on nation-states is no longer adequate. Global governance actors now include nation-states, regional and international organisations, charitable foundations, civil society and non-governmental. States and intergovernmental organisations have dominated international decision-making for most of the last century. The demand for governance is increasing due to rapidly evolving complex relationships and interdependencies among actors. **An honest and critical examination of the role each organisation plays in maintaining asymmetries of power is required.** 

Whilst most democracies cannot neglect the nexus between climate change and health, they are hesitant to directly link climate change to certain mortality numbers and securitize the nexus between climate change and health to an existential threat. However, these complex challenges require effective partnerships among levels of government and jurisdictions, as externalities are too strong for any one jurisdiction – be it a country or a local government – to manage the challenges on their own.

Decolonization calls for arrangements that strive for **community participation**, **Indigenous ideas**, **and national sovereignty** emphasizes the importance of focusing on the tenets of power of speech, legitimacy, and the public sphere. In addition, there is an enhanced attention to the ways in which authority, power and resources are allocated for health and climate governance. Yet, it is less clear on how key principles of good governance (i.e. accountability; leadership; integrity; stewardship; and transparency) are and should be used to address this nexus of climate and health. Specifically, we do not understand well **how power impacts the integration of policy decision-making processes across levels of <b>governance**. For example, attention has been channeled to national-supranational relations, while national-subnational networking remains less explored.

The concept of multilevel governance has been instrumental in many respects, focusing on mutual dependence among levels of government– notably to better understand inter-governmental relations (including with supra-national organisations), as well as the interactions among all types of actors – public, private, citizens – at different scales of government.

### | OBJECTIVES

- Explore how good governance principles contribute to decolonization of global health, specifically, the desired governance arrangements enabling community participation/self-determination, indigenous ideas, and national sovereignty.
- Discuss how MLG can accelerate the shifts in power/authority along three dimensions (i) devolution of power from central to local governments; (ii) increased sharing of power between the state and civil society, and (iii) reduction of state sovereignty through joining of international coordination mechanisms.
- Develop and share a clear list of reforms/best practices to enable more proactive and coordinated ways to decolonize global health.





#### Moderator

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