



# Swiss Health Foreign Policy 2019–2024



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Commemoration of the 70<sup>th</sup> Anniversary of the World Health Organization (WHO), United Nations Office at Geneva, May 2018. Headquarter of the World Health Organization and host of a multitude of various key health actors, International Geneva is a major governance hub for global health. ©FDFA

# 1

## Overview

In Switzerland as in most other countries, issues relating to health and healthcare in Switzerland were primarily considered to be domestic policy matters. Cross-border health risks, which have always required international coordination, were one exception to this. Communicable diseases such as tuberculosis, HIV, Ebola, the Zika virus and bird flu are all recent examples of cross-border health risks, highlighting the importance of such cooperation. Similarly, it is over the past 30 years that countries around the world have realized the crucial importance of public health, both in terms of development and economic policies. As such, health has acquired an ever-greater political dimension to the point where it is now firmly placed on the international agenda.

A broad variety of health challenges must be tackled with an international approach. These include communicable diseases, antibiotic resistance, development of new and affordable medicines<sup>1</sup>, the lack of healthcare personnel, an ageing society, urban health, attacks on healthcare personnel in crisis zones, key factors influencing health (determinants of health), fragmentation in the global health architecture, air pollution, the increase in illegal drug trading, patient-related healthcare information and the sustainable financing of solidarity-based healthcare systems.

Improving global health in an increasingly interconnected world presents considerable challenges, as well as opportunities. This is specifically illustrated by the 2030 Agenda for Sustainable Development adopted by UN member states in 2015, in which health plays a key role. The 2030 Agenda calls for multi-sectoral cooperation and policy coherence, which is in line with the approach that Switzerland has been pursuing for many years, particularly with regard to Health Foreign Policy.

Swiss Health Foreign Policy has two pillars: firstly, it supports further improving the overall health of the Swiss population and the healthcare system in general. Secondly, it is an instrument of Swiss foreign policy and, as such, is designed to support its objectives, i.e. to defend Swiss interests in a strategic manner and to contribute effectively to global health. It is focused on securing an individual's right to health, as well as to other health-related human rights.

Within the framework of Swiss Health Foreign Policy, the Federal Council defines the guiding principles and strategic objectives (or priority areas) of its engagement on global health issues, which are of relevance to Switzerland. Thus, by adopting a mutually-agreed position, the Federal Council ensures that these issues can be addressed coherently and effectively. This requires a continuous reconciliation of both domestic and foreign policy aspects. The Federal Council's strategy forms the basis of cross-sectoral cooperation between the actors concerned, as well as the formulation of a common approach.

The Swiss Health Foreign Policy 2019–2024 was adopted by the Federal Council on 15.5.2019 and is to be reviewed in six years at the latest.

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<sup>1</sup> 'Medicines' in this context refers not only to medication but also to medical products, vaccines, diagnostics and in-vitro diagnostics.

# 2

## Guiding principles of Swiss Health Foreign Policy

Swiss Health Foreign Policy is rooted in the nation's fundamental cultural and political values and principles, as enshrined in the Federal Constitution. In addition, Switzerland's international commitment to health is aligned with the constitution of the World Health Organization. In this respect, Switzerland is committed to securing the right of each individual to the highest attainable standard of physical and mental health. Its human rights-based approach aims to ensure equitable access to healthcare for all.

Switzerland, therefore, assumes its global responsibility and acts in solidarity with other countries in the health sector as it does in other areas. Switzerland contributes to finding solutions to global health challenges both within the relevant international organisations (i.e. multilaterally) and in direct cooperation with other countries (i.e. bilaterally). To this end, Switzerland draws on its strengths, including its knowledge and experience, its networks, its commitment to humanitarian aid and development cooperation, its role as host to many international organisations and as a major force in research and innovation.

Switzerland strives to build bridges between different actors at the international level and to facilitate a constructive, targeted dialogue. It attaches great importance to cooperation among all partners, looking for synergies between private and public actors public-private, as it is already the case in relation to the good governance of global health institutions.

Implementing Swiss Health Foreign Policy requires a comprehensive approach that takes into account the determinants of health, focuses on people and addresses inequalities. However, this approach also recognises that individual health needs and ability to influence personal health vary from one individual to another and according to the context.

In the interests of implementing Swiss Health Foreign Policy effectively, the Federal bodies involved consult each other on a regular basis within the framework of the Strategy Committee and its sub-committees (see Annex II) to ensure that their actions at national and international levels in the defined priority areas are as coherent and effective as possible.

At the end of 2017, the relevant Federal bodies reviewed the previous Swiss Health Foreign Policy document in light of the changing national and international context. They concluded that it was fundamentally sound, and that it formed a basis for coherent and effective action in the international arena. However, a thematic condensation of previous objectives into six fields of action will be implemented, drawing on Switzerland's guiding principles and existing strengths, to allow the Swiss Health Foreign Policy 2019–2024 to make an even more effective contribution to national and international health. The Swiss Health Foreign Policy Strategy prioritises these fields and determines the focus of work for the policy period 2019–2024.

# 3

## Opportunities and challenges in the global context

### From the Millennium Development Goals to the UN 2030 Agenda

Looking back at the UN Millennium Development Goals, recent decades have seen enormous progress in key health-related areas. Average life expectancy has risen significantly around the world, the AIDS epidemic has been curbed and child and maternal mortality has dramatically decreased. Nevertheless, not all of the Millennium Development Goals have been achieved.

With the UN 2030 Agenda for Sustainable Development, adopted in 2015, all UN member states have committed to modelling their future according to the economic, environmental and social dimensions of sustainability.

Goal 3 of the 2030 Agenda is: '*Ensure healthy lives and promote well-being for all at all ages*'. Health affects other sustainability goals and vice versa, hence close cooperation between health and other sectors is crucial.

### Health and humanitarian crisis remain a threat to the international community

Growing trade and mobility make it easier for health risks to spread around the world. Diseases such as Ebola, the Zika virus and bird flu are recent, recurring reminders of the threat posed by such pathogens. According to experts, the risk of a pandemic triggered by a dangerous mutation in an influenza virus remains the greatest potential challenge. They give the Spanish flu outbreak, which claimed some 50 million victims at the end of the First World War, as an example.

The international community has reacted to this elevated risk by strengthening both regional and international crisis prevention and response mechanisms, and by conducting peer reviews of their practical implementation and effectiveness.

The threat of dangerous pathogens spreading across borders is not the only risk that has increased, growing antimicrobial resistance is making current treatment options less effective. Leading international initiatives such as the G7 and G20 have now begun to address this issue. To lend additional impetus to the urgent development of new antibiotics, the G20 states have created the *Global R&D Collaboration Hub on AMR* to promote joint research into antimicrobial resistance. This platform, which began its work in 2018, is intended to support a better coordination of research and development programmes for new antibiotics and diagnostics at the international level.

Increasingly, health risks are originating from or being exacerbated by protracted armed conflict. Human health is in particular jeopardy in such crisis situations, with care being especially difficult to provide and to access, and attacks frequently making life dangerous for patients and healthcare personnel alike. Communicable diseases spread especially quickly in refugee camps and urban slums, and diseases that had been virtually eliminated are beginning to return. This illustrates the importance of investing in building sustainable health systems.

### **Access to medicines: a balancing act between equal health opportunities, economic interests and promoting innovation**

Access to medicines is both a human right and a complex global challenge at the nexus of health, business, politics and development. According to the WHO, despite international efforts, approximately two billion people around the world have no access to life-saving medicines – whether generics or patented products. The question of access also affects high-income countries such as Switzerland, especially where certain high-priced medicines are concerned.

Meanwhile, the authorities deploy a variety of instruments in an effort to better position themselves in price negotiations with the pharmaceutical industry. One of these instruments is known as ‘horizon scanning’, which is a screening system designed to identify future treatment methods at an early stage of their development. It is intended to strengthen the authorities’ position in subsequent price negotiations. Foreign price comparisons and cross-border procurement initiatives are other ways to reduce medicines costs. The pharmaceutical sector is by far Switzerland’s biggest exporter, so lower prices imply lower revenues for the industry. As a consequence, the country is caught, both nationally and internationally, amid the push and pull of innovation, patent protection, access to medicines and profitability.

Other mechanisms concentrate on the development of new medicines that would otherwise never be produced owing to a lack of investment incentives. These include medicines used to treat neglected or tropical diseases, but also new antibiotics in which developers and manufacturers would not invest without public and private support.

### **Universal health coverage is caught amid the changing balance of social and economic forces**

‘Universal health coverage (UHC)’ means that all individuals and communities receive the health services they need without suffering financial hardship. Ensuring universal health coverage is one of the health-related priorities of the UN 2030 Agenda. The question regarding how to ensure the financing of UHC remains a key challenge.

Over half of the world’s population has no reliable access to essential health services. What’s more, around 100 million people are forced into extreme poverty (living on less than USD 1.90 per day) because they have to pay for health services out of their own pocket. The lack of personnel is a further challenge, with estimates putting the shortfall at 18 million healthcare professionals by 2030.

The world’s poorest countries lack the resources needed not only to set up a functioning health system, but also for other areas that have a critical impact on health. A persistent or even widening gap between richer and poorer regions and segments of society, as well as factors such as gender, age and education level, exacerbate inequalities in access to healthcare.



## **Technological progress: opportunities and challenges for health systems**

At international level it can be seen that stable health systems have a positive effect on health. Ageing, the rising incidence of non-communicable diseases and technological progress are nonetheless driving the cost of healthcare up. As a result, high-income countries are increasingly confronted with the question of how healthcare can continue to be financed in the long term. Low and middle-income countries face exactly the same challenge.

Although technological developments continue to open up new avenues of treatment, low-cost interventions and process optimisation could also lead to high levels of treatment success. In recent years public awareness of patient safety issues has increased. According to experts, at least one death per 1,000 hospital patients is the result of medical error, even in high-income countries. In Switzerland, it is estimated that between 700 and 1,700 people die each year due to malpractice. Simple rules, such as hand hygiene in hospitals or surgical checklists and standardised procedures might significantly reduce medical errors and complications. This greater awareness is reflected in the Global Ministerial Summits on Patient Safety, which began in 2015 and are attended by both experts and high-level political decision-makers.

## **Global spread of non-communicable diseases as the downside of increased prosperity and longer life expectancy**

The spread of non-communicable diseases presents a challenge for the health systems of low, middle and high-income countries. In the past, conditions such as cardiovascular disease, diabetes, cancer, respiratory disease and musculoskeletal diseases were found primarily in countries with high incomes. Today, non-communicable diseases are the primary cause of death worldwide.

In 2010, the international community decided to prioritise the fight against non-communicable diseases. It has since held three high-level meetings under the aegis of the United Nations. These diseases are many and varied, as are the factors (determinants of health) that cause and contribute to them. These include increasing environmental pollution, especially in low- and middle-income countries (e.g. as the cause of respiratory disease), as well as changing diet and exercise habits (e.g. as factors contributing to cardiovascular disease). International discussions in this regard are increasingly turning to new approaches aimed, for example, at reducing the consumption of tobacco, sugar, alcohol, or salt. Some of these approaches are voluntary, some regulatory.

Finally, international initiatives are also looking more and more at health literacy of the population. Relevant studies have shown that higher levels of literacy are generally associated with a healthier personal lifestyle and/or with a greater awareness of non-communicable diseases.

## **Global health regime undergoing radical change**

As a specialised organisation, the WHO plays a key role within the United Nations framework. In addition to implementing the health goal of the UN 2030 Agenda, its remit includes combating global health risks and ensuring universal health coverage, including in low and middle-income countries. The WHO has been under growing pressure since the early 2000s to justify to member states its normative, technical and operational leadership role on international health issues and crisis, especially in view of the emergence of new and well-resourced actors. Increasing shortfalls in funding for the secretariat have prompted a broad debate about a reform of the WHO and measures to ensure its independence.

Appointed by the World Health Assembly, Dr Tedros Adhanom Ghebreyesus of Ethiopia has been Director-General of the WHO since 1 July 2017. His general programme of work for 2019–2024, adopted by the Assembly in 2018, is based on the UN 2030 Agenda and contains an ambitious vision – that one billion more people should have access to universal health coverage, be better protected in health emergencies and be able to enjoy a healthier life.

## **New approaches in international addiction policy**

According to estimates, one in twenty people around the world use illegal drugs: a total of 247 million individuals. Of these, 29 million suffer from ill-health related to their addiction: the prevalence of HIV, hepatitis and tuberculosis is significantly higher in this group than in the rest of the population.

*Addiction* is a wide-ranging phenomenon, influenced by the interaction of biological, psychological and socio-economic factors, as well as by personal behaviours. Addiction has a negative impact on the health of the addict and of those around, and generates considerable costs for society.

There has been little success to date in the ‘war against drugs’. A paradigm shift is underway, initiated by Latin American countries in particular, with the encouragement of the *Global Commission on Drug Policy* and its internationally recognised members. As a consequence, increasing attention is being paid to measures focusing on health, which Switzerland has supported for many years now.

# 4

## Swiss Health Foreign Policy 2019–2024 – Strategic objectives

Drawing on the guiding principles set out above, the acknowledgement of what has been achieved to date, and the analysis of current and future opportunities and challenges in global health, the Federal Council has determined the following six strategic objectives (or priority areas) for its health foreign policy up to 2024. These were set in consultation with interested parties from the cantons, the private sector, the research community, the civil society and other actors:

1. Health security and humanitarian crisis
2. Access to medicines
3. Sustainable healthcare and digitalisation
4. Determinants of health
5. Governance in the global health regime (Global health governance)
6. Addiction policy

The six priority areas are linked and overlap in numerous ways, as do the commitments on the part of Switzerland, defined in relation to each of those action areas. For example, a strong WHO (priority area 5) may counter the spread of health risks (priority area 1), or a healthy change of lifestyle (priority area 4) can further reduce healthcare costs (priority area 3). Switzerland is committed to each of the six priority areas in equal measure.

## 4.1 Health security and humanitarian crisis

### Why is it relevant?

The International Health Regulations (IHR) are a legally binding international instrument, which sets out states' rights and obligations with respect to the reporting of public health events. The Ebola crisis, originating in West Africa in 2014, highlighted the need for improvements in the consistent application of the IHR, specifically in response to such crisis. The WHO plays an important role here. For this reason, in May 2016 the World Health Assembly adopted a programme for health and humanitarian crisis.

It is becoming increasingly important to incorporate health-related considerations into humanitarian work. Examples of this include the UN Security Council Resolution 2286, intended to safeguard medical missions, and a report entitled *Protracted Conflict and Humanitarian Action*, issued jointly by the International Committee of the Red Cross (ICRC) and the WHO. The latter recommends a holistic, human rights-based approach to managing health-related challenges. This includes cooperation between development and humanitarian work, and giving due consideration to factors beyond the health system that may have an impact on health, such as infrastructure, environment, climate and energy. This allows to ensure that development progress can be sustained, to take action to counter deterioration in public health and to encourage peacebuilding dialogue between conflicting parties.

### What are Switzerland's interests?

Switzerland intends to improve protection against global health risks for the Swiss population. This is to be achieved by strengthening global prevention and through more effective responses. This requires a stronger WHO that promotes cooperation between member states and provides the necessary technical support to reinforce early detection at national and global level, monitoring, prevention and control systems in line with the IHR, while preventing the type of overreaction that can lead to unnecessary financial losses.

Geneva not only is the global health capital, but also home to the most important international humanitarian organisations. Switzerland has an interest in promoting synergies and exchange between actors in the health, humanitarian action, peace building and human rights fields in Geneva.

### What is Switzerland doing?

Switzerland:

1. advocates reinforcing the international system for early detection, monitoring, and prevention of, and fight against, communicable diseases at the global level;
2. supports the WHO in the interest of a faster and more effective response to health and humanitarian crisis;
3. believes that the fight against growing antimicrobial resistance should be treated as a priority, in particular in the context of associated international initiatives;
4. has stepped up international cooperation, in particular with the European Union, the EU Public Health Committee, the European Centre for Disease Prevention and Control, as well as in the context of the Global Health Security Agenda initiative;
5. applies the International Health Regulations consistently and efficiently, and shares experience with their implementation with other countries;

6. is committed to improving governance and coordination with regard to actors and instruments in the humanitarian aid, health, peacebuilding, development and human rights fields, in order to strengthen health systems in fragile states;
7. supports health measures in humanitarian and other crisis situations in order to alleviate suffering;
8. is committed to safeguarding medical missions in armed conflicts from the warring parties and thus ensuring that international humanitarian law is respected;
9. is committed to safeguarding the health of the personnel of international organisations engaged in improving public health in Switzerland or abroad;
10. seeks to ensure safe and sustainable health services and to protect service providers and infrastructure in the health sector;
11. actively opposes any and all forms of gender-specific violence;
12. in implementing the Sendai Framework for Disaster Risk Reduction, is continuing its efforts to ensure that biological risks from the outbreak of disease, epidemics and pandemics – caused by communicable diseases – are considered as a priority action of disaster risk management, equal to natural hazards;
13. supports the collection of data to facilitate global resource allocation, the definition of measures and standards, political dialogue and coordination;
14. encourages the effectiveness of multi-sectoral cooperation between authorities at the national and international levels in the interest of protecting the climate, adapting to climate change and sharing best practices, in order to improve the health of displaced persons and migrants.

Federal Councillor Alain Berset, right, and Doctor Jean-Chrysostome Gody, Director of the Bangui pediatric hospital, left, speak during an official visit of the Bangui pediatric hospital, Central Africa Republic, on May 7, 2019 © KEYSTONE / Anthony Anex



## 4.2 Access to medicines

### Why is it relevant?

In Goal 3.B of the 2030 Agenda for Sustainable Development, the international community set itself the objective of further improving access to safe, effective, quality, affordable medicines and vaccines around the world by 2030. This access is vital to achieving the higher-level goal of universal health coverage.

Four dimensions essentially determine access to medicines:

1. medicines must be developed according to the needs of patients;
2. they must be affordable;
3. they must be genuinely available to the patient on site;
4. they must be adapted to the patient's socio-cultural context if they are to be accepted.

These dimensions must be factored into research and development (including market incentives), from the very start right through to the ultimate use of the medicine. Consideration must also be given to factors such as intellectual property regulations (e.g. patent protection and protection of trial data), market approval, product financing, the structure of the health system, available supply chains and distribution channels, the global concentration of production sites, and individual health-related behaviours.

As home to the headquarters of international R&D organisations and major private and public-sector research actors, and as one of the world's leading exporters of pharmaceuticals and a driver of innovation, Switzerland holds an important position. It makes a significant contribution to the availability of quality medicines both nationally and internationally.

### What are Switzerland's interests?

Switzerland aims to improve access to proven and newly developed, safe, effective, high-quality, affordable and/or financially sustainable medicines. To this end, it intends to promote an evidence-based debate at international level that covers all access-related aspects relevant to the different disease areas and products. In doing so, it must take into account differing interests in the fields of health, development policy and business.

Switzerland also has an interest in protecting intellectual property abroad in such a way as to ensure that innovation in research and development of new and improved medicines remains worthwhile.

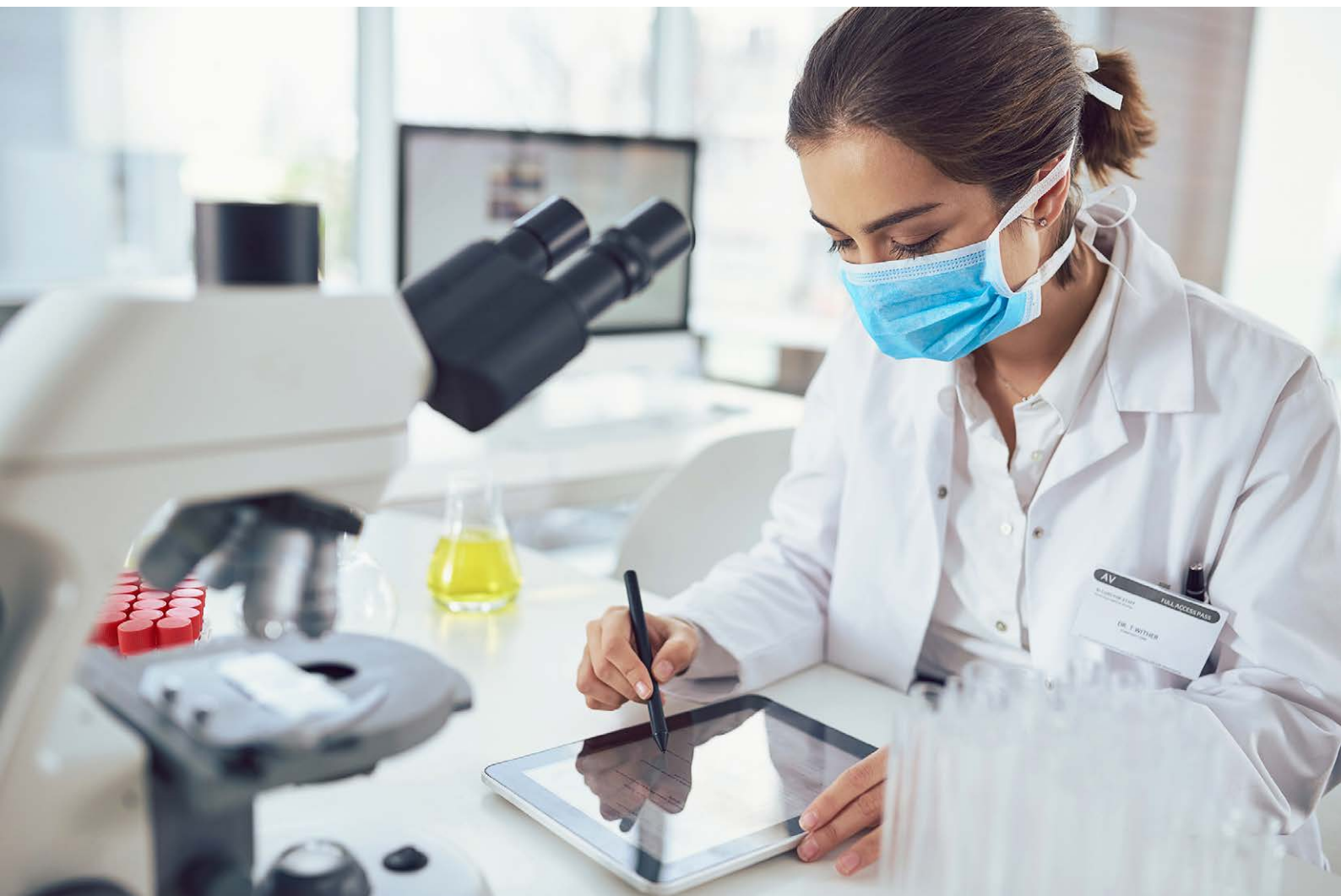
### What is Switzerland doing?

Switzerland:

1. advocates protection of intellectual property, emphasising its role in R&D and in the marketing of new medicines. Here, it recognises the application of the TRIPS flexibilities in accordance with the Doha Declaration on the TRIPS Agreement and Public Health;
2. in the context of international initiatives, supports stronger and better coordination of research and development of medicines that are subject to particular challenges, or for which there is little incentive to invest. These include vaccines, effective antibiotics and products to fight infectious, poverty-related or neglected diseases in low and middle-income countries;
3. is establishing closer cooperation between the Swiss Federal authorities and their foreign partner organisations;
4. is active around the world in the fight against counterfeit medicines;

5. actively supports compliance with and the continued development of international market access obligations;
6. supports complementary, pragmatic solutions to facilitate access to affordable, quality products in low and middle-income countries;
7. as part of its work with low-income countries, supports their efforts to strengthen their health systems. This includes supplying health services with life-saving medicines;
8. supports global and regional mechanisms and initiatives that, in line with international obligations, strive to improve access to medicines (systems of regulation, horizon-scanning, price-setting, etc). Attention is given to establishing constructive public-private partnerships;
9. supports structural reforms in partner countries to strengthen their medical regulations and regulatory authorities, thereby allowing for more effective evaluation and monitoring of treatments and health technologies.

Access to medicine begins with research and development. As a driver of innovation and home to important private and public players in the area of research and development, Switzerland, also through its framework conditions, significantly contributes to the availability of quality medicines both nationally and internationally. © iStock, 2019.



## 4.3 Sustainable healthcare and digitalisation

### Why is it relevant?

Great progress has been made in healthcare around the world over the past half-century. In high-income countries, the objective of universal health coverage has largely been achieved, and there have also been significant improvements in healthcare in many middle and low-income countries. Alongside growing prosperity, these improvements are some of the primary reasons for the continued increase in life expectancy in most countries around the world. As prosperity increases, so do the population's expectations in terms of the quality and services offered by their health system. This makes cost a key issue everywhere.

Technological progress is continually opening up new opportunities in healthcare. Digitalisation – using a variety of information and communication technologies – offers great potential for exchanging information between healthcare providers and has a bearing on both patient safety and the quality of care. It also makes service provision more efficient and more accessible. The data volumes involved in this are growing exponentially. The careful use and analysis of this data hold enormous potential for healthcare globally. It must nonetheless be remembered that new technologies may present ethical, health and financial risks, as well as risks related to data security.

### What are Switzerland's interests?

Switzerland is committed to sound, sustainable national health systems and better healthcare worldwide, with a view to reduce the risk of poverty and to improve control of global health risks, such as highly infectious diseases, and, by extension, to strengthen national health security.

Switzerland also intends to make the best possible use of the opportunities offered by digitalisation in order to promote cost-efficient healthcare models. Furthermore, it wishes to remain integrated at the international level, especially where the development and production of medicines and technologies are concerned, given that these goods are manufactured as part of global value chains. Furthermore, Switzerland supports the development of a global health data governance framework, as well as meaningful international cooperation in this area. Finally, Switzerland has an interest in ensuring that the international norms and guidelines that apply to the health sector guarantee appropriate protection for health, personal privacy and dignity. In Switzerland, the Federal Data Protection Act (DPA), in addition to a variety of special legal provisions, provides the basis for the processing and sharing of personal data. The legislation sets out the conditions on which personal data may be disclosed internationally. These requirements must be respected when concluding treaties on cross-border data exchange involving personal information.

### What is Switzerland doing?

Switzerland:

1. is committed both nationally and internationally to efficient, integrated models of care, as well as sound and sustainable national health systems. To this end, it promotes the use of information and communication technologies to support care (e.g. by improving information-sharing along the treatment chain to improve the quality of diagnosis and treatment, as well as adherence) and better coordination between service providers (e-health) – while taking the necessary action to protect both data and the IT infrastructures;



2. advocates, within the WHO and other multilateral bodies, for quality, person-centred healthcare based on human rights;
3. under the aegis of the OECD, the WHO/EURO and other bodies, is stepping up exchange with other countries to advance models of care, with a particular focus on better coordination of care and the use of e-health applications, as well as patient safety and cost control;
4. endeavours to collect and use high quality data in the interests of greater transparency and continued development of health systems;
5. is examining how to ensure the responsible use of data when cooperating with other states;
6. is actively involved in implementing the WHO Global Code of Practice on the International Recruitment of Health Personnel;
7. supports cross-border, individual access to patient data and, if needed, will establish the necessary legal framework;
8. is committed to strengthening international cooperation to ensure that people with rare diseases are diagnosed more quickly, treated effectively and properly cared for;
9. works in partner countries to promote health literacy among patients and the population in general with regard to risk factors and healthy behaviours, for example, as well as how to manage non-communicable diseases (self-management) and access health services;
10. works in partner countries to promote child and maternal health in particular, as well as sexual and reproductive health and rights, as an integral part of person-centred healthcare provision;
11. supports partner countries as they draft and implement sustainable health financing strategies, including mobilising national resources and their effective use.

Digitalisation can improve the quality of healthcare provision and patient safety by giving healthcare professionals access to relevant information and patients' records, everywhere and every time they need it. © Gorodenkoff / iStock



## 4.4 Determinants of health

### Why is it relevant?

The 2030 Agenda presents a unique opportunity to take action on the determinants of health with a cross-sectoral approach. The Sustainable Development Goals are integrated, indivisible and interdependent, and take into account the economic, social and environmental dimensions of sustainable development.

The 'health in all policy areas' approach covers every field that might have an effect on health. Health-related aspects must therefore be factored into all policies, which must in turn promote equality of opportunity when it comes to health. Furthermore, in negotiations Switzerland has consistently been a vocal advocate of a cross-sectoral approach.

### What are Switzerland's interests?

Switzerland intends to influence socio-economic and environmental factors to improve people's health and well-being and to reduce inequalities with regard to health. This will not only ensure that individuals are able to maintain their independence, but also optimise investments in healthcare. It will also reduce the risk of poverty resulting from health problems. Switzerland is committed to harnessing synergies and fostering improved coordination between the various actors in relevant policy areas in the interest of promoting health and preventing potential conflicts of interest.

### What is Switzerland doing?

Switzerland:

1. joins global strategies, programmes and initiatives aimed at reducing health-related risk factors, and thus contributes to combating communicable and non-communicable diseases;
2. raises awareness in other areas, as well as the awareness of the respective national and international actors, regarding the importance of determinants of health;
3. encourages and boosts research and cross-sectoral cooperation in the interests of having a coherent and efficient approach in all policy areas;
4. supports exchange with regard to cross-sectoral cooperation and the engagement of key actors;
5. remains committed at the international level to environment, nutrition and education, and is increasingly extending its activities to other determinants;
6. is harnessing the potential of International Geneva via the various missions, UN organisations and new platforms, for purposes of networking and growing cross-sectoral synergies.

Sozioökonomische und ökologische Faktoren haben einen starken Einfluss auf das Malaria-Risiko bei Kindern unter fünf Jahren.  
© Swiss Malaria Group / Ben Moldenhauer



## 4.5 Governance in the global health regime

### Why is it relevant?

International Geneva plays an important part in the global health governance and architecture. The World Health Organisation – tasked with achieving the best possible degree of health for all – has been based in Geneva since 1948. Other UN organisations, as well as many other key actors in global health, have also made Geneva their home. This allows them to benefit from the expertise of Swiss actors, such as professional associations, the research and academic community, healthcare providers, the private sector and NGOs working in the health sector. International Geneva therefore provides fertile ground for political and operational synergies between the organisations working to promote health around the world.

### What are Switzerland's interests?

Switzerland intends to promote coherent, strong, sustainable, efficient and multi-sectoral institutions, so that these can perform their roles effectively and contribute to improvements in global health. In this context, Switzerland is committed to supporting reforms within international organisations, in order to create more efficient structures capable of finding effective solutions more quickly, thereby strengthening the credibility and acceptance of these institutions. Only in this way can global health risks be minimised, knowledge generated and shared, approaches formulated, and limited funds deployed in the most effective way.

Switzerland intends to counter further fragmentation in the global health space/landscape and to further strengthen International Geneva and its role as a global centre of expertise for health. To this end, it aims to involve all actors, encourage the division of labour and use of synergies at all levels of global health policy, and create an understanding of the need for interaction between various policy areas in relation to health.

### What is Switzerland doing?

Switzerland:

1. actively supports coherent, strong, sustainable, effective, efficient and multi-sectoral global health institutions, i.e. those that achieve their set targets and keep administrative costs as low as possible;
2. is working towards greater national and global recognition of the interplay between different policy areas where health is concerned;
3. encourages the inclusion of and division of labour between all of the actors within the global health arena in drawing up viable shared approaches to achieve the goals of the UN 2030 Agenda. In doing so, it advocates cohesive cooperation between the actors concerned from the fields of health, science, the private sector, development cooperation, humanitarian aid, human rights and other health-related policy areas;
4. supports efforts to achieve institutional and thematic coherence within the UN system and between the individual UN institutions at all levels;
5. is involved in governance reforms within the WHO and in strengthening the WHO's leadership role in global health governance;
6. encourages the coordination of specific WHO activities and programmes in various regions of the world;
7. is committed to further consolidating the position of International Geneva as the global health capital;
8. supports exchange platforms as well as research and academic institutions in the health sector in Geneva;
9. advocates a framework for boosting research in global health.

Federal Councillor Alain Berset, left, discusses with Dr. Tedros Adhanom Ghebreyesus, right, Director General of the World Health Organization (WHO), prior the opening of the 72nd World Health Assembly at the European headquarters of the United Nations in Geneva, Switzerland, May 20, 2019 © KEYSTONE / Salvatore Di Nolfi



## 4.6 Addiction policy

### Why is it relevant?

The UN 2030 Agenda for Sustainable Development calls for a multi-sectoral approach. Its Goal 3.5 demands that the prevention and treatment of substance abuse, including narcotic drug abuse and the harmful use of alcohol, be strengthened. Switzerland's four-pillar approach – consisting of prevention, therapy and reintegration, harm reduction and survival support as well as control and law enforcement – has achieved international renown. Its success is evidenced by lower prevalence of HIV, and the reduction of drug use in public spaces. Interventions aimed at protecting public health as well as public safety and security are an important part of the comprehensive approach taken by Switzerland.

### What are Switzerland's interests?

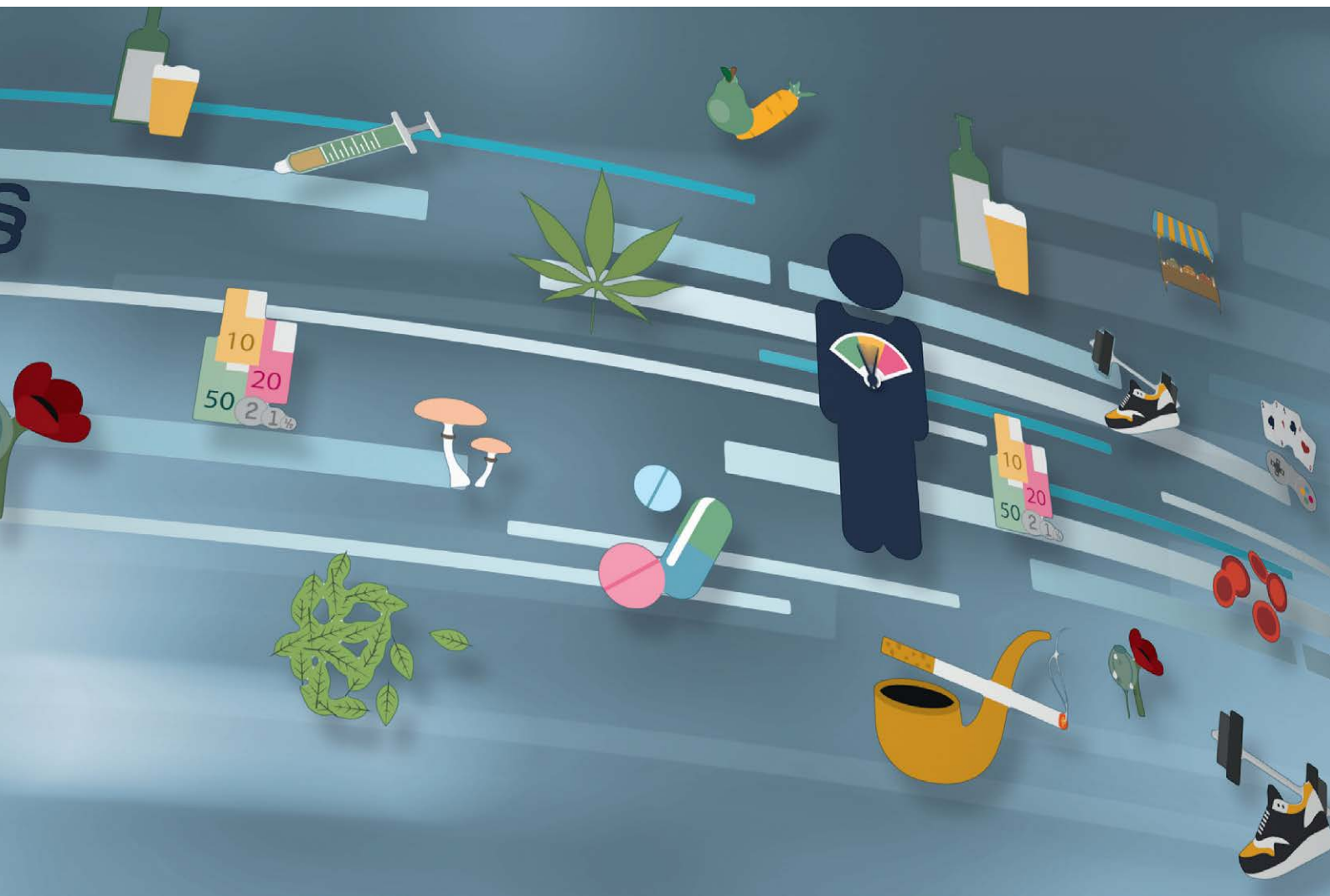
Based on its experience, Switzerland is among those countries that promote comprehensive health and human rights policy approaches to addiction. Switzerland intends to achieve a coherent, health and human rights-based approach to addiction and supports the development of an international drug policy according to those principles and in line with its national health policy priorities.

### What is Switzerland doing?

Switzerland:

1. is committed to advancing international drug policy to achieve a coherent, comprehensive and multidisciplinary approach to addiction policy that includes health and human rights principles and integrates aspects of development policy.
2. actively supports a broad-based debate within international bodies on the issue of addiction, and identifies opportunities at the international level to discuss Switzerland's experience with addiction as it affects all areas of health;
3. is stepping up cooperation in this area, in particular with European states and with European Union authorities. Examples include the working arrangement for 2018–2020 jointly formulated by the Federal Office of Public Health (FOPH) and the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA);
4. incorporates the experience and findings of other countries into the implementation and ongoing development of the National Addiction Strategy, including ongoing development of cannabis policy;
5. is a strong global advocate for the formulation of an evidence-based system of indicators that takes into consideration the multi-sectoral approaches (health, social services, education, justice, police and economy) and the effects of measures, according to the 2030 UN Sustainable Development Agenda.

Addiction takes many forms. In addition to the use of psychoactive substances such as tobacco, alcohol or drugs, it also includes excessive behavior such as using the Internet or gambling. © FOPH



# 5

## Swiss Health Foreign Policy 2019–2024 – Implementation

Tried-and-tested instruments will be used to maintain interdepartmental cooperation in as efficient a form as possible. The various Federal bodies are involved in the individual action areas in accordance with their particular remits, and coordinate with each other on an ongoing basis. A list of contributors to the Swiss Health Foreign Policy is given in Annex I, while Annex II contains a chart showing the institutional structure.

The Annual Health Foreign Policy Event was introduced in 2012 as a means of involving non-governmental actors directly in the policy process. It has proven popular and will be continued. The staff exchange programme between the Federal bodies concerned will also be maintained as far as it is possible. Eventually, as is currently the case, one staff member of the Swiss missions to international organisations in Geneva, Brussels and New York will have specific responsibility for the health portfolio.

### 5.1 Managing implementation

Swiss Health Foreign Policy 2019–2024 defines the strategic emphasis of Switzerland's engagement in international health issues. The Federal Council receives reports on implementation status, as well as

the extent to which Swiss Health Foreign Policy targets have been attained, at the halfway point after the first three years of the policy period and at its end.

### 5.2 Cooperation with international actors

Cooperation with international actors is crucial to Switzerland's work in the action areas defined in the Swiss Health Foreign Policy. For example, Switzerland works within international organisations to issue health-related guidelines and standards and is also involved in the global dialogue on major health-related challenges.

International actors include the following, in particular: international organisations within the UN system

(WHO, UNAIDS, UNFPA, UNICEF, FAO, World Bank Group); the WTO, OECD, Council of Europe, OIE and CFS; global health initiatives, such as GFATM and Gavi; product development partnerships, such as DNDi, FIND and MMV; and civil society organisations, such as MSF, Médecins du Monde, Medair, Solidarmed and Iamaneh, etc. Switzerland also fosters lively bilateral exchanges with the European Union, development cooperation partner countries and states that have similar healthcare systems.

### 5.3 Institutional structure and national actors

The present interdepartmental structure of inter-office cooperation on Swiss Health Foreign Policy has proven successful in practice. In the interests of streamlining this structure and making it more agile, the Strategy Committee will convene issue-based inter-departmental groups of experts on an as-needed basis in the future. These will then report to the Committee. The individual bodies will also be re-named.

#### a) Management Committee

The Management Committee (formerly the Interdepartmental Conference on Health Foreign Policy, IK GAP), to which strict rules on deputies apply, meets on an annual basis and is led by the Director-General of the FOPH, the Director General of the SDC and the State Secretary of the FDFA. The Management

Committee invites representatives of the FDFA, FDHA, FDJB, DDPS, FDF, EAER and DETEC, as well as of the Conference of the Cantonal Ministers of Public Health to attend. Other Federal bodies may be included as needed or as interest dictates.

#### b) Strategy Committee

The Strategy Committee (formerly the Advisory Group), to which strict rules on deputies apply, comprises representatives of the SFPD, FOPH, SDC, IPI, SERI, SECO and Swissmedic<sup>2</sup>. It meets three times a year to improve policy coherence and to prepare up-to-date dossiers for regular decision-making processes at office director, department or Federal Council level. Where necessary, the Strategy Com-

<sup>2</sup> Further federal bodies may be included as need or interest dictate.



mittee may convene issue-based inter-departmental groups of experts, which will then report to the Committee.

**c) Intellectual Property, Innovation, Trade and Health**

Intellectual Property, Innovation, Trade and Health (IdAG GIHGE, formerly IdAG GIGE - the interdepartmental working group on health, innovation and intellectual property) is chaired alternately on a shared basis by the Head of the FOPH International division and the Head of the IPI International Affairs division. It holds regular meetings at least twice a year.

**d) Expert groups**

The issue-based interdepartmental groups of experts convened on an as-needed basis by the State-

gy Committee, report to that Committee and where necessary also to the Management Committee. The expert groups are co-chaired by section heads from the federal bodies concerned.

**e) Annual Swiss Health Foreign Policy Event**

The Annual Swiss Health Foreign Policy Event (formerly the Swiss Health Foreign Policy Stakeholder Event) is held annually and includes Swiss healthcare actors from both inside and outside government. This instrument ensures that non-governmental actors are included more effectively in Swiss Health Foreign Policy. Furthermore, the experience and interests of non-governmental actors in the health sector are consulted depending on the issue and expertise at hand.

## 5.4 Resources

It is expected that Swiss Health Foreign Policy 2019–2024 can be implemented without placing any additional financial burden on the federal government. The six strategic objectives that have been

determined will permit the coherent and effective use of the existing resources of the federal bodies concerned.

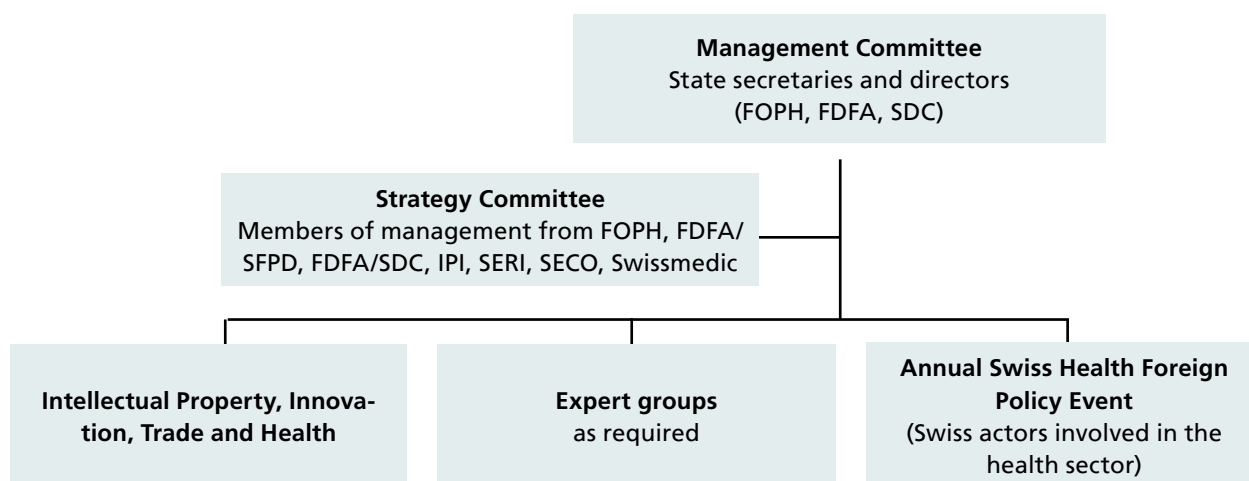
Federal Councillor Ignazio Cassis visiting a health cooperation project funded by Switzerland. Amman, Jordan, May 2018. ©FDFA



## Annex I: Federal bodies involved in Swiss Health Foreign Policy

DEA	The Federal Department of Foreign Affairs (FDFA) Directorate for European Affairs DEA is the federal government's centre of expertise on all European policy matters. Its remit includes monitoring European integration policy and analysing and assessing its implications for Switzerland. It coordinates matters of integration law and policy and negotiates treaties with the EU in close collaboration and shared responsibility with the competent bodies in each case. The DEA also provides information on Switzerland's European policy and European integration.
Defence	The Defence sector represents the planning, executive and administrative backbone of the Swiss armed forces. Armed forces Medical Services is an integral part not only of the armed forces, but also the Swiss system of healthcare as a whole. Medical Services bears overall responsibility for medical services for the Swiss Armed Forces and, as part of the Coordinated Medical Services (CMS) unit, it is responsible for managing national health-related emergencies such as pandemics and major incidents, etc.
DP (SFPD)	The FDFA's Directorate of Political Affairs safeguards Switzerland's foreign policy interests and ensures optimum bilateral and multilateral relations. It supports the Federal Council as it determines specific foreign policy objectives and ensures that positions in concrete policy areas remain consistent. It also implements Switzerland's foreign policy within UN organisations and their special bodies, as well as within other international organisations. Furthermore, the DP is responsible for Swiss policy as a host nation to international organisations. The Sectoral Foreign Policies Division (SFPD) coordinates Swiss Health Foreign Policy within the FDFA.
FOAG	The Federal Office for Agriculture (FOAG) is part of the Federal Department of Economic Affairs, Education and Research (EAER). Attached to the FOAG is Agroscope, the federal government's centre of expertise for agricultural research. Within the federal government, the FOAG is the lead agency responsible for the United Nations Food and Agriculture Organization (FAO), which provides the secretariat for the FAO-WHO Codex Alimentarius food standards commission. In addition, in cooperation with the SDC the FOAG serves the Committee on World Food Security (CFS) and is co-head of the One Planet Network's Sustainable Food Systems Programme.
FOCP	The Federal Office for Civil Protection (FOCP) is composed of the specialist units which deal with civil defence issues and also handle coordination with the other instruments of security policy. The FOCP supports the bodies involved in preventing collective risks and in incident management, especially the relevant federal government bodies, the cantons and the partner organisations within the integrated civil protection system.
FOEN	The Federal Office for the Environment (FOEN) is tasked with ensuring the sustainable use of natural resources such as soil, water, air, quietness and the forests. It is responsible for protecting the country against natural disasters, safeguarding the environment and human health against excessive impacts and conserving biodiversity and the quality of the landscape. It is also in charge of international environmental policy.
FOPH	As part of the Federal Department of Home Affairs, the Federal Office of Public Health (FOPH) is the specialist authority responsible for public health in Switzerland, for national health policy and for Switzerland's contribution to international health policy. The FOPH is also in charge of safeguarding health and of effective crisis management and is tasked with detecting new threats at an early stage.
FOSPO	Within the terms of its statutory remit, the Federal Office of Sport (FOSPO) promotes the diverse and sustainable development of youth and adult sport.
FSO	The Federal Statistical Office (FSO) is Switzerland's national centre of expertise for official statistics. It produces and publishes statistical information on the status and development of the population, economy, society, education, research, land use and the environment.
FSVO	The Federal Food Safety and Veterinary Office (FSVO) promotes the health and wellbeing of humans and animals. In the case of humans, its main focus is food safety, healthy diet and protection of animal health.
IPI	The Swiss Federal Institute of Intellectual Property (IPI) is the federal government's centre of expertise on all matters relating to patent and trademark protection, declarations of origin, the protection of designs and copyright. It prepares legislation in these areas. The IPI represents Switzerland within international organisations and in dealings with third countries.
SDC	The Swiss Agency for Development and Cooperation (SDC) is the agency within the FDFA responsible for international cooperation. Alongside other federal offices, it is in charge of the overall coordination of development cooperation and cooperation with Eastern Europe and for cooperation with certain global health actors (incl. UNAIDS, GFATM and DNDi). It is also responsible for the federal government's humanitarian aid work. Swiss Humanitarian Aid is responsible for saving lives and alleviating suffering around the world. It acts before, during and after conflicts, crisis and natural disasters to support those in need.
SECO	The State Secretariat for Economic Affairs (SECO) is the federal government's centre of expertise for all core issues relating to economic policy. Its aim is to ensure sustainable economic growth by putting in place the necessary regulatory and economic policy conditions.
SEM	The State Secretariat for Migration (SEM) determines the conditions under which a person may enter Switzerland, live and work here. It also decides who is granted protection from persecution. In collaboration with the cantons, the SEM organises accommodation for asylum-seekers and the return of those who do not need protection. In addition, the SEM coordinates the integration of foreign nationals into Switzerland, is responsible for naturalising foreigners at the federal level and works actively at international level to control migration movements effectively.
SERI	The State Secretariat for Education, Research and Innovation (SERI), part of the Federal Department of Economic Affairs, Education and Research (EAER), is the federal government's centre of expertise for national and international education, research and innovation policy issues.
Swissmedic	Swissmedic is Switzerland's approval and supervisory authority for medicines and medical products. The agency ensures that only high quality, safe and effective therapeutic products are available in Switzerland and thereby makes an important contribution to protecting human and animal health.

## Annex II: Institutional structure of Swiss Health Foreign Policy



## Annex III: List of abbreviations

AMR	Antimicrobial resistance	HIV	Human Immunodeficiency Virus
CFS	Committee on World Food Security	ICRC	International Committee of the Red Cross
DDPS	Federal Department of Defence, Civil Protection and Sport	IHR	International Health Regulations
DEA	Directorate of European Affairs	IK GAP	Interdepartmental Conference on Health Foreign Policy
DETEC	Federal Department of the Environment, Transport, Energy and Communications	IPI	Swiss Federal Institute of Intellectual Property
DNDi	Drugs for Neglected Diseases initiative	MMV	Medicines for Malaria Venture
DP	Directorate of Political Affairs	OECD	Organisation for Economic Cooperation and Development.
EAER	Federal Department of Economic Affairs, Education and Research	OIE	World Organisation for Animal Health
EMCDDA	European Monitoring Centre for Drugs and Drug Addiction	PD (SFPD)	Directorate of Political Affairs (Sectoral Foreign Policy Division)
EU	European Union	R&D	Research and development
FAO	Food and Agriculture Organization	SDC	Swiss Agency for Development and Cooperation
FDF	Federal Department of Finance	SECO	State Secretariat for Economic Affairs
FDFA	Federal Department of Foreign Affairs	SEM	State Secretariat for Migration
FDHA	Federal Department of Home Affairs	SERI	State Secretariat for Education, Research and Innovation
FDJP	Federal Department of Justice and Police	SFPD	FDFA Sectoral Foreign Policies Division
FIND	Foundation for Innovative New Diagnostics	SHFP	Swiss Health Foreign Policy
FOCP	Federal Office for Civil Protection	Swissmedic	Swiss Agency for Therapeutic Products
FOAG	Federal Office for Agriculture	TRIPS	Trade-Related Aspects of Intellectual Property Rights
FOEN	Federal Office for the Environment	UN	United Nations
FOPH	Federal Office of Public Health	UN 2030 Agenda	UN 2030 Agenda for Sustainable Development
FOSPO	Federal Office of Sport	UNAIDS	Joint United Nations Programme on HIV/AIDS
FSO	Federal Statistical Office	UNFPA	United Nations Population Fund
FSVO	Federal Food Safety and Veterinary Office	UNICEF	United Nations Children's Fund
G7	Group of Seven	UNODC	United Nations Office on Drugs and Crime
G20	Group of Twenty	WHO	World Health Organization
Gavi	Gavi, the Vaccine Alliance	WHO EURO	WHO Regional Office for Europe
GFATM	Global Fund to Fight AIDS, Tuberculosis and Malaria	WTO	World Trade Organization
GIHGE	Interdepartmental working group on intellectual property, innovation, trade and health		

## **Imprint**

### **Editor:**

Federal Department of Home Affairs FDHA

**Federal Office of Public Health FOPH**

[www.bag.admin.ch](http://www.bag.admin.ch)

[international@bag.admin.ch](mailto:international@bag.admin.ch)

Federal Department of Foreign Affairs FDFA

**Directorate of Political Affairs, Sectoral Foreign Policies Division (SFPD)**

<https://www.eda.admin.ch/eda/en/home/foreign-policy/cross-departmental-themes.html>

[pd-sektorielleaussepolitiken@eda.admin.ch](mailto:pd-sektorielleaussepolitiken@eda.admin.ch)

Federal Department of Foreign Affairs FDFA

**Swiss Agency for Development and Cooperation SDC**

[www.sdc.admin.ch](http://www.sdc.admin.ch)

[gph@eda.admin.ch](mailto:gph@eda.admin.ch)

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Statue in front of the World Health Organization (WHO) headquarters in Geneva commemorating the 30<sup>th</sup> anniversary of the eradication of smallpox. © WHO/Christopher Black

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