

## Sit up or shut up: regional organisations and health

Stephen Kingah describes a project which is developing a toolkit to strengthen activities of regional organisations in the fight against poverty

What regional institutional practices and methods of regional policy formation are conducive to the emergence of embedded pro-poor health strategies, and what can national, regional, and international partners do to promote such practices and methods? This question is at the heart of a research initiative on Poverty Reduction and Regional Integration (PRARI), funded by the Department for International Development (DfID) and the Economic and Social Research Council (ESRC) of the United Kingdom. The question is even more pertinent in the context of the Ebola virus outbreak which has forced some countries in West Africa to fortify sentinels and upgrade border controls. Responses from individual states such as Guinea, Liberia and Sierra Leone have proven to be grossly inadequate. As the virus spreads to other neighbouring countries questions are being asked about the effectiveness of regional outfits such as the Economic Community of West African States (ECOWAS) to deal with the problem. In the past ECOWAS has played a major role on security and trade questions. What institutional formations would be needed for ECOWAS to provide a robust response to challenges such as Ebola? Beyond the Ebola scare it is more important to understand how regional organisations such as ECOWAS, the Southern African Development Community (SADC), and the Union of South American States (UNASUR) amongst others can put in place and implement sterling rules and policies that pertain to more effective health systems and data sharing. Sharing of data on prevention strategies, referral hospitals, laboratory practices, joint procurement of pharmaceuticals, and training are some of key areas where regional interventions are salient.

Limited access to health amenities remains a burning problem that particularly afflicts vulnerable sections of societies, notably women and children. The initiative that is funded by DfID and the ESRC explores the manner in which regional alliances, especially those in

the South such as SADC and UNASUR, can use their extensive regional health disciplines to foster poverty eradication. The investigators who are drawn from the Open University; the University of Southampton; the United Nations University (CRIS); FLACSO Argentina, and the South African Institute of International Affairs plan to use unique participative action research methods to develop a dynamic body of indicators. The indicators generated will be consolidated in a toolkit for regional health policy makers and relevant practitioners. While emphasis is placed on Bolivia and Paraguay in UNASUR, and on Swaziland and Zambia in SADC, it is expected that beyond the life cycle of the project and that apart from SADC and UNASUR other regional formations and national health authorities will also be beneficiaries of the toolkit. The investigators examine and compare SADC and UNASUR institutional mechanisms and policy development. They also investigate how regional and national levels of authority engineer; implement and monitor the implementation of health norms and strategies. They do this through the toolkit of indicators that will be created to assess regional policy change and success in relation to impoverished populations' access to healthcare in Zambia and Swaziland in Southern Africa, and in Bolivia and Paraguay in South America.

Given the complexities in which the world is now enshrouded the relevance of regionalism has clearly gone beyond trade and security. Another unique feature of this ESRC project (apart from the toolkit development) is the use of robust regional health policy as both a means and an end in the convoluted battle to eradicate poverty. As states enter a high point in the discussions on the financing of sustainable development goals after 2015 it is important that greater attention is placed on the role of regional organisations in realising these goals. Targeted focus on regional entities that have decent strategies in coordinating delivery of public goods such as health needs to shape the approach to take toward engaging regional organisations. In doing so attention will be duly placed on relevant and active regional bodies while the weaker ones can be comfortably phased out.

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