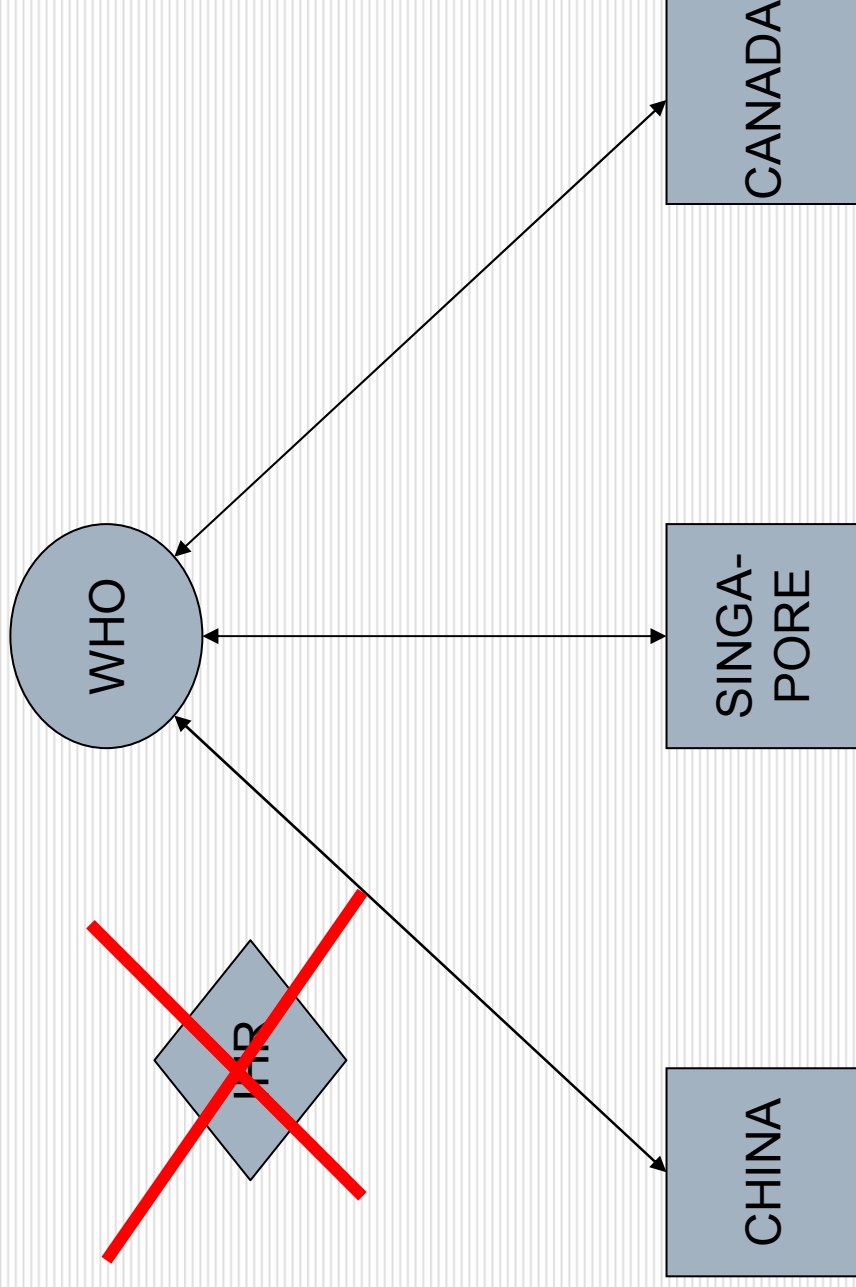


# The Governance of Health

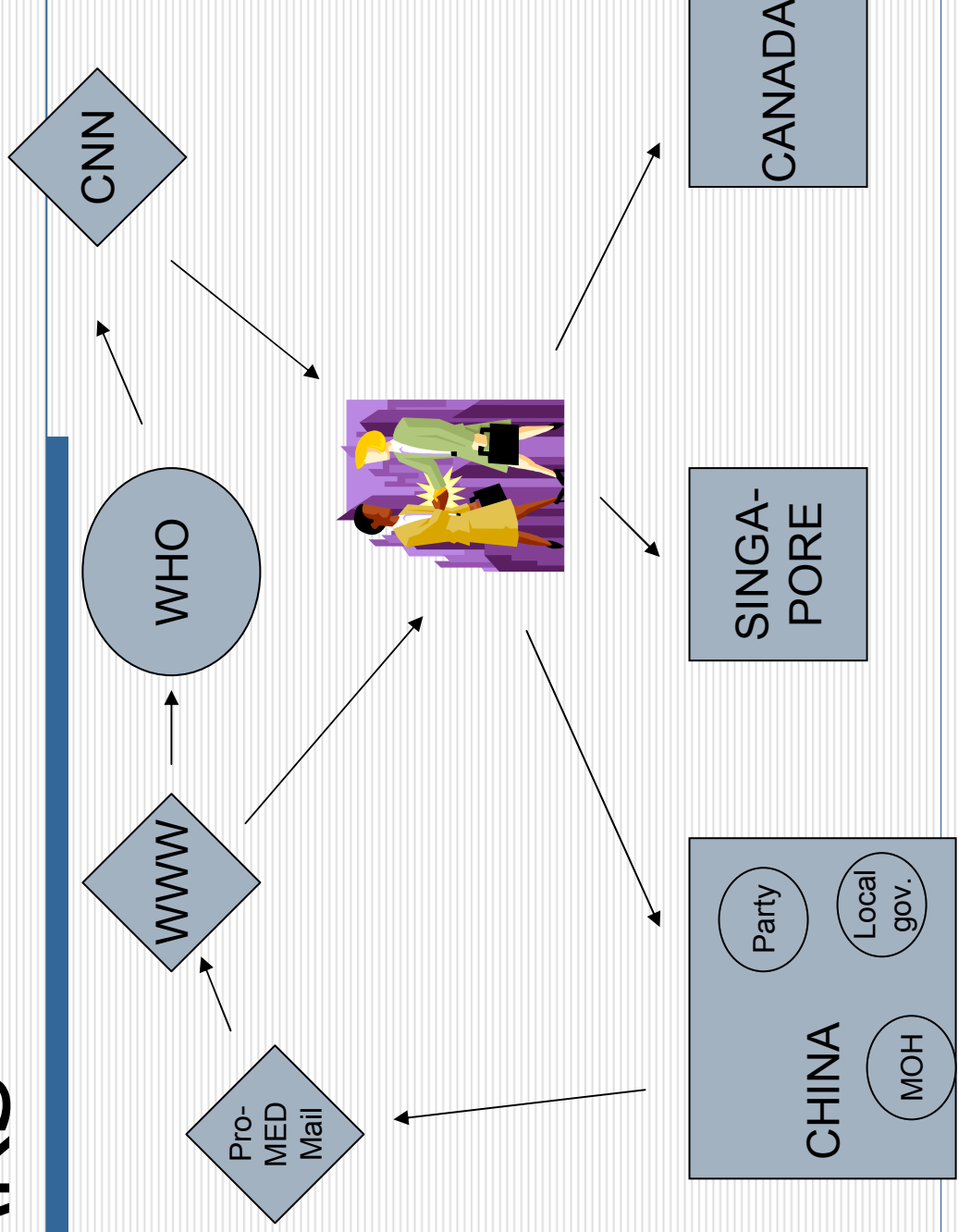
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Scott Burris  
Temple University Beasley School of Law  
Center for Law and the Public's Health at  
Georgetown and Johns Hopkins

# SARS

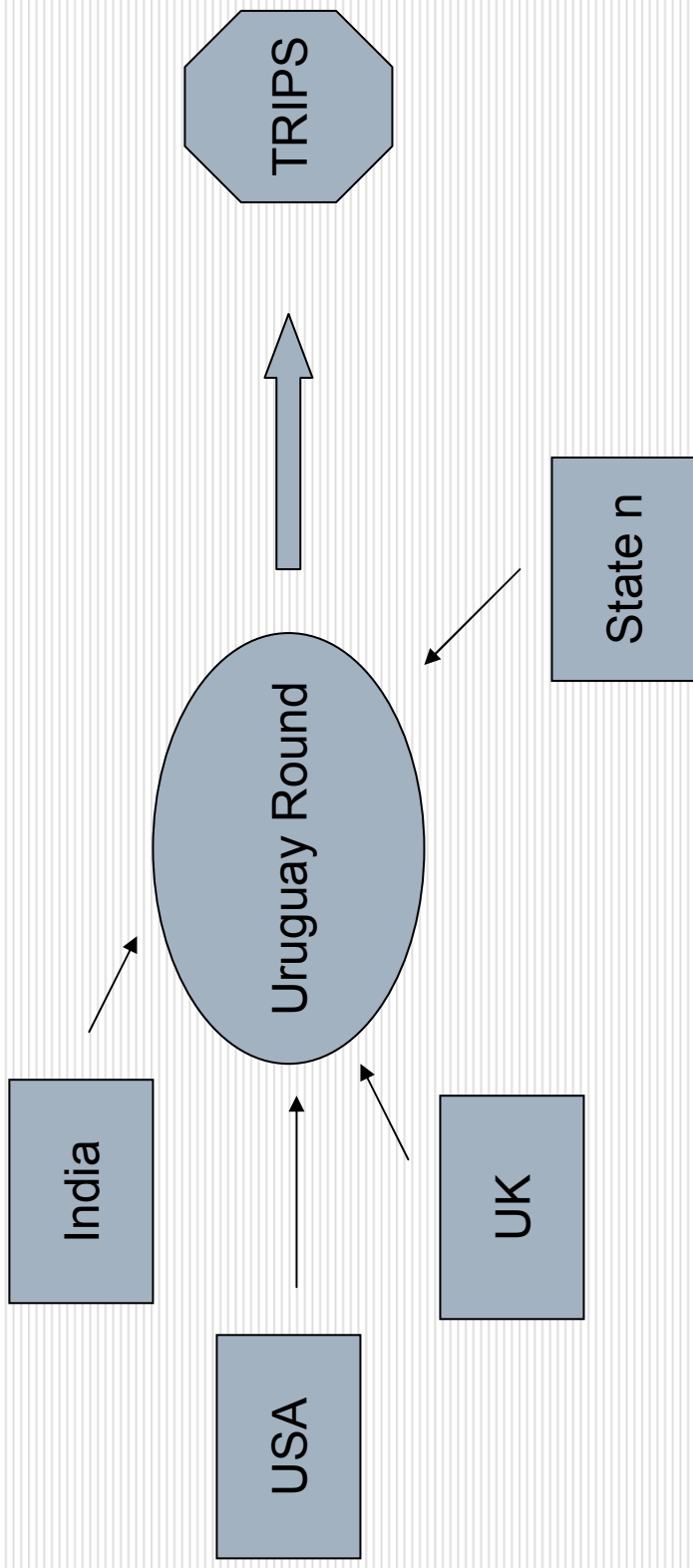


# SARS



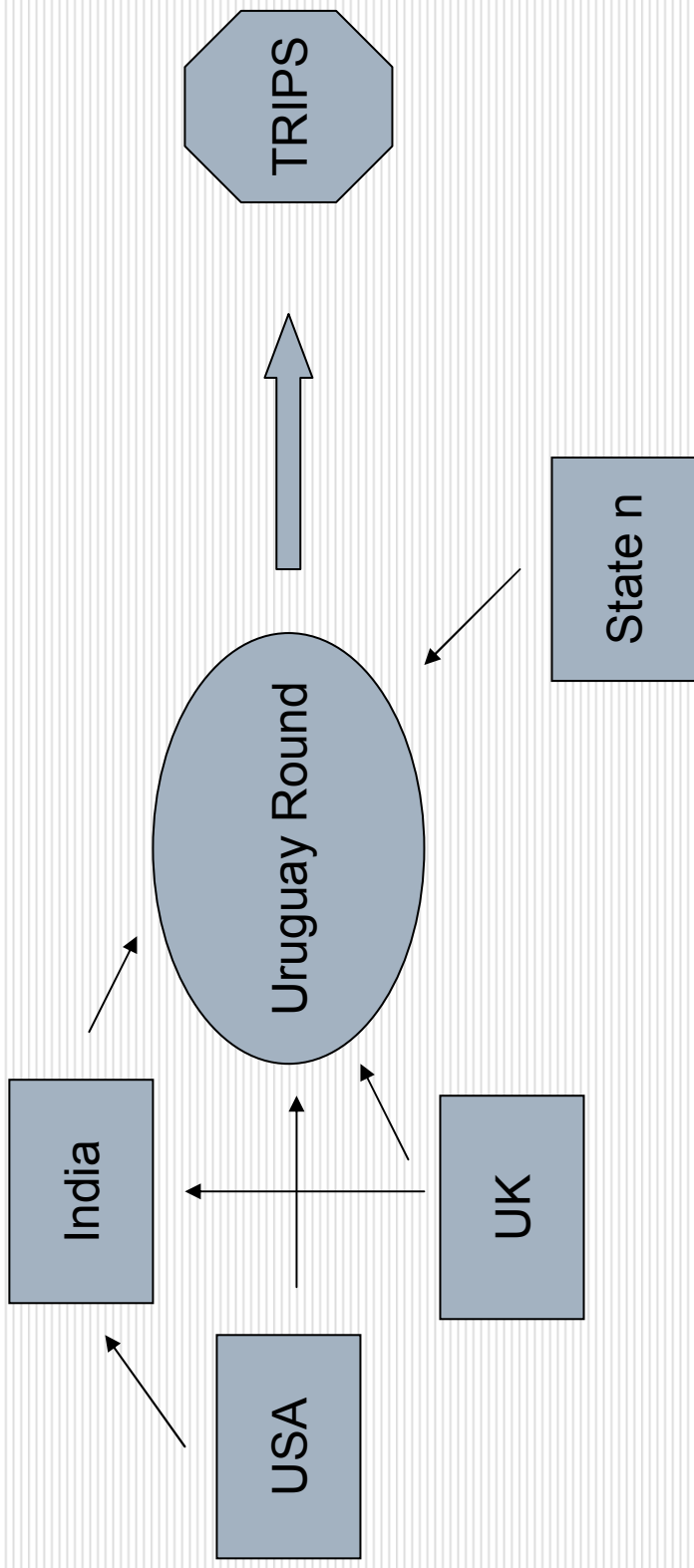
# TRIPS

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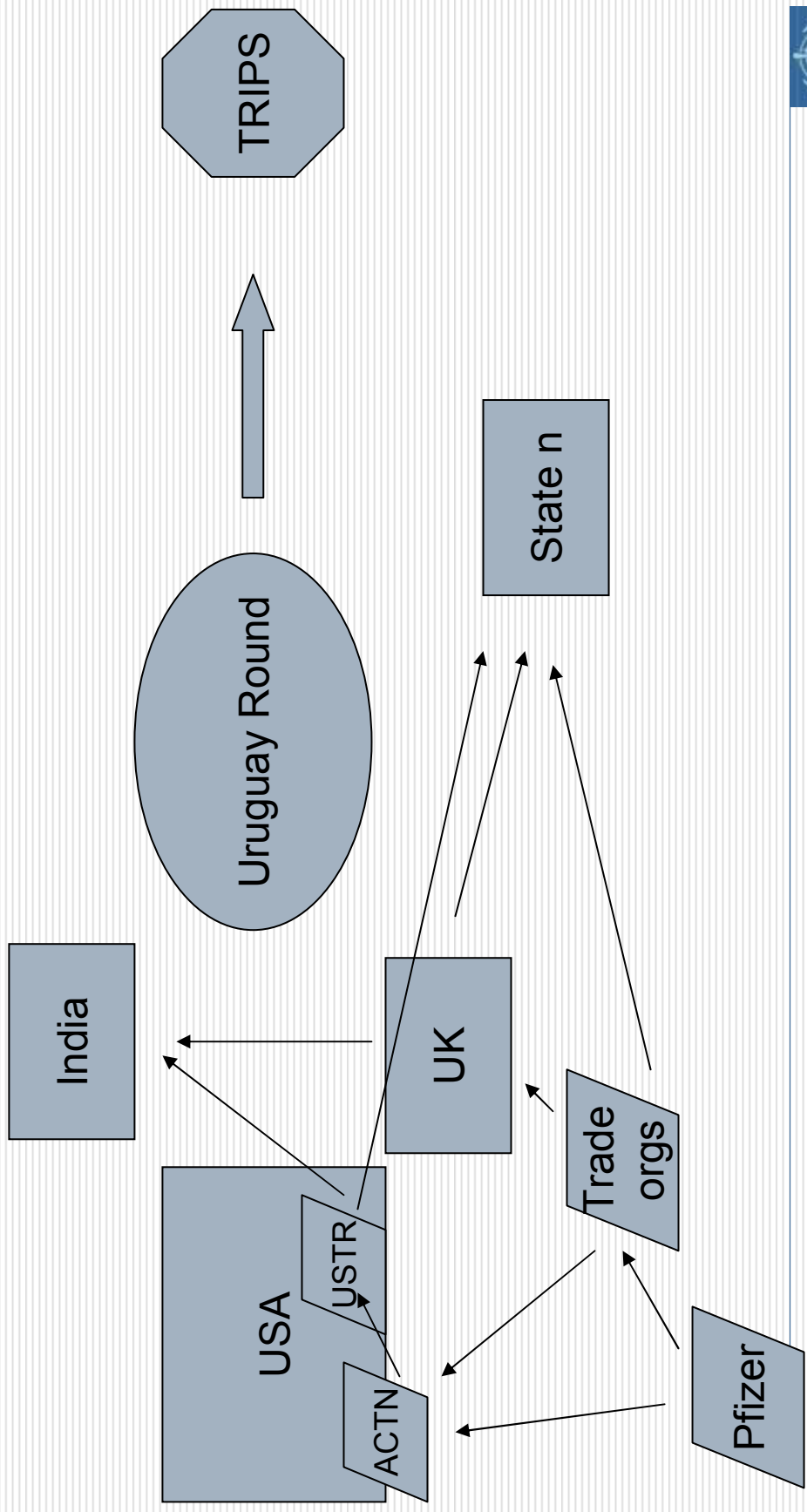


# TRIPS

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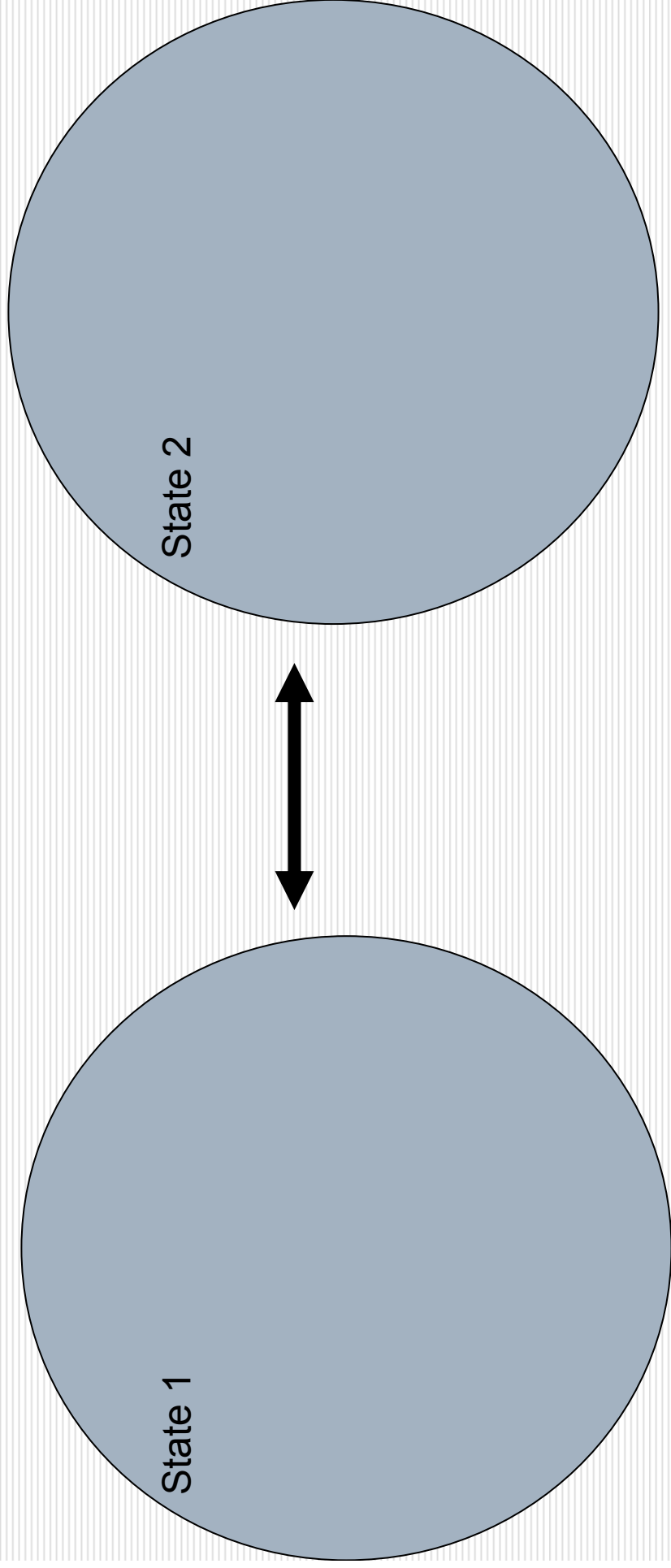


# TRIPS



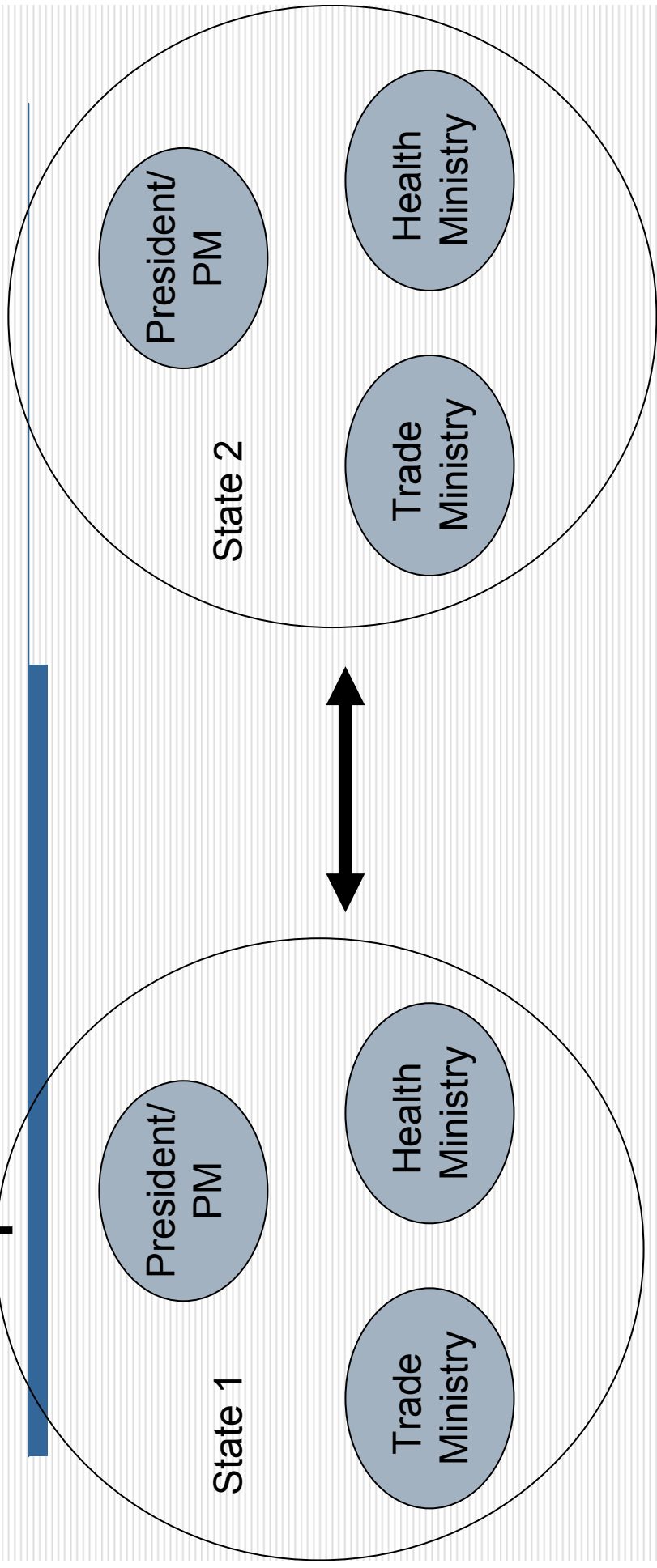
# Classic Westphalia

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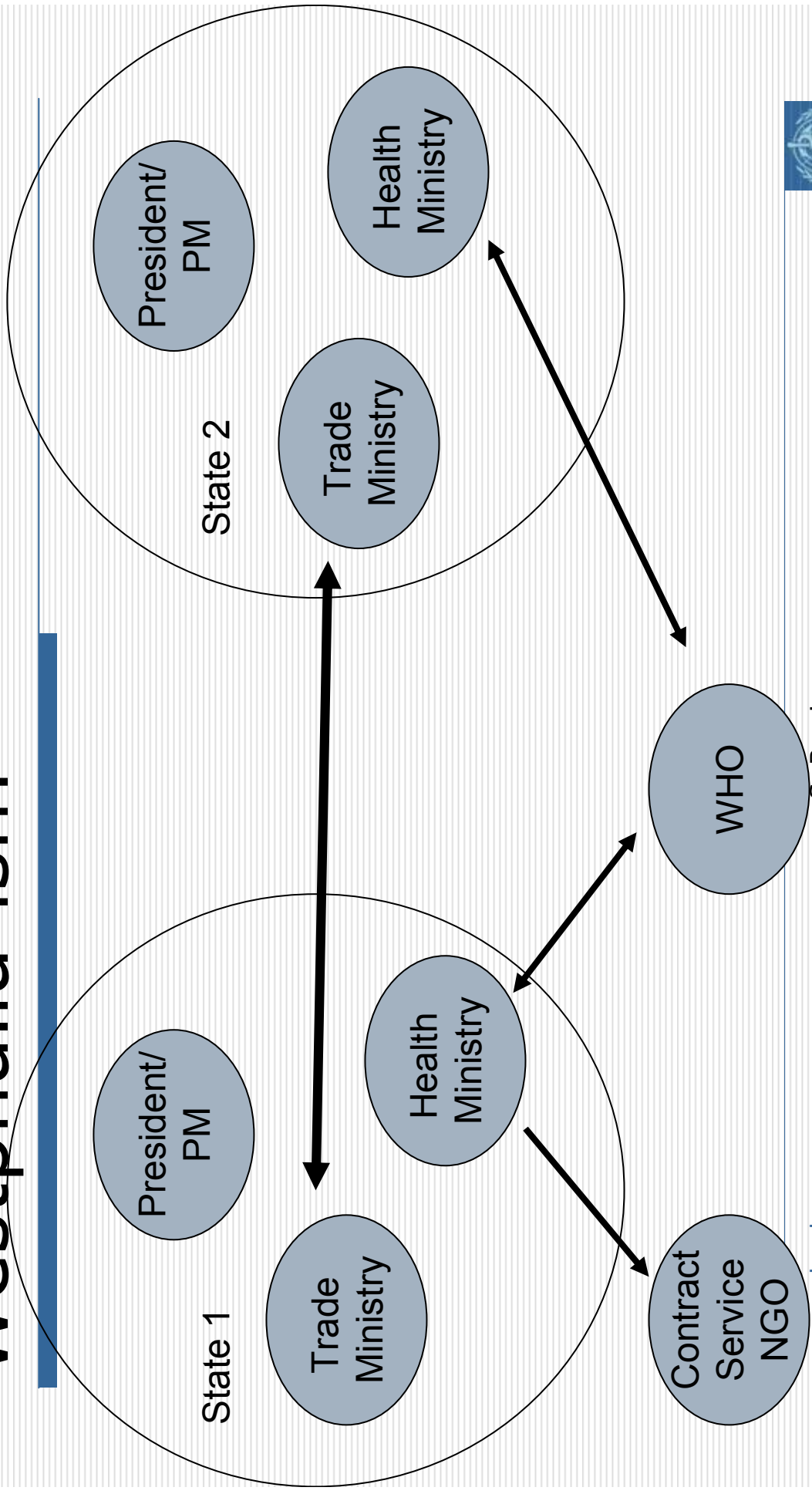


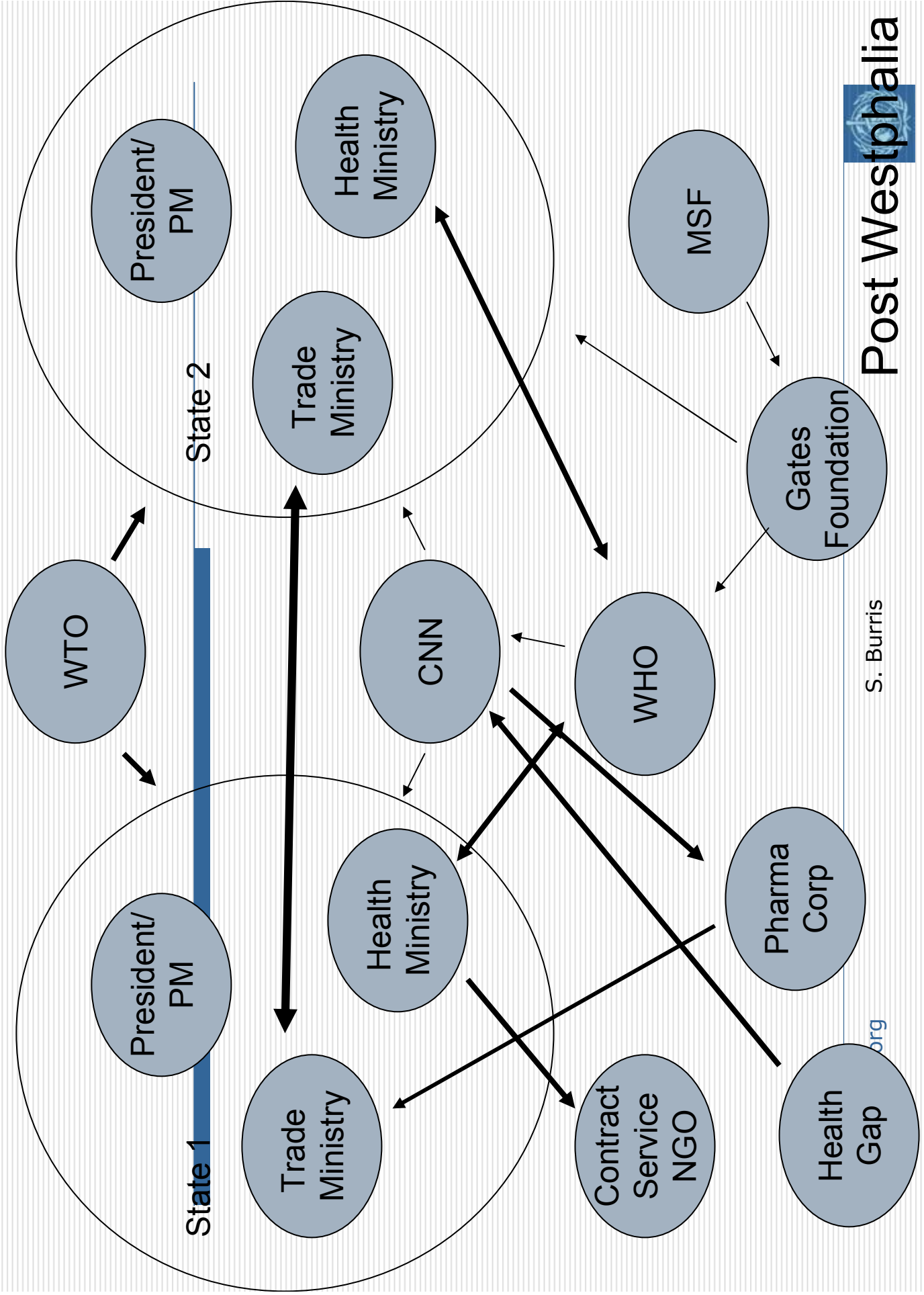
# Westphalia Lite

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# Westphalia-ish?





S. Burris

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# Network Systems Are Difficult to Manage

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- Systems are highly adaptive
  - Their structure is a result of path-dependent processes
  - Nodes are constantly improvising strategically to improve their own satisfaction
- Systems are highly complex
  - They are difficult or impossible to understand from one standpoint
  - Cannot be “centrally managed” – see F. Hayek



# Yet They Don't Automatically Produce Healthy Outcomes

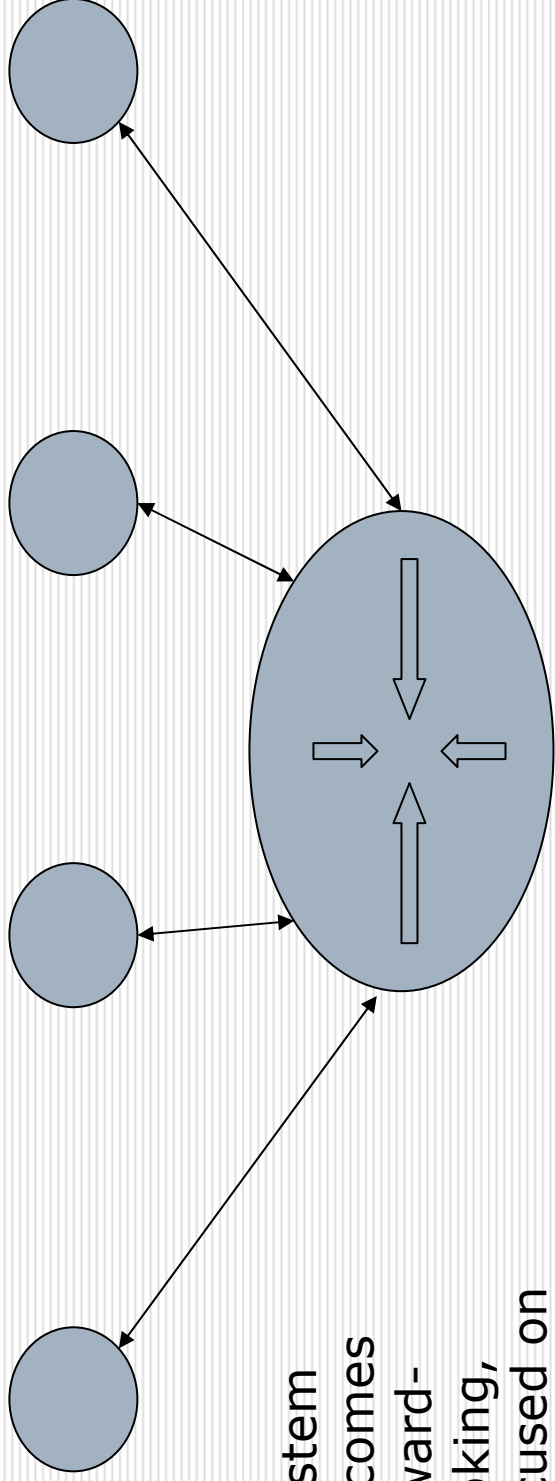
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- Information is the lifeblood of governing networks – but nodes are not omniscient
  - Peter Drahos: “No one network, public or private, has information omniscience. The response of actors to complexity has been to find ways to link networks to produce new structures of governance.... but these structures do not bring information omniscience to actors.”
  - Nodes and constellations of nodes can become “autopoietic”



# Autopoiesis and Change

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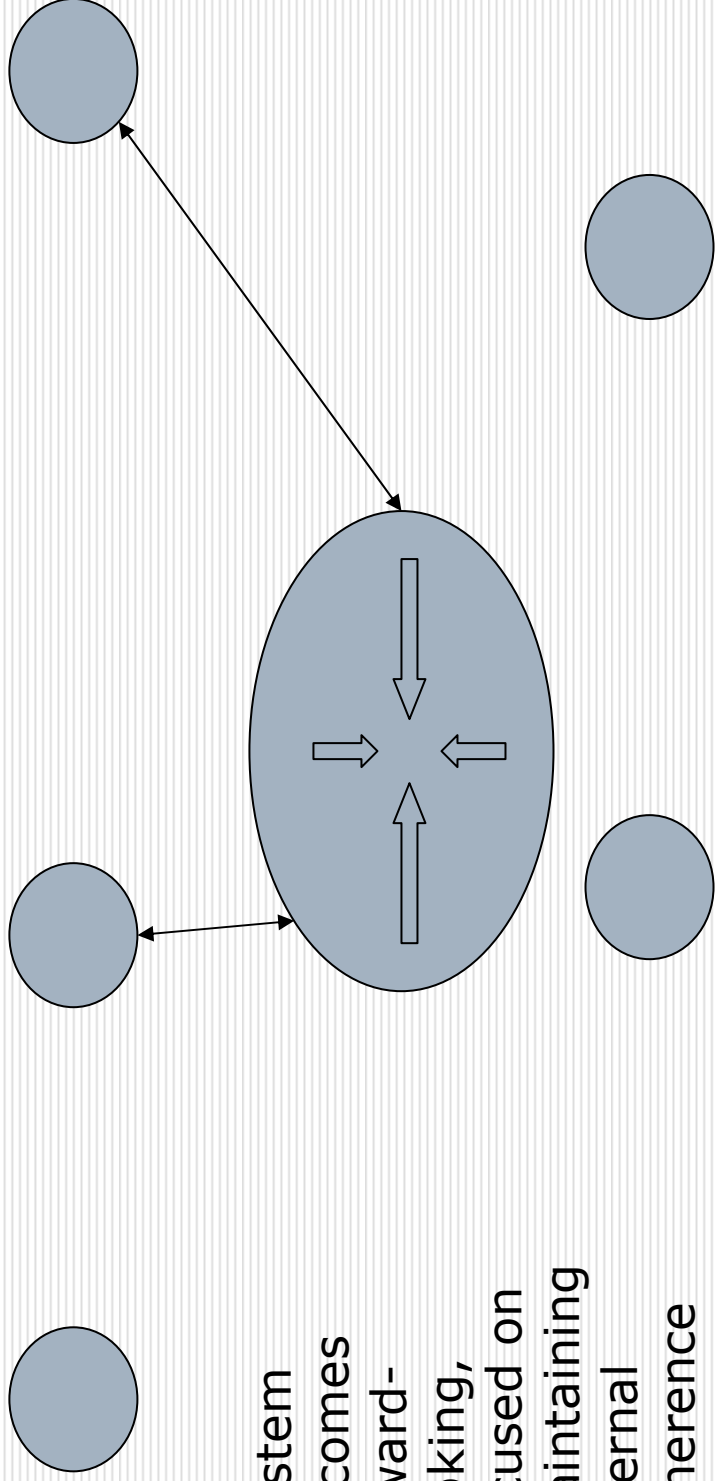


System  
becomes  
inward-  
looking,  
focused on  
maintaining  
internal  
coherence



# Autopoiesis and Change

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System becomes inward-looking, focused on maintaining internal coherence

Even if system works well, over time environmental change may not be addressed



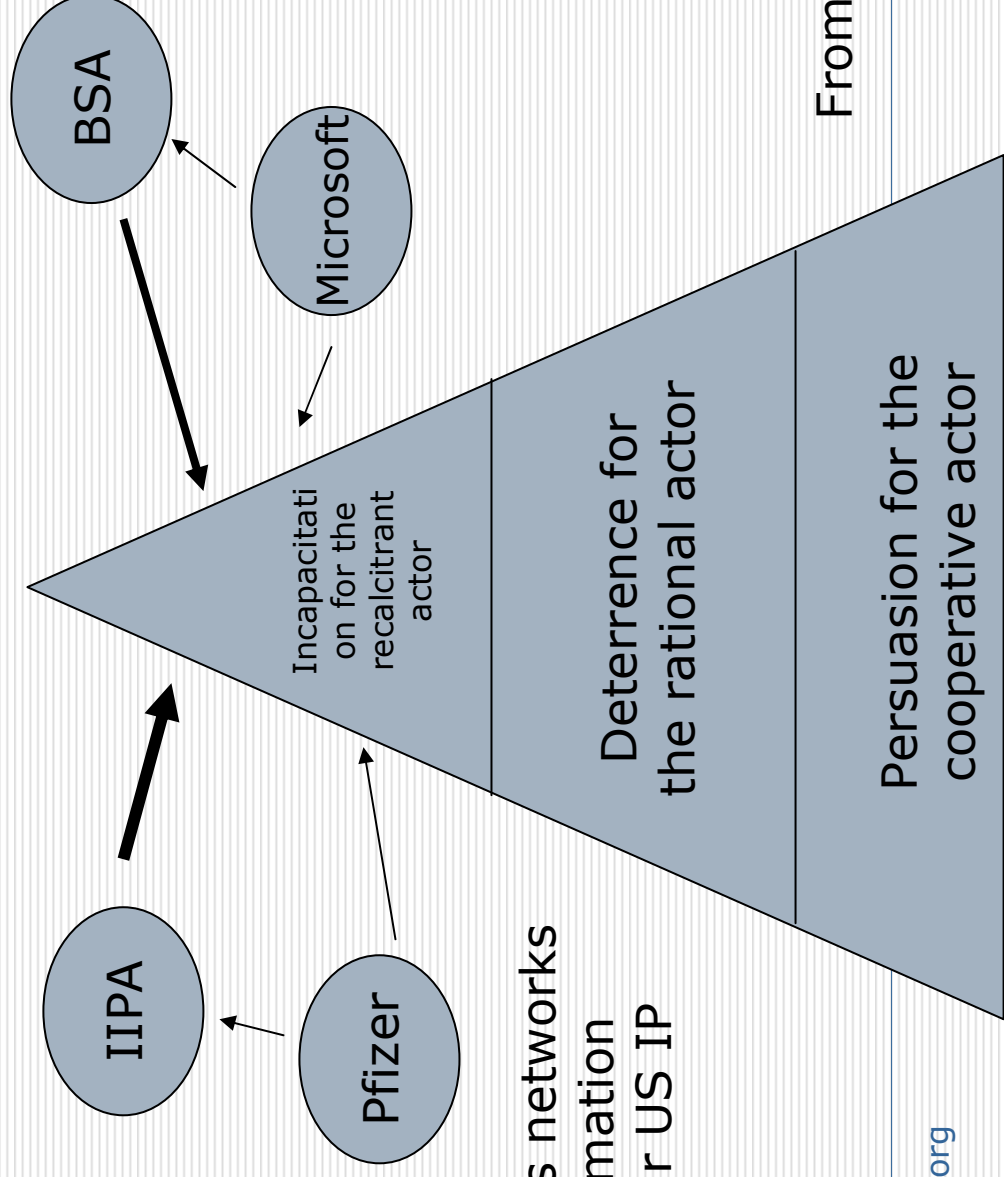
# New Ways of Thinking

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- Unger:
  - “Democratic experimentalism”
  - and *not* “institutional fetishism”
  - carried out through the exercise of institutional imagination



# Implications for Governance: Traditional State Regulation



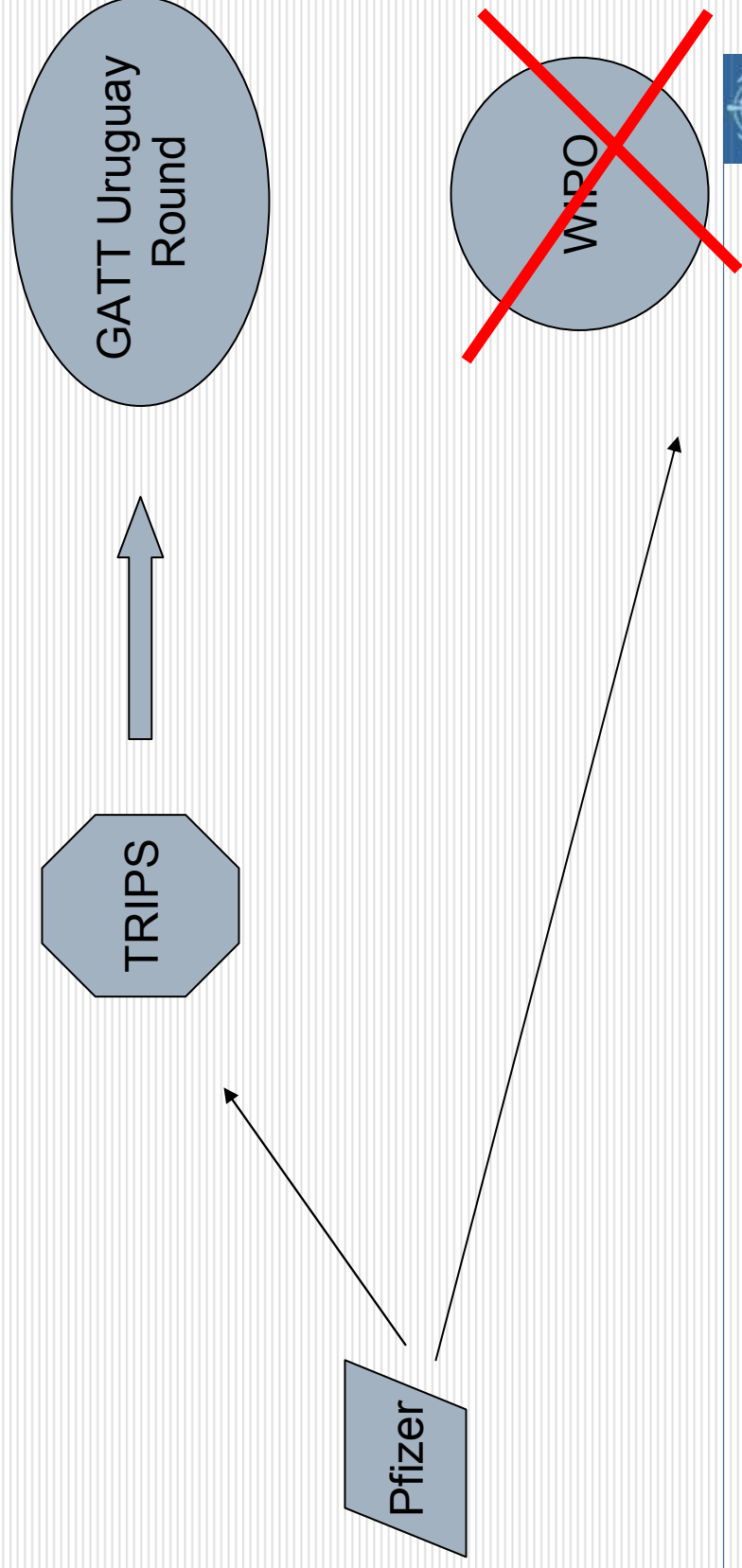
IP business networks  
solve information  
problem for US IP  
regulators

From: Peter Drahos



# Implications for Governance: "Regime Shifting"

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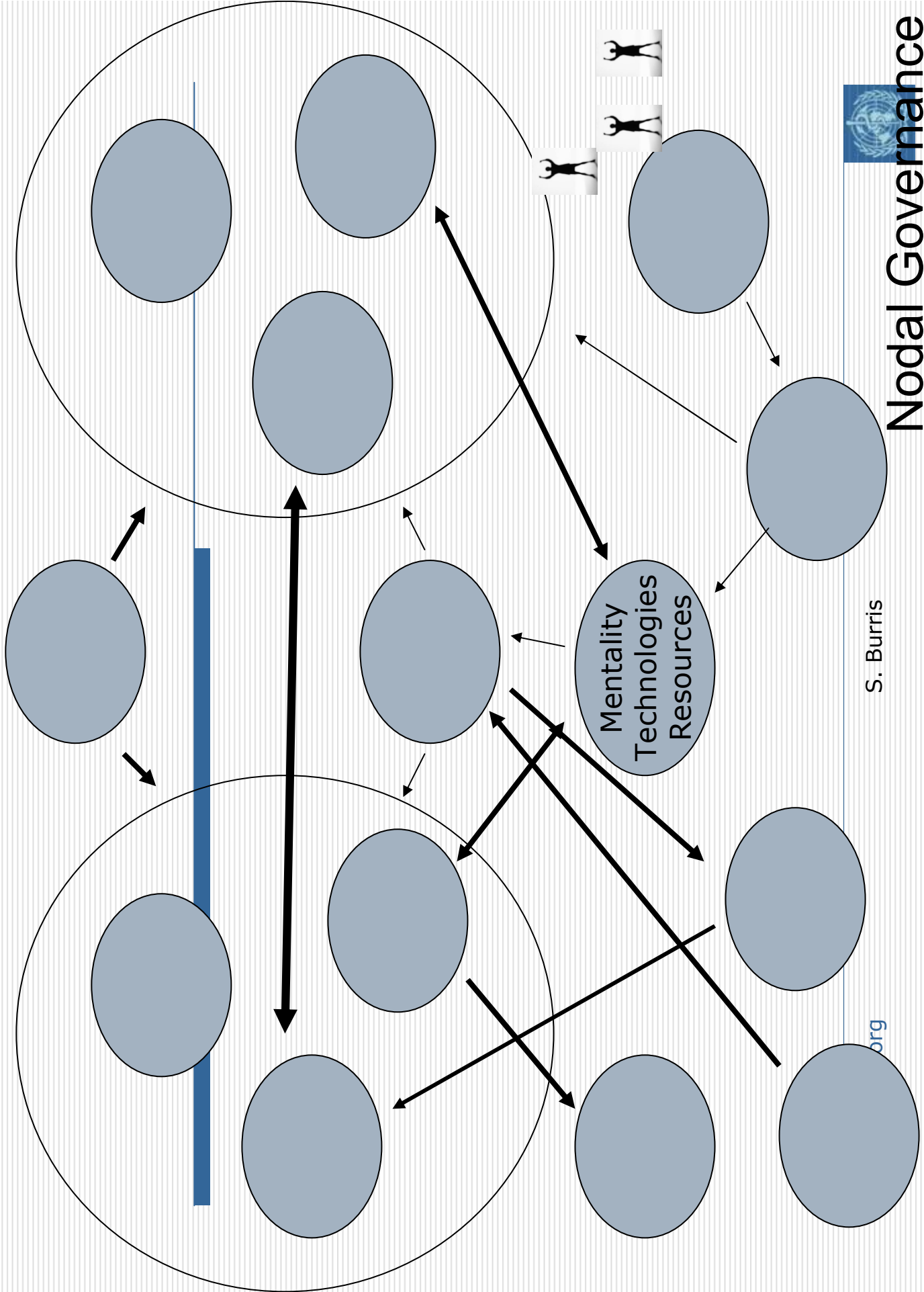


# Implications for Governance: Global Public Goods for Health

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- David Fidler and others offer the concept:
  - Borders no longer matter: policies and practices are required to produce GPGH that are enjoyed across borders
  - States are no longer the only entities responsible for producing GPGH
    - Civil Society
    - Multi-national Corporations
    - Public Private Partnerships



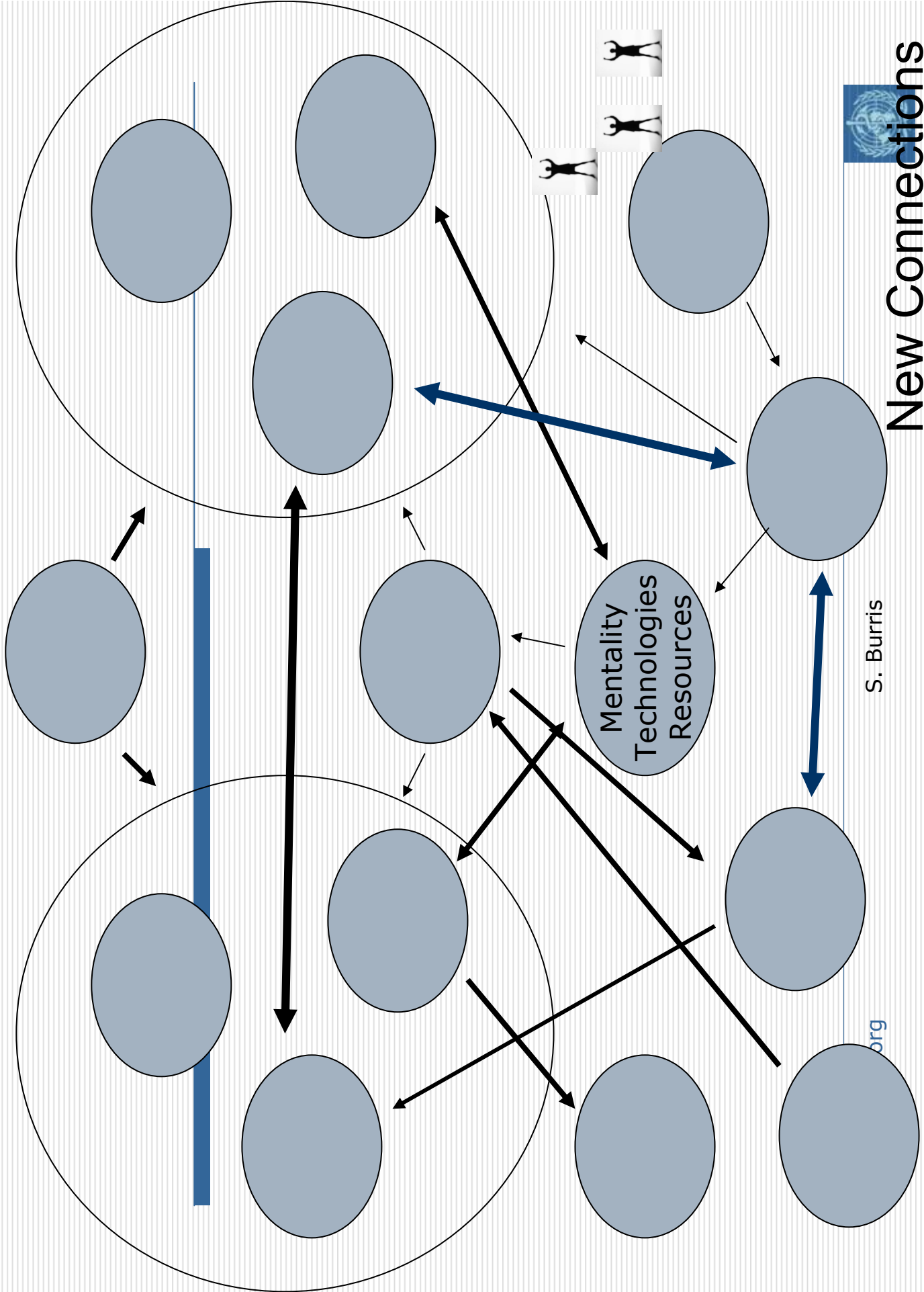


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# Nodal Governance



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# New Connections



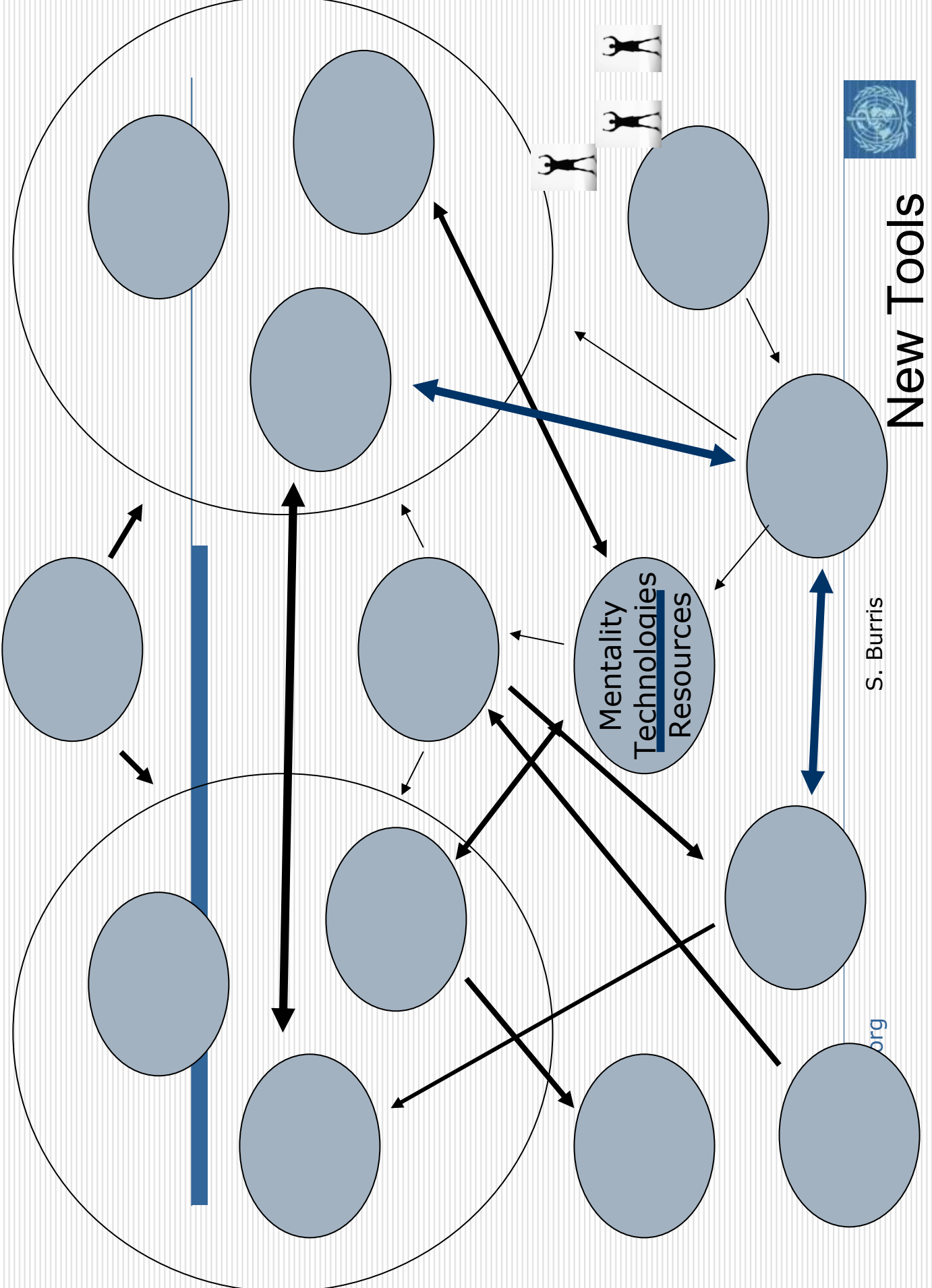


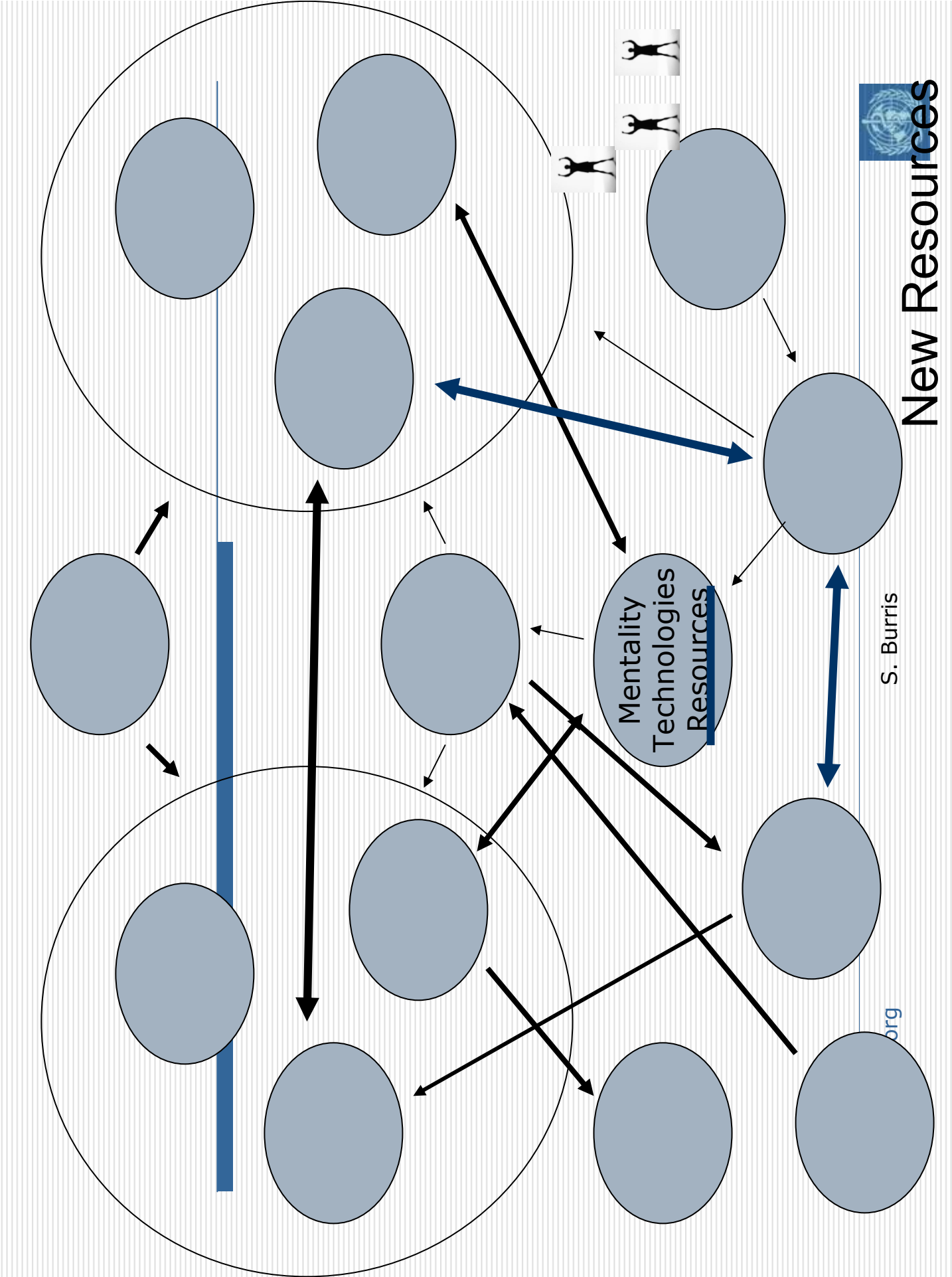


# New Tools

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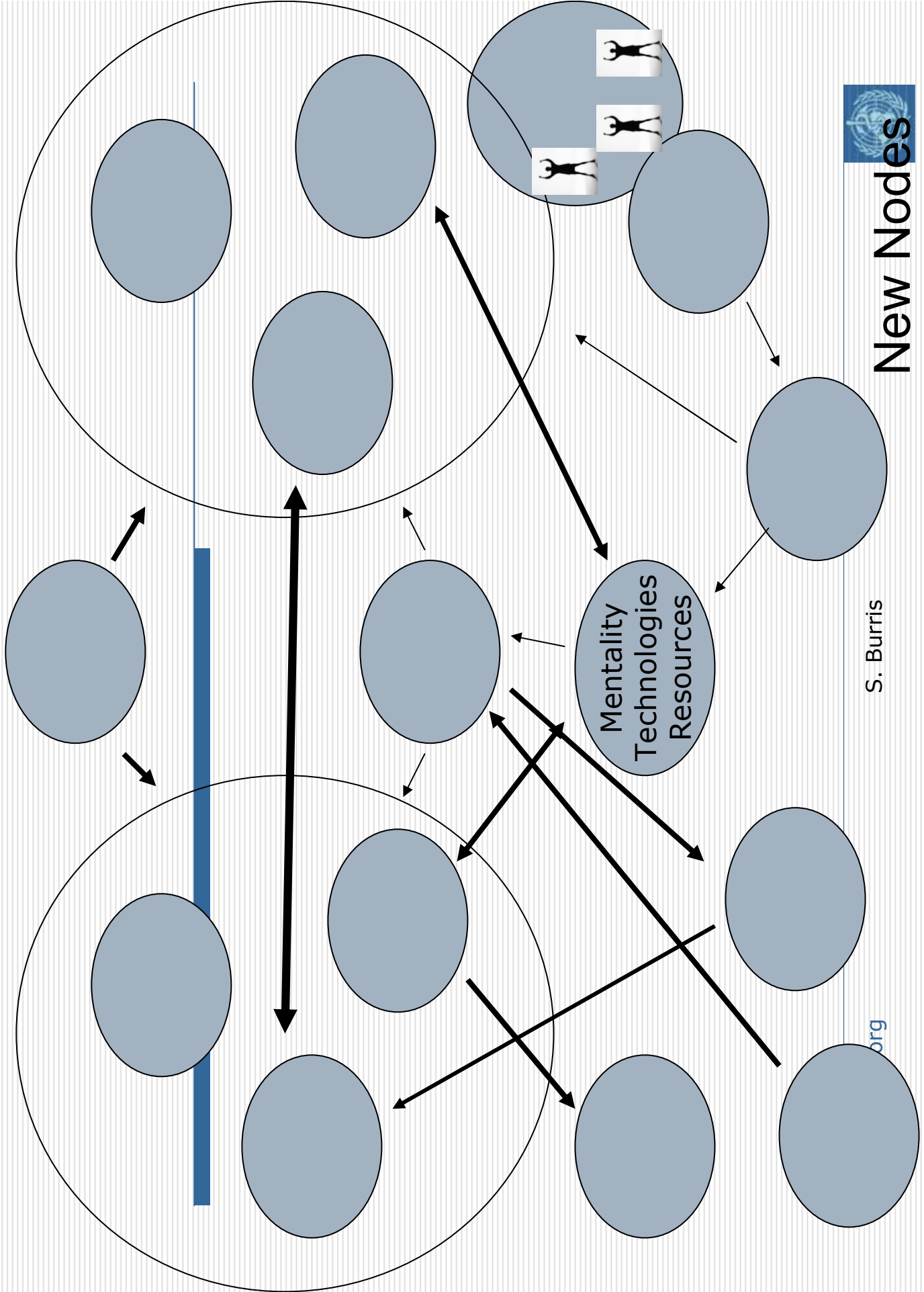




# New Resources

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New Nodes



org

# Modes of Change

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- Competition from new or reconstituted nodes
- Reconfiguration of networks – new connections, severed connections
- Changes in “jurisdiction”
- Internal change
  - mentalities
  - technologies
  - resources



# Implications for Health: Collective Efficacy and Microgovernance

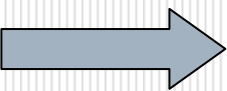
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- Collective efficacy
  - “the linkage of cohesion and mutual trust with shared expectations for intervening in support of neighborhood social control” (Sampson et al 1997)
  - a health-promoting community characteristic
- Microgovernance
  - The seeding of communities with new nodes that mobilize local capacity and knowledge

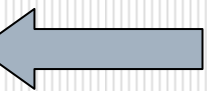


# Governance and Health

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□ The “big game” is access to resources, global goods for health – i.e., global governance 

But at the same time

□ All health is local: collective efficacy at the community level is essential to well-being at virtually all levels of wealth 



# Governance and Health

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- Thinking globally = health is part of the debate over the management of the global social and economic system
- Acting locally = promoting collective efficacy/democratic decisionmaking at the community level is just as important to health as providing specific services

