

Regional Cooperation in CDC and Health Systems Development

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Networkings and Collaborations

- More Wisdom
- More Social Power
- More Political Power

We should learn from our brains:

I = Individuals

N= Nodes

N= Networks



Challenges

- Unequal socio-econ development/ capacity - **burden of collaborations**
- Inequitable sharing of development benefits - **absorbative capacity**
- Vertical (Diseases Specific) and Horizontal (Health Systems) competition – **cyclical conflicts**
- Ownership of development partners & IGOs - **walls of empires**



Opportunities

- **Threats from cross-border movements**
- **Increasing global interests in health**
- **Many more players/\$**
- **ICT facilities**
- **New economic collaborations**



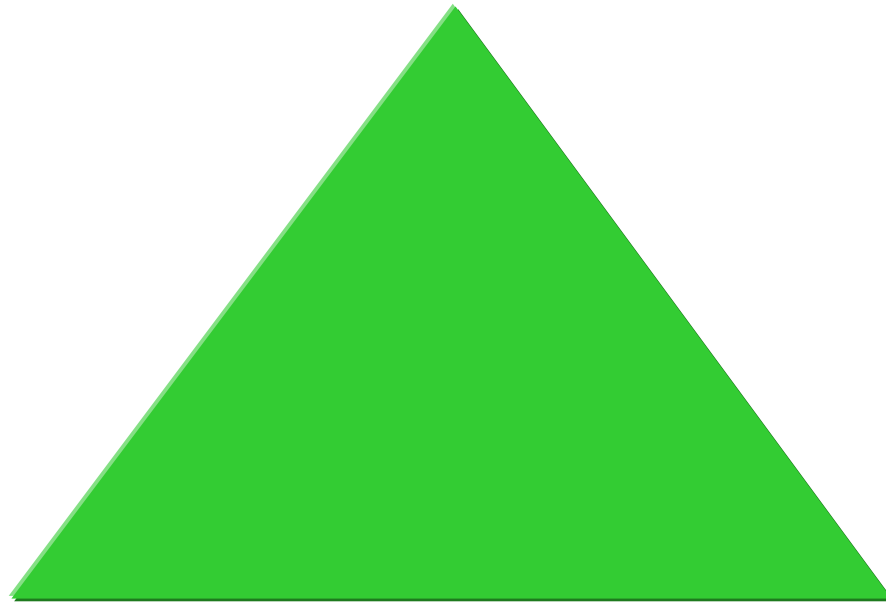
Regional Cooperation Mechanisms

- Political / Bureaucratic
- Civil Society Organizations
- Private sectors
- Academicians
- Mix – Triangle that moves the mountain
- Within and among countries collaborations



Triangle that moves the mountain

Knowledge generation



Social movement

Policy decisions



Dr. Suwit Wibulpolprasert, Ministry of Public Health, Thailand

Wasi

How to cope with multiple regional/global collaborations

- Formulation of national strategies and plan with clear priorities
- Engage only with those relate to priorities
- Bundles activities – one product for many
- Extensive use of IT – teleconf and comm.
- Import consultants - neighboring country
- Build up local capacity – long term
- Networks of the networks – INN – brain with small and efficient secretariat



How to prevent '**failure**' in collaborations?

" A-PARIHA-NI-YA-DHAMMA "

- Regular meeting, be punctual, and actively participate.
- Respect and commit to the shared vision and agreed decisions.
- Responsible for own home-works.
- Respect seniority, history, monuments.
- Respect and support ladies, elderlies, disables and under privilege groups.

"Systematic spiritual management"

"Non and/or Less-self/bureaucratic"



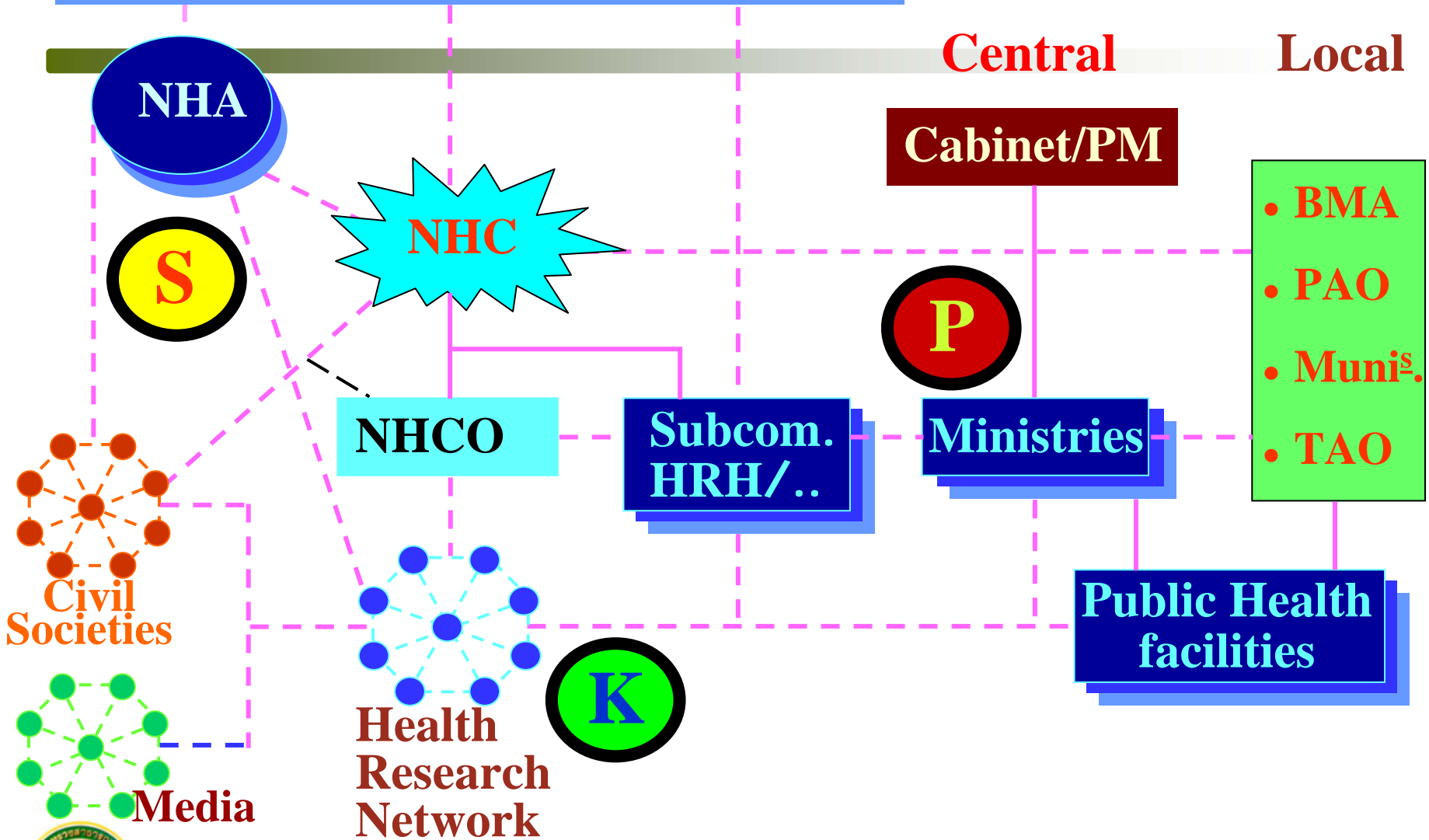
Innovative Financing for Health Promotion: The ThaiHealth Foundation

- Enacted as Public Executive Agency under the “Health Promotion Fund Act, 2001”, sponsored by the Minister of Finance
- 2% additional levy on the excise tax on tobacco + alcohol: 70 m\$/year
- An independent Board, chaired by Prime Minister with 10 ex officios and 9 independent resource persons - horizontal & flexible
- Evidence based social movements for Health promotion – strongly support civil societies



Broad definition of “Health” Director General, Ministry of Health, Thailand

Professionals/Academics/Industries



Dr. Suwit Withunrasart, Minister of Public Health, Thailand

Stewardship structure in the National Health ACT

Prince Mahidol Award International Conference 2008

- “30 years of PHC: Reviewing the Past and Defining the Future.”
- A series of global conference on PHC
- One panel session and 6 parallel sessions on PHC workers, Financing, PH surveillance, HIS, GHPs, and International Trade
- January 31st – February 1st close meeting +
- **Commemoration of 30th anniversary of PHC/HFA**
- www.pmaconference.org

