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Mistreating the Body Politic
A case study of Kosovo
by Lindsay A. La Forge and Kurt R. Herzer

This failure has serious implications for Kosovo’s economic sustainability as it attempts to integrate itself as an independent nation in the international system. Continued dependence on foreign aid and consultation bodes poorly for the country as it tries to obtain diplomatic recognition and distinguish itself from its turbulent Eastern European neighbors. Furthermore, a government rampant with corruption is unable to gain the legitimacy needed to govern effectively in any policy area. With health problems plaguing the polity and trenchant governance issues, moreover, economic investment in infrastructure will continue to be stagnant. If Kosovo cannot increase the living standards of its people, it will not be able to join the European Union currency system. Addressing the issue of healthcare is therefore integral if Kosovo wishes to join the Euro Zone and leave behind its status as an outsider.

Why did UNMIK and KFOR fail in the area of Kosovo’s healthcare delivery and policy? While international organizations undoubtedly possess the ability for cooperation and coalition building, the massive administrative burden of their mandates hinders their effectiveness. UNMIK and KFOR were given a country to run with no clear timeline and very few clear directions regarding their responsibilities. They may simply not have known what to do. Operational inefficiencies are another likely factor that contributed to the mission’s failure. These are massive bureaucracies, with varied policy areas to focus on around the globe. Neither organization is an expert in dealing with healthcare delivery, minority issues, peacekeeping operations, or economic rebuilding. These organizations are necessarily broad, and healthcare is just one of the many gargantuan pressures that confronts the various bureaucratic policymakers.

Help from Uncle Sam
When international organization are unable to carry out the missions they are tasked with, other parties such as nongovernmental organizations, private lending institutions, and domestic militaries emerge as ad hoc delivery mechanisms for aid services. In the shadow of UNMIK and KFOR’s failures, an unexpected actor in healthcare delivery emerged. The United States military at Camp Bondsteel administered medical treatment to Kosovars who sought care. Unlike peacekeepers, medical trainers, or organization staffers, American soldiers became a preeminent party in health care logistics. The U.S. military began providing healthcare through systems already in place for soldiers. Over time, this became part of a much larger humanitarian mission for the Army in Kosovo. The mission appears to be a coordinated effort and a strategic initiative on the part of the American military in the face of international organization failure. As the military assumed responsibility for developmental aid and public health policy, concerns arose over its appropriateness and ability to perform such functions. These issues provoked subsequent questions over accountability and mandate.

Is this a good thing?
Indeed, as America broadens its military presence around the world, there is an increasingly intense spotlight on soldiers’ activities. As our soldiers act as arbiters of American force, we should be questioning their role in humanitarian efforts. Are they best suited for the job? Do we want to pair messages of war with those of assistance? Should a purely American party be carrying out these missions or should such services have operational consensus and an international staff? Who is accountable should the American military encounter problems in its operations? If the military is to play a role, is one aspect of aid services enough (i.e. healthcare delivery) or should there be a larger coordination with strategic objectives for nation-building? One hopes that these questions are being asked at some level; there are obvious tradeoffs made when outside groups must fill the roles expected of international organizations. The case of Kosovo demonstrates that public health officials, as well as American citizens, should consider the military as an actor in the realm of medical aid, especially when international organizations fall short of public health and humanitarian goals. The military’s role, however, should be carefully scrutinized and evaluated in every step of implementation.
Endnotes
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