

Dear Colleagues,

It comes as no surprise that this week's compilation of global health policy news is rather long, so I won't waste your time any further in the intro. This week's highlights section will focus, obviously, on the SDG 3-day summit and all other UN Development Week related side-events. We'll also briefly discuss "the [greatest political show on earth](#)", the 70th session of the UN General Assembly in New York – not a side event. But there was also important [HIV news](#) this week, [a World Report on aging and health](#) and much more. So be resilient and stay with us, as the motto of this week's IHP issue motto is "to leave no relevant SDG article behind".

In this week's Featured Article, **Stephanie Topp** zooms in on target 3c of the new SDG agenda and concludes it's time to move beyond the 'pay vs no pay' debate for community health workers.

Enjoy your reading.

The editorial team

Featured Article

We must move beyond the 'pay vs. no pay' debate for community health workers

Stephanie M. Topp

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After several years of consultation, the SDG agenda was launched last week with much fanfare in New York. Amongst the various health-related targets established by the forthcoming Sustainable Development Goals (SDGs) [target 3.c](#) aims to: *substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in the least-developed countries and developing small-island states*. This target speaks to the 'chronic emergency' many low- and middle-income countries (LMIC) face both in terms of the quantity and performance of human resources for health. Importantly, meeting this target will be a prerequisite to attaining [SDG target, 3.8](#) which aims (amongst other things) to: *achieve universal health coverage [via] financial risk protection and access to quality essential health care services [...]*.

The financing and sustainability of a strengthened health workforce is one of, if not the key component(s) underpinning our ability to achieve universal health coverage (UHC). But the wording of Target 3.c, with its reference to the need for recruitment *and* development *and* training *and* retention, hints at the complexity of an issue that must be central to global health and health systems debates in the coming months and years. Increasingly, the human resource crises in LMIC are being recognized as not simply a crisis of numbers but also a crisis of human resource management. Although strengthening local training capacity and increasing the output of health

professionals is desirable, the experiences of various countries have demonstrated that it is not possible to ‘train’ our way out of this problem. Even assuming they stay in the system, having more doctors, nurses or even stipendiary or volunteer community health workers available is simply no guarantee of universal access to good quality and essential health care services – as issues of distribution, motivation and retention all come into play.

While more doctors and nurses are undoubtedly needed, experiences from across different regions and countries have repeatedly demonstrated the [challenges of retaining clinical health workers in service of the most vulnerable populations](#) – including both rural and urban poor. Meanwhile, health systems and global health programs continue to rely on lay or [community health workers to deliver various primary-level services](#) in various permutations of community- or clinic-based care.

Clearly, given the scope of the human resource short-fall and the issues of distribution in many LMICs, it is time to place community health workers (or lay health workers or auxiliary workers) at the centre of discussions around how UHC can be achieved. And as part of that debate, the thorny – even ideological – issue of volunteerism versus formal employment of these lower cadres must be tackled. On one side of this debate it has been argued that there is an economic imperative to maintain non-paid health workers as the only way to ensure basic service coverage in geographically remote or otherwise marginalized communities. The [potential for formal payments and/or employment to pervert](#) intrinsic pro-social motivations among such workers has been raised along with the need for non-monetary incentives. Problematically, however, a number of studies have also demonstrated that along with genuine ‘help-giving’ motivations, [health volunteers often experience severe economic need](#) that contributes to [high levels of physical and mental stress](#) that undermine performance and retention. Some have even suggested that our widespread reliance on volunteerism to provide health services to marginalized people is reflective of [societies habituated to inequality](#).

Where does that leave us? As we think about how to gain traction for increased funding or negotiate complex policy reform targeting the HRH-oriented SDG target, we must move beyond the dichotomy of ‘pay vs. no pay’ in relation to community health workers. A more helpful starting point is the desired outcome – UHC – and a better more thoughtful assessment of the way inconsistencies in recruitment, posting and retention policies impact on (both professional and community) health workers’ motivation and capacity to deliver on that outcome. Assessment and reform of health systems to ensure congruence between the system-wide goal (UHC encompassing financial protection and service coverage) and health workers’ goals (both intrinsic and economic) is required. This is a more nuanced lens through which to discuss the central role that CHWs will have to play if we are to achieve ‘universal’ care. It is an approach that allows for different meanings and significance attributed to “volunteerism” in different settings. But it also moves us away from the pervasive and dangerous assumption that the most vulnerable members of our health workforce should, and are able to provide, continuous service with only minimal or no support.

Highlights of the week

SDG summit in NY

*In this lengthy SDG section, we will first focus on the **overall action** at the “SDG jamboree” and the UN General Assembly, then we’ll give a – by no means comprehensive - overview of all **global health policy related news & reports**, including at side events & other High-Level breakfast meetings, and we’ll conclude with some **analyses and assessments**, including on the way forward now. The SDGs were adopted last Friday, and it’s clear from this week’s news compilation that, at least for the health SDG (goal 3), the lenses ‘health as an investment’, ‘health security’ & ‘the right to health’ all play an important role (including in the focus on UHC), sometimes they’re complementary but often they aren’t. Haven’t seen much yet from a ‘planetary health’ perspective (somewhat surprising perhaps, given that this is meant to be a ‘sustainable development’ agenda), but the SDG era has only begun, I guess. What is great (in the words of Mark Dybul), is that the SDGs ask us to focus on a person, not on an issue. But there’s so much more to say about these SDGs as you’ll notice below. And opinions still differ greatly.*

*Now that the SDGs are adopted, observers start wondering about the **Theory of Change** - in order to **implement** & reach all these lofty targets – and of course **indicators will also be finalized** by March 2016. The next meeting of the UN Statistical commission subgroup in charge of the process of developing draft SDG indicators, [IAEG-SDGs](#), is scheduled for the end of October, in Bangkok. Could still be an interesting battle...*

I : The buzz & the overall action

Guardian - Global goals received with rapture in New York –now comes the hard part

<http://www.theguardian.com/global-development/2015/sep/25/global-goals-summit-2015-new-york-un-pope-shakira-malala-yousafzai>

See also the [NYT](#). Both are stories on the adoption of the SDGs, or the ‘Global Goals’ as they are now often called (see also below on the difference between SDGs & Global Goals).

Humanosphere - Four takeaways from the Global Citizen Festival

Tom Murphy; <http://www.humanosphere.org/basics/2015/09/four-takeaways-from-the-global-citizen-festival/>

Among others: “Amid all the announcements and pledges (more on that later) that took place throughout the day, **the issue of power was essentially ignored**. The collective message was to do more in order to achieve the leading Global Goal of ending extreme poverty, as well as the 16 other goals.” And another one: Beyoncé (or “Queen Bey”) is apparently quite something 😊.

What was great is that all people in the audience needed to have contributed to one of the SDG causes.

Guardian – Pope Francis demands UN respect rights of environment over 'thirst for power'

<http://www.theguardian.com/world/2015/sep/25/pope-francis-asserts-right-environment-un>

Over to **the pope** then, the “pope of the poor”, as he’s often called, or also the ‘green pope’. He lived up to that expectation in his UN speech. He told the general assembly that the environment should enjoy the same rights and protections as humanity and expressed concern for the persecution of Christians, among others. *“Nature – as well as humanity – has rights. It must be stated that a true ‘right of the environment’ does exist,” Francis said. An attack on the environment was an assault on the rights and living conditions of the most vulnerable, he said, warning that at its most extreme, environmental degradation threatened humanity’s survival.”*

For the **full speech** of the pope to UN, see [here](#).

You might also want to read Tom Murphy’s take (on Humanosphere): [The Pope lays out his own development goals](#).

Pope Francis already blew some of his (street) credibility among quite some people, by secretly meeting with Kim Davis, a famous US anti-gay clerk, (and more importantly, first [denying](#) it). Not very catholic. Yet, that doesn’t mean his speech in New York was wrong. After all, even the pope is fallible☺. And of course, he also still has his work cut out to give women equal rights in his very own institution.

Quartz – Bill Gates on the most important thing the United Nations has done in this century

[Quartz](#);

Over to the ‘pope of global health’ then: what is **Bill Gates’ take on the (just adopted) SDGs**? He’s (surprisingly?) positive in this interview, as you’ll notice. (*must-read*)

We also want to draw your attention to an [interview](#) with Gates on the SDGs & India. Important quote: *“One thing the SDGs make explicit is the promise to “leave no one behind.” This is a big change from the MDGs, where averages were measured and very often the most vulnerable including women, rural or marginalized populations were not reached. **All eyes are on India. India is to the SDGs what China was to the MDGs:** i.e., the world could not have achieved its poverty reduction targets without China coming through; the world will not achieve many of its SDGs targets without India coming through.”*

Guardian – China pledges \$2bn for development goals and says it will write off debts

<http://www.theguardian.com/global-development/2015/sep/27/china-pledges-2bn-for-development-goals-and-says-it-will-write-off-debts>

Xi Jinping told the UN gathering that China will set up a **\$2bn aid fund** and aims to lift it to \$12bn by 2030. Beijing will also forgive debts due this year in an effort to help the world's poorest nations. See also [here](#).

As for **Obama**, he tackled poverty and sexism in a speech at the end of the three-day summit meeting on development (see [NYT](#)). He also made some announcements related to PEPFAR (see below).

Guardian – The growing need for humanitarian aid means we must find a new approach to development

K Georgieva & B Brende; <http://www.theguardian.com/global-development-professionals-network/2015/sep/26/addressing-humanitarian-crisis-is-key-to-reaching-the-sustainable-development-goals>

(Kristalina Georgieva is the co-chair of the UN secretary general's high-level panel on humanitarian financing and vice president of the European commission. Borge Brende is minister of foreign affairs, Norway.) They say a number of important things in this op-ed. Among others: "... **Complex and protracted crisis has become the new normal in and across many fragile countries and regions. Humanitarian aid's traditional rapid response model – getting in swiftly and exiting once the emergency is over – doesn't fit the new terms of reference. A band-aid solution is too often being applied to the same chronic crises. ... On Saturday Norway and the UN secretary general's High-Level Panel on Humanitarian Financing host a meeting which brings together several heads of UN agencies, foreign ministers and heads of international organisations to discuss charting a course towards higher ground.**

... *The relationship between humanitarian and development assistance urgently requires attention because the evidence has never been more clear that the distinctions between them are artificial. **The wall needs to come down:** addressing humanitarian crises is not only a prerequisite of sustainable development but also a necessity if the SDGs are to be achieved. Let's have innovative ideas, including from our international finance institutions and development banks, on how to deal with greater fragility. We need new financial instruments which encourage giving and reward best practice. ...* " Not everybody agrees with this take, often for very good reasons. But the trend towards an expanded definition of humanitarian aid won't go away, we think. Next year, at the **World Humanitarian summit in Turkey (2016)**, we'll probably know more.

Swedish government – Swedish Government initiates High-Level Group in UN

<http://linkis.com/www.government.se/pr/kpCQb>

The Swedish Government took the initiative to start a **High-Level Group** consisting of nine leaders from various parts of the world **to ensure** that the 17 global goals and the 2030 Agenda are **implemented** at all levels of society. You find the names of the 9 in this short article.

Global Policy Watch –Public SDGs or Private GGs?

B Adams; <https://www.globalpolicywatch.org/blog/2015/09/25/public-sdgs-or-private-ggs/>

Must-read. “**The SDGs** negotiated painstakingly over two years by all UN Member States with thousands of public interest organizations providing their commitment and expertise **have been copyrighted**. And by whom? The UN you would think? But no. They **have been re-branded as Global Goals (GGs) and copyrighted by Project Everyone**, a private company incorporated and registered in London.”

Now that’s a good start.

II: Global health (policy) news, reports & initiatives

WHO - From MDGs to SDGs (brochure): a new era for global public health: 2016-2030

<http://www.who.int/mediacentre/events/meetings/2015/MDGs-SDGs-Summary.pdf?ua=1>

As you can imagine, **WHO welcomes the new SDG agenda**. “The 2030 Agenda for Sustainable Development heralds a **new era for global public health**, offering the opportunity to strive for a global development agenda of unprecedented scope and ambition.”

Check out also this [WHO Webpage](#), with a good **overview of all Health-related Sustainable Development Goals targets** (i.e. also targets under other goals than goal 3). Quite a list...

WHO – Follow up to the World Health Assembly decision on the Ebola virus disease outbreak and the Special Session of the Executive Board on Ebola: *Roadmap for Action* September 2015

http://www.who.int/about/who_reform/emergency-capacities/WHO-outbreaks-emergencies-Roadmap.pdf?ua=1

Must-read. “*This Roadmap for work under decision WHA68 2014 Ebola virus disease outbreak and follow-up to the Special Session of the Executive Board on Ebola is structured around a results-based framework of outcomes, outputs and deliverables, to ensure that WHO maintains appropriate levels of organizational readiness, supports country-level capacity building and preparedness, deploys efficiently and effectively to respond to outbreaks and emergencies at national and subnational*

levels, and engages effectively with partners and stakeholders throughout. The **Roadmap is predicated on three overarching pillars**: country preparedness; organizational readiness, response and early recovery; and identification and mitigation of high threat pathogens. To address these pillars, the **Roadmap is divided into six outputs**. ...”

In an [interview](#) with Nova Next, Margaret Chan referred to some of these outputs and assured that she’s personally overseeing these changes.

WHO – New partnership to help countries close gaps in primary health care

<http://www.who.int/mediacentre/news/releases/2015/partnership-primary-health-care/en/>

Huge news. “Underscoring the urgent need to transform how essential health care is delivered in LMICs, the **Bill & Melinda Gates Foundation, World Bank Group and World Health Organization** [...] **launched a new partnership to support countries in improving the performance of primary health care.**” PHCPI is partnering with the **Joint Learning Network for Universal Health Coverage**, originally established by The Rockefeller Foundation.

*“Primary health care is the pillar of health systems and is central to preventing epidemics like Ebola; improving women’s and children’s health; controlling major infectious diseases, such as HIV and TB; and managing the rising burden of non-communicable diseases, such as heart disease and cancer. ... The new partnership, the [Primary Health Care Performance Initiative \(PHCPI\)](#), will support countries to strengthen monitoring, tracking and sharing of key performance indicators for primary health care. While many countries have identified primary health care as an urgent priority, they lack the data needed to pinpoint weaknesses, understand their causes and drive improvements. ... **The partnership was launched at an event co-hosted by the governments of Germany, Ghana and Norway**, where German Chancellor Angela Merkel released a new framework, **“Roadmap: Healthy Systems – Healthy Lives,”** for global cooperation to strengthen health systems. The launch of these two complementary initiatives took place as world leaders met at the UN to adopt the SDGs.*

*“We know that better measurement can guide smarter, more effective planning and action,” said Bill Gates, co-chair of the Bill & Melinda Gates Foundation and a co-founder of PHCPI, who spoke at the event. “It’s time to get serious about tracking and measuring primary health care performance, so that countries have the data they need to efficiently direct resources to improve the health of their citizens, especially women and children.” In the words of [Jasmine Whitbread](#) (Save the Children), **“Fifteen years supporting health projects have also convinced Bill Gates that we need health systems that can deliver for all.”***

Aims of the partnership are:

Monitor primary health care vital signs: A new website, PHCperformanceinitiative.org, tracks 25 **“Vital Signs,”** performance indicators for primary health care across 135 countries, where data is available. These indicators can help the global health community and countries better understand how well or poorly their primary health care systems are performing, and are intended to shine new light on what actually happens in health facilities.” Other aims are: **Improve the quality of primary health care data; Promote country collaboration and improvements.**

See also the [World Bank](#) ; the [JLN](#); and the [NYT story](#) on this nice news.

More on this Rockefeller foundation hosted **High-level event on resilient health systems**:

Joint Press Release from Chancellor Angela Merkel of Germany, Prime Minister Erna Solberg of Norway, and President John Dramani Mahama

http://www.bundeskanzlerin.de/Content/EN/Pressemitteilungen/BPA/2015/2015-09-25-merkel-solberg-mahama_en.html

*“Germany’s Chancellor Angela Merkel, Ghana’s President John Dramani Mahama and Norway’s Prime Minister Erna Solberg launched an initiative at the beginning of the year to better prepare the world for future global health crises. [This Saturday, the three leaders will host a **high-level event entitled Securing a Healthy Future: Resilient Health Systems to Fight Epidemics and Ensure Healthy Lives** on the margins of the UN Summit for the Adoption of the 2030 Agenda for Sustainable Development in New York. The event will gather key actors to give recommendations to Tanzania’s President Jakaya Mrisho Kikwete, who heads the UN High-Level Panel on the Global Response to Health Crises. “ ... At the event, **Angela Merkel launched a new roadmap entitled Healthy Systems – Healthy Lives** for further discussion with stakeholders in the coming months. The roadmap process is to be concluded on the margins of the replenishment conference of the GFATM in September 2016. Ban Ki Moon, Bill Gates, ... were all there (see also the previous item on PHCPI).*

UNGA side event: High-level event on “The Path to UHC”

<http://webtv.un.org/meetings-events/watch/the-path-towards-universal-health-coverage-high-level-event/4515743319001>

On Monday 28 August, Japan hosted a UHC event at UNGA – Shinzo Abe was obviously present. Governments of Liberia and Senegal co-hosted the event, together also with WHO (with Chan speaking as well) & the GF. The side event discussed how to achieve UHC (central to the health related goals of the SDGs); how UHC can help to reduce health risks and poverty; and what role governments can play in the attainment of UHC. The discussion also covered how Universal Health Coverage can serve as a cross-cutting mechanism to tackle various health challenges including HIV/AIDS, Tuberculosis and Malaria.

Chan mentioned, among others, that UHC “is a very good example to illustrate how Goal 3 can come together.”

Among others, Lara Brearley, Robert Marten & Simon Wright tweeted about the event. You can still watch the [webcast](#).

USAID – USAID’s vision for Health Systems Strengthening

<https://www.usaid.gov/what-we-do/global-health/health-systems/usaid-vision-health-systems-strengthening>

USAID released on Tuesday its Vision for Health Systems Strengthening (HSS) 2015-2019.

World Bank (report) – Going Universal : How 24 Developing Countries are Implementing Universal Health Coverage from the Bottom Up

<https://openknowledge.worldbank.org/handle/10986/22011>

Last week we already referred to this new WB report. *“This book is about 24 developing countries that have embarked on the journey towards universal health coverage (UHC) following a bottom-up approach, with a special focus on the poor and vulnerable, through a systematic data collection that provides practical insights to policymakers and practitioners. Each of the UHC programs analyzed in this book is seeking to overcome the legacy of inequality by tackling both a “financing gap” and a “provision gap”: the financing gap (or lower per capita spending on the poor) by spending additional resources in a pro-poor way; the provision gap (or underperformance of service delivery for the poor) by expanding supply and changing incentives in a variety of ways. The prevailing view seems to indicate that UHC require not just more money, but also a focus on changing the rules of the game for spending health system resources. The book does not attempt to identify best practices, but rather aims to help policy makers understand the options they face, and help develop a new operational research agenda. The main chapters are focused on providing a granular understanding of policy design, while the appendixes offer a systematic review of the literature attempting to evaluate UHC program impact on access to services, on financial protection, and on health outcomes.”* For the WB [press release](#) (25 September), see here.

UN News –UN launches \$25 billion strategy to end preventable deaths of mothers and children

<http://www.un.org/apps/news/story.asp?NewsID=51979#.VgefOcuqqkp>

Other big news. You find the **new Global strategy** [here](#).

For **WHO’s press release**, see [here](#). “United Nations Secretary-General Ban Ki-moon announced over \$25 billion in initial commitments spanning five years to help end preventable deaths of women, children and adolescents, and ensure their health and well-being. Heads of State and Government, international organizations, the private sector, foundations, civil society, research and academic institutions, and other key partners joined the event during the UN Summit for the adoption of the sustainable development agenda to pledge their **support to the Global Strategy for Women’s, Children’s and Adolescents’ Health.**”

The press release includes **some information on specific contributions from countries** (including an increasing number of development partners from emerging countries “working together in innovative ways to deliver the Sustainable Development Goals”, and from civil society & the private sector.

For **Guardian coverage**, see [here](#).

A [BMJ news article](#) also pointed out that with this new Strategy, Global health initiatives are **focusing on the health of adolescents for the first time.** *“In a foreword to the strategy, Ban Ki-moon*

said that adolescents were “central to everything we want to achieve, and to the overall success” of the sustainable development goals.”

PR Newswire - New Report Outlines Vision for Ending Malaria

<http://www.prnewswire.com/news-releases/new-report-outlines-vision-for-ending-malaria-300149359.html>

“**Bill Gates and Ray Chambers**, the UN Secretary-General's Special Envoy for Financing the Health Millennium Development Goals and for Malaria, **released** an in-depth **report on what it will take to eradicate malaria**. It declares that eradication can be achieved by 2040 if world leaders commit to making it a reality, and they call on leaders to launch a global debate on the issue. The report, titled *From Aspiration to Action: What Will It Take to End Malaria? ...* urges major donors and malaria-affected countries to expand their commitment to the fight against malaria, and it declares that eradication could save 11 million lives and unlock \$2 trillion in economic benefits. Malaria Eradication in the 21st century will differ dramatically from past efforts - From Aspiration to Action envisions a new approach to eradication that will draw important lessons from past eradication efforts and apply innovative strategies, tools and financing.” The report says that innovation is needed in three key areas (new strategies; new tools & new financing).

A related [BMJ news article](#) is titled ‘**WHO should commit to eradicating malaria by 2040, says Gates Foundation**’: “*The World Health Organization has been urged to commit to eradicating malaria by 2040, building on recent progress that has cut the number of deaths from the disease. A report by the Gates Foundation & Ray Chambers, the United Nations’ special envoy for malaria, laid out what it would take to eliminate malaria by 2040. It urged the World Health Assembly, WHO’s decision making body, to make a declaration on malaria eradication if certain key milestones are met. ...*” Well well.

In an [AP article](#), **Sophie Hartman** criticized the report, stating among others that “*Grand and glitzy eradication campaigns overlook the real necessity of financing everyday health systems.*” And she also doubts “*whether the 2040 goal is realistic, citing the previously missed polio targets. WHO had originally hoped to get rid of polio by 2000. “These dates seem increasingly arbitrary and gloss over all the previous dates we’ve heard before,” she said.*”

Thomson Reuters Foundation – U.S. says to spend \$300 mln to fight HIV in Africa

<http://www.trust.org/item/20150926140359-irkd4/?source=jtOtherNews1>

“The Obama administration said on Saturday it was allotting an additional \$300 million to the effort to reduce HIV infection among girls and young women in 10 sub-Saharan African countries” (PEPFAR expansion, in other words).

UNAIDS – World leaders call for accelerated action and smarter investments to Fast-Track the end of the AIDS epidemic

http://www.unaids.org/en/resources/presscentre/pressreleaseandstatementarchive/2015/september/20150927_action_implementation

“The Governments of Kenya and Malawi, together with UNAIDS, are leading an **urgent call for new investment and improvements in health service delivery** to put the world on course to ending the AIDS epidemic by 2030. The **call was made during a high-level event** at the United Nations headquarters in New York, on the eve of the historic 70th United Nations General Assembly. Leaders from around the world gathered at the event to pledge their **support and commitment to UNAIDS Fast-Track approach** and to finding new and innovative ways of delivering essential health care to people most in need. “ See also [UN News centre](#).

WHO - New WHO monitoring tool tracks country action on responding to NCDs

<http://www.who.int/nmh/media/ncd-progress-monitor/en/>

The World Health Organization’s **new Noncommunicable Disease Progress Monitor** tracks the extent to which 194 countries are implementing their commitments to develop national responses to the global burden of NCDs.

In other NCD related news, **Jörg Reinhardt**, chair of the **Novartis Board of Directors** elaborates (on [Project Syndicate](#)) on an innovative access program, which provides 15 NCD medicines at an affordable \$1 per treatment per month in Kenya, Ethiopia, and Vietnam. (let’s hope that treatment access for NCDs gets a further boost in this way).

Check out also an [NCD Alliance Statement](#), ‘*NCD Alliance in the Post-2015 Era Leadership, Vision and Priorities to Transform the NCD Response*’. “*In preparation for this new and transformative era of sustainable development, the NCD Alliance announced this evening [at a High-Level reception] at a high-level reception in New York a transition in leadership and an ambitious new strategic plan for 2016-2020.*”

World Bank Health (blog) –Pandemic response: Time to act is now

Sania Nishtar; <http://blogs.worldbank.org/health/pandemic-response-time-act-now>

*“... The good news is that the recent Ebola crisis has spurred an appetite to act. **Last week, I was invited by the World Bank Group’s Washington offices to give the opening talk at a global pandemic financing stakeholders’ meeting, where the design of a new Pandemic Emergency Financing Facility was being discussed.** The facility will provide financial resources to quickly deploy trained health workers, equipment, medicines and whatever else is required when a pandemic hits. **Other initiatives under way** include the UN Secretary General’s High Level Panel on Global Response to Health Crises; the World Health Organization’s (WHO) Emergency Contingency Fund and process of internal reform; the Global Health Security Agenda, the Institute of Medicine’s Global Health Risk framework; and the Bill and Melinda Gates Foundation’s several lines of support for vaccine development and diagnostic devices. In addition, the G7’s three global priorities include pandemics, and the private sector is showing greater recognition of the issue. Pandemics are at the top of the list of ‘extreme risks’ of importance to the insurance industry, for example. “* So it seems pandemics are on everybody’s minds now.

For updated info on the World Bank’s Pandemic Emergency Facility, see [here](#).

Global partnership for education – Global leaders call for stronger ties between health and education

<http://www.globalpartnership.org/blog/global-leaders-call-stronger-ties-between-health-and-education>

SDG integration & nexus thinking at work. *“One day after the historic adoption of the Agenda 2030 for Sustainable Development, leaders from the Global Partnership for Education, the Global Fund to fight AIDS, TB and Malaria, UNICEF and UNAIDS, co-hosted an event to agree on a new approach to cross-sector collaboration in health and education.”*

Finding synergies won't always be that easy, though. Check out a great [piece](#) by Charles Kenny (in the Atlantic), ‘If Everyone Gets Electricity, Can the Planet Survive?’ “The United Nations has set conflicting goals for 2030: combatting climate change while providing energy to all.” Oops.

Guardian –UN hails impressive gains on education and reducing child mortality in Africa

<http://www.theguardian.com/global-development/2015/sep/28/united-nations-hails-impressive-mdg-gains-on-education-reducing-child-mortality-africa>

“When African leaders return home after this month’s UN summit in New York, they must be ready to implement innovative policies, seek fresh financing and beef up their data if they hope to build on progress made over the past 15 years and turn the sustainable development goals into reality, according to a [new report](#) assessing African countries’ progress in implementing the MDGs. The report hailed “impressive gains” on enrolment in primary schools, women’s political representation, reducing child and maternal deaths, and cutting the prevalence of HIV and Aids.”

Impatient Optimists - Accountability in Global Health: What works, what doesn't, and what we need to do about it

Lola Dare et al; <http://www.impatientoptimists.org/Posts/2015/09/Accountability-in-Global-Health-What-works-what-doesnt-and-what-we-need-to-do-about-it#.VglPAJd2Cix>

Lola Dare et al discuss the importance of **accountability** in achieving the SDGs, highlighting a **UNGA side event on accountability** (see also last week’s IHP newsletter), a [report](#) released by Global Health Visions on accountability in maternal and newborn health, and a CHESTRAD [report](#) on global accountability in the SDGs.

CGD (blog) – The importance of global health investment

<http://www.cgdev.org/blog/importance-global-health-investment>

Larry Summers is still lyrical about the Economists’ [declaration](#) on UHC.

For a related [piece](#), see also **Sania Nishtar** in the Guardian. “As world leaders gather in New York to launch a new set of development goals that they hope will improve the lives of millions, a new constituency has joined the health debate. More than 250 prominent economists – Joseph Stiglitz, Larry Summers and Linah Mohohlo – have signed the Economists’ Declaration on Universal Health Coverage, which calls on world leaders to implement universal health coverage. The Economist Declaration on Universal Health Coverage, convened by The Rockefeller Foundation, **highlights the enormous economic benefits of investing in health, which are estimated to be more than 10 times greater than the cost.**” (whether it’s a “new constituency” is debatable, though)

UN News Centre - UN agencies call for end to violence and discrimination against LGBTI community

<http://www.un.org/apps/news/story.asp?NewsID=52042#.VgztSPmqqr>

At another High-Level Event, “twelve UN agencies today called for an end to violence and discrimination against lesbian, gay, bisexual, transgender and intersex (LGBTI) adults, adolescents and children, and set out specific steps to protect these individuals. “This is the first time that so many members of the UN family have joined forces in defence of the basic rights of lesbian, gay, bisexual, transgender and intersex people,” said Charles Radcliffe, the Chief of Global Issues for the Office of the High Commissioner for Human Rights (OHCHR).”

The Global Partnership for Sustainable Development Goals

<http://www.data4sdgs.org/#intro>

On september 28, 2015 The **Global Partnership for Sustainable Development Data** was officially **launched**. Check out the website. See also [The Guardian](#) (for coverage on the launch).

In a CGD blog, Amanda Glassman [wonders](#) whether the new Partnership will deliver for low-income countries.

Guardian – Data 'crucial' to eradicating poverty

http://www.theguardian.com/media-network/2015/sep/28/data-poverty-sustainable-development-goals-un?CMP=share_btn_tw

And there is a huge need for data. “The UN’s sustainable development goals can’t be achieved unless more funding goes to data and statistics, says a **new report**. ... Although one of the 17 SDGs outlines the need to “increase significantly the availability of high-quality, timely and reliable data,” national statistics offices (NSOs) in developing countries are chronically underfunded, according to [a new report](#) from The Partnership in Statistics for Development in the 21st Century (Paris21).”

SDG insights – Launch

<http://sdginsights.org/>

“SDGinsights uses a completely innovative technique to find new sustainable development ideas and information to support your work. Typical search engines allow you to dive deeper into any specific topic. In contrast, when you enter keywords in SDGinsights, it takes you out of your areas of interest – into connected areas of sustainable development – exposing you to unforeseen but related topics and ideas of importance to you. **SDGinsights takes lateral thinking on sustainable development to a new level by using artificial intelligence** to create meaningful connections throughout the largely unstructured world of development themes and information.”

III : Analysis

As you can imagine, people really, really differ on the use of the SDGs... See below for an overview (with also some pieces specifically focusing on the use of the SDGs for health more in particular, or how they can still be improved, for example when selecting indicators)

Lancet (Editorial) – Towards 2030: counting and accountability matter

[http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)00396-7/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)00396-7/fulltext)

“The SDGs, however, are here to stay, and provide an opportunity for broader accountability in health and development. ...” “...The SDGs challenge all of us to monitor progress towards improved human and planetary health. **Building strong civil registration systems** (= series now published in print issue of the Lancet) is thereby protecting the right to an identity and strengthening global health security, is one critical answer to this challenge.”

Lancet – Offline: Let's celebrate rhetoric-based development

R Horton; [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)00380-3/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)00380-3/fulltext)

(must-read). Horton's (first) assessment of the SDG summit & the SDG agenda. He starts off like this: *“We are now no more than rent boys in the neoliberal takeover of health, nutrition, and development.” The words of one professor of global health last week. He was angry about what has become the most politically charged annual event in global health—the UN General Assembly in New York, a kind of Davos for real people. **This year was historic**, and not only because Pope Francis shamed heads of state into thinking about someone other than themselves. It was also historic because it signified a turning point in international diplomacy. **Global health was rebooted.**”*

“... But did these Presidents and Prime Ministers really understand what they had signed up to? **Did they know how radical the idea of sustainability truly is?** Did they appreciate that the concept of sustainability invites reappraisal of every cherished assumption about human health and development?”

“...What happened last week was an extraordinary declaration of commitment. Now heads of state must turn their declarations into manifestos for action. My global health professor also noted that

“We have presided over the transition from evidence-based medicine to rhetoric-based development” ...”

Let’s prove him wrong.

The Conversation – How the new global goals can help drive systems to address health challenges better

Sara Bennett & Kabir Sheikh ; <https://theconversation.com/how-the-new-global-goals-can-help-drive-systems-to-address-health-challenges-better-48269>

(must-read) *“The fact that the sustainable development goals have only one solitary goal for health has been criticised by many. There are concerns that it signals a more diluted and less ambitious era in global health. We disagree. We believe that the sustainable development goals promise a significant improvement for global health over what went before.”* And they conclude: *“The sustainable development goals are a timely reminder of the complexity of human health and the systems that support it.”* We agree.

Lancet (Comment) - Choosing indicators for the health-related SDG targets

Christopher J L Murray; [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)00382-7/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)00382-7/fulltext)

(must-read) *“On the basis of the lessons learned from the MDGs, the indicators chosen for each SDG target will probably determine the amount of action and attention each target receives. ...”*

*“... Multiple efforts have been underway to develop indicator candidates. ... Consequently, **the operating instructions for the UN Statistical Commission are to select one indicator per target, and, in some cases, to have indicators that monitor more than one target so the overall set is less than 169.**”*

Murray then lays out **what basic properties** should be fulfilled by the **highlevel indicators** for the health-related SDGs, according to him. In a table, he presents a **list of the health-related SDG targets and the indicators that he proposes for them.** (for discussion 😊)

But he also stresses that “discussions of indicators cannot be divorced from the organisations that will undertake the data collection, analysis, and reporting”.

Lancet (Comment) –Understanding death, extending life

Michael Bloomberg et al; [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)00400-6/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)00400-6/fulltext)

On the **Bloomberg Data for Health initiative.** *“To help accelerate global progress and provide technical resources to countries that need them, earlier this year Bloomberg Philanthropies and the Australian Government joined together to launch an ambitious new effort called Data for Health.*

This US\$100 million initiative aims to provide better health data for more than 1 billion people in the next 4 years. To reach that goal, we brought together a group of leading partners that includes the US Centers for Disease Control and Prevention, the Union North America, the University of Melbourne, Johns Hopkins University, and WHO....”

MSF – SDGs: commendable but pie-in-the-sky?

<https://www.msf.org.za/msf-publications/sustainable-development-goals-commendable-pie-sky>

“The aspirations of the SDGs are commendable, but MSF is concerned that they lack a concrete plan to accelerate progress and address existing gaps in healthcare. Daily MSF medics witnesses the real world outcomes of government policy decisions, actions and inactions on people’s health. From our perspective there is a disconnect between the SDGs and people’s health needs, context and country variations and a serious lack of political will and leadership to make health central among other concerns in the SDGs.” MSF’s Key Concerns: (1) The SDG ambitions are at odds with the reality of the people. Significant gaps in health care provision continue to destroy lives and cripple communities. (2) Health gains of the last 15 years are at risk. (3) Inadequate support for research and development (R&D) and lack of access to vaccines and medicines. (4) Funding for health care is being reduced. (5) Lack of political will and leadership on health.

Social Watch – The world agrees on a better future... just not how to get there

Roberto Bissio; <http://www.socialwatch.org/node/17059>

Very nice short piece.

Duncan Green (Oxfam) - Hello SDGs, what’s your theory of change?

<http://oxfamblogs.org/fp2p/hello-sdgs-whats-your-theory-of-change/>

Good question & a recommended piece. Duncan Green gives some suggestions for targets, channels, dynamics,

Righting finance – Financing human rights: Historic summit ups the opportunities, but also the risks

Aldo Caliari;

<http://www.rightingfinance.org/?p=1374>

A human rights assessment. “Advocates who have railed against the fraught relationship between human rights commitments and the MDGs will find **a lot to welcome** in the new goals, several of which are quite progressive. ... However, the ambition of the SDGs, including the **aspirational human rights language**, will have to face its **contradictions with the limited ambition** displayed by the

international community when it comes to **financing** their achievement and **being accountable** for it. ... The new sustainable development agenda ups the opportunities but also the risks for the resourcing of human rights.”

Final HHR (blog) – wrapping up the series on SDGs & human rights & health: With SDGs Now Adopted, Human Rights Must Inform Implementation and Accountability

<http://www.hhrjournal.org/2015/09/29/sdg-series-with-sdgs-now-adopted-human-rights-must-inform-implementation-and-accountability/>

A clear call to action. “Contributors to our SDG SERIES welcome the SDGs as providing valuable opportunities to advance human dignity and rights. But their analyses of the SDGs also highlight missed opportunities, and signal the need for ongoing vigilance to keep human rights central to global development.” With an overview of all key blogs in the series & key messages.

FP – Who foots the bill for ending extreme poverty?

Mark Suzman; <https://foreignpolicy.com/2015/09/28/who-foots-the-bill-for-ending-extreme-poverty-sdgs-mdgs/>

A view from the Gates foundation.

FP – The SDGs should stand for Senseless, Dreamy, Garbled

Bill Easterly; <http://foreignpolicy.com/2015/09/28/the-sdgs-are-utopian-and-worthless-mdgs-development-rise-of-the-rest/>

Lovely read, even if I don't agree at all (except for the last part). “*Play sports! Be in harmony with nature! And end all preventable deaths! Only the U.N. could have come up with a document so worthless.*” Easterly in great shape. Recommended!!

Charles Kenny (CGD) is also [underwhelmed](#) for the time being: “SDGs: not much to cheer yet”. Among others for this reason: “...*That's why the self-congratulatory mood of much of what went on this weekend feels misplaced. The people making speeches in New York lead policymaking worldwide. When it comes to urgent global policy change, if not them, who? If not now, when? I'm holding my cheers until they come through.*”

Guardian – Global goals: a chance to hold power accountable and to disrupt

D Sriskandarajah; <http://www.theguardian.com/global-development-professionals-network/2015/sep/27/global-goals-a-chance-to-hold-power-accountable-and-to-disrupt>

“If we use them right, the SDGs will be fantastic tools to empower and enable”. Now that’s the spirit! The author is the secretary-general of Civicus, the global civil society alliance.

Development Policy – Why poor countries should try to avoid the SDGs

P Krause; <http://devpolicy.org/why-poor-countries-should-try-to-avoid-the-sdgs-20151001/>

Interesting read. Some of his arguments why the SDGs are bad news for poor countries: “...*In reality, governments will need to continue the slow and difficult process of institutional transformation if they want to develop – they need to build capable bureaucracies, money management systems, train and deploy public servants and so on. The way to do that is for government officials and politicians to fix the problems that are in front of them, because they want to keep their jobs and the complicated networks of domestic politics push them that way. Much like Bismarck, who set up the German welfare state to keep the socialists out of government, this kind of progress need not rely on politicians wanting to the right things, and is intensely contested by its very nature. Governments develop unevenly, and find their own idiosyncratic ways to do so.*”

... “For those governments doing the actual work of development, capacity is scarce, and every step forward is often a struggle, especially in poor and fragile contexts. They can ill spare the time and attention to deal with a new set of measurement frameworks, assessments, strategies and plans...”

ODI (blog) - The SDGs could change the way we think about poverty

Elizabeth Stuart; <http://www.odi.org/comment/9903-sdgs-change-way-think-poverty-bottom-billion>

The SDGs may just help shift the way governments approach poverty, Stuart argues. Read how.

Fox news – Exclusive: UN ignores science council warnings in creating vast Sustainable Development Goals

<http://www.foxnews.com/world/2015/09/29/un-ignores-science-council-warnings-in-creating-vast-sustainable-development/>

Fox is still not very happy that the new SDG agenda “over-rode pointed warnings by two international science councils that the program is in many ways uncoordinated, unmeasurable, and unrealistically ambitious”.

Guardian – Tax avoidance by corporations is out of control. The United Nations must step in

J A Ocampo et al; http://www.theguardian.com/commentisfree/2015/sep/30/tax-avoidance-corporations-impacts-the-poor-united-nations-step-in?CMP=share_btn_tw

Issue that will be hugely important for the SDG implementation. “...*We cannot, therefore, close our eyes to the fact that the current global tax system is having a disproportionate impact on those living in poverty. In this sense, a dysfunctional global tax system is also one of the biggest obstacles*

*to the fulfilment of human rights – which includes economic, social and cultural rights as well as civil and political rights. Even as world leaders met earlier this week in New York to set the trajectory for the next fifteen years of development, we cannot continue to gloss over the **need for global tax reform. Fair taxation is critical to realizing the 2030 development agenda.***

And then there are of course a lot of (more specific) **global health concerns** about the **goal(s)**, **targets** and (still to be decided) **indicators** (see also C Murray's Lancet article above), as well as **suggestions**. You find just a couple here below. There are no doubt many more.

Read also – in Foreign Policy - [Cheers to the Taxman: Why taxes are better than aid](#) (by Alex Their). On the Addis Tax initiative, among others.

NPR Goats & Soda - Trying To Add The 'M' Word (Menstruation) To The U.N.'s New Goals

<http://www.npr.org/sections/goatsandsoda/2015/09/25/443103720/trying-to-add-the-m-word-menstruation-to-the-u-n-s-new-goals>

“...Patkar sees it as particularly vital that the **United Nations uses the word "menstruation"** in its 17 SDGs, which will be ratified this weekend. Goal 6, which calls for access to sanitation and clean water for all, alludes to it: "achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls." But the goal does not mention it by name. The **Water Council is advocating for an "indicator"** under **Goal 6.2** that will explicitly address menstruation by measuring the percentage of women and girls who have access to information and facilities that allow them to handle their monthly period in a hygienic way. ...”

Global Health Workforce Alliance - Investing in health workforces: the path towards the SDGs starts here

<http://who.int/workforcealliance/media/news/2015/path-towards-SDGs/en/>

By **Jim Campbell**.

Biomed central (blog) – Hepatitis and the Sustainable Development Goals: time for an end run

Jeff Lazarus; <http://blogs.biomedcentral.com/on-health/2015/09/28/hepatitis-sustainable-development-goals-time-end-run/>

Jeffrey Lazarus talks about the need for a global goal of **eliminating** viral hepatitis (instead of just ‘combatting’ it). That will have to happen in the indicator stage, then.

GAVI – Gavi welcomes global goals and renews call for immunisation indicator

<http://www.gavi.org/Library/News/Statements/2015/Gavi-welcomes-global-goals-and-renews-call-for-immunisation-indicator/>

Gavi also has a suggestion. *“Gavi, the Vaccine Alliance today renewed calls for **an immunisation indicator to be included** in the monitoring framework for the Sustainable Development Goals (SDGs). Gavi is committed to playing its part in the ambitious efforts to end poverty by 2030 and welcomes the adoption of the goals. Gavi is calling on the Inter-Agency Expert Group (IAEG-SDGs), set up by the UN to develop a global indicator framework, to include a vaccine-specific indicator. This would measure progress against the following objective: Reach and sustain 90% national coverage and 80% in every district with all vaccines in national programmes.”*

WHO – Treat all people living with HIV, offer antiretrovirals as additional prevention choice for people at "substantial" risk

<http://www.who.int/mediacentre/news/releases/2015/hiv-treat-all-recommendation/en/>

Very big HIV news. **“Anyone infected with HIV should begin antiretroviral treatment as soon after diagnosis as possible**, WHO announced Wednesday. With its "treat-all" recommendation, WHO removes all limitations on eligibility for antiretroviral therapy (ART) among people living with HIV; all populations and age groups are now eligible for treatment.” See also [Thomson Reuters](#) and the [NYT](#) for coverage (and some reactions from Dybul, Birx, MSF, ...) on these new WHO guidelines which imply that an estimated **37 million people worldwide should be on treatment. All people at "substantial" risk of contracting HIV should also be given preventive ART**, not just men who have sex with men, the WHO said. It’s clear that advocates around the world welcomed the new guidelines — but it’s not clear how the cost issue will be dealt with. See also **David Garmaise** on [Aidspace](#): “Implementing the recommendation will require dramatically increased financial support from donors and governments.”

International Day of older persons

Yesterday, **1st October** was the [International Day of older persons](#). This year’s **theme** is was ‘Sustainability and Age Inclusiveness in the Urban Environment’.

WHO (report) – Number of people over 60 years set to double by 2050; major societal changes required

<http://www.who.int/mediacentre/news/releases/2015/older-persons-day/en/>

“With advances in medicine helping more people to live longer lives, the number of people over the age of 60 is expected to double by 2050 and will require radical societal change, according to a **new**

[report](#) released by the WHO for the International Day of Older Persons (1 October).

“Comprehensive public health action on population ageing is urgently needed. This will require fundamental shifts, not just in the things we do, but in how we think about ageing itself. The **World report on ageing and health** outlines a **framework for action to foster Healthy Ageing** built around the new concept of functional ability. Making these investments will have valuable social and economic returns, both in terms of health and wellbeing of older people and in enabling their on-going participation in society.”

(As the IHP curator, I know a thing or two about unhealthy ageing, so I already empathize 😊.)

*“In advance of the International Day of Older Persons, WHO Director General Dr. Margaret Chan said **“most people, even in the poorest countries, are living longer lives, but this is not enough.”** “We need to ensure these extra years are healthy, meaningful and dignified,” Dr. Chan said. **Contrary to widespread assumptions, WHO said the report finds that there is very little evidence that the added years of life are being experienced in better health than was the case for previous generations at the same age.**” Among others, health systems need to adapt to accommodate to the increasing number of aging people worldwide.*

You might also want to read **M Hodin’s (CEO Global Coalition on Aging) [op-ed](#) in the Huffington Post**, ‘Bravo World Health Organization’. *“The WHO Report on Ageing and Health gives us for the first time the pathway to 21st century healthy aging.”*

(PS: [Draft zero](#) of the "Global Strategy and Action Plan on Ageing and Health" is (still) **open to public consultation** from individuals and institutions – till end of October. Comments will be discussed in Geneva on 29-30 October 2015.)

On the same issue, check out also a **new ILO [study](#)** that “reveals a **global shortfall of 13.6 million care workers undermining the delivery of quality services to more than half of the world’s older persons**”. For the study, see [here](#).

(As the brother of a head nurse in a nursing home, I can assure you that even in the North, things are getting worse and worse, so these reports are very timely.)

The Lancet Oncology – Commission on Global cancer surgery

<http://www.lancet.com/commissions/global-cancer-surgery>

Over three-quarters of people with cancer worldwide have no access to safe surgery, according to a major new Commission examining the state of global cancer surgery, published in *The Lancet Oncology*, presented at the 2015 European Cancer Congress in Vienna. *“Surgery is a fundamental modality for both curative and palliative treatment of most cancers in countries across all income settings. Yet, the global debate on cancer has mainly focused on prevention and medication, with little narrative directed towards surgery. The **Lancet Oncology Commission on Global Cancer Surgery** highlights cancer surgery as an integral partner in national cancer control plans as a means of addressing the overlooked role of curative surgery in cancer care. The Commission critically examines the state of global cancer surgery and the variable needs and interdependencies of surgery with other cancer treatments, such as radiotherapy. It explores the link between the needs, gaps, and*

opportunities and directed changes in policy to drive improvements in cancer surgery research, education, and systems of care across all income settings.”

The Lancet Oncology – Responding to the cancer crisis: expanding global access to radiotherapy

<http://www.lancet.com/commissions/radiotherapy>

“Radiotherapy is a critical and inseparable component of comprehensive cancer treatment and care. For many of the most common cancers in low and middle income countries (LMICs), radiotherapy is essential for effective treatment. In high-income countries (HICs), radiotherapy is used to treat cancer in more than half of all cases to cure localised disease, to palliate symptoms, and to control disease in incurable cancers. Yet, in planning and building treatment capacity for cancer, radiotherapy is frequently the last resource to be considered. Consequently, worldwide access to radiotherapy is unacceptably low. We present a new body of evidence that quantifies the worldwide coverage of radiotherapy services by country. We show the shortfall in access to radiotherapy by country and globally for 2015–35 based on current and projected need, but demonstrate that our findings show substantial health and economic benefits to investing in radiotherapy. Our results provide compelling evidence that investment in radiotherapy not only enables treatment of large number of cancer cases to save lives it also brings positive economic benefits.” You find the Commission [here](#).

Tackling the global shortfall in radiotherapy could **save millions of lives** and boost the economy of poorer countries - **Investment in radiotherapy services could bring economic benefits of up to US\$ 365 billion in developing countries** over the next 20 years.

Refugee crisis

Over to the global refugee crisis then.

UN News –Syria: UN health agency urges donors to assist countries ‘doing the heavy lifting’

[UN News:](#)

“Crippling funding shortfalls are hindering the ability of emergency teams to meet the escalating health needs of the millions of Syrians displaced by civil war and donors need to step up support to countries in the region doing the “heavy lifting,” warned the World Health Organization (WHO). “It is imperative that the health sector in this region is adequately funded to ensure refugee and host population needs are catered to,” said Dr. Nada Al Ward, coordinator of WHO’s Emergency Support Team based in Amman, Jordan. ... The agency said the health component of the 2015 Syria response plan is only 30 per cent funded, while the health component in the regional refugee and resilience plan is only 17 per cent funded.”

AFP [reported](#) that the G7 & the Gulf States **pledged together 1.8 billion** for UN refugee aid. Doesn't sound like a lot of money. So much for 'doing the heavy lifting'...

However, as far as the World Food Programme is concerned, "...[WFP Executive Director] Ertharin Cousin said in an interview with the Associated Press that the **World Food Programme is not facing 'donor fatigue.'** In fact, **traditional donors have been more generous**, she said, but food needs have escalated because of an increasing number of refugees, people caught in conflict, and suffering from climate-related events including drought." (see [Huffington Post](#))

NYT – Mark Zuckerberg Announces Project to Connect Refugee Camps to the Internet

<http://www.nytimes.com/2015/09/27/world/americas/mark-zuckerbergannounces-project-to-connect-refugee-camps-to-the-internet.html>

"Mark Zuckerberg, chief executive of Facebook, promoted access to the Internet as "an enabler of human rights" and a "force for peace" on Saturday, as he announced that his company would help the United Nations bring Internet connections to refugee camps." (together with Bono & Mo Ibrahim, he also initiated a petition to expand connectivity, calling Internet access "essential" to achieving the development goals ... The petition describes the Internet as "an enabler of human rights."

WHO Bulletin (Editorial) – Improving mental health care in humanitarian emergencies

P Ventevogel et al; <http://www.who.int/bulletin/volumes/93/10/15-156919/en/>

From the new [WHO Bulletin October issue](#).

*"The mental health needs of people affected by emergencies are significant, but often overlooked by health-care providers. ... There is consensus that humanitarian assistance should address mental health and psychosocial issues through intersectoral action. Currently, most health agencies do not routinely address these needs, though the programmes of Médecins Sans Frontières and the International Medical Corps are notable exceptions. ... To address these gaps in service provision, the World Health Organization and the United Nations High Commissioner for Refugees have released the **mhGAP Humanitarian Intervention Guide.**"*

Health Affairs (blog) –The Global Migration Crisis, International Law, And The Responsibility To Protect Health

<http://healthaffairs.org/blog/2015/09/29/the-global-migration-crisis-international-law-and-the-responsibility-to-protect-health/>

Speaking of the refugees, "...Sadly, international law is lacking when it comes to protecting this vulnerable group, providing "no comprehensive legal instrument at the international level that establishes a framework for the governance of migration." Instead, **international law and regional agreements impose a patchwork of binding and non-binding state responsibilities depending on**

the migrant's legal status. Refugees have a range of entitlements once states have processed and affirmed their protection claims. Asylum seekers, however, have few rights unless they gain refugee status, and international law barely recognizes the plight of internally displaced persons. ...

...The sheer scale of forced migration, along with its potential to spread infectious diseases, is a matter **not only of the right to health**, but also of **global health security** to prevent the re-emergence of diseases such as polio." "It is very much in the international community's interests to build health system capacity to prevent public health emergencies of international concern. Pro-active protection of health and security should be an obligation under international law, but it also is a moral imperative. So yes, there's a global health security angle to this as well". (*usually the case whenever Gostin writes something* 😊).

HP&P – Network advocacy and the emergence of global attention to newborn survival

J Shiffman; <http://heapol.oxfordjournals.org/content/early/2015/09/23/heapol.czv092.short?rss=1>

If you allow my shameless lobbying, I'd like Jeremy Shiffman to feature in a plenary session in Vancouver. This is his latest piece. Part of the special supplement on global health networks. (*In a session with some of the best and most influential global health 'networkers' ?*)

Journal of comparative policy analysis – Kingdon reconsidered: Ideas, Interests and Institutions in Comparative Policy Analysis

D Béland; <http://www.tandfonline.com/doi/abs/10.1080/13876988.2015.1029770>

*"Initially published in 1984, John W. Kingdon's Agendas, Alternatives, and Public Policies has long been classic reading in policy studies. **This paper systematically explores its contribution to the analysis of the role of ideas in comparative policy analysis**, which has dramatically expanded over the last two decades. Looking at this book about agenda-setting as well as two more recent, and much less cited, chapters by Kingdon, the article explores his perspective on ideas as they relate to the problem, the policy, and the political streams, before addressing crucial issues, such as the role of institutions and the relationship between ideas and interests, that remain central to the current debates within the ever-expanding ideational policy literature. As the article shows, Kingdon's work, including its flaws, makes a powerful and most relevant contribution to the ideational approach to public policy, which is why this article ends with a synthetic agenda for future comparative research on the role of ideas in policy development."*

UN News centre - World Rabies day

[UN News;](#)

Worldwide, there is about 1 [rabies](#) death every 15 minutes. **World Rabies Day was celebrated on 28 September.** Once rabies symptoms appear, the disease is almost always fatal. However, rabies is a vaccine-preventable disease. And **vaccinating dogs is the most cost-effective strategy for preventing rabies in people.** WHO, the U.N. Food and Agriculture Organization (FAO), and the World Organisation for Animal Health (OIE) are initiating an **international conference on the global elimination of dog-mediated human rabies from 10 to 11 December 2015 in Geneva.**

Global Challenges (Editorial) – Global challenges: Global health

Steven Hoffman & JA Rottingen; <http://onlinelibrary.wiley.com/doi/10.1002/gch2.1006/epdf>

Editorial from a brand **new & interdisciplinary journal**, 'Global Challenges'. This Editorial concerns one of the five key priorities (at least for the time being), global health.

Check out also the general [Editorial](#), 'Global Challenges: An innovative journal for tackling humanity's major challenges'. "... we are excited to announce the launch of Global Challenges, Wiley's new premium interdisciplinary open access journal. Global Challenges will publish high-quality research papers, reviews, editorials, and commentaries spanning research and practice related to these global challenges. The aim is to mobilize debate and leadership regarding these challenges and to create a platform for directing and setting the research, policy, and practice agendas. In doing so, we provide a new centre for an emergent community of cross-disciplinary collaborative stakeholders. **Global Challenges will initially focus on five major challenges:** Climate Change, Energy, Water, Global Health, and Food, Agriculture & Nutrition."

Journal of Epidemiology & Public Health (essay) - The rise of neoliberalism: how bad economics imperils health and what to do about it

R Labonté & David Stuckler; http://jech.bmj.com/content/early/2015/09/30/jech-2015-206295.short?g=w_jech_ahead_tab

Great stuff, pointing out how "The 1 % can be tamed". *"The 2008 global financial crisis, precipitated by high-risk, under-regulated financial practices, is often seen as a singular event. The crisis, its recessionary consequences, bank bailouts and the adoption of 'austerity' measures can be seen as a continuation of a 40-year uncontrolled experiment in neoliberal economics. **We call for four policy reforms** to reverse rising inequalities and their harms to public health. First is re-regulating global finance. Second is rejecting austerity as an empirically and ethically unjustified policy, especially given now clear evidence of its deleterious health consequences. Third, there is a need to restore progressive taxation at national and global scales. Fourth is a fundamental shift away from the fossil fuel economy and policies that promote economic growth in ways that imperil environmental sustainability. This involves redistributing work and promoting fairer pay. We do not suggest these reforms will be politically feasible or even achievable in the short term. They nonetheless constitute an evidence-based agenda for strong, public health advocacy and practice."*

Ebola

Guardian – Ebola is all but over, but the postmortem is just getting started

Sarah Boseley; <http://www.theguardian.com/world/2015/sep/30/ebola-inquest-un-united-nations-world-health-organisation>

Pretty good overview of the place in which WHO finds itself now – under scrutiny as never before; a ‘defining moment for WHO’ and the like. But perhaps, as Devi Sridhar tweeted, it’s time to publish also an in-depth report on the things **WHO did right** in its response.

Some excerpts if you don’t have time for the piece – **“Chan, meanwhile, is trying to bring about the revolution needed to ensure the WHO is fit to fight the next pandemic.”**

“...The US showed the most disquiet over the WHO’s handling of the outbreak and has already moved to set up an African version of its CDC in Addis Ababa in conjunction with the African Union. Farrar said: “I think if there isn’t action, Obama won’t come out and say we’re taking over the epidemic responses for the world. It will just happen quietly and you can see some of that happening already with the African CDC.” ... **“... In Sierra Leone, the new country representative is Anders Nordström,** a former acting director general of the WHO, who as yet does not have his photograph on the wall. He is a high-level appointee to an office seen as a backwater before Ebola. He wanted to return to the field after years on high-level boards, he said, but is also keen on overseeing restructuring in Sierra Leone and bringing reform to west Africa. He talked of “trying to make WHO be what WHO should be”, supported by Chan and Moeti, the Afro regional director...”

African Governance Initiative (AGI) – State of emergency: How government fought Ebola

<http://www.africagovernance.org/sites/default/files/download/pdf/1/AGI%20-%20Ebola%20lessons%20SMALL.pdf>

Sometimes Tony Blair does something right - from a while ago already. Ebola was not just a medical problem, but also a systems problem, AGI realized quickly. *“...We have developed this piece, part of an ongoing series of case studies on our work, by reflecting on AGI’s experience (in these three countries, during the Ebola crisis) and by gathering the views of government colleagues and international partners. The lessons in this paper are for three groups: political leaders, governments and international partners (including AGI).”*

In other Ebola related news, Sierra Leone started a new 42-day [countdown](#) to Ebola-free status. 4 new cases last week in [Guinea](#) though.

And both the **presidents of SL & Liberia** [outlined](#) their **post-Ebola recovery plans** in their addresses to the UN Assembly.

Global health initiatives

Clinton Global initiative & Clinton foundation update

In NY, the Clinton Global Initiative's annual meeting also took place- "a who's who of the rich, famous and influential gathered again, this time to discuss "the future of impact, of sustainable development (and the US presidency)". The meeting and the initiative got quite some attention, given Hillary's presidency candidacy and other troubles recently. Check out **Devex analysis before & coverage** [here](#) and [here](#). You might also want to read an [AP article](#) (in which Bill claims the results booked) . Unfortunately, Clinton Foundation President Donna Shalala suffered a stroke.

PEPFAR – Statement From Ambassador Deborah L. Birx, M.D., U.S. Global AIDS Coordinator & U.S. Special Representative for Global Health Diplomacy on Translating the Vision Into Action: Fast-Tracking to an AIDS-free Generation

[PEPFAR](#);

(see a KFF report on this statement) *"In this statement, Birx discusses the administration's launch of new PEPFAR HIV prevention and treatment targets for 2016 and 2017, highlighting U.S. investments in initiatives including the DREAMS partnership, which aims to "ensure that adolescent girls and young women have an opportunity to live Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe lives;" the Robert Carr Civil Society Networks Fund (RCNF) Replenishment "to build the capacity of civil society and bring often marginalized populations out of the shadows and into health care clinics;" and a joint two-year initiative with UNAIDS to strengthen the capacity of faith communities to respond to HIV."*

Global Fund –The Global Fight against Corruption Comes to Montreux

<http://www.theglobalfund.org/en/news/2015-09-29-The-Global-Fight-against-Corruption-Comes-to-Montreux/>

Over 150 international investigators met in Montreux, Switzerland this week for the 16th **Conference of International Investigators**. Hosted for the first time by the Global Fund Office of the Inspector General, the conference brings together investigators from United Nations agencies, development banks and international organizations. ... As the Global Fund Office of the Inspector General celebrates its 10-year anniversary this year, we are delighted to be able to host this conference and facilitate international cooperation between all investigative offices in the global

fight against fraud and corruption.” This year, the Global Fund Office of the Inspector General has proposed **the theme of “those we impact”**, introducing **human rights** on to the conference agenda for the first time.

BMC public health - Mortality changes after grants from the Global Fund to Fight AIDS, tuberculosis and malaria: an econometric analysis from 1995 to 2010

I Yan; E Korenromp & E Bendavid; <http://www.biomedcentral.com/1471-2458/15/977>

The authors conducted an econometric analysis of data from all countries eligible to receive Global Fund grants from 1995 to 2010, prior to and during the Global Fund’s activities. They conclude: “Grants from the Global Fund are closely related to accelerated reductions in all-cause adult mortality and malaria-specific under-five mortality. However, up to 2010 the Global Fund has not measurably contributed to reducing all-cause under-five mortality

UHC, post-2015 and global governance for health

UHC

NEJM – Transforming Turkey's Health System — Lessons for Universal Coverage

R Atun; http://www.nejm.org/doi/full/10.1056/NEJMp1410433?query=featured_home

Turkey’s turn in the NEJM series.

HP&P – Quality at the centre of universal health coverage

H Sobel et al;

<http://heapol.oxfordjournals.org/content/early/2015/09/28/heapol.czv095.short?rss=1>

Recommended. *“The last decade of the MDG era witnessed substantial focus on reaching the bottom economic quintiles in low and middle income countries. However, the inordinate focus on reducing financial risk burden and increasing coverage without sufficient focus on expanding quality of services may account for slow progress of the MDGs in many countries. Human Resources for Health underlie quality and service delivery improvements, yet remains under-addressed in many national strategies to achieve Universal Health Coverage. Without adequate investments in improving and expanding health professional education, making and sustaining gains will be unlikely. The transition from the Millennium Development Goals (MDG) to the Sustainable Development Goals (SDG), with exciting new financing initiatives such as the Global Financing Facility brings the potential to enact substantial gains in the quality of services delivered and upgrading human health resources. This focus should ensure effective methodologies to improve health worker competencies and change*

practice are employed and ineffective and harmful ones eliminated (including undue influence of commercial interests)."

SDGs, post-2015 & climate change

The [news on Shell abandoning drilling](#) in the Arctic was no doubt the biggest climate change news this week. But in addition:

Guardian – UK's £6bn climate finance pledge is welcome – but not its fair share

http://www.theguardian.com/environment/2015/sep/28/uks-6bn-climate-finance-pledge-is-welcome-but-not-its-fair-share?CMP=tw_t_a-global-development_b-gdndevelopment

Over to David Cameron and crew. "*The [UK's \(\\$8.8bn\) pledge](#) (i.e. spread over five years) to help poor nations cope with climate change falls short of the country's fair share of the burden and the efforts of other European leaders, campaigners have said.*"

(also important to know: "...It is a common misconception that the \$100bn total is intended to come solely from the budgets of developed countries. Instead, it will involve a combination of private and public capital, as well as contributions from development banks.")

Euractiv - Hollande boosts COP21 climate finance efforts

<http://www.euractiv.com/sections/climate-environment/hollande-boosts-cop21-climate-finance-efforts-318075>

*"The French leader has promised an extra €2 billion per year to finance the fight against climate change in the Global South. **France has pulled out all the stops in its effort to boost the level of international ambition ahead of the United Nations Climate Conference**, which will take place in Paris this December. ... In his address to the 70th United Nations General Assembly this week, François Hollande promised a significant increase in France's climate financing effort. By 2020, Paris will spend an extra €2 billion per year on the fight against climate change, bringing France's total contribution from €3 billion to €5 billion. ... To raise these extra funds, France hopes to lean heavily on the **Financial Transaction Tax (FTT)**, a severely delayed tool that is now scheduled to come into force in 2017. ... France is not alone in increasing its climate financing efforts. In May this year, Germany announced that it would double its finances to €4 billion per year. ... (and see above) The United Kingdom will also increase its financial contribution to the fight against climate change in the global South by around 50% over the next five years, to £5.8 billion. "*

As for the SDGs, **many global stakeholders and actors** are already **considering how to reposition themselves in the new era**, or think tanks are doing that in their place.

Read for example:

- An IMF discussion note: [From Ambition to Execution: policies in support of SDGs](#);
- Homi Kharas (Brookings institute): [The post-2015 agenda and the evolution of the WB group](#).
- International Institute for Sustainable Development (IISD): [Inclusivity and Integration: The new SDGs & a second chance for Bretton Woods](#) (nice one, with some historical background) – part 1.
- [Engaging Philanthropy in the Post-2015 Development Agenda: Lessons Learned and Ways Forward](#)

There are no doubt many, many more ...

Infectious Diseases

Globalization & Health – Islamist insurgency and the war against polio: a cross-national analysis of the political determinants of polio

J Kennedy et al; <http://www.globalizationandhealth.com/content/11/1/40>

Co-authored by Martin McKee. Their conclusions: *“Only particular forms of internal armed conflict – those prosecuted by Islamist insurgents – explain the current global distribution of polio. The variation over time in the relationship between Islamist insurgency and polio suggests that Islamist insurgent’s hostility to polio vaccinations programmes is not the result of their theology, as the core tenets of Islam have not changed over the period of the study. Rather, our analysis indicates that it is a plausibly a reaction to the counterinsurgency strategies used against Islamist insurgents. The assassination of Osama bin Laden and the use of drone strikes seemingly vindicated Islamist insurgents’ suspicions that immunization drives are a cover for espionage activities.”*

(In follow-up research, let’s find out what the impact is of Putin’s bombs on the islamists’ rivals, on polio immunization campaigns in IS territory. Martin, the time is now for some field research)

WHO – WHO Removes Nigeria from Polio-Endemic List

<http://www.who.int/mediacentre/news/releases/2015/nigeria-polio/en/>

Great news obviously.

You might also want to read – on Global Health Now – an [article](#) on a recent CSIS conference on the challenges of global polio eradication (in Washington DC).

NYT - Children With H.I.V. More Likely to Die of Malaria

[NYT](#);

“Children infected with HIV appear much more likely than those who are not to die with severe malaria, a new study has found. It may make sense to give these children malaria drugs protectively, the authors said.”

Malaria Journal – Disruptive technology for vector control: the Innovative Vector Control Consortium and the US Military join forces to explore transformative insecticide application technology for mosquito control programmes

J Knapp et al; <http://www.malariajournal.com/content/14/1/371>

Anything with ‘disruptive’ in the title is recommended reading for my colleague Pierre Massat. Enter the ‘US Military’ – even better. *“Malaria vector control technology has remained largely static for decades and there is a pressing need for innovative control tools and methodology to radically improve the quality and efficiency of current vector control practices. This report summarizes a workshop jointly organized by the Innovative Vector Control Consortium (IVCC) and the Armed Forces Pest Management Board (AFPMB) focused on public health pesticide application technology.”*

In other malaria news, check out also The Wellcome Trust (press release): [Genes that protect African children from developing malaria identified](#).

NCDs

Lancet (Editorial) –Coca-Cola's funding of health research and partnerships

[http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)00397-9/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)00397-9/fulltext)

“In a bid to increase transparency, Coca-Cola has disclosed spending US\$118.6 million in the past 5 years on scientific research and health and wellbeing partnerships. In a list of organisations funded by Coca-Cola, published on Sept 22, they reveal several influential medical organisations that have received funding, including the American Cancer Society, which received roughly \$2 million, the American College of Cardiology, which received roughly \$3.1 million, and the Academy of Nutrition and Dietetics, as detailed in an article published on Sept 22 in The New York Times.” This Editorial comments.

NTDs

Plos NTDs – Vaccine Science Diplomacy: Expanding Capacity to Prevent Emerging and Neglected Tropical Diseases Arising from Islamic State (IS)–Held Territories

Peter Hotez; <http://journals.plos.org/plosntds/article?id=10.1371/journal.pntd.0003852>

Here's another one related to Islamic extremists. By the omnipresent Peter Hotez. *“War and the ensuing health system breakdowns in the Islamic State (IS)–occupied Syria and Iraq significantly increase the risk of a new wave of infectious disease epidemics in the Middle East and North Africa (MENA). Proactive engagement to enable health system capacity and resilience—including expanding immunization programs and building biotechnology capacity for vaccines that specifically target diseases in the region—would help minimize the impact if and when outbreaks occur. A program of **vaccine science diplomacy** with selected countries in the MENA region could help to avert an international public health crisis possibly similar in scope and magnitude to the 2014 Ebola virus outbreak in West Africa.”*

Reproductive, maternal, neonatal & child health

WHO – Draft Final Report of the Commission on Ending Childhood Obesity open for comment until 13 November 2015

<http://www.who.int/end-childhood-obesity/final-report-for-comment/en/>

“The Draft Final Report of the Commission on Ending Childhood Obesity is now open for comment from relevant stakeholders. In addition, the Commission will hold regional consultations and hearings throughout this consultative period. The Commission reviewed the feedback received on their Interim Report from relevant stakeholders and through the regional consultation. This Draft Final Report proposes key policy actions to address childhood obesity.” Read the draft final report [here](#).

Forbes – Gates foundation backs new shot to prevent babies from dying of pneumonia

<http://www.forbes.com/sites/matthewherper/2015/09/29/gates-foundation-backs-new-shot-to-prevent-babies-from-dying-of-pneumonia/>

“The Bill and Melinda Gates Foundation will spend up to \$89 million to fund the development of a vaccine against viral pneumonia. In return, the vaccine’s maker, Novavax, will make the shot available at an undisclosed, but cheap, price in developing countries if it proves effective.”

World Contraception Day 2015

<https://www.usaid.gov/what-we-do/global-health/family-planning/world-contraception-day>

*“Currently, more than 225 million women in developing countries want to delay or avoid pregnancy but are not using a modern method of family planning. **World Contraception Day**, which takes place on **September 26** each year, draws attention to the importance of increasing access to contraceptive information and services for all who want them. “ USAID joined the global campaign.*

(as for me, I celebrated [International Coffee Day](#) this week ☺ - hope the coffee drinkers among you did the same)

The Yale School of Public health will [measure](#) global breastfeeding promotion programs (via a Breastfeeding Friendly Country Index).

Lancet Global Health –New WHO guidance on prevention and treatment of maternal peripartum infections

M Bonet et al; [http://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(15\)00213-2/fulltext](http://www.thelancet.com/journals/langlo/article/PIIS2214-109X(15)00213-2/fulltext)

This week, WHO launched new guidance on interventions for women to prevent and treat infections occurring during the peripartum period. This is a related Comment.

RHM papers on abortion

<http://www.rhmjournal.org.uk/key-topics/abortion/>

Check them out.

Guardian – Endometriosis: the hidden suffering of millions of women revealed

Sarah Boseley et al ; http://www.theguardian.com/society/2015/sep/28/endometriosis-hidden-suffering-millions-women?CMP=Share_iOSApp_Other

The hidden toll and extraordinary neglect of a disease that affects an estimated 176 million women around the globe, causing many to suffer a life of pain and debilitation and sometimes infertility, was revealed by the Guardian this week.

Reuters – Human reproduction, health broadly damaged by toxic chemicals: report

<http://www.reuters.com/article/2015/10/01/us-usa-chemicals-report-idUSKCN0RV3D920151001>

*“Exposure to toxic chemicals in food, water and air is linked to millions of deaths, and costs billions of dollars every year, according to a **report** published Thursday by an international organization of medical professionals. Among the poor health outcomes linked to pesticides, air pollutants, plastics and other chemicals, according to the report from the International Federation of Gynecology and Obstetrics (FIGO), an organization representing obstetrical and gynecological associations from 125 countries, are miscarriage and still births, an increase in cancer, attention problems and hyperactivity. “Exposure to toxic environmental chemicals during pregnancy and breastfeeding is ubiquitous and is a threat to healthy human reproduction,” the report states. The piece was written by a team of physicians and scientists from the United States, the United Kingdom and Canada, including from the World Health Organization. It was **published in the International Journal of Gynecology and Obstetrics ahead of a global conference on women's health issues next week in Vancouver, British Columbia.** »*

Health Policy & Financing

Journal of Health Diplomacy - Locating Health Diplomacy through African Negotiations on Performance-based Funding in Global Health

Amy Barnes et al; http://media.wix.com/ugd/35c673_c5741d5e3c8542c09d909132a0ed5a95.pdf

“This article examines how national health actors in South Africa, Tanzania and Zambia perceive the participatory quality of negotiation processes associated with the performance-based funding mechanisms of the Global Fund to Fight AIDS, Tuberculosis and Malaria and the World Bank...”

Open for business - The economic and business case for global LGB&T inclusion

<http://www.open-for-business.org/the-report/>

For the report, see [here](#).

Huffington Post – Bernie Sanders Calls Out Obama Team On Global Drug Prices

http://www.huffingtonpost.com/entry/bernie-sanders-michael-froman-drug-prices-poor-countries_560aea3ce4b0dd850309818b

*“Democratic presidential hopeful Bernie Sanders on Monday urged the Obama administration to reverse its opposition to a proposal aimed at preventing drug price increases in the world’s poorest countries. “Making sure people in poor countries have access to life-saving medicine is our moral responsibility,” Sanders wrote in a letter to U.S. Trade Representative Michael Froman. “I respectfully ask you to reconsider this position.” **In February, poor countries asked the World Trade Organization to exempt them from patents and other intellectual property standards for medicines.... The WTO will rule on the plan in mid-October.** » To be continued...*

MSF access campaign – TPP trade pact will deepen global crisis of exorbitant drug prices unless dangerous terms are removed

<http://msfaccess.org/about-us/media-room/press-releases/tpp-trade-pact-will-deepen-global-crisis-exorbitant-drug-prices>

« As public outrage about exorbitant drug prices features in new headlines in the US and around the world, **negotiators and trade ministers from the 12 Trans-Pacific Partnership (TPP) countries are converging in Atlanta to potentially finalize the trade pact**, which has been negotiated in secret over a period of more than five years. Recent leaked copies of the TPP’s intellectual property chapter confirm the inclusion of harmful rules that will lock in high prices and block affordable generic medicines for years. **MSF urges all TPP countries to firmly reject provisions that will deepen the global crisis of unaffordable medicines and health products.** » (see also [AFP](#) on TPP negotiations in Atlanta)

Scroll.in – India needs to resist pressure from big drug firms and their backers to change patent laws

Chase Perfect; <http://scroll.in/article/741820/why-india-must-resist-pressure-from-big-drug-firms-and-their-backers-to-change-patent-laws>

Pretty neat piece. *“India’s intellectual property model is under attack not because it has failed, but because it has succeeded – in balancing private profits with public health.”* With some very good examples. Some excerpts:

“...However, the generic drug industry threatens big pharma’s hold on the global market, notably in the lucrative arena of so-called specialty drugs. As a pillar of the global generic industry, India has been facing relentless international pressure, especially from governments that act on behalf of their pharmaceutical industries. This is particularly significant for new cancer drugs that India is capable of producing at low costs and that big pharma prices exorbitantly, and is thus desperate to keep under its control. ...” “...One of 2014’s blockbusters, a new hepatitis C drug called sofosbuvir (brand name: Sovaldi) illustrates this point. **Gram for gram, it costs 67 times the price of gold.** A 12-week treatment course totals \$84,000 for 84 pills; however, each \$1,000 pill costs less than \$2 to manufacture.”

See also the [Economic Times](#): Generic drugs row: NGOs ask India not to buckle under US pressure. (and [MSF](#) – ahead of a meeting between Obama & Modi).

Bloomberg – Save the World, Turn a Profit

M Yunus & J Rodin ; http://www.bloombergview.com/articles/2015-09-25/save-the-world-turn-a-profit?utm_content=buffere622d&utm_medium=social&utm_source=twitter.com&utm_campaign=buffer

[At next week's General Assembly meetings, the United Nations will formally announce 17 ambitious new SDGs. ...] **“The first question the world will ask is: “How do you expect to pay for them?”** The U.N. has put a price tag of accomplishing these goals into the trillions. Meanwhile, donor governments and philanthropies only have in the billions to spend. There is no question, then, that we’ll need to tap into the estimated \$210 trillion now invested in global financial markets. ...”

Yunus & Rodin give some suggestions. Read about, for example, the ‘**social success note**’, a new tool (jointly developed by Yunus Social Business & the Rockefeller Foundation).

FT (Long read) – Value over volume

<http://www.ft.com/intl/cms/s/0/0a1fec32-629b-11e5-9846-de406ccb37f2.html#axzz3nJwkNzbO>

On one of last week’s big stories. *“Outcry over a 5,000 per cent rise on the price of a pill rattled pharma stocks and crystallised concerns about rising US drug costs. Even drugmakers acknowledge that their pricing models will have to evolve.”*

Lancet (World Report) – Rise in online pharmacies sees counterfeit drugs go global

[http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)00394-3/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)00394-3/fulltext)

Increasing public use of online pharmacies, along with a new mass producer of fake medicines, have widened the global market for falsified drugs. Fiona Clark reports from Moscow.

FT – report on rare diseases

<http://www.ft.com/intl/reports/combating-rare-diseases>

“For decades, rare diseases were all but ignored by the pharmaceuticals industry. That is now changing as the science and the economics have improved while patient groups are becoming more powerful.” Check out [Charities urge low-income countries to recognize need](#).

And this quote in particular: “Yann Le Cam, head of Eurordis, the European patients’ group for rare diseases, says: “It’s more and more difficult to speak about high- and low-income countries, but rather about **high- and low-income people**. There are plenty without access in the US and the EU.”

Foreign Policy – The age of infection

F Jabr; <http://foreignpolicy.com/2015/09/30/the-age-of-infection-antibiotics-microbes-germ-ichip/>

(One for Laurie Garret) : “Meet the iChip, a plastic block that helped scientists discover a new antibiotic that kills superbugs. Will it be enough to save humankind from the coming bacterial apocalypse?”

HS Global (blog) – Expert workshop on health systems in fragile and conflict affected states: lots of engagement, ideas & energy

E Sondorp; http://healthsystemsglobal.org/blog/66/Expert-workshop-on-health-systems-in-fragile-and-conflict-affected-states-Lots-of-engagement-ideas-and-energy-.html?utm_campaign=shareaholic&utm_medium=twitter&utm_source=socialnetwork

“On 2nd September 2015, the Thematic Working Group (TWG) on Health Systems in Fragile and Conflict Affected States organised an expert workshop in London at the Wellcome Trust building. The event was an opportunity for the TWG’s Steering Committee, its Advisory Group, and a number of invited experts to brainstorm around a number of issues related to the current and future scope of activities of the TWG.”

Emerging Voices

Great news about **Omesh Bharti** (EV 2010), from Shimla, India.

*“The innovation at the intra dermal anti-rabies clinic in Shimal’s Rippon hospital figures in the world’s fifty best **innovations** shortlisted by World Health Organisation (WHO)-Tropical Diseases Research (TDR)...The pooling strategy technique adopted to lower the cost burden on the poor patients bitten by dogs and monkeys in Shimla and around is the first of its kind across the globe---- This WHO-TDR [webpage](#) gives the details of the innovation by Dr Omesh Bharti along with the research paper (in the World Journal of Vaccines).”*

Research

IJHPM – Rights Language in the Sustainable Development Agenda: Has Right to Health Discourse and Norms Shaped Health Goals?

L Forman, G Ooms, C Brolan; http://www.ijhpm.com/article_3102_0.html

“While the right to health is increasingly referenced in Sustainable Development Goal (SDG) discussions, its contribution to global health and development remains subject to considerable debate. This hypothesis explores the potential influence of the right to health on the formulation of health goals in 4 major SDG reports. We analyse these reports through a social constructivist lens which views the use of rights rhetoric as an important indicator of the extent to which a norm is being adopted and/or internalized. Our analysis seeks to assess the influence of this language on goals chosen, and to consider accordingly the potential for rights discourse to promote more equitable global health policy in the future.”

HP&P –How to do (or not to do)... translation of national health accounts data to evidence for policy making in a low resourced setting

J Price et al ; <http://heapol.oxfordjournals.org/content/early/2015/09/28/heapol.czv089.short?rss=1>

The main aim of this article is to recommend strategies for bridging the divide between production and utilization of National Health Accounts data in low-resource settings.

TMIH – Who, What, Where: an analysis of private sector family planning provision in 57 low- and middle-income countries

O Campbell et al;

<http://onlinelibrary.wiley.com/doi/10.1111/tmi.12597/abstract;jsessionid=C9719295F469AC584E3D76C3671DB5A3.f03t03>

“Family planning service delivery has been neglected; rigorous analyses of the patterns of contraceptive provision are needed to inform strategies to address this neglect. ...” The authors used 57 nationally representative Demographic and Health Surveys in LMICs (2000–2013) in four geographic regions to estimate need for contraceptive services, and examined the sector of provision, by women's socio-economic position. They also assessed method mix and whether women were informed of side effects.

TMIH – Role of the private sector in childbirth care: cross-sectional survey evidence from 57 low- and middle-income countries using Demographic and Health Surveys

L Benova et al; <http://onlinelibrary.wiley.com/doi/10.1111/tmi.12598/abstract>

From the same series in TMIH. “Maternal mortality rates have decreased globally but remain off track for Millennium Development Goals. Good-quality delivery care is one recognised strategy to address this gap. This study examines the role of the private (non-public) sector in providing delivery care and compares the equity and quality of the sectors.”

HP&P – Agenda setting and framing of gender-based violence in Nepal: how it became a health issue

M Colombini et al;

<http://heapol.oxfordjournals.org/content/early/2015/09/25/heapol.czv091.short?rss=1>

« Gender-based violence (GBV) has been addressed as a policy issue in Nepal since the mid 1990s, yet it was only in 2010 that Nepal developed a legal and policy framework to combat GBV. This article draws on the concepts of agenda setting and framing to analyse the historical processes by which GBV became legitimized as a health policy issue in Nepal and explored factors that facilitated and constrained the opening and closing of windows of opportunity. «

Public Health –Beyond the Golden Era of public health: charting a path from sanitarianism to ecological public health

Tim Lang et al; [http://www.publichealthjrn.com/article/S0033-3506\(15\)00302-9/abstract?rss=yes](http://www.publichealthjrn.com/article/S0033-3506(15)00302-9/abstract?rss=yes)

“The paper considers the long-term trajectory of public health and whether a ‘Golden Era’ in Public Health might be coming to an end. While successful elements of the 20th century policy approach need still to be applied in the developing world, two significant flaws are now apparent within its core thinking. It assumes that continuing economic growth will generate sufficient wealth to pay for the public health infrastructure and improvement needed in the 21st century when, in reality, externalised costs are spiralling. Secondly, there is evidence of growing mismatch between ecosystems and human progress. While 20th century development has undeniably improved public health, it has also undermined the capacity to maintain life on a sustainable basis and has generated other more negative health consequences. For these and other reasons a rethink about the role, purpose and direction of public health is needed. While health has to be at the heart of any viable notion of progress the dominant policy path offers new versions of the ‘health follows wealth’ position. The paper posits ecological public health as a radical project to reshape the conditions of existence. Both of these broad paths require different functions and purposes from their institutions, professions and politicians. The paper suggests that eco-systems pressures, including climate change, are already adding to pressure for a change of course.”

South Centre (research paper) - Intellectual Property in the Trans-Pacific Partnership: Increasing the Barriers for the Access to Affordable Medicines

Carlos M Correa; <http://www.southcentre.int/research-paper-62-september-2015/>

“Most free trade agreements signed by the United States, the European Union and the members of the European Free Trade Association (EFTA) in the last 15 years contain chapters on intellectual property rights with provisions applicable to pharmaceuticals. Such provisions considerably expand the rights recognized to pharmaceutical companies under the Agreement on Trade Related Aspects of Intellectual Property Rights (TRIPS) established in the context of the World Trade Organization. The leaked text on intellectual property of the Trans-Pacific Partnership (TPP) currently under negotiation goes further than those FTAs. It reflects the ambition of such companies to obtain even higher levels of protection. This paper discusses some characteristics of the TTP negotiations and the main possible outcomes that may negatively affect access to medicines, notably in developing countries.”

Miscellaneous

CSN BRICSAM (Report) - For Richer... or Poorer? The Capture of Growth and Politics in Emerging Economies

<http://csnbricsam.org/for-richer-or-poorer-the-capture-of-growth-and-politics-in-emerging-economies/>

“The emerging economies Brazil, China, India, Indonesia, Mexico, Russia, South Africa and Turkey – in short, the BRICSAMIT – have come to be considered the economic powerhouses of recent decades, fostering a narrative of the growth of the South. Not only have these countries managed to reduce poverty; most have embarked on a steep economic growth path and play an increasingly influential role on the global scene. But an emphasis on growth masks another, worrying trend. Today, all eight BRICSAMIT countries occupy the top ranks as some of the most unequal countries in the world.” (for the full paper, see [here](#)).

Times of India – Zuckerberg, Gates make bid for universal internet access

<http://timesofindia.indiatimes.com/tech/tech-news/Zuckerberg-Gates-make-bid-for-universal-internet-access/articleshow/49119034.cms>

Mark Zuckerberg and Bill Gates on Saturday threw their weight and resources behind the goal of bringing internet access to everyone in the world by 2020.

Humanosphere - Obama underscores how inequality undermines development

Tom Murphy; <http://www.humanosphere.org/world-politics/2015/09/obama-underscores-how-inequality-undermines-development/>

“President Obama addressed the United Nations on Sunday at the conclusion of the summit for the Sustainable Development Goals. It was one of the few occasions that Obama spoke at length about the issue of global development and poverty eradication.” Tom Murphy wasn’t all that enthusiastic, though. One reason: “... Worryingly, the president concludes his section on inequality with better interventions as the answer. He does not go as far as saying that the balances in power that contribute to the dichotomies in outcomes he illustrates must be addressed.”

Global Policy Journal – The UN at 70: Confronting the Crisis of Global Governance

Madeleine K. Albright and Ibrahim A. Gambari;

<http://www.globalpolicyjournal.com/blog/28/09/2015/un-70-confronting-crisis-global-governance#.Vgj7KxQFXcs.twitter>

Madeleine K. Albright and Ibrahim A. Gambari, Co-Chairs, Commission on Global Security, Justice & Governance, introduce the idea of '**just security**' to forge a mutually supportive global system of accountable, fair, and effective governance and sustainable peace. (another nice idea: "...Generating smart coalitions working on parallel tracks, including toward a **World Conference on Global Institutions in 2020** to promote these and related ideas needed to meet 21st century challenges and to adapt critical UN and other global institutions—especially those tasked with conflict prevention, human rights promotion, climate governance, stable and broad-based economic growth, and peacebuilding.")

Guardian – The obscure global organisation that's unwittingly undermining civil society

<http://www.theguardian.com/global-development-professionals-network/2015/sep/30/the-obscure-global-organisation-thats-unwittingly-undermining-civil-society>

From India to Spain, civil society is becoming increasingly constrained, with the **FATF** – set up by the G7 to combat financial crime – “unwittingly” restricting NGOs.