# IHP news 521 : UHC & GHS in a planetary emergency era

*( **10 May 2019**)*

The weekly International Health Policies (IHP) newsletter is an initiative of the Health Policy unit at the Institute of Tropical Medicine in Antwerp, Belgium.

Dear Colleagues,

A tweet from **Johan Rockström** (Stockholm Resilience centre) set the tone for this week, and ideally, the better part of this century, "*Place the IPBES report next to the IPCC 1.5 C report and you have a full picture of a **Planetary Emergency**. Science cannot be more clear. The World needs to Transform. Now*." We hope with him that IPBES (the Intergovernmental Science-Policy Platform on Biodiversity and Ecosystem Services ) soon becomes a household name like IPCC. By the way, it was no less than heart-warming to see how the people behind the report almost desperately wanted to convey a message of hope, in spite of the dire tone of the report. "**Transformative change**" will be needed, however: "*…Through 'transformative change', nature can still be conserved, restored and used sustainably – this is also key to meeting most other global goals. "By transformative change, we mean a fundamental, system-wide reorganization across technological, economic and social factors, including paradigms, goals and values*."

We humans are famous for getting our priorities right (*ahum*). I understand there's a division of labour in the UN system, but against this backdrop of a new **planetary emergency era**, I wonder whether UHC & GHS, as they are currently conceived and operationalized (i.e. more or less within the constraints of the current global economic system), will remain dominant mantras for global health in the years to come, even if both are no doubt hugely important (*PS: and let's just forget about the term 'planetary health', increasingly a 'contradictio in terminis'*). After all, the IPBES assessment estimates that "*…current negative trends in biodiversity and ecosystems will **undermine progress towards 80 % of the assessed targets** of [*a number of SDGs, including SDG 3 on health*]."* Guess we'll already find out at the 72nd WHA in Geneva. And, yes, in a way, the **Global Action Plan for healthy lives and wellbeing for all** tries to adopt more syndemic/systemic thinking, starting from a similar assessment that many SDG (health) related goals and targets are off track, but it's not nearly going far enough. I just noticed Richard Horton is already fully on board, however, unlike most, see Offline: Time to radically rethink non-communicable diseases.

Earlier this week, when the IPBES report came out, George Monbiot lashed out at **the media**, frustrated about the laser-like focus in many British newspapers on the brand new (and arguably, cute) royal baby, "*I'm often told "newspapers give us the stories we want to read". It would be more accurate to say "the billionaires who own newspapers give us the stories they want us to read. They constantly influence our perceptions of what is relevant*"." Greta Thunberg and many others share(d) his frustration. Unfortunately, it's a bit easy to blame the media. The truth lies, like in many cases, somewhere in between. And even if newspapers put the IPBES report on the front page, as they should have done (and did in a few cases), a few days later most people will already have 'moved on', with other concerns or news that gets their attention, especially now that the internet is further destroying our (already fairly weak) collective attention span. Trending topics are rising and disappearing faster than ever before. I only see one consolation for us human beings: at least the

dinosaurs didn't get to watch a heart-warming dino version of Liverpool-Barcelona when they were about to get extinguished. Neither did they have the chance to get wasted when cheering for their own 'Van Dijk', or shed big dino tears for a horrible last-minute defeat 😊.

This issue will also zoom in on the **Ebola DRC outbreak**, which is "on a knife edge" ( *the dire outlook prompted WHO to* *overhaul its vaccination strategy* *on Tuesday, and UN SG Guterres to* *commit the entire UN system to help end the outbreak* *)*; the **5ᵗʰ UN Global Road Safety week**; the **International Day of the Midwife; the** launch of the **US Global Health Security strategy;** dr. Tedros showing off some of his best German at a meeting in Berlin ("*Gesundheit ist ein Menschenrecht!" & "Gesundheit für Alle!" - a suggestion from his John F Kennedy loving speechwriter*?)**,** where **Angela Merkel & other German politicians showed continued German support for global health,** and an important study in the Lancet on (worrying) **alcohol abuse trends.** Not just in Liverpool on memorable Tuesday football nights 😊.

Enjoy your reading.

Kristof Decoster

# Featured Article

## #NotATarget: Protecting peace-building health workers in the line of duty

**Clara Affun-Adegbulu** (ITM)

Last year, members of the health community came together to commemorate Alma Ata. While there was cause for celebration in Astana, it was nonetheless clear that progress had been uneven and people in some parts of the world were in danger of being left behind. There are of course many reasons why 40 years after the initial declaration, the world had failed to realise the promise of Alma Ata. One of the most important however, is the lack of peace in many countries.

Conflict, instability or unrest all affect health outcomes, either through their direct impact on physical, mental and psychosocial state, or indirectly through their impact on the health system and other determinants of health. Yet the world is becoming less peaceful according to the Global Peace Index; in 2018, the average level of global peacefulness declined for the fourth consecutive year. While some dispute the veracity of these claims, almost everyone agrees that the nature of conflicts is changing - they are becoming increasingly complex and lasting longer than they did in the past. The situation is further exacerbated by the fact that countries which emerge from conflict remain at high risk of relapse.

Evidently, against this global backdrop of more and more protracted conflicts, efforts to improve global health must necessarily include conflict prevention and resolution measures. Recently there have been growing calls for health to be seen as a tool for peacebuilding.

The idea of "health as a bridge for peace" defined as "the integration of peace-building concerns, concepts, principles, strategies and practices into health relief and health sector development" is not new. In fact, as early as 1981 the World Health Assembly, recognising the importance of peace as a

determinant of health, adopted resolution 34.38 which acknowledged that *"the role of physicians and other health workers in the preservation and promotion of peace is the most significant factor for the attainment of health for all."* However, in a world where attacks against health workers are increasingly [common](#), implementing this is a serious challenge. Just last month Dr Kiboung, an epidemiologist deployed as part of the Ebola response team in the Democratic Republic of the Congo (DRC) was [killed](#), and as most of you know, there have been multiple reports of attacks against health workers in [Nigeria](#), [Palestine](#), [Libya](#) and [Syria](#) amongst others, in recent years. This is in spite of the adoption, three years ago, of UN Security Council [Resolution 2286](#) which urged states to *"ensure that violations of international humanitarian law related to the protection of the wounded and sick, medical personnel and humanitarian personnel exclusively engaged in medical duties, their means of transport and equipment, as well as hospitals and other medical facilities in armed conflicts do not remain unpunished"* and affirmed *"the need for States to ensure that those responsible do not operate with impunity, and that they are brought to justice, as provided for by national laws and obligations under international law."* As is the case with many other obligations under international humanitarian law, the enforcement of this resolution which is not legally binding, is poor. It is often violated with impunity; in some cases, even by the states themselves.

It is clear that while health workers in conflict and fragile affected settings are an important resource that can be harnessed for conflict prevention and peace-building, they are also highly vulnerable, and the overriding goal should thus be to protect them. Health workers should not be involved in any extraneous initiatives, unless and until mechanisms which mitigate their risk of becoming targets as a result of such initiatives, have been devised and put in place. Health workers are first of all human and should not be asked to sacrifice themselves on the altar of peace- or nation-building.

# Highlights of the week

## Ebola DRC – Tipping point ?

For the latest WHO outbreak news (9 May), see [WHO](#).

### Stat News - 'On a knife edge': Ebola outbreak threatens to escalate as violence rises

**Helen Branswell**; [Stat;](#)

Must-read. Ominous one.

"***The Ebola outbreak in the Democratic Republic of the Congo is threatening to spiral out of control,*** *with ongoing violence aimed at the Ebola response workers undermining efforts to stop spread of the deadly virus.* ***STAT spoke to a number of experts*** *involved with or closely monitoring the situation to try to get a sense of where the outbreak in northeastern DCR is heading. Each one agreed: A disaster is unfolding….*" Includes the views of **Jeremy Farrar, Mike Ryan, Michael Osterholm, Bob Kitchen, …**

**Stat - WHO broadens the pool of people who can get the Ebola vaccine**

https://www.statnews.com/2019/05/07/who-broadens-eligibility-ebola-vaccine/

"*The World Health Organization announced Tuesday it is going to substantially ramp up the number of people eligible to be vaccinated against Ebola in a bid to try contain a dangerous outbreak in the Democratic Republic of the Congo that seems on the cusp of spinning out of control. Now, people even further removed from individuals who have contracted the virus — an additional ring of contacts — will be offered Merck's experimental Ebola vaccine. And others in the region who are deemed to be at some but not immediate risk of being exposed to Ebola will be eligible for another experimental vaccine, made by Janssen, the vaccine division of Johnson & Johnson. Responders, including the WHO and other organizations, will also set up more pop-up vaccination clinics to allow people who want to be vaccinated to go outside their neighborhoods to get the shots….*"

See also **WHO** - WHO Adapts Ebola Vaccination Strategy in the Democratic Republic of the Congo to Account for Insecurity and Community Feedback

**DR Congo: Ebola claims over 1,000 lives, Guterres commits 'whole' UN system, to help 'end the outbreak'**

https://news.un.org/en/story/2019/05/1038161

"*Now in its tenth month, the **Ebola epidemic in the Democratic Republic of the Congo (DRC) has claimed more than a thousand lives**, prompting Secretary-General **António Guterres to throw the support of "the whole United Nations system" into stemming the spread of the deadly virus**.*"

"*…"With important shifts in the response now being implemented, **the Secretary-General has emphasized his commitment to a collective UN-wide approach, both in Kinshasa**, where the UN is led by his special representative, **and in the areas affected by the virus**, where the response is led by WHO [World Health Organization], all in close liaison with Congolese leaders both in Kinshasa and eastern DRC", said his Deputy Spokesperson, Farhan Haq, in a statement on behalf of the UN chief.*"

See also **CIDRAP News** - Ebola outbreak hits 1,600 cases amid armed clashes

**Reuters Exclusive: Mineral traders in Rwanda helping fund Congo rebels - U.N. panel**

https://mobile.reuters.com/article/amp/idUSBRE89F1M320121016?__twitter_impression=true

"*Traders in Rwanda profiting from tin, tungsten and tantalum smuggled across the border from mines in eastern Democratic Republic of Congo are helping fund a rebellion in their resource-rich neighbor, according to a U.N. expert panel report. The confidential report, seen by Reuters on Tuesday, said while Congolese government requirements that exporters ensure minerals are conflict-free had halted nearly all trade from the country's east, smuggling into Rwanda and Burundi had increased. … … … M23 rebels commanded by warlord Bosco Ntaganda, who is wanted by the International Criminal Court for war crimes, have been fighting government soldiers in eastern*

*Congo's North Kivu province since April. **The U.N. report said Rwanda and Uganda were providing arms, troops and advice to M23…."***

Related **tweet from Anthony Costello**: "**The real cause of the Ebola epidemic in the Congo: violence around mineral smuggling through Rwand**a."

- You might also want to read a **Stat op-ed by Tom Inglesby** et al - [Urgent steps are needed to prevent Ebola from spinning out of control in the DRC](#)

Inglesby (**director of JH's Center of Health Security**) et al list **three steps**, related to the financing gap, new security steps & vaccination.

- **Devex** - [Exclusive: 'Haphazard' White House crackdown on human trafficking disrupts aid](#)

"**The Trump administration's desire to crack down on global human trafficking may restrict U.S. efforts to fight Ebola in the Democratic Republic of the Congo**. *The White House's decision to enforce tighter aid restrictions on countries that do not meet anti-trafficking criteria — and a lack of transparency from the administration about how those decisions are being made — has led to confusion and uncertainty about which programs will be allowed to continue, and which will be suspended, Devex has learned. At a Senate hearing on Wednesday, that concern spilled over into a discussion about the **U.S. Agency for International Development's evolving strategy to combat the escalating Ebola outbreak in eastern DRC**. Senator Robert Menendez questioned USAID Administrator Mark Green about the agency's plan to broaden its activities in Ebola-affected communities, and **whether that plan would be permitted under the Trump administration's unusually strict interpretation of a law designed to fight human trafficking**….*"  The picture is rather blurred.

The positive side: like WHO and other donors, USAID is [adapting its strategy](#), to try to avoid this outbreak from spiraling out of control.


## Twitter discussion continues on (need for) PHEIC


Some tweets from this week:

 **Laurie Garrett**

*"Those who've said "**community engagement** " can stop the violence, allowing #Ebola fighters to defeat the virus must now **see the limits of "talk" in a war zone**. Every HCWer fighting the epidemic is risking bombs, bullets, arson & physical assaults. We have never been here before."*

**I Kickbusch**

*"Agree-When #PHEIC was constructed this kind of scenario was not imagined. Countries who once told @WHO it should not be operational now leave it to cope in a war zone and beg for money as long as #Ebola stays in Africa. #DRC government prefers to pay $$$ to Washington lobbyists."*

*"The world needs a reliable financing system for #healthsecurity as a global public good - the #G20 must address this - present donor based approaches do not work - ALL countries must step up as must business"*

**L Gostin**

*"Key #Ebola facts pointing to an emergency in #DRC: > 1K cases; $54 mil funding gap; distrust-1/4 think Ebola untrue; 1st outbreak in virtual warzone; community deaths not on contact lists... Explain how this isn't a PHEIC? OK maybe PHEIC won't help, but status quo unacceptable"*

# 5th UN Global Road Safety Week highlights need for strong leadership  (6-12 May)

WHO - [5th UN Global Road Safety Week highlights need for strong leadership](#)

*"The **Fifth UN Global Road Safety Week** acknowledges that **strong leadership is needed** to advance road safety in countries and communities and achieve related Sustainable Development Goal and other global targets.  … …"*

We recommend your read:

### Lancet Global Health (Editorial) - Speaking up for global road safety

[https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(19)30192-5/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(19)30192-5/fulltext)

*"**This week marks the fifth UN Global Road Safety** Week. This year's biennial events and activities **aim to galvanise public demand for stronger leadership for road safety worldwide**. Every day some 3700 people die on the world's roads, equating to 1·35 million lives lost every year, according to WHO. Furthermore, up to 50 million people are left injured or disabled after a crash. Poorer countries bear the brunt of the burden, with 93% of deaths taking place in low-income or middle-income countries. Regionally, Africa and southeast Asia experience the highest number of fatalities. What is most shocking, however, is the fact that road traffic crashes are the number one cause of death for children and young people between the ages of 5 and 29 years globally. **Despite the size of the problem and the continuing increase in traffic density around the world, high-level actors have been slow to convene on this issue….**"*

*"**As the decade of road safety ends, many countries are unlikely to meet the ambitious SDG target of halving all deaths due to road traffic crashes by 2020**. Significantly reducing the number of injuries and fatalities on the world's roads **will require concerted multisectoral action** from government agencies, politicians, the police, the automotive industry, schools, health services, non-governmental organisations, civil society, and road users in all countries. Having responsible and accountable leadership in place is crucial to mobilise action…."*

You might also want to read **Michael Bloomberg**, on the current state of affairs for (and work/progress so far of) the  ["Bloomberg Philanthropies Initiative for Global Road Safety"](#)

# Big Alcohol & trends alcohol (ab)use

**Lancet - Global alcohol exposure between 1990 and 2017 and forecasts until 2030: a modelling study**

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)32744-2/fulltext

Cfr the **press release**:

*"The Lancet*: **Targets to reduce harmful alcohol use are likely to be missed as global alcohol intake increases**

**Globally, alcohol intake increased from 5.9 litres pure alcohol a year per adult in 1990, to 6.5 litres in 2017, and is predicted to increase further to 7.6 litres by 2030. This is likely to be caused by increased alcohol use in low- and middle-income countries as they become wealthier. Between 2010-2017, the most notable increases in alcohol drinking occurred in India and Vietnam, compared with significant decreases in Azerbaijan, Russia, the UK, and Peru. The world is not on track to achieve global targets to reduce harmful alcohol use, and the authors call for effective policy measures, such as the WHO best-buys including increasing taxation, restricting availability, and banning alcohol marketing and advertising, to be introduced globally.**

*Increasing rates of alcohol use suggest that the world is not on track to achieve targets against harmful alcohol use, according to a* **study of 189 countries' alcohol intake between 1990-2017 and estimated intake up to 2030**, *published in* **The Lancet**...."

Check out also the related **Lancet Comment** - [**Increases in alcohol consumption in middle-income countries** will lead to increased harms](#)

**"The WHO Global Monitoring Framework for Non-Communicable Diseases includes an ambitious global target of a 10% reduction in the harmful use of alcohol by 2025.** *A modelling study by Jakob Manthey and colleagues in The Lancet indicates that* **this goal will not be met, with a plateau in consumption in high-income countries offset by marked projected increases in middle-income countries...**"

And some great **coverage in the Guardian** - [World alcohol consumption on the rise as China's thirst grows.](#)


# Planetary Health: IPBES report, 2 new IMF papers, ...

**IPBES (press release) - Nature's Dangerous Decline 'Unprecedented'; Species Extinction Rates 'Accelerating'**

https://www.ipbes.net/news/Media-Release-Global-Assessment

We trust you heard about this landmark report via the media earlier this week. *"Nature is declining globally at rates unprecedented in human history — and the rate of species extinctions is accelerating, with grave impacts on people around the world now likely, warns a **landmark new report from the Intergovernmental Science-Policy Platform on Biodiversity and Ecosystem Services (IPBE**S), the summary of which was approved at the **7th session of the IPBES Plenary, meeting last week (29 April – 4 May) in Paris.** "The overwhelming evidence of the IPBES Global Assessment, from a wide range of different fields of knowledge, presents an ominous picture," said IPBES Chair, Sir Robert Watson. "**The health of ecosystems on which we and all other species depend is deteriorating more rapidly than ever**. We are eroding the very foundations of our economies, livelihoods, food security, health and quality of life worldwide." **"The Report also tells us that it is not too late to make a difference, but only if we start now at every level from local to global,"** he said. **"Through 'transformative change',** nature can still be conserved, restored and used sustainably – this is also key to meeting most other global goals. By transformative change, we mean a fundamental, system-wide reorganization across technological, economic and social factors, including paradigms, goals and values."…"*

For the **key messages of the report**, see this **press release**.

The report goes a step further than previous studies **by linking the loss of species to humans and analyzing its effect on food and water security, farming, and economies.**

Alternatively, you might also want to read coverage in:

- **Nature** - [Humans are driving one million species to extinction](#)

"Landmark UN-backed report finds that **agriculture** is one of the biggest threats to Earth's ecosystems."

- Guardian - [Human society under urgent threat from loss of Earth's natural life](#)

*"…The **next 18 months will be crucial**. **For the first time, the issue of biodiversity loss is on the G8 agenda**. The UK has commissioned Partha Dasgupta, a professor at Cambridge University, to write a study on the economic case for nature, which is expected to serve a similar function as the Stern review on the economics of climate change. **Next year, China will host a landmark UN conference to draw up new global goals for biodiversity…."***

*"…**The next year and a half is likely to be crucial because world leaders will agree rescue plans for nature and the climate at two big conferences at the end of 2020**. That is when **China will host the UN framework convention on biodiversity gathering in Kunming,** which will establish new 20-year targets to replace those agreed in Aichi, Japan, in 2010. Soon after, **the UN framework convention on climate change will revise Paris agreement commitments at a meeting in either the UK, Italy, Belgium or Turkey.**""*

- Or the **Guardian op-ed by Robert Watson, chair of IPBES**: **[Loss of biodiversity](#)** is just as catastrophic as climate change

"…*The **IPBES assessment has shown the strong interrelationship between climate change, the loss of biodiversity and human wellbeing**. Climate change has been identified as a primary driver of biodiversity loss, already altering every part of nature. Likewise, the loss of biodiversity contributes to climate change, for example when we destroy forests we emit carbon dioxide, the major "human-produced" greenhouse gas. **We cannot solve the threats of human-induced climate change and loss of biodiversity in isolation. We either solve both or we solve neither**. The IPBES report shows that governments and businesses are nowhere close to doing enough. **The world is on track to miss the targets of the Paris agreement, the Aichi biodiversity targets and 80% of the UN sustainable development goals** (food, water and energy security), because of our poor stewardship of the natural world….*" (including SDG 3).

## Some tweets to frame the issues properly:

**Tweet Greta Thunberg** on the term 'climate change':

"*It's 2019. Can we all now please stop saying **"climate change"** and instead call it what it is: **climate breakdown, climate crisis, climate emergency, ecological breakdown, ecological crisis and ecological emergency?** #ClimateBreakdown #EcologicalBreakdown*"

**Tweet Laurie Garrett** on the term 'planetary health':

"*If we were candid we would replace the term **#PlanetaryHealth** with **Collective Suicide or Environmental Self-Destruction.** The PH term holds no clarity outside of a small medical/publ hlth coterie*."

## Global Policy (blog) - Global Inequality is 25% Higher than it would have been in a Climate-Stable World

N Beuret; https://www.globalpolicyjournal.com/blog/07/05/2019/global-inequality-25-higher-it-would-have-been-climate-stable-world

"*Nicholas Beuret on how global warming has radically changed the economies and fortunes of the world's nations.*"

Based on a **new paper** in the **Proceedings of the National Academy of Sciences** - Global warming has increased global economic inequality

"*… **the economic injustice of climate change has already been operating for 60 years**. The study, published in the Proceedings of the National Academy of Sciences, compared different countries' GDP per capita – a measure of the average person's economic standard of living – between 1961 and 2010. It then **used climate models to estimate what each country's GDP would have been without the effects of climate change**. The findings are stark.  Many poorer countries' economies have rapidly grown in the last 50 years, albeit often at great social and environmental cost and to the benefit of the globalised economy. But even that **growth has been held back substantially by*

*climate change – the gap in GDP per capita between richer and poorer countries is 25% higher than it would have been in a climate-stable world…*."

**IMF (blog) - Getting Real on Meeting Paris Climate Change Commitments**

**C Lagarde & V Gaspar**; https://blogs.imf.org/2019/05/03/getting-real-on-meeting-paris-climate-change-commitments/

Includes links to 2 **new IMF papers** –
Fiscal Policies for Paris Climate Strategies—from Principle to Practice

Global Fossil Fuel Subsidies Remain Large: An Update Based on Country-Level Estimates

Cfr a tweet: "*The IMF estimates that fossil fuels were artificially propped up **by more than $5.2 trillion in subsidies in 2017** — or 6.5% of total global GDP….*"

**Guardian - Aid funding must recognise climate change emergency, say MPs**

https://www.theguardian.com/global-development/2019/may/08/aid-funding-must-recognise-climate-change-emergency-say-mps?CMP=twt_a-global-development_b-gdndevelopment

"*The British government's aid spending is failing to recognise the "scale and urgency" of the climate change challenge facing the world, MPs warn. **Climate change must be placed at the centre of aid strategy and funding, if it is to address the seriousness of threats facing developing countries, the committee said**. It urged a minimum spend of £1.76bn annually and a halt to funding fossil fuel projects in developing countries, unless they can demonstrate they support transition to zero emissions by 2050….*"

**UN News – Climate change: 'A moral, ethical and economic imperative' to slow global warming say UN leaders, calling for more action**

https://news.un.org/en/story/2019/05/1038231

"*It is nothing less than a "**moral, ethical and economic imperative**" to take more action to mitigate the existential threat posed by climate change, said top executives from across the United Nations system on Thursday." "Calling on Member States to take "urgent action to limit global temperature rise to 1.5°C above pre-industrial levels", **the leaders of more than 30 UN agencies and entities, issued a formal, joint appeal for governments everywhere to "step up ambition and take concrete action" ahead of the landmark Climate Action Summit**, which has been convened by UN chief António Guterres this September….*"

# Global Health Security

**NEJM Perspective – Stopping the Gaps in Epidemic Preparedness**

**J Farrar**; https://www.nejm.org/doi/full/10.1056/NEJMp1902683?query=featured_home

One of the reads of the week, given the Ebola threat risking to spiral out of control. Once more.

"*New patterns of viral emergence and spread are being driven by ecologic and sociologic changes, such as climate change, migration of vector species to new areas, changing interactions between people and animals, increasing connectivity between communities, more and faster travel, urbanization, and political instability and conflict. **Our preparations for epidemics must keep pace with such changes. … … The WHO remains the global resource for preparing for and responding to epidemics, and its Health Emergencies Program has made much progress since its launch in 2016. In addition, the Centers for Disease Control and Prevention, nongovernmental organizations such as Doctors Without Borders, and many other groups have long played invaluable global roles. What is lacking are clear definitions of the relationships among countries, the WHO, and organizations engaged in epidemic preparedness and respon**se….*"

"*… The German government prioritized international epidemic preparedness throughout its presidencies of the Group of 7 (G7) and Group of 20 (G20) industrialized countries. **As the host of the annual Munich Security Conference and a member of the United Nations Security Council, Germany is in a strong position to lead efforts to secure global health in insecure situations…**"

Farrar also suggests to deploy **peace negotiators with experience in conflict resolution** for public health. Among others.

### White House – US Government Global Health Security strategy

https://www.whitehouse.gov/wp-content/uploads/2019/05/GHSS.pdf

Was released this week.  More info in this White House on aims & priorities Briefing

See also this media statement by **CDC**: "*The Global Health Security Strategy (GHSS), released [today], reaffirms a continued and coordinated U.S. Government (USG) approach to strengthening the world's capacity to prevent, detect, and respond to infectious disease threats, whether natural, accidental, or deliberate….*"  and announcement by **USAID's Mark Green** USAID: " *The strategy will pursue **three interrelated goals**: 1) strengthened capacity in developing nations to implement obligations under the International Health Regulations (2005); 2) increased international support for The Global Health Security Agenda (GHSA); and 3) a Homeland prepared and resilient against global health threats.*"

On Twitter,  **Jeremy Youde** already gave some of his preliminary thoughts on the strategy.

# AMR

### The Economist Intelligence Unit (report) - The Cost of Complacency: Report Underscores Major Gaps in World's Response to Drug-Resistant Tuberculosis

https://www.jnj.com/the-cost-of-complacency-economist-intelligence-unit-report-underscores-major-gaps-in-worlds-response-to-drug-resistant-tuberculosis

"A *new report published today by The Economist Intelligence Unit (EIU), and made possible with support from Johnson & Johnson, emphasizes* **the urgent need for focused global action to address the growing threat of drug-resistant tuberculosis (DR-TB)**. *DR-TB is the leading contributor to deaths from antimicrobial resistance (AMR).*"

"**Report estimates DR-TB deaths in a single year cost the global economy at least US$17.8 billion** *and calls for commitment and action to end the epidemic. Urgent action needed for hundreds of thousands who go undiagnosed and untreated for DR-TB – the leading contributor to deaths from antimicrobial resistance*"

In other AMR (governance) news, a **tweet from Kelley Lee**:

"*Grappling with complex* **challenge of potential treaty for antimicrobial resistance** *@UniofOxford this week with impressive multidisciplinary group including @shoffmania, @GorikOoms, @clarewenham, Thomas Hale, Anthony So, John-Arne Rottingen and Gian Luca Burci. #amrtreaty*"


# Global Action Plan (GAP)

**Global Action Plan (GAP) For Healthy Lives and Well-Being for All - Consultation with Non-State Actors on GAP and its 'Accelerators' on Community & Civil Society Engagement, Determinants of Health and Primary Health Care**

https://www.who.int/docs/default-source/global-action-plan/draft-meeting-report-for-comment-gap-consultation-8-may-2019.pdf?sfvrsn=9ac1c869_2

Discussion paper & draft report of the meeting of 30 April in New York.

"*The attached draft report from the non-state actor consultation held in New York on 30 April 2019 is open for feedback until 16 May 2019. We invite participants at the meeting, and those unable to attend, to read the report and send any responses in writing. We would appreciate if feedback is limited to 300 words or less and sent to SPD@UNAIDS.org.* **The draft report presents proposals for the consideration of the 12 Global Action Plan agencies on how they might strengthen their work to accelerate progress on health, particularly in the areas of community and civil society engagement, determinants of health and primary health care**. *We would particularly encourage feedback on the actions and draft standards/principles proposed to enhance community and civil society engagement.*"


**Blog by Mareike Haase: Global Action or Dissatisfaction?**

http://g2h2.org/posts/global-action-or-dissatisfaction/

With some **civil society concerns on the GAP process** so far.

Such as: a fairly intransparent process; the lack of human resources for health doesn't get enough attention, and so NGOs suggest to add HRH as an 'accelerator'. They also think it would also be wise to integrate non-profit civil society organisations into the development of the GAP from an early stage on. And see a conflict of interest for WHO.

During the upcoming World Health Assembly, the GAP and its process will be at the core of debate.

# UN HLM on UHC preparations, panel discussions & meetings

**HPW - Universal Health Coverage Requires Finance For Healthcare Systems & Prevention**

https://www.healthpolicy-watch.org/universal-health-coverage-requires-finance-for-healthcare-systems-prevention/

You can **re-watch** this event from early this week on **Key Asks from the UHC movement for the UN HLM on UHC**, in Geneva, here.

Great coverage in this article of a **panel discussion** from earlier this week **in Geneva, 'Moving Forward together, Key Asks from the UHC Movement for the UN HLM'**. "*Stimulating national government investments in health systems and reducing the large global burden of environmental and work-related health risks are two complementary approaches to universal health coverage (UHC) that are key to its success, said WHO's lead on the issue. WHO Assistant Director-General Ranieri Guerra was speaking today* at a **Geneva panel discussion on "Key Asks from the UHC Movement" that should be considered at the United Nations High Level Meeting on Universal Health Coverage,** *planned for 23 September in New York.* **The panel debate was sponsored by the Geneva-based Graduate Institute's Global Health Centre.**"

Excerpt:

"…**At last week's UN multi-stakeholder meeting, it was suggested that a 7th Ask on gender equality and women's rights be considered, including a reference to the right to sexual and reproductive health.** *This* **seventh Ask may prove to be a politically contentious** *one, noted Kickbusch, in the wake of a political dispute over a reference to health services for victims of sexual violence, which was removed from a UN Security Council Resolution on Ending Sexual Violence in Conflict, approved on 23 April….*"

**MMI input in the panel discussion (Thomas Schwarz)**

http://www.medicusmundi.org/contributions/news/2019/un-high-level-meeting-on-uhc-initial-mmi-input-to-the-preparatory-process/6-may-2019-input-thomas-schwarz.pdf

Recommended. Thomas spoke about: **UHC as an umbrella? UHC 2030 as a movement? Multi-stakeholderism; and health as a social contract.**

**Quote (on UHC 2030 as a movement):** *"A social movement for health must be a people's health movement. A movement for health cannot be organized top-down, with a secretariat hosted by WHO and the World Bank, and with interactive multi-stakeholder consultations and a civil society engagement mechanism. So call UHC2030 as you like, but not a movement. …"*

**Recordings multi-stakeholder hearing NY (29 April)**

http://webtv.un.org/search/part-1-interactive-multi-stakeholder-hearing-to-prepare-for-the-high-level-meeting-on-universal-health-coverage/6031167498001/

http://webtv.un.org/search/part-2-interactive-multi-stakeholder-hearing-to-prepare-for-the-high-level-meeting-on-universal-health-coverage/6031259745001/

if you want to re-watch some of the sessions.

# Access to Medicines

**HPW - Group Of Developed Countries Seek To Delay Italian Proposal On Drug Price Transparency**

https://www.healthpolicy-watch.org/group-of-developed-countries-seek-to-delay-italian-proposal-on-drug-price-transparency/

"*A number of developed countries are working to delay a landmark proposal at the World Health Organization by Italy to increase transparency of drug prices and R&D costs in an effort to make medicines more affordable, according to sources. The Italian proposal has garnered a number of supporters, including within Europe; but at an informal WHO consultation today and last week at the European Union, countries such as Germany, France, and the United Kingdom have begun pushing for postponement of discussions, sources said….*"

See also **HPW** - New Text Of Italian Transparency Proposal Shows North-South Divide Emerging

"*A new draft text from an informal consultation at the World Health Organization yesterday shows a North-South divide emerging as member states made changes to the proposed resolution on the transparency of drug prices and the costs of research and development (R&D), brought forward by Italy earlier this year, that is slated for discussion at the World Health Assembly later this month.*

*The changes, led by high-income European states, with support from the United States and Australia, were described by civil society advocates for transparency of drug prices and R&D costs as an attempt to strip the resolution of any meaning and purpose, by deleting key provisions that make it useful in promoting transparency….*"

In related news*, "…m*ore than 100 civil society organizations and health experts sent an **open letter to World Health Organization (WHO) Member State delegate**s urging them to oppose harmful proposed changes to the draft World Health Assembly (WHA) resolution on transparency to be discussed at the 72nd WHA on May 20-28, 2019 in Geneva, Switzerland. *…*"

### GAVI (press release) - Inactivated polio vaccine now introduced worldwide

https://www.gavi.org/library/news/press-releases/2019/inactivated-polio-vaccine-now-introduced-worldwide/?platform=hootsuite

*"After the introduction of inactivated polio vaccine (IPV) into Zimbabwe and Mongolia's routine immunisation programmes with Gavi's support, **every country worldwide, including all 73 Gavi-supported countries, have now introduced the vaccine which protects children against the disease…"***

### The Telegraph - How a Wikipedia for drug discovery is disrupting big pharma

https://www.telegraph.co.uk/news/0/wikipedia-drug-discovery-disrupting-big-pharma/

Interesting article on the **open source pharma movement**. With the views of Els Torreele (MSF Access Campaign), Matthew Todd and others.  Also listing a few examples, like Open Source Malaria and the Pandemic Response box.

# NCDs

### Lancet - Offline: Time to radically rethink non-communicable diseases

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(19)31038-4/fulltext

*"The strategies that underpin global health orthodoxy today, expressed as an almost exclusive concern with Sustainable Development Goal (SDG) 3, will fail to deliver healthy lives for all…. … Unless global health leaders reinterpret, resituate, and reactivate their advocacy and practice in the context of an urgent planetary emergency, their well intentioned words will be wasted. Perhaps the best example of this misplaced thinking is to be found in the strategies to prevent and control non-communicable diseases (NCDs)—a global movement that is dangerously off course…."*

*"…**In her University College London–Lancet Annual Lecture last week, economist Rachel Nugent,** who led The Lancet's 2018 Taskforce on NCDs and Economics, **challenged the NCD and global health communities to think differently. She explicitly framed NCDs as a "global emergency**"…..* " She recommended to invoke the idea of a **syndemic**, even if that's no panacea.

### Health Systems & Reform - Political Economy of Non-Communicable Diseases: From Unconventional to Essential

**Michael L Reich**; https://www.tandfonline.com/doi/full/10.1080/23288604.2019.1609872

One of the reads of the week, based on a **keynote speech at the latest PMAC conference** in Bangkok.

*"**In January 2019, the Prince Mahidol Award Conference organized an international meeting on "the political economy of non-communicable diseases**"—the first major global health symposium to*

*include political economy in its title and as its frame for discussion.* **This commentary is based on a plenary presentation made at the start of the conference.** *The overall goal of PMAC 2019 was "to foster and enhance global momentum for NCD prevention and control," using a political economy perspective. The organizers called this "an unconventional outlook."* **This commentary argues that political economy should become viewed as a conventional, indeed, an essential outlook for NCDs, and more broadly for global health.** *Political economy factors are integral to the problems of NCDs and therefore must also be integral to the policy responses…."*

## Health ministries leverage Coca-Cola's distribution and marketing expertise

https://www.coca-colaafrica.com/stories/health-ministries-leverage-coca-colas-distribution-and-marketing-expertise#

"**Project Last Mile** *shares Coca-Cola business models to help governments make sure medicines are available where they are needed most. Project Last Mile is an innovative partnership that is improving the availability of life-saving medicines and demand for health services in hard-to-reach communities across Africa by sharing the expertise and network of Coca-Cola…."*

**"Project Last Mile is a unique partnership between The Coca-Cola Company, The Coca-Cola Foundation, United States Agency for International Development (USAID), the Bill & Melinda Gates Foundation and the Global Fund to fight AIDS, Tuberculosis and Malaria**. *It aims to extract and apply key private sector lessons for the benefit of reaching millions of patients accessing public health services in eight African countries."*

As for example **Robert Marten** argued on Twitter, this sort of partnership is just insane in the SDG era.

**Anthony Costello** replied: "*We should not be surprised.  The neoliberal ideologues in charge of major global funds want to sanitise companies that hugely contribute to the problem*."

# International Day of the Midwife (5 May)

## WHO - International Day of the Midwife 2019

https://www.who.int/maternal_child_adolescent/news_events/events/international-day-midwife-2019/en/

"*International Day of the Midwife is celebrated each year on 5 May. The **theme** for this year's celebration is **Midwives: Defenders of Women's Rights**."*

Do read also (**UN News**) - International Day of the Midwife: 5 things you should know

# Lancet (Editorial) - Research futures—from 2019 to 2029

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(19)31006-2/fulltext

*"What will the world of research look like in 2029? How will research be funded? What are the pathways to open science? How will researchers work, and what will be the role of technology? How will the research information system change, and what will education look like? On **May 2, at a conference organised by the European Health Forum Gastein, and hosted by Wellcome in London (UK)**, possible drivers shaping the future of research were outlined. **Three main scenarios** provided pegs for broader discussion, based on the outcomes of the [Research Futures](#) report by Elsevier (publisher of The Lancet) and Ipsos MORI. The report outlined plausible futures for research: "**brave open world", "tech titans", and "Eastern ascendance**"…."*

# Disability & conflict

## Geneva Academy – Disability and Armed Conflict

https://www.geneva-academy.ch/news/detail/227-our-new-publication-addresses-the-devastating-impact-of-conflict-on-persons-with-disabilities

*"Our new publication [Disability and Armed Conflict](#) brings attention to the **devastating impact conflict has on persons with disabilities** and, crucially, highlights that **many of the key international humanitarian law (IHL) provisions that serve to minimize the impact of armed conflict** – such as the proportionality assessment and advanced effective warnings – **are not being applied in a disability inclusive manner**, resulting in persons with disabilities being killed, seriously injured or left behind as families flee armed attacks. … … 'This publication brings attention to this extremely important, yet much overlooked topic that has been predominately ignored by states, humanitarian organizations, the United Nations (UN), civil society, the media as well as academics. It is the outcome of more than [three years of research](#) funded by SNIS and Pro Victimis, including field research in the Democratic Republic of the Congo, Colombia, Palestine, Ukraine and Vietnam…"*

# Gearing up for the 72nd WHA  (20-28 May, Geneva)

## HPW - WHA 2019 Top Issues: Budget, UHC, Access To Medicines, Emergencies, Environment

https://www.healthpolicy-watch.org/wha-2019-top-issues-budget-uhc-access-to-medicines-emergencies-environment/

You know you have to read this **analysis** ahead of #WHA72 in full.

*"**This year's World Health Assembly will provide perhaps the best measure to date of the World Health Organization director-general's policies since taking office nearly two years ago**. But it will also reflect changing times for country relationships and for the state of global health. … … The WHA*

*will take on a wide range of topics in a short time, including **universal health coverage, the next two-year budget, organizational reform and a host of staffing and internal issues, access to medicines, emergencies and pandemics, environment and health, antimicrobial resistance, and actions on a variety of diseases such as polio, tuberculosis, and non-communicable diseases**. Below is a look at some of the issues ahead…."*

Focus in this analysis on **UHC**, **budget** (with 8 % increase of ceiling for 2020-2021 asked for by Tedros), **health emergencies** (high profile now, with Ebola outbreak ongoing); **access to medicines & vaccines;** and the **WHO draft global strategy on health, environment, and climate change**, and a draft action plan, for small island developing states particularly vulnerable to climate change.

### HPW - World Health Assembly Agenda, Technical Briefings, Side Events – Online Links To The Big Moments Ahead

https://www.healthpolicy-watch.org/world-health-assembly-agenda-technical-briefings-side-events-online-links-to-the-big-moments-ahead/

*"The first "World Health Assembly Journal" for the upcoming World Health Assembly, 20-28 May, has been published online, together with the provisional agenda for the 72nd WHA and links to some 50 progress reports, strategy plans and updates that will shape the face of the meeting between WHO's 194 member states. The already wide breadth of topics on the agenda – ranging from anti-microbial resistance and health emergencies to WHO's internal reorganization and its 2019-23 budget plan – will be complimented by a series of 8 technical briefings……."*

See also **G2H2** - 17-18 May 2019: Civil society meeting ahead of the 72nd World Health Assembly

What's up in Geneva during WHA72: Technical briefings, official side events and other meetings at the Palais des Nations and in town

## WHO

### WHO results report 2018 - Programme Budget 2018-2019 Mid-Term Review

http://apps.who.int/gb/ebwha/pdf_files/WHA72/A72_35-en.pdf

The WHO results report 2018 is out, among others with info on what WHO achieved on **UHC, health emergencies & healthier populations.**  This Mid-term Review 2018–2019 is a summary of key achievements and results in the first year of the biennium. This report presents areas where WHO had impact and the financial resources that were required to achieve them. Key results are organized using the triple billion targets.

### Devex - Exclusive: Questions arise over Tedros' new deputy director-general

J L Ravelo; https://www.devex.com/news/exclusive-questions-arise-over-tedros-new-deputy-director-general-94459

*"**An internal complaint at the World Health Organization's ethics office has questioned the appointment of Dr. Zsuzsanna Jakab as WHO's new deputy director-general as part of the agency's organizational restructuring in March**. The complaint, filed after the appointment and seen by Devex, came from a "group of concerned staff members at WHO" who "feel confused and outraged" by Jakab's elevation. The complaint alleges that Jakab, while serving as regional director of WHO's European office from 2010 to early 2019, was a **recipient of "many allegations of harassment**." In addition, the complaint also alleges that by appointing 67-year-old Jakab to the position, WHO has violated the retirement age limit of 65. **While WHO's ethics office has since closed the case, the emerging details raise questions on the legitimacy of Jakab's appointment and the credibility of WHO's oversight processes….***"

*"…The issue comes a few weeks before the 72nd World Health Assembly, where WHO's restructuring will likely be a major topic of discussion…."*

### Scientific American - The World Health Organization Needs to Put Human Behavior at the Center of Its Initiatives

S B Oomer et al; [https://www.scientificamerican.com/article/the-world-health-organization-needs-to-put-human-behavior-at-the-center-of-its-initiatives/](https://www.scientificamerican.com/article/the-world-health-organization-needs-to-put-human-behavior-at-the-center-of-its-initiatives/)

WHO needs a **'nudge unit'**, the authors of this piece argue, in order to incorporate insights from behavioral research into large-scale policy initiatives. They also explain what such a nudge unit should do.


# Global Fund update

### Aidspan - Global Fund Board's new Chair and Vice-Chair appointed using new selection process

[http://www.aidspan.org/gfo_article/global-fund-board-selects-donald-kaberuka-chair-and-roslyn-marauta-vice-chair](http://www.aidspan.org/gfo_article/global-fund-board-selects-donald-kaberuka-chair-and-roslyn-marauta-vice-chair)

*"**The Global Fund Board has appointed Donald Kaberuka as Chair of the Board and Roslyn Morauta as Vice-Chair**. Each will serve for a two-year term starting from the adjournment of the 41st Board Meeting on 16 May 2019. In choosing its new chair and vice-chair, **the Board followed a selection process that it adopted in May 2018. Under the new process, a Board Leadership Nominations Committee (BLNC) was created to coordinate the selection and an executive search firm was engaged to provide support.** The new selection process maintains the current practice of rotation between the implementer and donor voting groups for the final candidates for Board chair and vice-chair…."*

*"The new chair, Donald Kaberuka, who is from Rwanda, was nominated by the donor bloc; and the new vice-chair, Roslyn Morauta, who lives in Papua New Guinea, was nominated by the implementer bloc. **This is the first time in the history of the Global Fund that the person nominated by the donor bloc hails from an implementing country….**"*

## Global Fund- 4-pager on its "new" focus on UHC

https://www.theglobalfund.org/media/5913/publication_universalhealthcoverage_focuson_en.pdf

"...The Global Fund's strategy for 2017-2022 commits us to supporting resilient and sustainable systems for health, and promoting and protecting human rights and gender equality – two critical foundations of universal health coverage...."

Excerpts:

...The Global Fund is the largest multilateral investor in sustainable systems for health, investing **US$1 billion a year on health system strengthening**, including: improving procurement and supply chains; strengthening data systems and data use; training qualified health care workers; building stronger community responses and systems; and promoting the delivery of more integrated, people-centered health services so people can receive comprehensive care throughout their lives.

... **A new catalytic funding mechanism will support innovative activities that amplify ongoing programs**: service delivery integration, data quality and data usage, human resources for health, procurement and supply chain management and improving health sector governance

... **The Global Fund is working with other health agencies including Gavi, WHO, and the Global Financing Facility as part of the Global Action Plan's "Sustainable Financing Accelerator;"** and with the African Union and the World Bank to **accelerate the capacity of countries to raise more domestic resources**, give greater priority to health spending, and improve the efficiency and equity of investments in health. ..."

- PS: For an example of this new Global Fund approach/emphasis, see **Uhuru: Kenya, Global Fund to implement Universal Health Coverage**.

"President Uhuru Kenyatta has lauded the **partnership between the Government of Kenya and The Global Fund to Fight AIDS, Tuberculosis and Malaria (The Global Fund) in the delivery of health services to Kenyans,** especially in the war against malaria, TB and HIV/AIDS."

- And a quick link:

Global Fund Partners with PharmAccess to Accelerate Universal Health Coverage in Africa

"The Global Fund [today] announced **a partnership agreement with PharmAccess Foundation** to support African countries accelerate progress toward universal health coverage **by harnessing digital technology.** PharmAccess is **a Dutch non-governmental organization with presence in Africa**, dedicated to championing the development of mobile and digital technology platforms to expand access to affordable healthcare in sub-Saharan Africa. ... ... **Kenya, Rwanda, Nigeria and Ethiopia have been identified by the Global Fund as potential key pilot countries** given their commitment to achieving universal health coverage and focus on digital technology."

# UNAIDS

### Guardian - Mali gives top job to UN executive accused of 'tolerating harassment'

https://www.theguardian.com/global-development/2019/may/08/mali-health-minister-michel-sidibe-un

Sidibé has been appointed **health minister in Mali**. He leaves UNAIDS immediately.

As for an overview Sidibé's legacy at UNAIDS, and more specifically his contribution to the HIV response, you might want to read the **UNAIDS press release**, UNAIDS congratulates Michel Sidibé on his appointment as Minister of Health and Social Affairs of Mali

# Global Financing Facility

### GFF – Final report 8th Investors group meeting (15 April)

https://www.globalfinancingfacility.org/sites/gff_new/files/documents/GFF-IG8-Final-Report.pdf?CID=GFF_TT_theGFF_EN_EXT&hootPostID=ca66e4514253bc70fe265a9e5baa9b9d

Well worth scanning.

Among others: "…***The Director of the GFF Secretariat gave an update on GFF progress from the last year, particularly with the strengthening of the partnership and its critical role in reaching the replenishment milestone of US$1 billion in November 2018 in*** *Oslo. Dr. Mariam Claeson also announced her departure from the GFF Secretariat on June 30.* ▪ *The **Minister of Health from Nigeria provided a detailed account of Nigeria's experience and results with the GFF** (GFF-IG8-2 PPT) as well as next steps for successfully meeting Nigeria's health priorities.* ▪ ***The GFF Portfolio Update was presented as a synthesis of the progress in the 27 GFF-supported countrie****s, and all country representatives presented updates on their country's individual successes and challenges (GFF-IG8-3).* ▪ *Global Affairs Canada facilitated a **panel discussion on the role of Gavi, GFF, and Global Fund in the Global Health Architecture**. …."*

# World Bank update

### Tim Evans will join McGill Faculty of Medicine in September

https://publications.mcgill.ca/medenews/2019/05/01/dr-tim-evans-to-join-mcgill-faculty-of-medicine-in-september/

The link does no longer work, but I'm guessing Tim is still moving to McGill. Back to academia, in other words.

"…Dr. Evans is **currently the Senior Director of the Health, Nutrition and Population (HNP) Global Practice at the World Bank Group**. Over the last six years, he has re-oriented its multi-billion dollar investments in low- and middle-income countries around the pursuit of Universal Health Coverage. Flagship initiatives during his tenure have included establishing a Global Financing Facility (GFF) to eliminate preventable maternal and child mortality, inaugurating the first-ever insurance for pandemics in the wake of the Ebola outbreak in West Africa (PEF) and catalyzing efforts to measure primary care performance (PHCPI)…."*

What this bodes for the WB & global health, with Jim Kim also gone already for a while, is anybody's guess…

In other WB related news, you might also want to read this **article from Charles Kenny (CGD)** - [Fighting crony capitalism at the World Bank](#)  (the Hill)

Cfr. a **tweet from Justin Sandefur** – "*World Bank aid to the poorest countries is increasingly diverted to its private sector arm, which provides "undisclosed levels of subsidy to firms selected on opaque, non-competitive grounds, involving no input from beneficiary countries*."

## Tax expert fired for stance on transwomen

**Times - Tax expert Maya Forstater fired for saying trans women aren't women**

[https://www.thetimes.co.uk/edition/news/tax-expert-fired-for-saying-trans-women-aren-t-women-tpqgnm9vj](https://www.thetimes.co.uk/edition/news/tax-expert-fired-for-saying-trans-women-aren-t-women-tpqgnm9vj)

"*An internationally renowned **researcher on tax avoidance** is believed to be the first person in Britain to lose her job for saying that transgender women are not women. [Maya Forstater](#), 45, was told by her managers that she had used "offensive and exclusionary" language. She was accused of "fear-mongering" for tweeting her concerns about government proposals to allow people to legally self-identify as the opposite sex. **Forstater has begun employment tribunal proceedings against her former employer, the London office of the Centre for Global Development (CGD) think tank**. …*"

For the full story in Forstater's own words, see  **Medium** - [I lost my job for speaking up about women's rights.](#)

Sure her name rings a bell for readers of this newsletter, including on tax evasion in LMICs.  See for example a former CGD blog - [Exaggerating Multinational Tax Avoidance Does Not Help Africa](#)

## New newsletter on Anti-corruption, Transparency, & Accountability (ACTA) in Health Systems

As for the **first issue**, see [here](#).

"*WHO [ i*.e. The Department of Health Systems Governance and Financing and the Department of Gender, Equity and Human Rights at the World Health Organization*], UNDP, and the Global Fund to Fight AIDS, Tuberculosis, and Malaria (Global Fund) joined forces to convene a* multi-stakeholder consultation *to inform the* **creation of the first global network focused on ACTA in health systems**. *This newsletter is one of the channels through which we hope to continue the conversation….*"

**Subscribe** here: https://hsgovcollab.us20.list-manage.com/subscribe?u=bf8c7d10fc024748b2edb4d00&id=ca90f6932d

# Urban health

### JAMA (Perspective) - Health Concerns in Urban Slums - A Glimpse of Things to Come?

JAMA;

"*In this Viewpoint,* **authors from the International Center for Diarrheal Disease Research in Bangladesh** *discuss rapid urbanization in low- and middle-income countries and the associated challenges of meeting the basic health care needs of growing urban slum populations.*"

# Some papers & reports of the week

### Globalization & Health - Inclusive engagement for health and development or 'political theatre': results from case studies examining mechanisms for country ownership in Global Fund processes in Malawi, Tanzania and Zimbabwe

**R Armstrong** et al; https://globalizationandhealth.biomedcentral.com/articles/10.1186/s12992-019-0475-9

"***For many countries, including Malawi, Tanzania and Zimbabwe, 2017 was a transition year for support from the Global Fund to Fight AIDS, Tuberculosis and Malaria*** *as one funding cycle closed and another would begin in 2018. Since its inception in 2001, the Global Fund has required that countries demonstrate ownership and transparency in the development of their funding requests through specific processes for inclusive, deliberative engagement led* **by Country Coordinating Mechanisms (CCMs).** *In reporting results from case study research,* **the article explores whether, in the context of the three countries, such requirements continue to be fit-for-purpose given difficult choices to be made for financing and sustaining their HIV programmes***…. … The findings show how complex, competing priorities for limited resources increasingly strain processes for inclusive deliberation, a core feature of the Global Fund model. Each country has chosen expansion of HIV treatment programmes as its main strategy for epidemic control relying almost exclusively on external funding sources for support. This step has, in effect, pre-committed HIV funding, whether available or not, well into the future. It has also largely pre-empted the results of inclusive dialogue on how to allocate Global Fund resources.* **As a result, such processes may be entering the realm of 'political theatre,' or processes for processes' sake alone, rather than being important opportunities where critical decisions regarding priorities for national HIV programmes and how**

*they are funded could or should be made. … … To address this, **the Global Fund has begun an initiative to shore-up the capabilities of CCMs**, with specialised technical and financial support, so that they can both grasp and influence the overall financing and sustainability of HIV programmes, rather than focussing on Global Fund programmes alone…"*

## Canadian Journal of Public Health - Building the political case for investing in public health and public health research

**Steven Hoffman** et al; [Canadian Journal of Public Health;](Canadian Journal of Public Health;)

Well worth a read, this 4-page Comment, even you're not from Canada.

*"Governments around the world vastly underinvest in public health, despite ever growing evidence demonstrating its economic and social benefits. Challenges in securing greater public health investment largely stem from the necessity for governments to demonstrate visible impacts within an election cycle, whereas public health initiatives operate over the long term and generally involve prevention, statistical lives and underlying conditions. **It is time for the public health community to rethink its strategies and craft political wins by building a political case for investing in public health**—which extends far beyond mere economic and social arguments. **These strategies need to make public health visible, account for the complexities of policymaking networks and adapt knowledge translation efforts to the appropriate policy instrument."***

## Plos Med - The healthcare response to human trafficking: A need for globally harmonized ICD codes

[https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1002799](https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1002799)

*"In a Perspective, **Jordan Greenbaum and Hanni Stoklosa make the case for inclusion of codes for human trafficking in international diagnosis classification systems**. Part of the ongoing Collection on Trafficking, Exploitation and Health."*

*"…We are calling on WHO to include HT among the ICD-11 codes, which will take effect in 2022. Inclusion of diagnostic codes at WHO level is critical to harmonizing international public health efforts to end trafficking…."*

## Global Health Action - Research collaboration on community health worker programmes in low-income countries: an analysis of authorship teams and networks

**E N Maleka, H Schneider** et al;
[https://www.tandfonline.com/doi/full/10.1080/16549716.2019.1606570](https://www.tandfonline.com/doi/full/10.1080/16549716.2019.1606570)

*"Global health research partnerships, which promote the exchange of ideas, knowledge and expertise across countries, are considered key to addressing complex challenges facing health systems. Yet, many studies report inequalities in these partnerships, particularly in those between high and low-and-middle-income countries (LMICs). **This paper examines global research collaborations on community health worker (CHW) programmes, specifically analysing the***

*structures of authorship teams and networks in publications reporting research on CHW programmes in low-income countries (LICs)…."*

The authors conclude: "***Knowledge production on CHW programmes in LICs flows predominantly through a pool of connected HIC authors and North–South collaborations***. *There is a need for strategies harnessing more diverse, including South–South, forms of partnership*."

### Nature – Rising rural body-mass index is the main driver of the global obesity epidemic in adults

NCD Risk Factor collaboration; [Nature](#)

A remarkable new study: "*Body-mass index (BMI) has increased steadily in most countries in parallel with a rise in the proportion of the population who live in cities. This has led to a **widely reported view that urbanization is one of the most important drivers of the global rise in obesity**. Here we use 2,009 population-based studies, with measurements of height and weight in more than 112 million adults, to report national, regional and global trends in mean BMI segregated by place of residence (a rural or urban area) from 1985 to 2017. **We show that, contrary to the dominant paradigm, more than 55% of the global rise in mean BMI from 1985 to 2017—and more than 80% in some low- and middle-income regions—was due to increases in BMI in rural areas**. This large contribution stems from the fact that, with the exception of women in sub-Saharan Africa, **BMI is increasing at the same rate or faster in rural areas than in cities in low- and middle-income regions**. These trends have in turn **resulted in a closing—and in some countries reversal—of the gap in BMI between urban and rural areas in low- and middle-income countries, especially for women**. In high-income and industrialized countries, we noted a persistently higher rural BMI, especially for women…*"

### Oxfam Briefing paper - It's not all about the money: Domestic revenue mobilization, reducing inequality and building trust with citizens

[Oxfam](#);

"*This Oxfam briefing paper examines the challenges to the 'success' of domestic revenue mobilization (DRM) efforts, raises some questions about how to measure progress, and urges both governments and donors to shift to a more equity-centered approach to DRM. This paper emphasizes that DRM is about more than just increasing revenue; it is about how revenues are collected (i.e. who pays). Oxfam advocates that DRM efforts should reduce inequalities, not reinforce them*."

# Some blogs of the week

### IHP (blog) – From "Health for All" to "Universal Health": The Americas Region Seems to Get it. Again.

**Renzo Guinto**; [https://www.internationalhealthpolicies.org/from-health-for-all-to-universal-health-the-americas-region-seems-to-get-it-again/](https://www.internationalhealthpolicies.org/from-health-for-all-to-universal-health-the-americas-region-seems-to-get-it-again/)

Insightful blog from Renzo, focusing on a recent PAHO report.


### O'Neill Institute (blog) – Health and safety at workplaces: an opportunity for a joint effort

L Naurato; http://oneill.law.georgetown.edu/health-and-safety-at-workplaces-an-opportunity-for-a-joint-effort/


"Last **April 29** was the **first official world day for safety and health at work**…."  Blog on what WHO & ILO could do, jointly, in this respect.


### Keynote by Christine Lagarde at Paris Forum - How to Ensure the Effective and Sustainable Financing of International Development

IMF;


Helicopter view by the IMF boss at a recent Forum in Paris. Well worth a read.


 https://www.cgdev.org/blog/leadership-ambitions-four-opportunities-rory-stewart-uks-new-secretary-state-development


Excerpt: "…*Our work at the IMF has shown that many countries need to significantly scale up spending to meet the SDGs by 2030. **The additional spending needs in vital areas such as health, education, and priority infrastructure represent as much as 15 percentage points of GDP on average in low-income developing countrie**s—which is equivalent to about half a trillion US dollars in 2030. This is clearly a considerable challenge. **How can this be financed in a way that is sustainable? This is the key question**. The **first step begins at home**—raising more domestic revenue, making spending more efficient, reducing corruption, and improving the business environment. We believe that **countries can raise as much as 5 percentage points of GDP in additional tax revenue**—ambitious, but doable. But this alone will not be enough**. Developing countries will also need support from the international community—from bilateral donors, international institutions, and the private sector*…."


### F2P (blog) - On tackling 'Development Effectiveness' and the long journey ahead

P Ngirumpatse; https://oxfamblogs.org/fp2p/on-tackling-development-effectiveness-and-the-long-journey-ahead/


"*Making aid and development more effective has been a central aim of the development sector in the last two decades. Successive meetings have brought together donors and recipients to devise a way forward in addressing the poor development results of aid and development co-operation overall. Indeed, four High Level Fora (HLF 2003, 2005, 2008, 2011) and two High-Level Meetings (HLM 2014, 2016) discussed, shaped and reviewed the effectiveness agenda. This agenda is encapsulated in evolving frameworks ensuing from each meeting: **Rome 2003, Paris 2005 & Accra 2008, Busan 2011, Mexico 2014, Nairobi 2016**.  These frameworks put forward a set of commonly agreed effectiveness principles and commitments. **The agenda moved from an initial focus on aid to one on development effectiveness….**"

Excerpt: "*…One of the achievements of Busan was to bring on board South-South Co-operation (SSC) providers like China and India. The Busan Partnership and the subsequent* **GPEDC [ Global Partnership for Effective Development Co-operation ]** *had hoped to constitute a common global framework and rallying platform. But* **by now, China, India and Brazil have exited the GPEDC process, blaming an agenda still dominated by the OECD-DAC and Western norms.** *The* **three countries, plus South Africa, did not attend the Nairobi High Level Meeting (HLM2) in 2016.** *This begs the question: is a global framework possible (or desirable) when there is not even an agreed forum to discuss it? If yes, what platform could rally all actors? The* **UN Development Co-operation Forum is seen by major SSC providers as more representative.** *But whether it could play that role and what would be the division of labor with the GPEDC remain an open question.*"

## Duncan Green (blog) - INGOs and Aid's Middle Income Country Trap – What are the Options?

https://www.globalpolicyjournal.com/blog/09/05/2019/ingos-and-aids-middle-income-country-trap-what-are-options

"**Duncan Green on what INGOs can do in fast developing semi-authoritarian countries**." Like in the Philippines now, under Duterte.  Green sees **three options**, neither of them very enticing.

## BMJ (blog)  - Let's talk about sex

**Kaye Wellings**, https://blogs.bmj.com/bmj/2019/05/07/kaye-wellings-lets-talk-about-sex/

If you got this far in the newsletter, we don't want to withhold this insightful blog from you 😊.

*"What may be of concern is not how often an individual has sex, but whether it matters to them"*, argues Kaye Wellings, commenting on her latest (UK focused) study.  She's a Professor of Sexual and Reproductive Health Research, Faculty of Public Health and Policy, London School of Hygiene and Tropical Medicine.

And no worries, findings & comments probably don't just pertain to the UK.

## BMJ Global Health (blog) - Let's talk about sex – what has sexuality got to do with violence during global health fieldwork?

**Elizabeth Paul**; https://blogs.bmj.com/bmjgh/2019/05/09/lets-talk-about-sex-what-has-sexuality-got-to-do-with-violence-during-global-health-fieldwork/

"*Valéry Ridde and colleagues recently published an Editorial entitled "It's time to address sexual violence in academic global health". While I support the call to fight the violence endured by women, I disagree with the authors in a number of respects*."

# Global health events

## Africa Health Agenda International Conference Declaration

https://ahaic.org/wp-content/uploads/2019/05/AHAIC_2019_COMMUNIQUE_FINAL_18th_April.pdf

Communiqué from the **Kigali conference** (March 3-7). As you might recall, the focus of the conference was on "…*progress and strategies on how Africa can accelerate attainment of UHC under the AHAIC 2019 theme 2030 Now: Multisectoral Action to Achieve Universal Health Coverage in Africa.*"  4 pager.

This Communiqué will also feed into the multi-sectoral contribution to the UN High Level meeting on UHC in September 2019

## MSF Scientific Days (9-10 May)

https://www.msf.org.uk/msf-scientific-days

With a research & innovation day.

## Global Health Governance Programme: Healthy and sustainable futures exhibition (Edinburgh, 1st week April)

http://globalhealthgovernance.org/healthy-futures

"*The Global Health Governance Programme hosted a week long exhibition during the first week of April 2019 entitled "Healthy and Sustainable Futures". The main purpose of the exhibition was to engage and educate the public. We would like to improve the public's to understanding of Global Health, and of its importance for the future*…."  Short report.

## Webinar coming up:

**Collectivity - The unfinished agenda in community health: The design, governance and quality of CHW programs   (22 May)**

Collectivity;

With **Helen Schneider** & **Lilian Otiso**.

For more info on the program, see here.

# Global governance of health

## Devex - Growing donor concern could boost press freedom funding

https://www.devex.com/news/growing-donor-concern-could-boost-press-freedom-funding-94771

"*Current and prospective funders are keeping a close eye on troubling trends threatening press freedom globally, according to a new report from Media Impact Funders on global media philanthropy. Around the world, free and independent media is facing a crisis. Threats to press freedom in the digital age have serious implications for democracy, stability, and development. And recognition of this fact is growing among donors, who are coming together in new ways to discuss how to support this space….*"

## AP – Trump formally submits Kelly Craft nomination for UN post

AP;

"*President Donald Trump has formally submitted to the Senate the nomination of Kelly Craft to serve as the next U.S. ambassador to the United Nations. Craft serves as the U.S. ambassador to Canada. In February, Trump had said he had selected Craft for the U.N. job….*"

Apparently, as you might have expected from a Trump pick, the lady isn't quite sure about the reality of climate change…

## Devex - EU under pressure to lead by example on Global Fund

V Chadwick;  https://www.devex.com/news/eu-under-pressure-to-lead-by-example-on-global-fund-94821

(gated) "*France has warned the European Commission that negotiations over its seven-year budget are "no excuse" for delaying the announcement of how much it intends to commit to the Global Fund to Fight AIDS, Tuberculosis and Malaria for 2020-2022. The fund, a multilateral health partnership, is aiming to raise $14 billion at its sixth replenishment conference in October in Lyon, France….*"

## Devex - Rory Stewart: New DFID chief with a colorful career

https://www.devex.com/news/rory-stewart-new-dfid-chief-with-a-colorful-career-94833

Looks like an interesting character, the new DFID boss.

Excerpt: "…*But Stewart's biggest claim to fame is his grueling walk across Afghanistan, Iran, Pakistan, India, and Nepal in 2002, about which he wrote a well-received book, "The Places in Between."…*"

Do read also a **CGD blog by Ian Mitchell** et al - [Leadership Ambitions: Four Opportunities for Rory Stewart, the UK's New Secretary of State for Development](#)

## Global Social Policy - The limits to 'global' social policy: The ILO, the social protection floor and the politics of welfare in East and Southern Africa

J Seekings; [https://journals.sagepub.com/doi/full/10.1177/1468018119846418](https://journals.sagepub.com/doi/full/10.1177/1468018119846418)

"*Bob Deacon's study of the Social Protection Floors initiative, led by the International Labour Organisation (ILO), entailed a pioneering study of the making of global social policy. Just **how global is this 'global social policy' in terms of both its making and its subsequent diffusion? African governments were minimally involved in the making of this global social policy.** Most seem to have acquiesced in this global policy-making, as they have with other 'global' declarations, in the expectation that it would have little effect on them. Nor, in Southern Africa, is there clear evidence of any significant effect. Even the social protection strategy documents adopted by either the African Union or national governments, typically written by external consultants, have generally avoided direct use of the concept of the social protection floor, while reiterating the commitment to 'comprehensive' (and appropriate) social protection that predated the ILO-led initiative. The trajectory of actual policy reform in Southern African countries does not appear to have changed. **There continues to be a disjuncture between 'global social policy' at the global and African levels**.*"

## IISD - A World Gathering to Drive Results: UN System Outlines Common Narrative for High-level Week

[http://sdg.iisd.org/news/a-world-gathering-to-drive-results-un-system-outlines-common-narrative-for-high-level-week/](http://sdg.iisd.org/news/a-world-gathering-to-drive-results-un-system-outlines-common-narrative-for-high-level-week/)

"*The UN system's HLPF Task has produced a **narrative document** as an informal contribution to preparations for the **series of high-level meetings convening in September 2019**, beginning with the Climate Action Summit. **The narrative envisions leaders returning to their countries from the high-level week "emboldened" both by fellow governments' actions and by the availability of concrete, scalable solutions.** As seen by the Task Team, the high-level week could mark a shift not just from commitments to action, but also "onwards to results"….*"

"*A UN system task team has prepared a common narrative for six high-level events taking place in September 2019. UN Secretary-General Antonio Guterres informally presented the narrative document to governments to support preparations for the meetings. The narrative describes the series of meetings as **a singular world gathering with a three-fold aim of taking stock of progress,***

*increasing ambition, and highlighting "scalable, just and tailored" solutions to global challenges…."*    #gosh

## WB (report) - Tracking the Sustainable Development Goals : Emerging Measurement Challenges and Further Reflections

Dang Hai-anh et al ;

http://documents.worldbank.org/curated/en/340711557154138746/Tracking-the-Sustainable-Development-Goals-Emerging-Measurement-Challenges-and-Further-Reflections

*"The SDGs recently adopted by the United Nations represent an important step to identify shared global goals for development over the next two decades. Yet, the stated goals are not as straightforward and easy to interpret as they appear on the surface. Review of the Sustainable Development Goals indicators suggests that some further refinements to their wordings and clarifications to their underlying objectives would be useful. **This paper brings attention to potential pitfalls with interpretation, where different evaluation methods can lead to different conclusions about country performance.** The review of the United Nations' Sustainable Development Goals database highlights the **overwhelming challenge with missing data: data are available for just over 50 percent of all the indicators and for just 19 percent of what is needed for comprehensively tracking progress across countries and over time**. The paper offers further reflections and proposes some simple but cost-effective solutions to these challenges."*

## IISD - Experts Review HLPF's First Cycle, Discuss Possible Improvements

IISD;

*"DESA organized an expert group meeting to consider lessons learned from the first cycle of the HLPF. Participants discussed areas of improvement related to VNRs, SDG thematic reviews, and multi-stakeholder participation, among other topics. Participants also started discussing the review of the HLPF scheduled to take place during the 74th session of the UNGA."*

# UHC

## Lancet Global Health (Comment) - Infection prevention: laying an essential foundation for quality universal health coverage

B Allegranzi et al; https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(19)30174-3/fulltext

Excerpts:

"…*Infection prevention and control (IPC)* *is an evidence-based approach to halt the spread of infection and AMR*. ***It embodies all three core domains of quality care*** *(ie, care that is safe, effective, and people-centred), and strongly supports the attainment of other key global health priorities that* ***will eventually contribute to high-quality UHC.*** *Strong IPC capacity and programmes ensure adequate preparedness and response to protect people from outbreaks. Their reinforcement is an essential pillar for recovery and health system strengthening after the shock of an epidemic. IPC is also complementary to and enhances water, sanitation, and hygiene (WASH) interventions. WASH monitors infrastructure indicators, whereas IPC provides evidence of an effect on health workers' behaviour and patient outcomes through improved infrastructures….*"

"…*Despite this compelling evidence,* ***only 58% of countries report having a national IPC programme or plan and related guidelines.*** *Even more alarmingly, only 15% have a system to assess their compliance and effectiveness.* ***These gaps are more striking in low-income countries*** *where surveillance indicators for infections associated with health care are present in only 5% of countries and the monitoring of IPC in only 30%...*"

After looking ahead to the next WHA, linking IPC to various resolutions in the pipeline, the Comment concludes*: "…Clean and safe care should be universally available to every person worldwide. It can be achieved through improved IPC practices and monitoring everywhere, driving the foundation for quality care in the UHC era."*

PS: You might also want to read a somewhat related piece, by **Garance Upham** (Editor in Chief of AMR control) - [From Ebola to Antimicrobial Resistance: Coming Into a Health Center Could Kill You! Is WHO Now Placing Hygiene As a Global Priority? Will Governments Listen?](#)

## The Wire – It's Time to Have Universal Healthcare as a Public Service – and a Right

S Ghosh; [https://thewire.in/health/universal-healthcare-congress-bjp](https://thewire.in/health/universal-healthcare-congress-bjp)

On health care in the (ongoing) Indian elections. "*Congress's pledge on healthcare might be more appealing than schemes like Ayushman Bharat, but years of failed promises have elicited a need for a nationalised public healthcare system*."

## Health Affairs - China's Health Expenditure Projections To 2035: Future Trajectory And The Estimated Impact Of Reforms

T Zhai et al ; [https://www.healthaffairs.org/doi/abs/10.1377/hlthaff.2018.05324](https://www.healthaffairs.org/doi/abs/10.1377/hlthaff.2018.05324)

« *To understand the future trajectory of health expenditure in China if current trends continue and the estimated impact of reforms, this study projected health expenditure by disease and function*

*from 2015 to 2035. Current health expenditure in China is projected to grow 8.4 percent annually, on average, in that period. … …The biggest challenge facing the Chinese health system is the **projected rapid growth in inpatient services.** … … Future action in controlling health expenditure growth in China should focus on the high growth in inpatient services expenditure and interventions to reduce risk factors."* »

## International Journal of Health Services - Commercial Health Care Financing: The Cause of U.S., Dutch, and Swiss Health Systems Inefficiency?

JP Unger & P De Paepe; https://journals.sagepub.com/doi/10.1177/0020731419847113

*"This article evaluates the performance of 3 industrialized nations that have pursued market-based financing models, focusing on equity in access to care, care quality, health status, and efficiency. It then assesses the consistency of the findings with those of different research teams…."*

# Planetary health

## Guardian - Raise taxes on firms that harm nature, OECD tells G7 countries

https://www.theguardian.com/environment/2019/may/07/raise-taxes-firms-harm-nature-oecd-g7

*"Governments need to ramp up investment in nature restoration and raise the tax burden on companies that degrade wildlife, according to recommendations made to the G7 group of rich nations. The proposals are **part of a growing debate on how to radically change humanity's relationship with nature in the wake of a new UN mega-report** that showed an alarming decline in the Earth's life-support systems. They were presented by the **Organisation for Economic Cooperation and Development (OECD) at the meeting this weekend in Metz, France, of environment ministers from the G7 nations** – the US, Germany, Japan, the UK, Canada, France and Italy – along with observers including India, Indonesia, Mexico and Egypt…."*

## Foreign Policy – China rises in UN Climate talks, while US goes AWOL

https://foreignpolicy.com/2019/05/07/china-rises-united-nations-climate-change-talks-u-s-trump-goes-awol-environment-diplomacy-global-warming/

*"As the **global body becomes increasingly identified with tackling climate change**, Trump refuses to take part, handing the reins to Beijing."*

*"…"By staying out of these negotiations, the U.S. is basically giving Beijing a free pass," Richard Gowan, a U.N. expert at the International Crisis Group, told Foreign Policy. "So much of the current effort to contain China at the U.N. boils down to bickering over language in not very important resolutions. I think the Trump administration is missing **the big picture**, which is that **for a lot of countries climate diplomacy is the most important part of what the U.N. does."…"***

And some quick links:

**Vox** - We'll soon know the **exact air pollution from every power plant** in the world. That's huge.

*"Tuesday brings a somewhat mind-blowing announcement in the world of power plants and pollution. In a nutshell: **A nonprofit artificial intelligence firm called WattTime is going to use satellite imagery to precisely track the air pollution (including carbon emissions) coming out of every single power plant in the world, in real time**. And it's **going to make the data public**. This is a very big deal. Poor monitoring and gaming of emissions data have made it difficult to enforce pollution restrictions on power plants. **This system promises to effectively eliminate poor monitoring and gaming of emissions data.** And it **won't just be regulators and politicians** who see this data; it will be **the public too**. When it comes to environmental enforcement, the public can be more terrifying and punitive than any regulator. If any citizen group in the world can go online and pull up a list of the dirtiest power plants in their area, it **eliminates one of the great informational barriers to citizen action…."***

**Guardian** - US is hotbed of climate change denial, international poll finds

*"Out of 23 countries, only Saudi Arabia and Indonesia had higher proportion of doubters*."

**Nature Communications** - The impact of human health co-benefits on evaluations of global climate policy

*" The health co-benefits of CO2 mitigation can provide a strong incentive for climate policy through reductions in air pollutant emissions that occur when targeting shared sources. However, reducing air pollutant emissions may also have an important co-harm, as the aerosols they form produce net cooling overall. Nevertheless, aerosol impacts have not been fully incorporated into cost-benefit modeling that estimates how much the world should optimally mitigate. Here we find that when both co-benefits and co-harms are taken fully into account, optimal climate policy results in immediate net benefits globally, overturning previous findings from cost-benefit models that omit these effects….*"

# Infectious diseases & NTDs

## Vaccine - Pregnant women & vaccines against emerging epidemic threats: Ethics guidance for preparedness, research, and response

C Krubiner et al (on behalf of the PREVENT working group);
https://www.sciencedirect.com/science/article/pii/S0264410X19300453

*"…Historically, pregnant women and their offspring have been largely excluded from research agendas and investment strategies for vaccines against epidemic threats, which in turn can lead to exclusion from future vaccine campaigns amidst outbreaks. This state of affairs is profoundly unjust to pregnant women and their offspring, and deeply problematic from the standpoint of public health. To ensure that the needs of pregnant women and their offspring are fairly addressed, new approaches to public health preparedness, vaccine research and development, and vaccine delivery are required.* **This Guidance offers 22 concrete recommendations** *that provide a* **roadmap for the ethically responsible, socially just, and respectful inclusion of the interests of pregnant women in the development and deployment of vaccines against emerging pathogen***s. The Guidance was developed by the* **Pregnancy Research Ethics for Vaccines, Epidemics, and New Technologies (PREVENT) Working Group** *– a multidisciplinary, international team of 17 experts specializing in bioethics, maternal immunization, maternal-fetal medicine, obstetrics, pediatrics, philosophy, public health, and vaccine research and policy – in consultation with a variety of external experts and stakeholders."*

## WHO – Snakebite: WHO targets 50% reduction in deaths and disabilities

https://www.who.int/news-room/detail/06-05-2019-snakebite-who-targets-50-reduction-in-deaths-and-disabilities

*"***WHO has [today] released further details of its strategy to prevent and control snakebite envenoming,*** a neglected tropical disease that affects 1.8–2.7 million people each year, claiming 81000–138 000 lives and causing 400 000 cases of permanent disability.* **The aim of the strategy is to halve the numbers of deaths and cases of disability due to snakebite envenoming over the next 12 years** *through a programme that targets affected communities and their health systems, and by ensuring access to safe, effective treatment through increased cooperation, collaboration and partnership at all levels…."*

## CSIS (interactive report)- The future of polio surveillance

N Bristol et al ; https://www.csis.org/features/future-polio-surveillance

## The Conversation - We're developing the world's first vaccine suitable for humans and livestock

G Warimwe; [https://theconversation.com/were-developing-the-worlds-first-vaccine-suitable-for-humans-and-livestock-115406](https://theconversation.com/were-developing-the-worlds-first-vaccine-suitable-for-humans-and-livestock-115406)

*"Rift Valley Fever infects millions of humans and livestock in Africa and Arabia. To fight it, scientists are developing a first of its kind vaccine that can be used on humans and animals."*

## The National Academies of Sciences/Engineering/Medicine - Exploring Lessons Learned from a Century of Outbreaks: Readiness for 2030: Proceedings of a Workshop

[National Academies](#);

*"**The year of 2018 marked the 100th anniversary of the 1918 influenza pandemic,** one of the deadliest disease outbreaks in human history, which took the lives of more than 50 million people. While there have been advances in mitigating the threat of pandemics since then, recent epidemics shed light on the major gaps in human and animal health systems throughout the world. Recognizing the 100th anniversary, in November 2018, **the Forum on Microbial Threats of the National Academies of Sciences, Engineering, and Medicine held two sister workshops to examine the lessons from influenza pandemics and other major outbreaks**; understand the extent to which the lessons have been learned; and discuss how they could be applied further to ensure that countries are sufficiently ready for future pandemics. **The first** was a public, half-day pre-workshop event held on November 26, 2018, which highlighted the benefits and progress of driving science, public health, global governance, and cross-sectoral alliances for pandemic influenza preparedness. Building on the pre-workshop event, the 1.5-day **public workshop that followed** on November 27 – 28, 2018, examined the lessons from major infectious disease outbreaks and explored the extent to which they have both been learned and applied in different settings. **This publication features presentations and discussions that took place throughout the pre-workshop and workshop events**."*

## CGD (report) – Struggling with Scale: Ebola's Lessons for the Next Pandemic

J Konyndyk; [https://www.cgdev.org/publication/struggling-scale-ebolas-lessons-next-pandemic#.XNR2Nnyp_Eg.twitter](https://www.cgdev.org/publication/struggling-scale-ebolas-lessons-next-pandemic#.XNR2Nnyp_Eg.twitter)

*"… **This report explores the lessons of the (West-Africa) Ebola outbreak through the lens of the US and UN policymakers** who were forced to construct an unprecedented response in real time. It tells the story of their choices around **four major policy challenges**: Operationalizing the US government*

*response; Balancing the politics and the science of travel restrictions; Defining the role of a reluctant military; Coordinating complex international partnerships. **The report draws on interviews with 19 high-level US and UN policymakers, a desk review of after-action reports, and the author's own experiences while lead-ing the response efforts of the US Agency for Interna-tional Development (USAID)**."*

Quick links:

Deutsche Welle - [Measles: German minister proposes steep fines for anti-vaxxers](#)

*"German Health Minister Jens Spahn is proposing a law that allows for fining parents of unvaccinated children up to €2,500 ($2,800). The conservative lawmaker said he wants to "eradicate" measles."*

France 24 - [Pakistan demands Facebook remove polio vaccine misinformation](#)

*"Pakistan urged Facebook to remove harmful polio-related content from the social networking site on Friday, saying it was jeopardising eradication initiatives and putting the lives of vaccinators at risk…."*

# AMR

## BMJ Global Health – How to improve antibiotic awareness campaigns: findings of a WHO global survey

B Huttner et al; [https://gh.bmj.com/content/4/3/e001239](https://gh.bmj.com/content/4/3/e001239)

*"**We aimed to examine the characteristics of antibiotic awareness campaigns (AAC) conducted on a national or regional level since 2010**. In October 2016, the WHO invited stakeholders involved in the planning or conduct of AACs to answer a web questionnaire. We solicited general information about the characteristics of the AAC, with a particular focus on key messages supporting optimal use of antibiotics. **Stakeholders in 93 countries were contacted and 55 countries responded**. … … There were **no major differences between LMICs and high-income countries in the types of key messages**. The scientifically questionable **'Finish your prescription' slogan** was used by 31 AACs (52%). **A One Health approach** was mentioned in 13/60 AACs (22%). Most messages were universally applicable; adaptation to locally prevalent public misconceptions was not systematic. The evaluation of the impact of campaigns was still incomplete, as only 18 AACs (30%) assessed their impact on antibiotic use. **For future AACs, it seems essential to base messages more rigorously on scientific evidence, context specificities and behavioural change theory**. A **new generation of messages that encourage first-choice use of narrow spectrum antibiotics is neede**d, reflecting international efforts to preserve broad spectrum antibiotic classes. Evaluation of the impact of AACs remains suboptimal."*

# Economist - Antibiotics biotech firms are struggling

https://www.economist.com/business/2019/05/04/antibiotics-biotech-firms-are-struggling?fsrc=scn/tw/te/bl/ed/antibioticsbiotechfirmsarestrugglingatoughsell

*"The slim rewards for new antibiotics make them a risky business."*

And a quick link:

NPG - Genetically Modified Viruses Help Save A Patient With A 'Superbug' Infection

*"For the first time, scientists have used genetically modified viruses to treat a patient fighting an antibiotic-resistant infection…."*

# NCDs

## Stat - Study pulls back curtain on contracts between Coca-Cola and the researchers it funds

https://www.statnews.com/2019/05/07/coca-cola-research-funding-contracts/

"**When it funds scientific research, Coca-Cola includes a provision in its contracts with academic institutions that allows the beverage giant to pull its funding for a study at any point, according to a group of researchers who obtained several such agreements**. The policies could pressure recipients of the funding to pursue research that dovetails with Coca-Cola's goals out of fear of having their project canceled, the researchers said in a paper published Tuesday, though they added that they found no example of that occurring. The paper, which was published in the Journal of **Public Health Policy**, comes amid increasing scrutiny of the food and beverage industry's funding of and influence over academic research. …"

For the paper, see "Always read the small print": a case study of commercial research funding, disclosure and agreements with Coca-Cola  (by S Steele et al).

## BMJ (Analysis) - Gambling and public health: we need policy action to prevent harm

https://www.bmj.com/content/365/bmj.l1807

"**Prevention of harms related to gambling requires investment in population based approaches**, say Heather Wardle and colleagues."

Some of the **key messages** of this paper: "*Current approaches targeting affected individuals substantially underestimate the harms of gambling; Gambling places a major burden of harm on individuals, communities, and society; Harms from gambling are generated through a range of political, legislative, commercial and interpersonal actions; Public health approaches to reduce harms related to gambling should encompass a range of population based approaches supported by regulation, legislation. and funding.*"

## HPW - WHO Secures Commitment From Food & Beverage Industry To Phase Out Trans Fats

https://www.healthpolicy-watch.org/who-secures-commitment-from-food-beverage-industry-to-phase-out-trans-fats/

"*The World Health Organization says it has secured a commitment from the International Food and Beverage Alliance (IFBA) to phase out industrially-processed trans fat from the global food supply by 2023….*"

## Devex - Opinion: 3 actions to address the PTSD crisis in global development

https://www.devex.com/news/opinion-3-actions-to-address-the-ptsd-crisis-in-global-development-94641

"***Aid workers on the front line in humanitarian crises are liable to suffer from a hidden and largely ignored problem — a mental health crisis**. **Seventy-nine percent** of global development professional respondents in a mental health and well-being survey **reported experiencing mental health issues** that have compromised the quality of their lives and relationships….*"

"*…Working on the frontline of humanitarian crises, these men and women may have witnessed human suffering first-hand. As a result, they are more likely to suffer from symptoms such as flashbacks, severe and often debilitating anxiety, depression, substance abuse, and nightmares. One of the most common disorders is **post-traumatic stress disorder**….*"

## CJASN -An International Analysis  of Dialysis Services Reimbursement

https://cjasn.asnjournals.org/content/14/1/84

"*The prevalence of patients with ESKD who receive extracorporeal kidney replacement therapy is rising worldwide. We compared government reimbursement for hemodialysis and peritoneal dialysis*

worldwide, assessed the effect on the government health care budget, and discussed strategies to reduce the cost of kidney replacement therapy." *"**Cross-sectional global survey of nephrologists in 90 countries** to assess reimbursement for dialysis, number of patients receiving hemodialysis and peritoneal dialysis, and measures to prevent development or progression of CKD, conducted online July to December of 2016."*

Conclusions*: "In low- and middle-income countries, reimbursement of dialysis is insufficient to treat all patients with ESKD and has a disproportionately high effect on public health expenditure. Current reimbursement policies favor conventional in-center hemodialysis."*

Cfr a **tweet by Kalypso Chalkidou**: *"**Dialysis not an MDG/SDG priority**; has no dedicated vertical; flagged by WHO as least cost-effective buy for health systems - #UHC; **yet increasingly covered by LMICs, inadequately, at great cost to health systems and families** ; Time to pay attention to tech? "*

# Science News - Chronic kidney disease epidemic in agricultural workers: High heat, toxins

[Science Daily](#);

"A *mysterious epidemic of chronic kidney disease among agricultural workers and manual laborers may be caused by a combination of increasingly hot temperatures, toxins and infections, according to researchers at the University of Colorado Anschutz Medical Campus.*" See a new [review article](#) in **NEJM**.

"…*the disease could be caused by **heat, a direct health impact of climate change, as well as pesticides like glyphosate….**"*

*"Newman and Johnson believe the epidemic is caused by a combination of heat and some kind of toxin and **they recognize the need to take preventative action immediately**. That means ensuring workers get adequate breaks, drink enough fluids and spend time in the shade. It also means maintaining a clean water supply, free of chemicals toxic to the kidneys."*

# Lancet Editorial –Malaysia's Pain Free programme

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(19)31005-0/fulltext

Malaysia's *" **Pain Free programme** incorporates three clinical approaches: reducing surgical or procedural pain, integrating non-pharmacological approaches, and modifying anaesthetic and analgesic techniques to minimise pain and need for opioids…."*

*"…the challenge for any country looking to improve pain control and opioid access is to prevent an opioid epidemic, especially given concerns that as regulations tighten in the USA, pharmaceutical companies might look to other markets and continue questionable marketing practices. **Malaysia's Pain Free programme has taken a holistic, coordinated, national approach, and the results should be eagerly anticipated by those interested in tackling pain without overprescribing.**"*

# Sexual & Reproductive / maternal, neonatal & child health

## Thomson Reuters Foundation – Resurgent 'family values' cause nations to break women's rights vows - U.N. official

http://news.trust.org/item/20190506192339-zega8/

"**U.***N. Women is collecting information from nations around the world to publish next year on the 25th anniversary of a historic women's rights declaration* signed in Beijing. The United Nations' agency on women is finding **resistance to women's rights, such as renewed support for "traditional family values***," as it tallies up global progress on gender equality, organizers said on Monday…."

## KFF - KFF Poll: Public Opinion and Knowledge on Reproductive Health Policy

KFF;

The poll of US public opinion on reproductive health care contained, among others this info:

"**The poll also gauges awareness and attitudes towards restrictions on U.S. funding for foreign non-governmental organizations that provide abortions or counsel or refer for abortions, using their own funds, known as the Mexico City Policy***. While the majority of the public does not support such restrictions, **views diverge along partisan lines***, with most Democrats and independents opposing them and most Republicans supporting the actions by the Trump administration.*"

## Journal of Development Economics -Regression discontinuity analysis of Gavi's impact on vaccination rates

S Dykstra, A Glassman et al; https://www.sciencedirect.com/science/article/pii/S0304387819305309

For the wonks among you, I guess.  "*Since 2001, … Gavi has accounted for over half of vaccines purchased in the 75 eligible countries with an initial GNI below $1,000 per capita. Regression discontinuity estimates suggest **most aid for cheap, existing vaccines like hepatitis B and DPT was inframargina***l: for instance, hepatitis B doses sufficient to vaccinate roughly 75% of infants raised vaccination rates by single-digit margins. These results are driven by middle-income countries near the eligibility threshold, and do not preclude **larger gains for the poorest countries, global externalities via vaccine markets, or impacts on newer vaccines such as pneumococcal or rotavirus for which income eligibility rules were relaxed***…."

## Global Health Action - What are the public health implications of the life course perspective?

J Aagaard-Hansen et al; https://www.tandfonline.com/doi/full/10.1080/16549716.2019.1603491

"*During the past decades innovative research has shown that exposure to harmful events during pregnancy and early infancy ('the first 1000 days') has an impact on health at subsequent stages of the life course and even across generations. Recently it has been shown that even the pre-conception period is of outmost importance, and other scholars have made the case that the 1000 days should be extended to a period of 8000 days post-conception. The present contribution aims to bridge further the gap between research evidence and public health policy by applying a holistic 'full-cycle' perspective. Thus, a conceptual framework is suggested for guiding public health prioritization, including the variables of 'impact on the next generation', 'plasticity' and 'available interventions with documented impact'. This framework could guide decision makers in selecting at which stages of the life course to invest (and not), and furthermore it points to some pertinent research priorities.*"

## BMJ Global Health – Gender-related differences in care-seeking behaviour for newborns: a systematic review of the evidence in South Asia

S A Ismail et al; https://gh.bmj.com/content/4/3/e001309

"*Data indicate substantial excess mortality among female neonates in South Asia compared with males.* **We reviewed evidence on sex and gender differences in care-seeking behaviour for neonates as a driver for this**."

Some of the results: "*…Low quality evidence across several South Asian countries suggests that care-seeking rates for female neonates are lower than males, especially in households with older female children. Parents are more likely to pay more, and seek care from providers perceived as higher quality, for males than females. Evidence on drivers of these care-seeking behaviours is limited. Care-seeking rates are suboptimal, ranging from 20% to 76% across male and female neonates….*"

Quick links:

NYT - Brunei Says It Won't Execute Gays After Protests of Stoning Law

# Access to medicines

## NBC - Generic HIV prevention drug coming in 2020, Gilead says

https://www.nbcnews.com/feature/nbc-out/generic-hiv-prevention-drug-coming-2020-gilead-says-n1003391

"*Following a campaign by activists, Gilead announced a generic version of Truvada, or PrEP, will be available next September, a year earlier than expected.*"

## BMJ - Indian campaigners ask government to stop relying on handouts of bedaquiline to ensure supply

https://www.bmj.com/content/365/bmj.l2140

"*Health and patients' rights groups have asked India's health ministry to stop depending on donations of bedaquiline from Johnson and Johnson to treat patients with multidrug resistant tuberculosis (MDR-TB) and instead use its own funds to procure the drug. In a letter sent to the health ministry last week, the All India Drug Action Network (AIDAN), a consortium of physicians and health activists, and other groups said dependence on "piecemeal donations" threatened the sustainability and predictability of the government's plan to treat patients with MDR-TB. They have asked the government to phase out donated bedaquiline and find and treat all patients in India eligible for the bedaquiline based regimen through its domestic budget….*"

And a quick link on transparency in the US:

Stat - Drug makers will have to include prices in TV ads as soon as this summer

# Human resources for health

## WHO Values charter

https://www.who.int/docs/default-source/documents/values-charter-en.pdf?sfvrsn=4ed75cec_12

1-pager.

Cfr a tweet: "@DrTedros DG @WHO launched the WHO Values Charter with full support and commitment. This is our values and our DNA to serve the population and the countries."

# Miscellaneous

## Social Europe - The trilemma of Big Tech

https://www.socialeurope.eu/the-trilemma-of-big-tech

Clearly, trilemmas are in vogue since Dani Rodrik. **"*Karin Pettersson says we can have Big Tech's market domination, business models and democracy—just not all at the same time.*"**

"…*It might be conceptually useful to structure the discussion of* **the global information space** *in an analogous manner* [i.e. like Rodrik did in his famous trilemma on the state of the world economy*]. One can have democracy, market dominance and business models that optimise for anger and junk—but only two at a time….*"

## Guardian (Longread)- How the news took over reality

O Burkeman; https://www.theguardian.com/news/2019/may/03/how-the-news-took-over-reality

One of the reads of last weekend. "*Is engagement with current affairs key to being a good citizen? Or could an endless torrent of notifications be harming democracy as well as our wellbeing*?"

Burkeman concludes: "…*If the* **colonisation of everyday life by the news** *is* **damaging both to ourselves and to democratic politics**, *we ought not to collaborate unthinkingly with that process. Far from it being our moral duty to care so much about the news,* **it may in fact be our duty to start caring somewhat less.**"

You might also want to read a somewhat related article (on **Vox**) - Yes, the internet is destroying our collective attention span

"Trending topics rise and disappear faster than ever."

## F2P blog - The African Continental Free Trade Area is expanding, but who will benefit?

B Kombo; https://oxfamblogs.org/fp2p/the-african-continental-free-trade-area-and-alternatives-to-neoliberalism/

"*On April 2, 2019, The Gambia ratified the agreement establishing the Africa Continental Free Trade Area (AfCFTA). In doing so,* **it joined 21 other African countries, thus helping usher the agreement into force as the threshold of 22 ratifications was reached.** *But what does this really mean for Africa? Temporarily ignoring the African Union's pronounced implementation deficit and focusing on the limits of free trade; how far can the initiative realistically go in its effort to "promote and attain*

*sustainable and inclusive socio-economic development, gender equality and structural transformation of [African countries]?"…"*

*"…Last month, the United Nations Economic Commission for Africa encouraged African scholars to conduct more research on the AfCFTA.* **There is great need for robust intellectual engagement with this initiative and such engagement must go far beyond the usual suspects, namely: intra-African bodies, economists, and international trade lawyers***. History, including the recent history of the United Kingdom's referendum to leave the European Union, has shown us that trade is far more than a technocratic exercise involving goods and services. It is a complex site of both local and global governance. As Africa embarks on one of its most ambitious initiatives since the formation of the OAU,* **interdisciplinary and engaged research must unpack the AfCFTA***…."*

## CSIS (interactive report) – Nutrition + Prosperity

A R Beaudrault; https://www.csis.org/features/nutrition-prosperity

*"A new interactive report from @CSISHealth outlines the role of global nutrition as a foundation for lifelong health, economic growth, and political stability and underscores the critical contribution of U.S. funding."*

Quick links:

- Blog by **Ben Ramalingam & Leni Wild** (on Duncan Green's F2P blog) - Adaptive rigour: bridging the art and science of adaptive management   On the Global Learning for Adaptive Management (GLAM) initiative.
- The UK's new Development Minister, Rory Stewart, is a genuine intellectual – here's a review of his book on Fragile States and the Failings of Western Intervention   (also on the F2P blog)
- **Global Policy Journal (blog)** - **China's Evolving Security Footprint in Africa** – A Conversation with GGF 2030 fellow Hang Zhou

# Emerging Voices

## Healthcare equity analysis: applying the Tanahashi model of health service coverage to community health systems following devolution in Kenya

**R McCollum** (EV 2014) et al ; https://equityhealthj.biomedcentral.com/articles/10.1186/s12939-019-0967-5

*"**Universal health coverage (UHC) is growing as a national political priority, within the context of recently devolved decision-making processes in Kenya**. Increasingly voices within these discussions are highlighting the need for actions towards UHC to focus on quality of services, as well as improving coverage through expansion of national health insurance fund (NHIF) enrolment. Improving health equity is one of the most frequently described objectives for devolution of health services. Previous studies, however, highlight the complexity and unpredictability of devolution processes, potentially contributing to widening rather than reducing disparities. **Our study applied Tanahashi's equity model (according to availability, accessibility, acceptability, contact with and quality) to review perceived equity of health services by actors across the health system and at community level, following changes to the priority-setting process at sub-national levels post devolution in Kenya....**"*

## IHP (blog) - Joining hands and heads to reach the SDGs in West Africa – and how WANEL assists in this

https://www.internationalhealthpolicies.org/joining-hands-and-heads-to-reach-the-sdgs-in-west-africa-and-how-wanel-assists-in-this/

Blog by **Juliana Gnamon** (EV 204), Clément Méda (EV 2010) and other WANEL colleagues, related to a recent workshop in Dakar.