IHP news 556: Towards a global care economy – soon.

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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,

You’re probably well aware of my view of Davos as a so-called “global health event” by now. Earlier this week, an observer in my country—a wealth fund manager, mind you—labelled Davos “organized crony capitalism”, which is probably not too far from the truth. The people “inside” Davos tend to call it a ‘superior networking opportunity’, though😊. Paraphrasing Klaus Schwab, who thanked the Donald for “his multiple contributions to a more inclusive America” after his speech, fortunately, all this networking in Davos takes place with a view on “a better, more sustainable and more inclusive” world.

Anyway, I won’t really go into that in this week’s intro. Instead, I would like to draw your attention to one of the focal areas of this year’s Oxfam report on global economic inequality, published in the run-up to Davos: why we need, urgently, a global care economy (and feminist economics). A key quote perhaps: “Economic inequality is out of control. In 2019, the world’s billionaires, only 2,153 people, had more wealth than 4.6 billion people. This great divide is based on a flawed and sexist economic system that values the wealth of the privileged few, mostly men, more than the billions of hours of the most essential work – the unpaid and underpaid care work done primarily by women and girls around the world. …”

Or as my witty colleague would have it, in addition to “She Decides”, there’s also “She Works (mostly un(der)paid)”.

I humbly admit I don’t always pay enough attention to the urgent need for a care economy in this weekly intro (and I’m afraid that’s an understatement). A global shift in this respect is long overdue, however. If, as many observers say, 2019 was the year of ‘awareness’ (they mean, mostly, of the climate emergency), and 2020 should kick off ‘real action’, then this surely also goes for a global care economy.

Let’s make the link with global health, then. I understand 2020 is, among others, WHO’s “year of the nurse and midwife”. Not to mention the many female, and not exactly overpaid, community health workers. Now, how much of a no-brainer can it be, then, to link the care economy to the issue of global tax justice?

Winnie Byanyima (the new UNAIDS boss) clearly gets this. She spoke, not for the first time, truth to power in Davos, sensing rightly that the momentum is shifting worldwide. Unlike many others in global health power circles, she’s also not shy to admit the current economic model is broken. Too many other global health leaders in Davos, however, seem happy to just advocate for global health security & AMR, “talk the Davos talk”, or are there to protect their own organisation’s
replenishment. In short, although they’re there for very worthy causes, and the WEF has arguably been instrumental in setting up a few very important PPPs (GAVI, GF, CEP, ...), they certainly won’t upset the status quo on this planet. The arguments usually having been, ‘in Davos at least you can get some stuff done’ and ‘you can raise a key global health issue on the agenda’. Dr. Tedros and WHO are perhaps somewhere in the middle on this spectrum, being fond of investment framing in Davos (although for extremely important causes like PHC & UHC).

While I agree that PPPs do have their merits, certainly in global health, unfortunately, by failing to really challenge the status quo at a plutocrat event like Davos, these global health leaders help create a vicious feedback loop. The loop goes like this: yes, the killer stats from annual Oxfam reports are covered all over the globe, which is great in terms of raising awareness on global inequality, but unfortunately, it’s mostly radical right-wing parties now that manage to “cash” in on this widely shared feeling of global injustice. With global solidarity as the first victim, I’m afraid. There’s no way that can be a good thing for global health.

This is not the MDG era anymore. Similarly, the status quo is no option anymore. Not unequivocally saying this, in the year 2020, in a setting full of billionaires (119, combined net worth: 500 billion) and business CEOs is a grave strategic error. In fact, perhaps Davos is the very venue where you should say this, loud and clear, over and over again. At the risk of not getting invited next year, like Rutger Bregman 😞.

So here’s a suggestion for global health leaders if they insist on continuing to go to Davos, next year and the years after as well. Put the Global Action Plan on Health and Wellbeing for All (aka “the GAP”) into practice, also in Davos, and streamline your discourse on global tax justice – in line with the GAP’s intention to harmonize the work of international global health & development organisations. Speak with one voice, that is, Winnie Byanyama’s voice, on this all-important issue of global tax justice. That would certainly ‘accelerate’ many important global health agendas, I reckon. Just one final killer stat, for example, from the Oxfam report: "“Getting the richest 1% to pay just 0.5% tax on their wealth – just on their wealth, not their income – would create enough money over the next 10 years to pay for 117m jobs, in education, health and elderly care."

Capitalism

As it’s “Davos week”, let me also quickly come back on this notion of ‘capitalism has to go’ from last week (including, we better make some great progress on this during this decade). I know that sounds fairly naïve, even if a global survey just pointed out that Capitalism is now seen as doing more harm than good by a majority of people, all over the globe. Naïve, because most of us (including myself on most days) can more easily imagine a completely destroyed planet, than a world that has gone “beyond capitalism”. You hear all the time about capitalism being ‘the only game in town’ (Milankovic), and even adapting (or rather mutating) once again in the 21st century, with current trends like disruptive platform capitalism, financialized capitalism, rentier capitalism, surveillance capitalism, disaster capitalism, and, especially these days, Klaus Schwab’s beloved “stakeholder capitalism”.

That’s all true. However, Larry Elliot’s assessment in the Guardian was also spot on, comparing the world after WWII with now: “... whereas the threat in 1948 [i.e. for Western dominated capitalism] was the spread of communism, now it is the much greater danger that capitalism will eat itself.”
You all know what that would imply, given human beings’ sorry track record on this planet: war & destruction, 21st-century style. Decades ago, the Club of Rome already expected that social limits would present themselves earlier than biophysical limits (for example, exhaustion of resources). Nowadays, given how dire the climate emergency scenes are, I’m less sure about the sequence, but it’s safe to say that a full-blown implosion of capitalism (as compared to structured transformation) would turn very ugly, very soon. I notice UN Secretary-General Guterres is also a fan of the book Apocalypse these days, referring to the Four horsemen, so for the biblical fans among you: “either we tame the Beast or the Beast will devour itself” 😊. PS: Even capitalists seem to understand “they must do better”, a Guardian editorial gauged the mood in Davos, this week. And Patriotic Millionnaires went global with their message, in Davos, that we face the choice between (higher and fairer) ‘taxes’ or ‘pitchforks’.

To sum up, it’s about time global health leaders move to ‘the right side of history’ on global tax justice. Winnie’s side, I reckon. We’ll get a lot closer to a global care economy as well, then.


Enjoy your reading.

Kristof Decoster

Featured Article

Decentering power in Health Policy and Systems Research: theorising from the margins

Shehnaz Munshi (University of the Witwatersrand); Lance Louskieter (University of Cape Town); Kentse Radebe (University of Cape Town)

The field of Health Policy System Research (HPSR) offers us valuable theorisations and empirical work to guide us on how we can engage with the complex social, economic and political nature of health systems today. However, the field has not been able to fully grapple with the blind spots that are ever present in our reality. This is why we argue that more needs to be done to actively build the capacity of HPSR scholars to question the implied assumptions of the dominant discourse that helps us make sense of the world we inhabit.

There is no turning back

As African HPSR scholars, practitioners and advocates, we feel it is time to build our collective capacity to engage in critical decolonial studies in order to develop counter power strategies that can inform the reorientation of health systems to be responsive to the issues of African localities. While the importance of decolonial perspectives linked to HPSR and global health has emerged in conversations,
much of these discussions and ideas have been concentrated in well-resourced global north institutions such as Harvard University and Duke University (with an event coming up on 31 January). Contrary to what the colonial project has intended, as Africans, we have a responsibility to shift our focus continentally to build solidarity with efforts to break silos and divides that exist across diverse African contexts and to re-orient African knowledge, realities and people as valuable and legitimate knowledge bearers. Ndlovu-Gatsheni, a prominent professor at the University of South Africa, warns against the word decolonisation becoming a buzzword and a metaphor. Instead, he says “decolonisation has to remain a revolutionary term with theoretical and practical value”. As Africans, we need to foreground our narratives, engage authentically and honestly, and make space for difficult conversations about power and hegemonic epistemologies.

**Questioning implied assumptions and developing new tools and practices**

We offer three strategies as starting points to advance the conversation; framing, voice and space and praxis.

**Framing**

Decolonial scholar Grosfoguel explains how the **structure of knowledge** in westernized universities is built on the destruction of knowledge systems, “epistemicides”, at the start of the modern/colonial project. For example, the burning of libraries in places like Al-Andalus. This led to the creation of the hegemonic Westernised frame based on modernism founded on Descartes’ most famous phrase “I think therefore I am”. The fields of global health, HPSR, colonial medicine along with anthropology, sociology have been generated with a Eurocentric/North American frame within the terrain of the overall project of modernity and industrialisation. While many of these fields have tried to move away from their violent past, towards values of social justice, many fundamental issues continue to exist. Professor Maureen Mackintosh from Open University wrote a blog critiquing “global health” framings of low-and-middle-income countries’ populations, researchers, activists and professionals as recipients of in-bound knowledge and technologies, or as empirical fodder for Western theoretical framings. Madhukar Pai shared examples of how parachute research and global health consulting mimic colonial ways. Seye Abimbola unpacked some of the imbalances in academic global health and pointed to the problem of the foreign gaze. HPSR researchers who are taught in neoliberal universities with a eurocentric approach operate on a market driven approach that defines how knowledge is produced, generated, commodified and held. The knowledge held informs how health systems are organised - often as colonial institutions. Furthermore, the westernised university does not draw on indigenous ways of being and doing.

In order for African HPSR scholars to unsettle this form of colonality of knowledge, power and being, we need to name and engage explicitly with the hidden powers and different types of power that operate to reinforce colonality in our research. Walter Mignolo calls this process epistemic disobedience. Despite our good intentions, we need to understand the parameters in which we operate and think and recognise how they are informed by our lived experiences and positionality. This means we need to critically reflect and be reflexive on how our training, research and practices perpetuate the very systems of oppression underlying global health and colonial medicine. The practice of recognising our own frame and the frame of the authors we read, will enable us to move away from stereotypes that exist within ourselves about ourselves, and decentre “weaknesses” constructed by and through colonialism, patriarchy, racism, white/western/European/North American hegemony, heteronormativity, sexism and neoliberalism. Professor Helen Schneider provides one example of how HPSR researchers can reflect on positionality. In a section entitled “embedded researcher” (pg. 40) of her PhD, she recognises that where she is positioned shapes how she sees the “problem” of a health system and therefore the priorities for research. She shares her story and declares the multiple factors that shaped her “approach and orientation” to her research on...
Community Health Workers (CHWs) in South Africa. She invites us to recognise both her expertise and limits of her frame.

**Voice and space**

Maria Lugones, an Argentinian scholar, in her article “Towards a Decolonial Feminism” builds on the concept of coloniality of power, which Latin American scholar Quijano identified as the technologies of exploitation and violence, of the ‘colonial matrix of power that affects all dimensions of social life’ by arguing for modernity and coloniality to be understood as simultaneously shaped through specific articulations of race, gender and sexuality. Feminist theories offer the concept of intersectionality that can enable HPSR scholars to understand how the intersection of ‘the matrix of power’ leads to the erasure of colonised women, especially black women, from social life. This has implications on whose voice is centered, and who is taking up space in the conversation.

In “Can the subaltern speak?”, Indian scholar Gaytri Spivak examines the relationship between Western discourses and the possibility of speaking ‘of’ or ‘for’ the subaltern. Subaltern, a concept rooted in post-colonial theory, describes the unequal power dynamics and relationships that previously colonised nations and populations have with Western centres of power. They are socially, politically, and geographically outside and separate from the centre of colonial power, and when researchers speak for them, Spivak describes this as epistemic violence because this mode of knowledge production is built on the idea of the universal that is displaced from the subaltern “other”, where the “other” is often written out of history, rendered as complacent, docile and passive. HPSR researchers need to reflect on the consequences of taking up too much voice and space, when there is a distance between HPSR research and the reality on the ground. These consequences are evasion, misrepresentation and self-deception. For example, researchers on CHWs often fall into this trap when our recommendations reproduce inequalities and totally disregard intersections of gender inequality, race, education, professionalisation and occupational hierarchies within the sector and the social and economic burden of unpaid labour. As Kristof Decoster highlighted in a recent IHP intro, decent work for all should be a key priority, going far beyond working conditions of health workers only.

**Praxis**

What this translates into is bringing forward the works of Bhaba, Spivak, Gurminder and Kilomba who argue that marginalised and indigenous voices need to be centred and that we need to be creating other ways of making sense of our world. Importantly, those working to transform this space should not shy away from audaciously claiming themselves as the authority on their lived experiences. This way of engaging aligns closely with what Ndlovu Gatsheni terms the process of healing and reclaiming one’s humanity.

Therefore, we call for and seek to explore the possibilities of an explicit knowledge paradigm that frames decolonial research in HPSR, drawing explicitly on decolonial theories and approaches. Such a knowledge paradigm should include anti-racist, critical race, black consciousness, queer, indigenous and African feminists perspectives. Such a knowledge paradigm will contribute to the re-orientation of HPSR and frames an intentional political project that foregrounds the legitimacy of African knowledges, theories, and subjectivities that function to advance socially just health systems. Decolonizing HPSR is a conscientization project, a rehumanisation project and a re-imagination project, one that is historical and political in nature, and that calls for a new language and new ways of being as scholars and practitioners. As Africans, we need to be brave enough to leave behind pre-existing models which do not serve us and focus our energies on constructing new epistemologies that can lead to a socially just and equitable world.
Note: Together with decolonial scholars from the Global South, we plan to host an *organised session at the upcoming Sixth Global Symposium on Health Systems Research* (HSR 2020). The title of the abstract that’s been accepted is ‘What does a socially just health system look like: an imaginative space?’

**Highlights of the week**

**Davos (World Economic Forum) - 50th anniversary (21-24 Jan)**

In spite of this week’s intro, still a lot of news from Davos. The theme for Davos 2020 was: “Stakeholders for a Cohesive and Sustainable World”. Arguably, the video that went most viral this year was the one sparking Anand Giridharadas’ “I have Claustrophobia” tweet 😄.

We’ll first provide you with some general info & analysis on the Forum, and then go into the global health related news and statements. Finally, we also offer some other (non-global health) reports & news snippets.

**General backdrop, theme & analysis (ahead of the Forum)**

**Oxfam report – World’s billionaires have more wealth than 4.6 billion people**


Last week we already flagged the Global Risks report, with climate & environment issues all in the top 5.

At the weekend, then, Oxfam’s annual killer stat report on inequality was published ahead of Davos, this year focusing on the care economy. “The world’s 2,153 billionaires have more wealth than the 4.6 billion people who make up 60 percent of the planet’s population, reveals a new report from Oxfam today ahead of the World Economic Forum (WEF) in Davos, Switzerland.” ...

See also the Guardian - [World’s 22 richest men wealthier than all the women in Africa, study finds](https://www.theguardian.com/society/2020/jan/22/worlds-22-richest-men-wealthier-than-all-the-women-in-africa-study-finds)

“The world’s 22 richest men have more combined wealth than all 325 million women in Africa, according to a study. ... Startling scale of inequality laid bare as Oxfam report highlights chronically undervalued nature of care work ... ... When 22 men have more wealth than all the women in Africa combined, it’s clear that our economy is just plain sexist,” said Oxfam GB’s chief executive, Danny Sriskandarajah. ...”

**WEF - Who’s coming to Davos 2020, and everything else you need to know**

Just as a reminder.

“The theme for Davos 2020 is Stakeholders for a Cohesive and Sustainable World, with a focus on renewing the concept of stakeholder capitalism to overcome income inequality, societal division and the climate crisis. ... The meeting will be guided by the Forum’s recently released Davos Manifesto 2020, which builds on the original Davos Manifesto of 1973 and lays out a vision for stakeholder capitalism that addresses fair taxation, zero tolerance for corruption and respect for human rights.” As in, “ha ha ha” 😊

Some great overall analysis ahead of Davos:

Economist - Can the WEF keep its mojo?

NYT - In its 50th year, Davos is searching for its soul

“Critics say the gathering of elites is out of touch. But the World Economic Forum’s founder, Klaus Schwab, is still making the case that the annual event in Switzerland makes a difference.”

Global (& planetary) health at Davos

Some of the highlights were the 20th GAVI anniversary, more attention for global mental health in Davos, global health security & AMR obviously, statements from various global health leaders, ...
And climate change, of course.

HPW - Increase Healthcare Spending By 1% GDP, Save 60 Million Lives


“The World Health Organization’s Director-General called on global and national leaders meeting at the World Economic Forum in Davos, Switzerland to increase their national healthcare spending by an average of 1% of National Gross Domestic Product (GDP). A 1% GDP increase in spending would inject more than US $200 billion a year into community-based primary care systems, which WHO estimates will save over 60 million lives a year, as well as increasing the average global lifespan by 3.7 years by 2030, WHO Director-General Dr Tedros Adhanom Ghebreyesus said in remarks at an event hosted by the Graduate Institute in Geneva and International Geneva on Tuesday, the opening day of the four-day forum....”

“... His remarks highlighted the agency’s increased focus on health financing as key to expanding health services to more people worldwide. ...”

And the difference with UNAIDS: “In terms of where countries can find resources to finance the increase in health spending, the WHO Director General pointed to increased taxation on unhealthy products such as sugary drinks and alcohol, as measures that can “add to government revenue.” Global leaders also need to rein in the trillions of dollars spent on subsidies for unhealthy
Industries such as fossil fuels, which not only sap government funds but harm public health through climate change and air pollution emissions.

UNAIDS took it a step further, arguing that one root cause of social and economic inequality was the lack of access to health care, while gaps in public health financing could be met by “eliminating tax dodging” and implementing “progressive taxation” in a press release Tuesday.

It’s more than worth reading the UNAIDS press release in full: Health should not be a privilege for the rich—the right to health belongs to everyone

“Gaps in public financing for health can be met by eliminating tax dodging and implementing progressive taxation; health and development must be protected from the growing impact of debt.”

HPW - Mental Health – No Longer an Invisible Issue


“...The push for increased spending on preventative health services follows dawning recognition of the impact of non-communicable diseases – which are often chronic and crippling – on the global health agenda. Among those, WHO’s increased prioritization of mental health disorders was spotlighted in Davos during a special session with Indian actress and activist Deepika Padukone and moderated by the WHO Director-General....”

See also WEF - Business is a crucial partner in solving the mental health challenge (by a Wellcome Trust staff member). “Approaches to mental health problems are limited to two biomedical strategies. More than 100 different other approaches have been suggested. Employers must collaborate in working towards the next generation of treatment.”

Homeland Preparedness News - Public-private cooperation must improve to fill gaps in pandemic preparation, response

Homeland Preparedness News;

This news, from last week already, set the scene for the Global health security agenda in Davos. Together with the coronavirus outbreak, of course...”

“Pandemic preparedness collaboration among private businesses with the public sector is critically important at this time, say experts at the Johns Hopkins Center for Health Security, the World Economic Forum, and the Bill & Melinda Gates Foundation. “The next severe pandemic will not only cause great illness and loss of life but could also trigger major cascading economic and societal consequences that could contribute greatly to global impact and suffering,” the three organizations said in a joint statement released on Jan. 17....”

“...the World Economic Forum predicts that a cataclysmic pandemic would disrupt health, economies and society, and could cause an average annual economic loss of 0.7 percent of global GDP — or $570 billion. ... Last week, the World Economic Forum joined with the Bill & Melinda Gates Foundation and the John Hopkins Center for Health Security to release a Call to Action document
that proposes seven recommendations toward improving responses to such pandemics. Their recommendations were culled from a high-level pandemic exercise entitled Event 201, which the organizations jointly sponsored in October 2019 in New York City....”

Guardian - Lack of antibiotics in low income countries 'worsening superbugs threat'


“Many antibiotics are unavailable in poorer countries despite higher infection rates, exacerbating the threat of drug-resistant superbugs, according to a report to be presented to world leaders and the bosses of top pharmaceutical companies in Davos. The report, released by the Access to Medicine Foundation, an Amsterdam-based non-profit group, also shows that the number of new treatments being developed for common infectious diseases such as pneumonia, tuberculosis and gonorrhoea has fallen....”

See also the Telegraph - World 'precariously reliant' on handful of companies developing drugs to treat superbugs, report warns

Save the Children – GAVI at 20 years: Delivering on the promise of immunization: how far have we come?

https://blogs.savethechildren.org.uk/2020/01/gavi-at-20-years-delivering-on-the-promise-of-immunisation-how-far-have-we-come/

By Y Garcia-M et al. Among others, they highlight a new brief - Delivering on the Promise of Immunisation: How far have we come? Gavi at 20 years “ This brief looks at the impact of immunization and the importance of immunization equity through the assessment of five countries....”

See also Global Citizen - This Global Health Agency Just Turned 20. To Celebrate, It’s Going to Vaccinate 300 Million Children. Short report of the GAVI event in Davos.

“Gavi plans to have vaccinated 1.1 billion children and saved 22 million lives by the end of 2025 — but if the organization is going to succeed, it needs another $7.4 billion. Gavi launched its third replenishment at the Tokyo International Conference on African Development (TICAD) in Yokohama, Japan, in August 2019, but the official replenishment conference — which offers donors the opportunity to commit new funding — will be held in London in June this year. The health initiative is calling on donor countries, partners, and philanthropists to commit for the period of 2021 to 2025 so that Gavi can deliver 300 million vaccines during that four-year period. That alone would save 7 to 8 million lives....”
And a tweet: “Chancellor Merkel announces €600 mio for @gavi at #WEF20 #Davos! Thanks for the strong contribution to #globalhealth @BMZ_Bund @RegSprecher. We all count on a further top up from Germany in the coming months.”

The Business Alliance to End AIDS by 2030 is announced at the World Economic Forum

“The Business Alliance to End AIDS by 2030, a public–private coalition co-hosted by UNAIDS and GBCHealth, was announced today in Davos, Switzerland, on the margins of the World Economic Forum Annual Meeting. The Business Alliance to End AIDS brings together forward-looking companies to strengthen cross-sector collaboration, build on common values and create spaces for effective collaboration. It aims to provide businesses with the necessary tools and support needed from public sector partners to help realize the goal of ending AIDS by 2030....”

GF – Ending Tuberculosis is Good for Business - New Initiative Launched to End Tuberculosis in the Workplace

“At the World Economic Forum (WEF) Annual Meeting, a multi-sectoral group of partners today launched a new initiative – called Ending Workplace Tuberculosis – aimed at engaging major businesses in the fight against tuberculosis. Initiated by the World Economic Forum; Johnson & Johnson; Royal Philips; Fullerton Health; the Confederation of Indian Industry; the Global Fund to Fight AIDS, Tuberculosis and Malaria; and the Stop TB Partnership, this initiative will leverage the untapped potential of businesses in countries disproportionately impacted by TB to roll out awareness, detection and treatment programs, to reach millions of workers, their families and communities....”

Climate change news - Thunberg says only ‘eight years left’ to avert 1.5°C warming
https://www.climatechangenews.com/2020/01/21/thunberg-says-eight-years-left-avert-1-5c-warming/?utm_content=buffer1a40b&utm_medium=social&utm_source=twitter.com&utm_campaign=buffer

Climate change was a top priority at the Davos meeting for policymakers and business leaders though Donald Trump is pulling the United States out of the Paris Agreement. “Swedish teenage climate activist Greta Thunberg called on Tuesday for far tougher action to limit climate change, telling the World Economic Forum in Davos the world has just eight years left to avert severe warming....”
HPW - Davos Sees Climate Change Initiatives Launched – Defying Doomsayers


This great overview article first starts with a quick rundown of how leaders in Davos assess the climate emergency. Pretty much in agreement (bar Donald).

But see also the Guardian on the World Bank’s relative absence this time: World Bank chief’s Davos snub dashes hopes of climate consensus. “One source said Malpass’s decision not to attend the World Economic Forum reflected the Bank’s go-it-alone approach under his presidency... ... Those more sympathetic to Malpass said he was a shy man who did not know how to do smalltalk and hated events such as Davos.”

The HPW article then goes on, listing some of the new initiatives:

“...Despite being accused of doom mongering, Wednesday’s climate discussions were peppered with a series of bold new initiatives on climate action, many of them under WEF sponsorship. The goal was to foster action and greater climate optimism, their proponents stressed.... Christine Figueres, former executive secretary of the UN Framework Commission and a founding partner of the NGO, Global Optimism, was part of a panel that described the Net Zero Asset Owner Alliance initiative. The group, which includes some of the world’s largest insurance investors, has pledged to ensure that their portfolios are carbon neutral by 2050. The alliance includes major players in health insurance markets such as Swiss Reinsurance Company Ltd. as well as the Allianz Group....”

A major afforestation initiative was also launched, One Trillion Trees.

And there were also a bunch of initiatives related to the “New Decade of Action on Food Systems, Climate and Health”. “The Davos event also saw the launch of new initiatives to support a transition to healthier and more sustainable food systems, as part of a New Agenda on Food – Decade of Action ...”

Some other news snippets & reports from Davos

- The Guardian on a new ILO report - UN report: half a billion people struggle to find adequate paid work.
- Guardian - IMF: climate crisis threatens global economic recovery
- WEF - World Economic Forum asks all Davos participants to set a net-zero climate target

They all agreed, while boarding their private jets home.
Devex - **NGOs use Davos stage to protest sale of .org domain**

“Plans to sell the .org domain to a private equity firm have international NGOs worried that civil society, which is already faced with a closing civic space, will lose its digital commons. The executive directors of 11 international NGOs released an open letter Wednesday calling on the leaders of two nonprofits — the Internet Society and the Internet Corporation for Assigned Names and Numbers — to stop the sale of the .org domain....”

UNOPS (report) – Effective public spending key to achieving agenda 2030


“A new UNOPS-supported report published by The Economist Intelligence Unit concludes that less wasteful, more efficient government spending practices can free up resources to address a critical funding gap in achieving the Sustainable Development Goals (SDGs). The research essay — The future of public spending: Why the way we spend is critical to the Sustainable Development Goals — argues that the sheer size of public spending, typically between 15-30 per cent of gross domestic product, makes it a powerful force for change. Efficient public procurement allows governments to make substantial progress towards achieving their social, environmental and economic sustainability objectives....”

HPW - **Former British Prime Minister Tony Blair Appears At Tobacco-Supported Davos Panel**

There’s wrong, there’s very wrong, and then there’s Tony Blair 😊. “Former British Prime Minister Tony Blair appeared Wednesday at a World Economic Forum (WEF) side event hosted by The Economist Events, and supported by tobacco giant Philip Morris International (PMI), Health Policy Watch has learned....”

**Global taxation**

ICRICT (Independent Commission for the Reform of International Corporate Taxation) - Fix the global tax system to fix the inequality crisis


Press release ahead of Davos: “ICRICT to world leaders, chief executives and thinkers meeting in Davos for the #WorldEconomicForum: inequality is not beyond solutions. Push for a real reform of the tax system that would benefit both developing and developed countries.”

Check the proposals of the ICRICT out in this 10-pager, different from the OECD proposals, and also the Commission’s stance on the OECD “Inclusive Framework”.
**CGD (blog) - Sub-Saharan Africa and International Taxation: Time for Unilateral Action?**


“While sub-Saharan African (SSA) countries have made some progress in collecting more taxes domestically in the last 20 years, international tax issues remain a significant concern for these and other developing countries, reflecting aggressive tax planning by multinational enterprises (MNEs) and the international initiatives designed by G20-OCED countries in response. **Drawing on a new CGD paper on international taxation and developing countries, we argue here that the time has come for SSA countries, and developing countries in general, to take unilateral action.**”

**UK-Africa investment summit (London, 20 January)**

Devex - All the news from the UK-Africa Investment Summit


“The U.K.-Africa Investment Summit saw £2 billion ($2.6 billion) worth of investments committed to African businesses over the next two years from the United Kingdom government’s development finance institution. Infrastructure development was also a key theme of the event, with international development secretary Alok Sharma announcing a new mechanism for financing projects in five countries. Heads of state from 21 African nations and their delegations assembled in London on Monday, alongside U.K. politicians, African entrepreneurs, and representatives from finance, business, and development for the high-level summit. U.K. Prime Minister Boris Johnson welcomed them to the country, saying the U.K. was a “one-stop shop for investment and business,” and spoke of his ambitions for free trade with African nations. **The development event’s focus on trade and the private sector was not without controversy, however....**”

Devex - UK-Africa summit ignored gender, climate, and poverty concerns, advocates say


“Civil society campaigners have raised concerns over the U.K.-Africa Investment Summit’s commitment to gender equality — despite the government’s claims it would be a key focus of the event — and to tackling climate change. Backed by the U.K. Department for International Development, the summit was pitched as prioritizing the needs of women and girls while promoting trade and investment with the African continent....”

Excerpts: “...DFID set aside a budget of more than £15 million ($19.5 million) for Monday’s summit, where more than £6.5 billion worth of commercial deals were signed, including more than £1 billion in oil and gas deals in Tunisia and Kenya and the sale of £80 million worth of Airbus aircraft to Egypt, according to the government....”
“But GADN’s Efange expressed concerns. “Overwhelmingly, the attempt seems to be to make African women entrepreneurs, as if that is the silver bullet to addressing structural issues like gender inequality,” she said…”

Global Justice Now - Boris Johnson’s Africa summit condemned for ‘corporate hijack’ of aid budget


From a few days before the summit: “Global Justice Now is among twelve civil society groups who have written an open letter to the prime minister, Boris Johnson, condemning Monday’s flagship UK-Africa Investment Summit for using UK aid money to promote business opportunities for British corporations and the City of London. The event, at the Intercontinental Hotel in London’s Docklands, will be hosted by the prime minister, and will convene around 1,000 people including heads of state from up to 20 African countries, representatives from the City of London, UK businesses, business leaders from Africa, international financial institutions and some UK civil society invitees. It has a budget of £15.5 million from the Department for International Development. No representatives of African civil society groups have been invited. The letter, signed by twelve organisations including Global Justice Now, criticises the business focus of the summit, arguing that international development funds should be spent on fighting poverty and inequality, not attempting to “expand the UK’s economic and political power over the African continent”....”

See also Devex - NGOs protest as DFID foots bill for trade-focused UK-Africa Investment Summit

Other links: (The Telegraph) Foreign aid for coal mines and coal-fired power plants to end, Boris Johnson pledges

Economist - Boris Johnson woos Africa as post-Brexit Britain seeks a new role


Interesting big picture analysis (19 Jan), published just before the summit. “But his government is unsure whether aid, trade or old-fashioned diplomacy is the key.”

Wuhan coronavirus outbreak – No PHEIC (yet?)

We’ll try to keep it brief here, as developments in this crisis are going fast now, and we bet you all follow this closely anyhow. The virus is rapidly spreading in China now, and already popped up in 8 countries in total (Vietnam being one of the latest). As we went to press, there were already 25 deaths.

If you have little time, you might want to start with this great update from Cidrap News - WHO holds off on nCoV emergency declaration as cases soar (from this morning)
HPW - WHO Won't Declare Public Health Emergency Now Over Coronavirus Virus Outbreak; Wuhan, China On Lockdown


“The World Health Organization has decided not to declare the outbreak of a novel coronavirus in Wuhan China a “public health emergency of international concern” (PHEIC) at this moment in time – after its Emergency Committee of expert advisors said the move would be premature. “Now is not the time. It’s a bit too early,” said the chair of the WHO Emergency Committee, Didier Houssin, in a WHO press conference Thursday evening. The statement followed right after a second meeting of the expert committee in 24 hours....”


See also the Guardian - WHO urges global unity in fight against coronavirus outbreak

“The World Health Organization has called on the global community to work together to fight the new coronavirus that is causing an epidemic of viral pneumonia and deaths in China, but stopped short of declaring it a public health emergency of international concern. After the second day of meetings of the emergency committee, WHO’s director general, Dr Tedros Adhanom Ghebreyesus, said on Thursday that nobody should assume there was no risk that it would become a dangerous global epidemic. “Make no mistake, this is an emergency in China,” he said. “But it has not yet become a global health emergency. It may yet become one.”...

“A programme has already been launched to speed up work towards a vaccine. Cepi, the Coalition for Epidemic Preparedness Innovations, said it hoped to have a vaccine in clinical trials within 16 weeks....” For more on that, see CEPI.

And Stat News - WHO declines to declare China virus outbreak a global health emergency

“Didier Houssin, the chair of a WHO emergency committee, said Thursday that members remained divided about the need for a PHEIC, but that overall, they decided it was too early to recommend that WHO Director-General Tedros Adhanom Ghebreyesus declare one....”

Georgetown Global Health Experts Weigh In on WHO Decision to Not Declare PHEIC


They don’t agree. “Georgetown University global health security expert Rebecca Katz, PhD, MPH, and global health legal experts Lawrence Gostin and Alexandra Phelan, SJD, LLM, LLB, disagree with the decision...”
After a first day of meeting on Wednesday, this was the news (already then, it seemed the committee was split): “The World Health Organization has stepped back from declaring the growing viral pneumonia outbreak in China to be a public health emergency of international concern, saying its expert committee would meet again on Thursday to discuss more evidence from its teams on the ground. “This is an evolving and complex situation,” said Dr Tedros Adhanom Ghebreyesus, the director-general of the WHO. “Today there was an excellent discussion but it was also clear that to proceed we need more information. “The decision is one I take extremely seriously and one I am only prepared to make with appropriate consideration of all the evidence.””

On this first (Wednesday) meeting, see also Cidrap News - WHO decision on nCoV emergency delayed as cases spike and Science News – WHO panel puts off decision on whether to sound alarm on rapid spread of new virus (this article also provides the perspective of Alexandre Phelan – on whether the criteria for a PHEIC have been met).

Meanwhile, in China, panic is rising and Xi Jinping himself has issued a statement on it (that the Chinese government is “on it” and will stamp it down). “A sense of panic has spread in the central Chinese city of Wuhan as the city of 11 million was put on lockdown in an attempt to quarantine a deadly virus believed to have originated there. On Thursday, authorities banned all transport links from the sprawling city, suspending buses, the subway system, ferries and shutting the airport and train stations to outgoing passengers....”

And that was just the beginning, it seems. They also closed off the nearby cities Huanggang (with another 6 million citizens) and Ezhan as well. And many Chinese new year celebrations in Beijing were cancelled.

“They’re political theater, not good public health policy.”

Nature (Editorial) - Stop the Wuhan virus
https://www.nature.com/articles/d41586-020-00153-x
“Vigilance, preparedness, speed, transparency and global coordination are now crucial to stopping a new infectious disease from becoming a global emergency.”

Stat News - WHO raises possibility of ‘sustained’ human-to-human transmission of new virus in China


From earlier this week. That set all alarm bells off, together with the outbreak also affecting health workers, and a quick increase in number of cases in China (probably also due to better diagnostics), not just in Wuhan anymore, and hence the emergency meeting.

Stat News - It’s been sequenced. It’s spread across borders. Now the new pneumonia-causing virus needs a name

Stat News:

“The pneumonia-causing virus, which is spreading rapidly in China and beyond, is currently being identified as 2019-nCoV, shorthand for a novel or new (i.e. “n”) coronavirus (CoV) that was first detected in 2019. The disease it causes doesn’t yet have a name, either, though Wuhan SARS or Wu Flu are among of the options being thrown around on the internet. None of these is likely to be the virus’ or the disease’s permanent name. They almost certainly would be unacceptable to the Chinese, and to the World Health Organization, which discourages the use of place names in the naming of diseases. As for the virus, the longer it spreads the less novel it becomes.

“...So how to name it? And who gets to name it? In this case, a committee will be convened by the WHO to take up the challenge, according to officials there, though it isn’t clear when, or who will be on the panel, or whether the WHO intends the committee to name both the virus and the disease it causes. ...”

PS: “...Two candidates have already been rejected: South East Asia Respiratory Syndrome, or SEARS (for obvious reasons) and Chinese Acute Respiratory Syndrome, CARS, because “that kind of sounds stupid,” he said.”

FT Health - How China’s slow response aided coronavirus outbreak

https://www.ft.com/content/6996d92a-3ce2-11ea-a01a-bae547046735

(gated) “Controls on information may have hampered efforts to curb the spread of the disease. “

You do hear a bit more criticism of how China has handled the outbreak, now, in spite of them having learnt from SARS.

See also Yanzhong Huang in the NYT - Is China Setting Itself Up for Another Epidemic?
“The Wuhan outbreak shows that the Chinese government didn’t learn enough from the SARS epidemic.”

“...In the wake of that [i.e. SARS] debacle, the Chinese government does seem to have become more willing to share disease-related information with both its people and international health organizations. But the government continues its top-down, state-dominated approach in disease surveillance, reporting and response....”

Reuters - Virus exposes Beijing campaign to isolate Taiwan on global bodies

Tsai urges WHO to include Taiwan after virus case confirmed

“Virus exposes Beijing campaign to isolate Taiwan on global bodies.” “The emergence of a deadly new virus in China has ignited fresh anger in neighbouring Taiwan about how the island has been squeezed out of international bodies, including the World Health Organization.”

See also Foreign Policy - As Wuhan Virus Spreads, Taiwan Has No Say at WHO

Scientific American - Snakes Could Be the Original Source of the New Coronavirus Outbreak in China

Scientific American;

“A study of the virus's genetic sequence suggests similarities to that seen in snakes, but the origin must still be verified.” The virus might have jumped from bats to snakes. With the emphasis on “Might... “ The “snake” hypothesis is not taken very seriously (for example, by Helen Branswell). Or see Nature - Why snakes probably aren’t spreading the new China virus.

Nature (News) – New China virus: Five questions scientists are asking

https://www.nature.com/articles/d41586-020-00166-6

Worth scanning. (22 Jan)

The Hill – Coronavirus vaccine could begin human trials in three months


“A top official at the National Institutes of Health (NIH) said Wednesday that human trials for a vaccine to counter a new strain of coronavirus behind an outbreak of viral pneumonia in China could begin within three months. In an interview with Bloomberg Law, the director of NIH’s National Institute of Allergy and Infectious Diseases said that his agency is working with Cambridge, Mass.-based biotech company Moderna Inc. to develop a vaccine for the disease. “We’re already working on it,” Anthony Fauci told Bloomberg. “And hopefully in a period of about three months, we’ll be able to start a phase one trial in humans.”...”
Chatham House (Expert Comment) - New Coronavirus Outbreak: Concern Is Warranted, Panic Is Not
David Heymann et al; https://www.chathamhouse.org/expert/comment/new-coronavirus-outbreak-concern-warranted-panic-not

“Whenever there is a new infection in humans, such as the novel coronavirus, it is appropriate to be concerned because we do not know enough about its potential.”

Ebola DRC

While all global attention is on the coronavirus, the Ebola DRC outbreak is still anything but over. A few reads from this week:

UN News - Joint UN-Congolese strategy needed to address insecurity following deadly attacks

“Authorities in the Democratic Republic of the Congo (DRC) and the UN peacekeeping operation in the country, MONUSCO, are being urged to develop a comprehensive joint strategy to address insecurity in Beni territory, located in the east. The recommendation follows an independent assessment into deadly attacks allegedly carried out by the Allied Democratic Forces (ADF) armed group during the latter part of last year, which sparked violent protests against the Government and the UN....”

CBC - Canada's Ebola vaccine almost didn't happen, new study reveals


“In the paper, published in the Journal of Law and the Biosciences, Herder concludes “the private sector was not only unnecessary to its development, but also likely slowed it down.”...

Link: New Humanitarian - In Congo’s Ebola zone, misinformation persists even as cases slow

On the fight against misinformation & rumours about the disease.
Other Global Health Security news

NPR Goats & Soda - How Much Should The Public Be Told About Research Into Risky Viruses?

NPR Goats & Soda:

“U.S. officials are weighing the benefits and risks of proposed experiments that might make a dangerous pathogen even worse — but the details of that review, and the exact nature of the experiments, aren’t being released to the public. Later this week, officials are to hold a meeting in Bethesda, Md., to debate how much information to openly share about this kind of controversial work and how much to reveal about the reasoning behind decisions to pursue or forgo it....”

AMR

Lancet Editorial – The antimicrobial crisis: enough advocacy, more action

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30119-7/fulltext

“Global advocacy has been successful in mobilising attention to antimicrobial resistance (AMR) by governments and agencies worldwide. Indeed, in the past decade, there has been a steady flow of reports, action plans, declarations, initiatives, and resolutions on what should be done. Inadequate access to antimicrobials and AMR are formidable threats to both human and animal health. The World Economic Forum’s annual meeting in Davos (Jan 21–25) will raise the profile of AMR again, but has this global advocacy translated into global action? In a word, no.”

“On Jan 17, WHO published two reports on its clinical and preclinical antibacterial pipelines. Of 52 antibiotics in the clinical pipeline, 32 target WHO’s priority pathogens, but most have little benefit compared with existing antibiotics. ... ... Access to antimicrobials remains a substantial challenge, especially in low-income and middle-income countries (LMICs). According to the Access to Medicine Foundation, antibiotics are not being made widely available in LMICs through registration filings or supply strategies....”

“...Addressing antimicrobial resistance is a complex issue. The formal tripartite of WHO, the Food and Agriculture Organization, and the World Organisation for Animal Health must have a major role in identifying and promoting the implementation of feasible strategies to tackle AMR, eventually leading to a global governance mechanism whereby evidence-based interventions that are feasible and acceptable can be enshrined. One idea mooted is a legally binding global treaty akin to the Framework Convention on Tobacco Control....”
Guardian - Big pharma failing to invest in new antibiotics, says WHO


Important news from late last week. “Big pharma continues to walk away from investment in new antibiotics and there are alarmingly few useful new drugs in the pipeline to deal with the worsening crisis of antibiotic resistance, according to the World Health Organization. Two reports paint a bleak picture. ...”

See also UN News - Urgent need for ‘immediate’ solutions to combat drug-resistant infections, warns WHO

“Drug-resistant infections are on the rise as private investment in new antibiotic development declines, the World Health Organization (WHO) said on Friday.”

Or Cidrap - WHO calls antibiotic pipeline insufficient “In 2 reports, the WHO said most antibiotics in development offer little benefit over existing ones, and too few are truly innovative.”

Polio

Rotary - Rotary and the Bill & Melinda Gates Foundation extending fundraising partnership to eradicate polio


“Rotary and the Bill & Melinda Gates Foundation are renewing their longstanding partnership to end polio, announcing a joint commitment of up to $450 million to support the global polio eradication effort....”

“...Rotary is committed to raising $50 million per year over the next three years, with every dollar to be matched with two additional dollars from the Gates Foundation. This expanded agreement will translate into up to $450 million for polio eradication activities....”

Access to Medicines

MSF (Press Release) - Gavi must ensure more children get new, more affordable pneumonia vaccine

MSF;

Press release ahead of the celebration of 20 years GAVI in Davos. “A new vaccine against one of the world’s deadliest childhood diseases – pneumonia – is now available at a more affordable price
than existing vaccines. Vaccine funding organisation, Gavi, the Vaccine Alliance, has a $1.5 billion funding programme for the pneumonia vaccine, of which 80 per cent has already been paid to two pharma giants. MSF urges Gavi – and WHO, UNICEF and the Gates Foundation – to ensure that the remaining amount is spent to ensure access to this third, more affordable, vaccine to protect children.”

Quartz – African countries are trying to work together to stop a borderless fake drug problem

Quartz:

“...On Jan. 18, 2020, seven African heads of state, global public health partners and NGOS committed to collaborating and coordinating efforts against the trafficking of substandard and falsified medicines as well as other medical products under an agreement called the Lomé Initiative, coordinated by UK NGO Brazzaville Foundation. Presidents Faure Gnassingbe of Togo, Macky Sall of Senegal, Yoweri Museveni of Uganda and representatives of heads of states of Ghana, Congo, Niger and The Gambia all signed the political declaration and framework agreement to stem the fake medicine problem in Africa. The hope is naturally that the scope of the initiative will expand beyond those countries....”

KEI - January 2020: European Commission publishes its Report on the protection and enforcement of intellectual property rights in third countries


The European Commission sets its sights on strict patentability criteria, compulsory licensing, and parallel importation.

A tweet by Els Torreele (MSF): “Following the bad example of the US, will Europe now also bully countries for not imposing Pharma-friendly IP rules? While European countries face growing challenges with exorbitant medicine pricing, due to unchecked monopolies... It makes no sense.”

25th anniversary of the Fourth World Conference on Women

The UN Unveils 6 Themes in a Big Year Pushing for Women’s Rights

https://www.passblue.com/2020/01/20/the-un-unveils-6-themes-in-a-big-year-pushing-for-womens-rights/

“As the countdown to this year’s main events celebrating the 25th anniversary of the Fourth World Conference on Women has begun, UN Women has announced six themes to anchor the two Generation Equality forums to be held in May and in July. While many women’s groups applaud the broad themes, some have serious qualms about one topic in particular. The Generation Equality Forum is a civil society-led global gathering, officially announced last June, that will play a major role
in the Beijing+25 commemorations. They officially start with the annual Commission on the Status of Women, or CSW, in March at the United Nations, where a review of the progress and gaps of the 1995 Beijing agenda will be made to inform the two forums later in the year as well as a UN General Assembly session in September. The new “action coalition” themes are: gender-based violence, economic justice and rights, bodily autonomy and sexual and reproductive rights, feminist action for climate justice, technology innovation for gender equality and feminist movements and leadership....”

Mental Health

WHO – Guided self-help intervention reduces refugees' psychological distress and improves wellbeing in humanitarian crises


“First randomised trial of its kind finds multimedia guided self-help intervention can be delivered rapidly to large numbers of people in low-resource humanitarian settings by non-specialists with minimal training”

“A guided self-help approach that provides strategies for managing distress and coping with adversity is safe, and resulted in meaningful improvements in psychological distress and functioning compared to enhanced usual care over three months in female refugees living in a settlement in Uganda, according to a randomised trial involving almost 700 South Sudanese refugee women, published in Lancet Global Health journal. ... ... The study is the first randomised trial of a guided self-help group intervention in a low-resource humanitarian setting. Although longer follow-up is needed to determine the long-term effects of the intervention, the authors say that guided self-help could be a promising first-line strategy to address the vast gap in mental health support in areas where humanitarian access is difficult, such as South Sudan and Syria.

Global health governance

CGD (blog) - Transitioning Away from Aid: The Pressure is On to Kickstart Meaningful Global Dialogue

A Sabino, K Chalkidou et al; https://www.cgdev.org/blog/transitioning-away-aid-pressure-kickstart-meaningful-global-dialogue

“In low-and middle-income countries, the health sector is under pressure to expand the coverage of services while also increasing the domestic resources funding them. Countries are transitioning away from aid and coordinated action is critical to ensure this change does not hinder the progress made so far or undermine the vision of universal healthcare coverage.”
For the full paper on which this blog is based, see *Navigating aid transition in the health sector*: “An issues paper of priority areas and practical recommendations for donors, countries and the provision of technical assistance.”

**CGD (blog) - Why HTA and Pooled Purchasing Must Be at the Heart of Global Health Transitions**


“As middle income countries transition from donor support and increasingly use domestic funds to finance health programmes that have previously received substantial external aid, it is imperative that they build and use Health Technology Assessment capacities so that they can prioritise investment in good value technologies and services....”

**The Once and Future World of Global Health Governance**


You know you have to read this. “To meet twenty-first century geopolitical, national security, and climate challenges, global health policies must evolve.”

Quote: “…The unfavorable geopolitical, ideological, technological, and environmental conditions change the context in which global health governance operates. These conditions make global health less politically important within and between countries, weaken international approaches in favor of renewed emphasis on national interests, undermine the contributions that information technologies make to global health, and increase the epidemiological burdens governance mechanisms must shoulder....”

**Journal of Public Health Policy - Climate crisis, health equity, and democratic governance: the need to act together**


Not just relevant for the US, we reckon. “On Friday, 20 September 2019, over 4 million people worldwide participated in the youth-led Global Climate Strike. Emphasizing the dire impacts of the climate crisis on people’s health, planetary health, and health equity, participants called for politicians and those with power to listen to the scientists and to the evidence. But who are these politicians and what is the evidence regarding to whom they listen? In the United States (US), critical research documents how the public’s will is being subverted—and people and planetary health are being harmed—via changes to the ‘rules of the game’ that affect democratic governance. Health professionals, organizations, and institutions should encourage civic engagement—for themselves, their staff, members, and study participants—regarding: voter registration; being counted in the 2020 Census; countering partisan gerrymandering; and helping to build strong coalitions addressing profound links between climate change, health equity, and democratic governance.”
Coming up - World NTD Day (January 30)

Lancet Global Health (Editorial) - Taking the neglected out of neglected tropical diseases

https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(19)30529-7/fulltext

Editorial from the new Lancet Global Health February issue.

“In December, 2019, Nairobi, Kenya hosted the first international conference on neglected tropical diseases (NTDs) in Africa. The theme, “cross-border partnership towards achieving control and elimination of NTDs”, recognised that cooperation beyond national borders is crucial for success in the fight against NTDs. The importance of collaboration to control NTDs came to global attention in 2012, with the launch of the WHO Roadmap on NTDs 2012–20 and the London Declaration on NTDs, which saw governments, donors, multilateral agencies, non-governmental organisations, and pharmaceutical companies coming together to commit to control, eliminate, or eradicate ten of WHO’s priority NTDs by 2020. Jan 30 will mark 8 years since the London Declaration on NTDs. That same date will also mark the inaugural World NTD Day. … “

“... 2020 is set to be a pivotal year for NTDs as the first roadmap ends and WHO finalises the Roadmap 2021–30 within the framework of the Sustainable Development Goals. … While celebrating important successes in the scale-up of NTD control and elimination programmes, greater access to medicines, and that this group of diseases is no longer neglected as a global health issue, we must keep in mind that many of the 2020 targets are unlikely to be met. NTDs remain a consequence and cause of poverty. As long as socioeconomic and cultural inequities persist, neglected and marginalised populations will remain at risk, trapped in cycles of poverty. A new decade and a new roadmap bring new opportunities to end the suffering of neglected populations. World NTD Day invites us to regroup to #BeatNTDs: For good. For all.”

Global Health in 2020 (and beyond)

HPW - The World On Fire: Five Global Health Stories To Watch In 2020


(recommended) This two-part series of articles nicely complements last week’s WHO list of 13 top threats to global health in the next decade. Also focusing more on the politics/governance.

“...WHO has also listed the climate and health crisis as among the 13 top threats to global health in the next decade. Among the other threats highlighted by the agency – as well as by a range of experts interviewed by Health Policy Watch about the global health outlook for 2020, include: Emergence of new diseases at an increasing rate and intensity – as reflected in the Wuhan pneumonia outbreak; Stalled action on medicines price transparency – watch to see if European countries take a lead this year in adopting stronger measures; Failing medicines markets contributing to the rise of anti-microbial resistance (AMR) – when prices for other vital drugs, particularly antibiotics, dip too low; Non-communicable Diseases (NCDs) and Universal Health
Coverage – how the global “syndemic” of obesity, undernutrition and climate change creates barriers to achieving UHC....”

The first article in the series focuses more on climate change & health; the second article more on the other 4 issues. See part 2 (HPW) - The World On Fire: Five Global Health Stories To Watch In 2020 – Part II

Devex - Opinion: Predictions 2020 — what will shape reproductive health issues in the coming year?

“We predict the following eight issues and trends in the reproductive health space will impede and facilitate access to and use of contraceptives and safe abortion products and technology:....”

Planetary health

Guardian - Climate refugees can't be returned home, says landmark UN human rights ruling

“It is unlawful for governments to return people to countries where their lives might be threatened by the climate crisis, a landmark ruling by the United Nations human rights committee has found. The judgment – which is the first of its kind – represents a legal “tipping point” and a moment that “opens the doorway” to future protection claims for people whose lives and wellbeing have been threatened due to global heating, experts say....”

See the press release of the UN Human Rights Committee - Historic UN Human Rights case opens door to climate change asylum claims

Nature Sustainability - Feeding ten billion people is possible within four terrestrial planetary boundaries
D Gerten et al; https://www.nature.com/articles/s41893-019-0465-1

“Global agriculture puts heavy pressure on planetary boundaries, posing the challenge to achieve future food security without compromising Earth system resilience. On the basis of process-detailed, spatially explicit representation of four interlinked planetary boundaries (biosphere integrity, land-system change, freshwater use, nitrogen flows) and agricultural systems in an internally consistent model framework, we here show that almost half of current global food production depends on planetary boundary transgressions. Hotspot regions, mainly in Asia, even face simultaneous transgression of multiple underlying local boundaries. If these boundaries were strictly respected, the
present food system could provide a balanced diet (2,355 kcal per capita per day) for 3.4 billion people only. However, as we also demonstrate, transformation towards more sustainable production and consumption patterns could support 10.2 billion people within the planetary boundaries analysed. Key prerequisites are spatially redistributed cropland, improved water–nutrient management, food waste reduction and dietary changes.”

Lancet Editorial – Doctors and civil disobedience
https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30120-3/fulltext

The Lancet’s view on civil disobedience. For example, in Extinction Rebellion.

BMJ Editorial – Investing in humanity: The BMJ’s divestment campaign
K Abbasi et al; https://www.bmj.com/content/368/bmj.m167

“...With this editorial, we launch a campaign for divestment from fossil fuels. Our campaign is aimed at health professionals and medical organisations, since divestment is one way of exerting influence on politicians and industry on behalf of our patients and the public. An immediate objective of the campaign is to gain commitments from health professionals and medical organisations to divest from fossil fuel industries. Our long term ambition is that those commitments will be acted on in order to influence politicians and industry....”

Scientific publishing

Lancet editor-in-chief calls for ‘activist’ journals

At a conference in Berlin (a few weeks ago), “Richard Horton said periodicals can no longer sit ‘passively waiting’ for submissions and should instead focus on issues such as the UN Sustainable Development Goals.”

“...“The journal as we’ve known it, I think, is coming to its end,” Dr Horton told the Academic Publishing in Europe conference. “What we now need to do is to reinvent the idea of the scientific journal that needs to be more activist in its engagement with the challenges of society.” ...”

Lancet Offline – Scientific publishing—trust and tribulations
https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30152-5/fulltext

Horton discusses some of the latest actions in the (rapidly changing) scientific publishing debate (and accelerating shift in power between funding bodies and publishers), and more in particular what was said at the annual Academic Publishing meeting in Europe, held in Berlin.
He indicates that both sides seem to seek an accommodation. But it’s a fragile equilibrium.

**10th Emerging Voices anniversary & EV Facebook Watch party (coming up - 28 Jan)**

- Check out the short Youtube video, giving some of the highlights of the past 10 years, and 6 different EV ventures already! [EV 10th anniversary](#)

- We also want to flag an upcoming FB Live chat (28 January, 6 pm CET). The video will be uploaded on to Facebook as a watch party. For all questions you still might have for your EV application for the Dubai EV venture, will be moderated by Shakira Choonara (EV 2014), and also feature a number of EV alumni panellists.

**Human Resources for Health**

Public-Private Collaboration Commits to Accelerate Access to Health Services in Africa, Reaching 1.7 Million People

[Global News Wire](#);

“Johnson & Johnson, Lilly, Novartis, Pfizer, GSK and the Bill & Melinda Gates Foundation have joined forces with Last Mile Health and Living Goods to increase access to community-based primary healthcare for nearly 1.7 million people in up to six African countries, as part of their shared commitment to accelerate universal health coverage. The Health Worker Training Initiative is a three-year investment, generously matched by The Audacious Project, and totals USD $18 million....”

**Digital health & Artificial intelligence**

HHR - A Democracy Deficit in Digital Health?


In line with Ilona Kickbusch’ blog in BMJ from last week.

You might also want to check out a new Lancet Comment - [An ethically mindful approach to AI for health care](#) (by J Morley et al)

“Health-care systems worldwide face increasing demand, a rise in chronic disease, and resource constraints. At the same time, the use of digital health technologies in all care settings has led to an expansion of data. These data, if harnessed appropriately, could enable health-care providers to target the causes of ill-health and monitor the effectiveness of preventions and interventions. For this
reason, policy makers, politicians, clinical entrepreneurs, and computer and data scientists argue that a key part of health-care solutions will be artificial intelligence (AI), particularly machine learning. AI forms a key part of the National Health Service (NHS) Long-Term Plan (2019) in England, the US National Institutes of Health Strategic Plan for Data Science (2018), and China's Healthy China 2030 strategy (2016)....”

Some key papers and reports of the week

Review of International Political Economy - Special Issue on Political Economies of Global Health

Edited by S Sell & O Williams; https://www.tandfonline.com/toc/ripp20/current

Brand new collection in Review of International Political Economy, edited by Susan Sell and Owain Williams. With some really excellent stuff in there.

Do start with the introduction - Health under capitalism: a global political economy of structural pathogenesis.

Among others, we also enjoyed Globalization and health: political grand challenges (by Ted Schrecker); Neoliberal regime change and the remaking of global health: from rollback disinvestment to rollout reinvestment and reterritorialization (by M Sparke); The somatic-security industrial complex: theorizing the political economy of informationalized biology (you know we just can’t resist terms like ‘somatic-security industrial complex’ 😊 (by R Hester & O Williams); ...

Lancet Global Health – February issue

https://www.thelancet.com/journals/langlo/issue/current

Apart from the Editorial on NTDs (see above), and the usual abundance of great articles, we also want to flag this Letter on polio in Pakistan:

Why is polio still here? A perspective from Pakistan (by R J Asghar)

Excerpts:

“In 2018, the independent monitoring board of the Global Polio Eradication Initiative reported that it felt the situation in Pakistan has not improved since the gains achieved in 2017 and that the programme in Pakistan is stalling. It also highlighted one of the key issues, which is crucial in the success or failure of the programme but is not openly talked about; the polio eradication programme is considered a foreign programme in some areas of Pakistan as local leaders are not seen leading it. In their absence, foreign technical staff are the ones seen by communities. Further, when one ventures beyond the streets and inside the polio programme offices, they find international technical staff developing strategies and supervising implementation. ... ... What we need in Pakistan is to accept that polio eradication is not solely the domain of international agencies, the
government of Pakistan should also take ownership. Real ownership comes with local funding, local strategy development, and political leadership at the forefront. ...”

Book - Global Health Priority-Setting

Edited by Ole Norheim et al.

The authors discuss a new framework for global health priority-setting that includes and goes beyond cost-effectiveness. “Presents ethical reflections and a new framework for how to think about priority setting in health for countries that want to achieve Universal Health Coverage and the Sustainable Development Goals for health and reduced poverty...”

PS: you might also want to check out another book - Leading Health Indicators 2030: Advancing Health, Equity and wellbeing.

Health Research Policy & Systems - A scoping review of the uses and institutionalisation of knowledge for health policy in low- and middle-income countries

“There is growing interest in how different forms of knowledge can strengthen policy-making in low- and middle-income country (LMIC) health systems. Additionally, health policy and systems researchers are increasingly aware of the need to design effective institutions for supporting knowledge utilisation in LMICs. To address these interwoven agendas, this scoping review uses the Arskey and O’Malley framework to review the literature on knowledge utilisation in LMIC health systems, using eight public health and social science databases..... ... The majority of articles in this review presented knowledge utilisation as utilisation of research findings, and to a lesser extent routine health system data, survey data and technical advice. Most of the articles centered on domestic public sector employees and their interactions with civil society representatives, international stakeholders or academics in utilising epistemic knowledge for policy-making in LMICs. Furthermore, nearly all of the articles identified normative dimensions of institutionalisation. While there is some evidence of how different uses and institutionalisation of knowledge can strengthen health systems, the evidence on how these processes can ultimately improve health outcomes remains unclear....”

European Journal of Public Health - Bringing the commercial determinants of health out of the shadows: a review of how the commercial determinants are represented in conceptual frameworks
Important short read.

“The term ‘commercial determinants of health’ (CDOH) is increasingly focusing attention upon the role of tobacco, alcohol and food and beverage companies and others—as important drivers of non-communicable diseases (NCDs). However, the CDOH do not seem to be clearly represented in the most common social determinants of health (SDOH) frameworks. We review a wide range of existing frameworks of the determinants of health to determine whether and how commercial determinants are incorporated into current SDOH thinking…”

“Overall, descriptions of commercial determinants are frequently understated, not made explicit, or simply missing. The role of commercial actors as vectors of NCDs is largely absent or invisible in many of the most influential conceptual diagrams. Our current public health models may risk framing public health problems and solutions in ways that obscure the role that the private sector, in particular large transnational companies, play in shaping the broader environment and individual behaviours, and thus population health outcomes.....”

Development & Change - Neoliberalism, Authoritarian Politics and Social Policy in China


“This article explores the relationships among neoliberalism, social policy expansion and authoritarian politics in contemporary China. It argues that in the era of neoliberalism, rising new right and authoritarian governments, the Chinese Communist Party has sought to retain power by shifting politically to the right and promoting neoliberal-looking economic policies. These policies have raised average living standards but also increased insecurity for most of the Chinese population, while new social policies have facilitated marketization. Social policy expansion includes minimal cash transfers as well as social old-age and health insurance for hitherto excluded sections of the population. These policies have begun to erode long-standing urban–rural segregation, but they have added new, underfunded, social programmes rather than widening participation in existing ones, re-segregating provision so that urban elites and formal sector workers enjoy much more generous provisions than many people working informally and those without work. These social policies’ most significant dark sides thus include compounded income inequalities and the segmentation and stigmatization of the poorest. Authoritarian controls have enabled the Communist Party to avoid redistributive policies that would undermine its urban support, so that politics in China differ from the right-wing populism of new, anti-establishment authoritarian regimes.”

Globalization & Health - Is countries’ transparency associated with gaps between countries’ self and external evaluations for IHR core capacity?


“This study aims to evaluate the gap between countries’ self-evaluation and external evaluation regarding core capacity of infectious disease control required by International Health Regulations and the influence factors of the gap....”
Conclusion: “Our study result indicated that countries’ transparency represented by CL status (i.e. civil liberties) do play a role in the gap between IHR and JEE scores. But HDI status (Human Development Index) is the key factor which significantly associated with the gap. The main reason for the gap in the current world is the different interpretation of evaluation of high HDI countries, though low CL countries tended to over-scored their capacity.”

The Journal of Law, Medicine & Ethics – Launch of column on global health law

L Gostin & B M Meier;

Cfr a tweet by B Meier: “The Wuhan Coronavirus outbreak #nCoV2019 raises an imperative for #PublicHealthLaw to address #GlobalHealth threats. To meet this imperative, @LawrenceGostin and I have launched a quarterly #JLME column on #GlobalHealthLaw. Read our opening column...”

Some blogs & mainstream articles of the week

Devex - Humanitarianism is a 'fallen angel,' says MSF president

Poignant must-read from late last week.

“Humanitarian work has become increasingly challenging as it has lost the widespread support it once enjoyed, the president of Médecins Sans Frontières has said. For humanitarian organizations, “we’re living in this era of the ‘fallen angels,’” Dr. Christos Christou told Devex in an interview. “When you try to build fences or you pretend that the problem is not yours, then what you create is ultimately even more risky.” “Societies were traditionally donating and supporting us, and many others like us, to help people in neglected corners around the world. Now the problem has come inside these societies [that were donating]. They have been split, and they don’t all support what we do,” he said....”

Lancet World Report - Humanitarian crises: needs grow as health funding falls
https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30153-7/fulltext

“Global humanitarian needs are expected to escalate in 2020, but the widening gap in aid funds earmarked for health is causing concern. John Zarocostas reports.”

Tax Justice Network - IMF: shrink the financial sector to reduce inequality

“The IMF has just published a new Staff Discussion Note entitled “Finance and Inequality,” by Martin Čihák and Ratna Sahay. The shortest summary of its conclusions is: too much finance makes
countries more unequal. And in the words of the IMF’s new Managing Director Kristalina Georgieva, introducing the study, rising inequality: is reminiscent of the early part of the 20th century — when the twin forces of technology and integration led to the first Gilded Age, the Roaring Twenties, and, ultimately, financial disaster. …”

... This is the latest in a now-hefty body of academic research supporting the finance curse thesis: the apparently paradoxical idea that “too much finance can make you poorer.” In other words, countries need to develop financial sectors, but only up to an optimal point, and if finance grows beyond this point it tends to harm the economy and society that hosts it. Many western economies passed this point long ago.…

Open Democracy – Can reparations help us to re-envision international development?

P Lukka: https://www.opendemocracy.net/en/transformation/can-reparations-help-us-re-envision-international-development/

“Reparations activism links today’s vast inequalities with the enormous culpability of colonialism.”

Project Syndicate – Closing the SDG Gap

Kevin Watkins (Save the Children); https://www.project-syndicate.org/commentary/davos-closing-the-sustainable-development-goals-gap-by-kevin-watkins-2020-01

Kevin Watkins’s assessment on the SDG decade of action: “…This is the decade of no return for the climate emergency. Failure to price carbon out of the world’s economies, safeguard carbon sinks, and – critically – protect the world’s poor against the effects of global warming that are now irreversible will first slow, and then stall and reverse, gains in poverty reduction, nutrition, and health…. ” However, “Nothing would do more to bring the SDG targets within reach than a concerted drive to narrow the social disparities currently acting as a brake on progress. … … Greater equity is the rocket fuel for achieving the SDGs. Instead of issuing vague pronouncements about “leaving no one behind,” governments should report on how quickly they are reducing inequalities.”

F2P blog - Why do some bits of the State function, even in Messed Up Places?
Review of ‘The Politics of Public Sector Performance’


Review of a new book. “The Politics of Public Sector Performance, edited by Michael Roll, brings together some fascinating research on ‘Pockets of Effectiveness’ in developing countries. PoEs are public organizations that ‘deliver public goods and services relatively effectively … scattered islands in seas of administrative ineffectiveness and corruption.’…”

Times - Restrict researchers to one paper a year, says UCL professor

“Uta Frith says limit would force academics to focus on quality over quantity... **Now a former president of the British Science Association has suggested a radical proposal to combat this problem: restricting researchers to just one scholarly paper a year....**” Sounds lovely.

### Some tweets of the week

A few tweets related to Davos:

- **Jeremy Farrar**: “There is a very real risk that #AMR drug resistant infections slip off the agenda - politically, access, behaviour, regulation, R&D, stewardship, incentives and funding.”

  + a reply to his tweet: “AMR community was extraordinarily lucky 4/5 years ago to have personal leadership from heads of govt - e.g. Cameron, Obama, Merkel. This gave topic 'stardust' needed to get top of agenda. Challenge now is keeping it there w/out such high level support...”

- **Richard Horton**: “For all global health friends in Davos, it would be good to know what is actually being achieved. (Not only including selfies with the great and not so good.)”

- “Well done @DrTedros ! During the Geneva Day at #Davos2020, @WHO General Director announced the creation of a panel of economists to advance universal #Health coverage #HealthForAll”

Finally, a Tweet by G Kallis: **“21st century economics, unlike 19th century economics, should help us understand how to prosper without growth.”**

### Global health events & announcements

- Tweet dr Tedros (16 Jan) on a framework agreement between WHO & France:

  “An honour to sign this agreement with #France FRe on strengthening our collaboration on important shared priorities. My thanks to Minister @JY_LeDrian & Director Fabien Penone, @francediplo_EN ; @agnesbuzyn, Minister of Health; @VidalFrederique, Minister @sup_recherche France ONU Genève.”

  “Signature by the @WHO Director of the FranceFReWHO framework agreement for 2020-2025:

  **These are our 3 main priorities:** ☑️ strengthen health systems ☑️ prepare for health emergencies

  ☑️ launch of the World Health Academy in Lyon”
Global governance of health

Devex - Europe's Africa strategy déjà vu


(gated) “New European Commission President Ursula von der Leyen wants a new Africa strategy presented within her first 100 days in office — but insiders are urging her to take more time.”

Washington Post – The U.S. is pushing Latin American allies to send their Cuban doctors packing — and several have

Washington Post:

“... the Trump administration is targeting the [Cuban] government’s signature medical brigades, urging U.S. allies to cancel their health cooperation agreements and send their Cuban doctors packing. At least four Latin American countries have done so — another blow to the island as it struggles under tightening U.S. sanctions....”

Q&A: New MSF president Christos Christou sets out his leadership priorities


(gated) “MSF's new president Christos Christou sits down with Devex to discuss activism, sexual harassment, and cultural change.”

Guardian - IMF boss says global economy risks return of Great Depression


“The head of the International Monetary Fund has warned that the global economy risks a return of the Great Depression, driven by inequality and financial sector instability. Speaking at the Peterson Institute of International Economics in Washington, Kristalina Georgieva said new IMF research, which compares the current economy to the “roaring 1920s” that culminated in the great market crash of 1929, revealed that a similar trend was already under way. While the inequality
gap between countries had closed in the last two decades, it had increased within countries, she said, singling out the UK for particular criticism....”

Science (Editorial) – Do bans help modern public health?

L Gostin; Science;

“... There are no easy answers, but strict regulation of unsafe products is a more flexible tool to decrease behavioral risks, while avoiding social harms (a black market or discriminatory enforcement). Regulations are often more politically viable than bans, which raise concerns about paternalism and the “nanny state.” ...

BMJ blog - The prevalence of industry funding of patient groups

C Colombo; BMJ Opinion;

Linked to a new BMJ systematic review on this topic, see Industry funding of patient and health consumer organisations: systematic review with meta-analysis

Conclusion: “In general, industry funding of patient groups seems to be common, with prevalence estimates ranging from 20% to 83%. Few patient groups have policies that govern corporate sponsorship. Transparency about corporate funding is also inadequate. Among the few studies that examined associations between industry funding and organisational positions, industry funded groups tended to have positions favourable to the sponsor. Patient groups have an important role in advocacy, education, and research, therefore strategies are needed to prevent biases that could favour the interests of sponsors above those of the public.”

UHC

First, check out the latest UHC 2030 newsletter - among others with an update from the UHC 2030 civil society engagement mechanism (CESM).

HP&P - Understanding the impacts of NPM and proposed solutions to the healthcare system reforms in Indonesia: the case of BPJS

“This study critically evaluates the adoption of a universal healthcare system recently introduced by the Indonesian government in 2014. Our study is driven by the lack of critical analysis of social and political factors and unintended consequences of New Public Management, which is evident in the healthcare sector reforms in emerging economies. This study not only examines the impact of economic and political forces surrounding the introduction of a universal health insurance programme in the country but also offers insights into the critical challenges and undesirable outcomes of a fundamental reform of the healthcare sector in Indonesia. Through a systematic and detailed review of prior studies, legal sources and reports from government and media organizations about the implementation and progress of an UHC health insurance programme in Indonesia, the authors find that a more democratic political system that emerged in 1998 created the opportunity for politicians and international financial aid agencies to introduce a universal social security administration agency called Badan Penyelenggara Jaminan Sosial (BPJS). Despite the introduction of BPJS to expand the health services’ coverage, this effort faces critical challenges and unintended outcomes including: (1) increased financial deficits, (2) resistance from medical professionals and (3) politicians’ tendency to blame BPJS’s management for failing to pay healthcare services costs. We argue that the adoption of the insurance system was primarily motivated by politicians’ own interests and those of international agencies at the expense of a sustainable national healthcare system. This study contributes to the healthcare industry policy literature by showing that a poorly designed UHC system could and will undermine the core values of healthcare services. It will also threaten the sustainability of the medical profession in Indonesia. The authors offer several suggestions for devising better policies in this sector in the developing nations.”

Value in Health - Economic Evaluation of User-Fee Exemption Policies for Maternal Healthcare in Burkina Faso: Evidence From a Cost-Effectiveness Analysis

Hoa Thi Nguyen, V Ridde, M de Allegri et al ;

“User-fee exemptions for maternal care services have been widely practiced and proven to increase the use of facility-based delivery in sub-Saharan Africa (SSA). The 80% reduction and 100% removal of the user fee for delivery care services in Burkina Faso are highly cost-effective and affordable interventions. It is worthwhile for Burkina Faso to switch from 80% reduction to complete (100%) removal of user fees for delivery care. Similar analyses should be done locally to identify whether it is worthwhile to implement user-fee exemptions in other SSA countries.”

Lancet World Report - Fears over plan to privatise India's district hospitals

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30117-3/fulltext

“Experts warn that the government's plan to privatise secondary care will seriously harm the health system. Dinesh C Sharma reports from New Delhi.”
Planetary health

Guardian - Oceans, biodiversity, deforestation: what's on the climate agenda for 2020?


Overview of the main global climate/biodiversity/deforestation events and meetings this year.

Foreign Policy – How climate change has supercharged the left

Adam Tooze: https://foreignpolicy.com/2020/01/15/climate-socialism-supercharged-left-green-new-deal/

"Global warming could launch socialists to unprecedented power—and expose their movement’s deepest contradictions. “

“The climate emergency is stirring radical politics across the world as a new spirit of environmental radicalism energizes left-wing politics. Most notably, the left wings of both the Democratic Party in the United States and the Labour Party in the United Kingdom have committed themselves to programs known as the Green New Deal. Across Europe, the Greens now rival right-wing populists in their political energy. For the established environmental movement, this surge in attention has come as something of a shock. The original green movement of the 1960s and 1970s had strong radical elements in its social and economic vision. But for much of the 1990s and 2000s, “Big Green” went mainstream. When it came to climate change, government regulation and investment were unfashionable. Market-based solutions focused on emissions trading and carbon pricing were the flavor du jour. Global climate negotiations became a giant diplomatic roadshow. The sudden mobilization from the left—with its calls for large-scale public investment in the green economy, bans on high-carbon industry, and nationalization of private energy interests—is a radical response to what is undeniably a dramatic situation. But the revived left faces both the old dilemmas of radical politics and the new challenges of a changed world."

Guardian - World’s consumption of materials hits record 100bn tonnes a year


“The amount of material consumed by humanity has passed 100bn tonnes every year, a report has revealed, but the proportion being recycled is falling. The climate and wildlife emergencies are driven
by the unsustainable extraction of fossil fuels, metals, building materials and trees. The report’s authors warn that treating the world’s resources as limitless is leading towards global disaster. The materials used by the global economy have quadrupled since 1970, far faster than the population, which has doubled. In the last two years, consumption has jumped by more than 8% but the reuse of resources has fallen from 9.1% to 8.6%....”

Science News - U.S. geoengineering research gets a lift with $4 million from Congress

https://www.sciencemag.org/news/2020/01/us-geoengineering-research-gets-lift-4-million-congress

“The top climate change scientist for the National Oceanic and Atmospheric Administration (NOAA) said he has received $4 million from Congress and permission from his agency to study two emergency—and controversial—methods to cool the Earth if the U.S. and other nations fail to reduce global greenhouse gas emissions. David Fahey, director of the Chemical Sciences Division of NOAA’s Earth System Research Laboratory, told his staff yesterday that the federal government is ready to examine the science behind "geoengineering”—or what he dubbed a “Plan B” for climate change....”

Infectious diseases & NTDs

FT - Scientists in race to protect humanity from future pandemics

https://www.ft.com/content/8521d81e-1c0f-11ea-81f0-0c253907d3e0

(gated) “New viruses are a threat but experts predict the old enemy influenza will be most deadly.”


Very neat big picture analysis. “Last year, 2019, was an eventful and “good news-bad news” year for both polio viruses and efforts to get rid of these nasty viruses that have been paralyzing and killing people for thousands of years....”

Quote: “... The need to continue using the OPV (oral polio vaccine) means that the global community has to figure out how to stop reverted OPV-derived polio viruses from emerging and
spreading. As the earlier WHO video showed, making sure that everyone is vaccinated can help do this. However, in places where vaccination rates aren’t high enough, the threat of vaccine-derived polio viruses remains a problem. Therefore, the Gates Foundation has been funding efforts to develop new OPV’s that have viruses that don’t revert to polio-causing forms as readily as the viruses in the current OPV. Two such vaccine candidates are now in Phase I and II clinical trials. So depending on how these trials go and how much data will be enough to re-assure people that these vaccine candidates are effective and safe, they may be available sometime soon....”

Devex - Are wearable devices the future of infectious disease surveillance?


From late last week. “In the future, surveillance for public health scares such as influenza could have an ally in new technology. A new study published today in The Lancet Digital Health journal reviewed deidentified data from 200,000 users of Fitbit — a wireless, wearable technology that keeps track of a person’s fitness activity — in several U.S. states. The researchers wanted to see whether data generated using the device could help predict the extent of influenza-like illness within a population....”

Lancet Infectious Diseases (Media Watch) - The Stockholm paradigm

https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(20)30006-2/fulltext

“Presenting a new evolutionary explanation of the emerging disease crisis, The Stockholm Paradigm: Climate Change and Emerging Disease by Daniel Brooks and colleagues pulls no punches. Climate change has opened Pandora’s box of unknown pathogens that could have an untold impact on humanity unless we act now. Emerging infectious diseases already cost a trillion US dollars a year. More than half of all species on the planet are parasites, 1400 of these infect humans, 58% of which have a zoonotic origin. And yet, less than 10% of extant parasites are documented. So, how are we to tackle the current rise in emerging infectious diseases?...”

In another Lancet Infectious Diseases article, you might also want to read Response to emerging infectious diseases: an African gaze.

“After writer Tony Morison introduced the concept of white gaze, Seye Abimbola defined the foreign gaze as the foreign audience whom African researchers are writing for. Abimbola mentioned that local researchers should ideally write for a local audience to ensure they remain consequential and not corrupted by the foreign gaze. In Socio-cultural Dimensions of Emerging Infectious Diseases in Africa: an Indigenous Response to Deadly Epidemics, Godfrey Tangwa and colleagues have described responses to emerging infectious diseases, including the Ebola virus disease outbreak of 2014–16, using an African gaze. The authors look at those outbreaks from different perspectives,
including clinical and socioeconomical aspects, but also their effect on governance, ethics, and policy...."

BMJ - Man bites dog: India's progress in tackling rabies

https://www.bmj.com/content/368/bmj.l6979

“With millions of stray dogs in India, controlling rabies in the subcontinent has proven a challenge. Kamala Thiagarajan says that building awareness, increasing vaccinations, better organisation, and an initial boost from a UK charity have led to improvements.”

The Conversation - Mosquito bites: widely available skin cream found to prevent the spread of deadly viruses – new research


“...our team of researchers has found a different approach that might be able to circumvent many of these issues. This solution is to target a common aspect of every single one of these infections: the body’s immune defence against viruses at the mosquito bite. Our research found that an immune-boosting skin cream can actually prevent infection from a wide range of these dangerous mosquito-borne viruses....”

AMR

Quick link:

Guardian - Cannabis compound could be weapon in fight against superbugs

“A compound made by cannabis plants has been found to wipe out drug-resistant bacteria, raising hopes of a new weapon in the fight against superbugs. Scientists screened five cannabis compounds for their antibiotic properties and found that one, cannabigerol (CBG), was particularly potent at killing methicillin-resistant Staphylococcus aureus (MRSA), one of the most common hospital superbugs....”
NCDs

**WHO - Smoking greatly increases risk of complications after surgery**


“Tobacco smokers are at significantly higher risk than non-smokers for post-surgical complications including impaired heart and lung functions, infections and delayed or impaired wound healing. But new evidence reveals that smokers who quit approximately 4 weeks or more before surgery have a lower risk of complication and better results 6 months afterwards. Patients who quit smoking tobacco are less likely to experience complications with anesthesia when compared to regular smokers. A new joint study by the World Health Organization (WHO), the University of Newcastle, Australia and the World Federation of Societies of Anaesthesiologists (WFSA), shows that every tobacco-free week after 4 weeks improves health outcomes by 19%, due to improved blood flow throughout the body to essential organs....”

See also UN News - [Smokers who quit one month before surgery reap benefits: UN health agency](https://www.un.org/en/news/error)

**Science (news) - WHO warning on vaping draws harsh response from U.K. researchers**


“New warnings about vaping issued this week by the World Health Organization have prompted strong pushback from public health experts in the United Kingdom, who charged that WHO was spreading “blatant misinformation” about the potential risks and benefits of e-cigarettes....”

**FT Health - CDC recommends avoiding e-cigarettes that contain THC**

[https://www.ft.com/content/90ba7a4-396f-11ea-a6d3-9a26f8c3cba4](https://www.ft.com/content/90ba7a4-396f-11ea-a6d3-9a26f8c3cba4)

(gated) “US health officials retreat from broad recommendation against vaping products. “
**Sexual & Reproductive / maternal, neonatal & child health**

**BMJ Global Health – Does economic growth reduce childhood stunting? A multicountry analysis of 89 Demographic and Health Surveys in sub-Saharan Africa**

S Yaya et al.; [https://gh.bmj.com/content/5/1/e002042](https://gh.bmj.com/content/5/1/e002042)

“There is mixed evidence and lack of consensus on the impact of economic development on stunting, and likewise there is a dearth of empirical studies on this relationship in the case of sub-Saharan Africa. Thus, this paper examines whether economic growth is associated with childhood stunting in low-income and middle-income sub-Saharan African countries....”

Conclusions: “**There was no significant association between economic growth and child nutritional status.** The prevalence of stunting decreased with increasing GDP per capita. This was more pronounced among children from the richest quintile. The magnitude of the association was higher among children from low-income countries, suggesting that households in the poorest quintile were typically the least likely to benefit from economic gains. The findings could serve as a building block needed to modify current policy as per child nutrition-related programmes in Africa.”

**Open Democracy - The false feminism of criminalising sex workers' clients**


“Feminist arguments against sex work are as influential as they are dangerous.” “**We asked sex worker rights groups and allies around the world to discuss what works and doesn’t work when arguing for the decriminalisation of sex work. This series reports what they said.”**

**Lancet Letter - Population-level impact of human papillomavirus vaccination – Authors' reply**


Author’s reply to a few Lancet letters on this issue.
Lancet Child & Adolescent Health – January issue

https://www.thelancet.com/journals/lanchi/issue/vol4no1/PIIS2352-4642(19)X0013-9

Meanwhile, the ongoing Lancet 2020 Campaign on Child & Adolescent health (see https://www.thelancet.com/campaigns/child-adolescent-health) features a number of articles on Youth detention collection. “A joint collection from The Lancet Child & Adolescent Health and The Lancet Public Health explores the health and wellbeing of adolescents exposed to criminal justice systems.”

Reuters - No sex, no babies: S.Korea's emerging feminists reject marriage

Reuters

“No dating, no sex, no marriage and no babies: two South Korean YouTubers who vow to stay single have caused uproar in the east Asian nation as it battles the world’s lowest fertility rate. The duo have gained celebrity status for their SOLOdarity channel - with some 37,000 followers in its first year - where they have compared marriage to slavery for women and criticised the tradition of fathers giving away brides as offensive....”

Bit drastic perhaps, but we reckon this movement could go global, with a bit of luck.

Human Resources for Health

AP - Billionaire’s cash helps Zimbabwe’s doctors back from strike

AP;

“Innovative” business model for the 21st century.

“A billionaire has offered to pay striking doctors in Zimbabwe to help end a months-long protest over grave hospital conditions as the economy crumbles, and a doctors’ group on Thursday said it was encouraging members to embrace the money and return to work. But Dr. Masimba Ndoro, vice president of the Zimbabwe Hospital Doctors Association, warned that “nothing much has changed” in the conditions at public hospitals that include the lack of basic items such as bandages and gloves....”
Miscellaneous

**CFR - Launch of Think Global Health**


“The Council on Foreign Relations (CFR) introduces *Think Global Health*, a multi-contributor website that examines how changes in health are reshaping economies, societies, and the everyday lives of people around the world.”

“...*Think Global Health is an initiative of the Council on Foreign Relations in collaboration with the Institute for Health Metrics and Evaluation at the University of Washington. Think Global Health was made possible by a generous grant from Bloomberg Philanthropies....*”

Cfr. a tweet: “Goal of @ThinkGlobalHlth is to demonstrate how #globalhealth is investment in societies and economies, not just as a form of humanitarian or emergency relief”.

**FT - Can we ever trust Google with our health data?**

https://www.ft.com/content/4ade8884-1b40-11ea-97df-cc63de1d73f4

Euhm, no? Well worth a read, though.

**Devex - Exclusive: Gates Foundation launches new agriculture-focused nonprofit**


“The *Bill & Melinda Gates Foundation is creating a new nonprofit to bring scientific breakthroughs to smallholder farmers whose yields are threatened by the effects of climate change. The Bill & Melinda Gates Foundation Agricultural Innovations, or Gates Ag One, will be based in St. Louis, Missouri, and led by Joe Cornelius, who is currently a director within the foundation’s Global Growth & Opportunity division....*”

**UN News - Rising inequality affecting more than two-thirds of the globe, but it’s not inevitable: new UN report**

“Inequality is growing for more than 70 per cent of the global population, exacerbating the risks of divisions and hampering economic and social development. But the rise is far from inevitable and can be tackled at a national and international level, says a flagship study released by the UN on Tuesday. The World Social Report 2020, published by the UN Department of Economic and Social Affairs (DESA), shows that income inequality has increased in most developed countries, and some middle-income countries - including China, which has the world’s fastest growing economy....”

See also the Guardian - Wealth gap widening for more than 70% of global population, researchers
find

Science news - The microbes in your gut could predict whether you’re likely to die in the next 15 years

https://www.sciencemag.org/news/2020/01/microbes-your-gut-could-predict-whether-you-re-likely-die-next-15-years

Guess that, like me, you don’t really want to know 😊.

“The microbes in our guts have been linked to everything from arthritis to autism. Now, scientists say they can even tell us about our future health. Two new studies find that our “microbiome”—the mix of microbes in our gut—can reveal the presence of many diseases better than our own genes can—and can even anticipate our risk of dying within the next 15 years....”

Emerging Voices

IJHPM - Handing the Microphone to Women: Changes in Gender Representation in Editorial Contributions Across Medical and Health Journals 2008-2018

Angela Chang (EV 2016) et al ; http://www.ijhpm.com/article_3743.html

“The editorial materials in top medical and public health journals are opportunities for experts to offer thoughts that might influence the trajectory of the field. To date, while some studies have examined gender bias in the publication of editorial materials in medical journals, none have studied public health journals. In this perspective, we studied the gender ratio of the editorial materials published in the top health and medical sciences journals between 2008 and early 2018 to test whether gender bias exists. We studied a total of 59 top journals in health and medical sciences. Overall, while there is a trend of increasing proportion of female first authors, there is still a greater proportion of male than female first authors. The average male-to-female first author ratio during the study period across all journals was 2.08. Ensuring equal access and exposure through journal editorials is a critical step, albeit only one step of a longer journey, towards gender balance in health and medical sciences research. Editors of top journals have a key role to play in pushing the
fields towards more balanced gender equality, and we strongly urge editors to rethink the strategies for inviting authors for editorial materials.”

International Health - Health inequality in the tropics and its costs: a Sustainable Development Goals alert


“It is known that health impacts economic performance. This article aims to assess the current state of health inequality in the tropics, defined as the countries located between the Tropic of Cancer and the Tropic of Capricorn, and estimate the impact of this inequality on gross domestic product (GDP)....”