IHP news 614: World TB Day & labour rights

(26 March 2021)

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,

Arguably, Covid-19 has somewhat ‘cannibalized’ this newsletter over the past year, but at last better times are coming. Indeed, being firm believers in ‘self-fulfilling prophecies’, we have decided to ban some of the (by now usual) Covid related content to the “extra” Covid section from now on. Slowly but irresistibly, we will again feature proper subheadings related to other global health causes (true, often still looked at through a Covid-angle). Who knows, seeing that it’s getting increasingly restricted room in this newsletter from now on, that damned pandemic might decide to just go away 😊. It helps, of course, if the global health week features ‘World Water Day’ and ‘World TB Day’ (and frankly, every day should just be a ‘Global Tax Justice day’😊!).

While we’re rooting for the implosion of Covid-19, unfortunately, many of us with chronic issues, “not very resilient families” or both, by now feel like the weary soldiers at the end of WW II who presumably also “really hated it to die in the last months of the war”. In many countries, we are anxiously awaiting for the vaccines to slowly “trickle down” (unless if you happen to live in Israel, US, UK), through some sort of wicked “PPPP” (pharma patent-profiteering from pandemic) scheme. And that’s just in the EU, the vaccination situation in most LMICs remains far more dire. Tedros nailed it on Monday, not for the first time: “The gap between the number of vaccines administered in rich countries, and the number of vaccines administered through COVAX is growing every day, and becoming more grotesque every day.” And that was before the worrying media reports on Covax delays.

But there’s more than Covid in this world. Lately, now that the entire world needs new social contracts for the post-Covid era (beyond the comforting company of cats & dogs who spiced up many’s miserable lockdown lives ), I’ve become encouraged by some of the battles taking place globally for more labour rights. Among others: (partial) legal victories for workers against platform corporations (eg. Uber, or more in general “the gig economy”), garment workers who booked a victory in their fight against wage theft during Covid-19 (PayUp) and of course the fight for a trade union at Amazon – considered by my (almost pathologically enthusiastic) Dutch colleague as ‘the beginning of the end’ for Jeff Bezos. Interesting to see by the way how some black activists in Alabama draw a straight line in their battle between the “free” labour from slavery times to the exploitation of employees (many of them black) in companies like Amazon. Not shying away from words like ‘White supremacy’ (meaning Jeff), in the process. We wish them well. (PS: In case you think this doesn’t pertain to you, do read this piece in Vox – “The uneasy intimacy of work in a pandemic year”: “How capitalism and the pandemic destroyed our work-life balance”.)

Enjoy your reading.

Kristof Decoster
Featu red Article

Yes, we have no bananas (but plenty of disasters otherwise)

Elena Vargas

It had been exactly one year since the last time I was in Honduras. I was honestly glad to enjoy the green landscape as the airplane landed in San Pedro Sula airport. Little did I know that my excitement was going to change into something more ominous, on my way to the hotel where I was about to spend my quarantine. It didn’t take long to notice entire families still camping on the central strip and on both sides of the 10-km road into Honduras’ economic capital.

Oh, Honduras! Of its glorious indigenous past only the lempira, its national currency, is a vague remembrance. Even before business tycoon Sam Zemurray financed a coup d’état in 1912, Honduras had already become the quintessential “banana republic”. Years of military rule and despair made it the bleakest country of Central America by the turn of the 80s (if I may believe Werner Soors, still a student globetrotter at the time).Appearances changed pretty fast when US president Reagan started pouring in massive amounts of money, to compensate for the presence of contra training camps along the Nicaraguan border. By the end of the 80s, Honduras had paved roads and fast-food chains all over. A couple of decades later, the country, home to 17% of the Central Americans, also had 60% of all regional AIDS cases. By 2012, Honduras was the most violent non-war country in the world with 20 murders a day, and San Pedro Sula holding the title of murder capital.

In addition to the violence, a series of climate disruptions shook the country, with hurricanes Eta and Iota as the most recent disasters (November 2020). Four months later, some families are still living in shelters after losing their homes, livelihoods and family members. A recent report indicated that Honduras is one of the countries most affected by extreme weather events between 1998 and 2017 worldwide. Both violence and climate change-related events (drought, hurricanes, floods, etc.) are among the main drivers of the massive migration from the so-called Northern Triangle (El Salvador, Honduras and Guatemala) over the last five years. The last attempt was in January this year, right after the hurricanes and just a few days before Biden took the oath of office as the 46th President of the United States. This latest caravan was made up of approximately 5,000-7,000 Hondurans who decided to flee from poverty and systemic violence, some hoping to reunite with family members already living in the United States.

The Eta and Iota hurricanes worsened the already dire situation of women and children, vulnerable to domestic and sexual violence that further increased due to COVID-19 confinement measures. On top of the violence exerted by maras (gangs), law reforms favour sexual abuse perpetrators by reducing jail time and making it more difficult for victims or their families to access justice. In January, Honduras voted in favour of a constitutional reform designed to prevent the legalization of abortion. Now one of the countries with the most restrictive abortion laws in the world, it is also among the ones with the highest teenage pregnancy rate (around 30% in rural areas). Even the emergency contraceptive pill is prohibited because it is thought to be abortive.

Once again, 2021 won’t be an easy year for Honduras. General elections will be held in November (as is the case in my home country, Nicaragua, south of Honduras). The previous elections turned turbulent in Honduras when claims of electoral fraud resulted in protests and violent repression. In the meantime, COVID vaccination is just getting started but people are not trusting the government nor the vaccine. The next hurricane season is expected soon while recovery from the past season is going slowly.
Still, there is room for hope. Notwithstanding the political polarization and the weak social fabric caused by social violence, I witnessed Hondurans organizing to help their neighbours and other people from most affected areas in the aftermath of the hurricanes, in the absence of an appropriate government response to disasters. Perhaps, after all calamities, things might change for the better after November - a hope I lost long ago for my own country.

Highlights of the week

World TB Day (24 March)

WHO - COVID-19 highlights urgent need to reboot global effort to end tuberculosis


“An estimated 1.4 million fewer people received care for tuberculosis (TB) in 2020 than in 2019, according to preliminary data compiled by the World Health Organization (WHO) from over 80 countries- a reduction of 21% from 2019. The countries with the biggest relative gaps were Indonesia (42%), South Africa (41%), Philippines (37%) and India (25%)....”

See also UN News – 1.4 million with tuberculosis, lost out on treatment during first year of COVID-19

And Cidrap News - World TB Day highlights challenges—and hope

Lancet Respiratory Medicine – Challenges and opportunities to end tuberculosis in the COVID-19 era


Good & short overview of current global picture. “...on World Tuberculosis Day, 2021, we reflect on the compelling evidence of the challenges that COVID-19 has created for tuberculosis control and look forward to opportunities for integrated strategies to address the COVID-19 and tuberculosis pandemics...”

HPW - New Oral MDR-TB Treatment Shows Positive Trial Results – Potential To Change Clinical Practice & Save Lives


“A first-ever clinical trial of a new, all-oral, treatment regime for multidrug-resistant tuberculosis (MDR-TB) has stopped enrolling patients after initial data provided positive results that the new treatment could potentially save thousands of lives, as well as improving peoples’ quality of life. Findings of the TB-PRACTECAL, Phase II/III clinical trial sponsored by Médecins Sans Frontières (MSF), were originally due to be reported in late 2021 or early 2022. But an independent data safety
and monitoring board found that one of the regimens being studied in the trial – bedaquiline, pretomanid, linezolid and moxifloxacin – has already shown itself to be superior to current care, which typically also involves the use of drug injections, since MDR TB is available to standard oral treatment formulations. More patient data would be extremely unlikely to change the trial’s outcome, the safety board determined. Findings Could Transform Treatment Of MDR-TB...”

BMJ GH - World TB day: a new opportunity to reimagine workplace health

M Reid, E Goosby et al; https://gh.bmj.com/content/6/3/e005601

“The COVID-19 pandemic is forcing employers around the world to do more to protect and maintain the health of their workforce. This renewed attention on workplace health provides a unique opportunity for the private sector to make investments that could improve outcomes for tuberculosis (TB), which prior to the COVID-19 pandemic, claimed more lives every year than any other infectious disease. With COVID-19, there is an opportunity to capitalize on new mandates to go beyond prior protective measures and implement better workplace TB control strategies. Addressing workplace risk of TB, especially in high burden countries must be a global priority if progress in TB control is to be restored.’’

PS: see also this WEF blog by P Stoffels: “The Ending Workplace TB initiative – launched in 2020 by the World Economic Forum, the Stop TB Partnership, the Global Fund, Johnson & Johnson, and others – leverages the potential of businesses worldwide to implement TB awareness, detection and treatment programmes reaching workers, their families and communities....”

Telegraph - We went all-out to tackle Covid-19 – TB needs the same approach


Must-read. Furin & Pai adapt the “Swiss cheese model” (see Covid) for ending TB.

Quote: “The model, developed by Ian Mackay, a virologist, uses the imagery of the large holes in Swiss cheese to illustrate the fact that a single layer of protection will not be enough to stop Covid-19. Because of the “gaps” in each “slice”, the coronavirus will always get through and therefore multiple layers of protection are needed to halt the pandemic. Today, everyone understands the need for isolation, masking, social distancing, testing, contact tracing, vaccinations, as well as medical care. Unfortunately, limited budgets, combined with the paternalistic and punitive approach to TB, dictated decades ago, deemed multiple layers of protection too difficult and not ‘cost-effective’ to implement. Espousing a colonial mindset, “experts” felt that TB – a disease that was seen to primarily affect the poor in the Global South – could best be addressed (and most cheaply be addressed) by tackling a single layer at a time. The result? Each year 10 million people become sick with TB and more than 1.4 million die....” Read what should be done instead.

HPW - New TB Screening Tools Combine X-Rays & AI

“Reversing decades of negative messages, the World Health Organisation is once again endorsing the use of X-rays as a TB screening tool in lower-income countries – this time in conjunction with the use of new artificial intelligence programmes that can read digital x-rays and identify suspected TB cases more accurately. ...”

And a few links:

- Devex - What’s holding up simultaneous testing of tuberculosis and COVID-19?

“More than a year into the coronavirus pandemic, countries have witnessed a decline in the number of people diagnosed and treated for tuberculosis. But public health experts and health organizations are now identifying efforts being made in countries to reverse this trend, including screening and testing patients for TB who test positive for COVID-19....”

- BMJ GH Editorial - Increasing tuberculosis burden in Latin America: an alarming trend for global control efforts.

World Water Day (22 March) & NTDs

WHO - Water, Sanitation and Hygiene: closing the gap to end neglected tropical diseases

https://www.who.int/news/item/22-03-2021-water-sanitation-and-hygiene-closing-the-gap-to-end-neglected-tropical-diseases

“Today, on World Water Day, the World Health Organization (WHO) released its strategy on water, sanitation and hygiene as part of joint efforts by the water, sanitation and hygiene (WASH) and the neglected tropical diseases (NTD) sectors towards ending these diseases over the next decade. The “Global Strategy on Water, Sanitation and Hygiene to Combat Neglected Tropical Diseases – 2021-2030” complements the recently launched new NTD road map and aligns with the Sustainable Development Goal targets 6.1 and 6.2 on drinking water and sanitation....”

HPW - The COVID Pandemic As “X-Ray” – Zeroing In On Urban Water & Sanitation Gaps


“COVID has highlighted deep-seated weaknesses in urban water and sanitation systems that are vital to health- but the pandemic has also underlined how improvements can hit back at the SARS-CoV2 virus – as well as reducing other traditional waterborne diseases. That was a key message at a conference sponsored by the Geneva Cities Hub, UN Habitat, and Geneva Water Hub, on the occasion of World Water Day. It was the first in a series of ‘Geneva Urban Debates.’ “COVID in some ways has given us a huge opportunity in the water sector, because it has acted as an x-ray,” said Graham Alabaster, Chief of the Geneva Office of UN Habitat. ...”
“... Over Half of World’s Population May Be Water-Stressed by 2025...

Some 68% of the global population is projected to be living in cities by 2050, making the issue understanding urban challenges and sharing urban experiences across continents increasingly significant. By 2025, over half of the world’s population will be living in water-stressed areas. ...

UHC

Via Devex - Opinion: How to future-proof Africa’s health systems (Gitinji Gitahi)

Op-ed related to “the launch of the FutureProofing Healthcare Africa Sustainability Index, an online policy tool, providing an overview of 18 health systems across the continent. It is composed of 76 different measures split across six categories called “Vital Signs”: access, financing, innovation, quality, status, and wider factors. These measures were identified by experts across Africa who work in health systems, multilateral organizations, civil society organizations, think tanks, and academia.

“During the AHAIC session [a few weeks ago] — convened by research-focused health care company Roche — several of the health experts who oversaw the index’s development shared takeaways for applying the “future-proofing” mindset to health systems in Africa...”

Index: https://futureproofinghealthcare.com/africa-sustainability-index

Global Governance and Financing

Devex - US must step up on global COVID-19 vaccination efforts, experts say


With views from A Jha & T Bollyky. Seems to be a general sentiment, now that the US has vaccinated so many of its citizens already. Time for the US to show some leadership on global vaccine equity, at last.

“The United States needs to step up its efforts to address global COVID-19 vaccination efforts by improving manufacturing and detailing donation plans for surplus doses, according to health and foreign policy experts....”

- For a similar view, see Foreign Affairs - America Can—and Should—Vaccinate the World (by H Gayle et al)

“The Case for an All-Out Global Approach to Ending the Pandemic”. “The Biden administration is right to want to take the lead in vaccinating the world, for a host of reasons both self-interested and altruistic. But it should not fall into the trap of trying to beat Russia and China at their own game—handing out vaccines to specific countries based on their geostrategic importance and the amount of...
attention they are receiving from rival powers. Rather, Biden should pursue abroad the sort of “all in” unity approach that he has proclaimed at home. His administration should focus less on strategic advantage than on vaccinating the largest number of people worldwide in the shortest amount of time. …"

- And for my favourite view, see J Shaffer (Stat Oped) – Biden should use emergency powers to license Covid-19 vaccine technologies to the WHO for global access

“Following the WTO’s failure to act, Biden’s best option to lead the world toward equitable vaccine access is by using his executive powers to extricate the Moderna, Pfizer, and Johnson & Johnson vaccine patents from the grip of stifling monopolies and license the Covid-19 vaccine technology to the World Health Organization’s Covid-19 Technology Access Pool, which would enable a rapid scale-up of generic vaccine manufacturing worldwide. This would give Biden a chance for a rare triple win: Licensing Covid-19 vaccine technologies to the pool would be a major victory for global social justice, a win for the self-interested American public, and a foreign policy victory for world order and stability....”

Additional argument: “The world is beginning to see the political instability engendered by chronic, unchecked Covid-19 transmission....”

Devex - G-7 leaders support 'sizeable' Special Drawing Rights allocation
https://www.devex.com/news/g-7-leaders-support-sizeable-special-drawing-rights-allocation-99457

“Finance ministers from the G-7 group of industrial nations agreed to a new “sizeable” issuance of International Monetary Fund Special Drawing Rights [last week] on Friday, sending the clearest signal yet that countries might expect an influx of liquidity to fight the COVID-19 pandemic. ... ... While the G-7 finance ministers described the new issuance as “sizeable,” they stopped short of stating an amount. ...”

See Devex - In Brief: IMF announces it will release a plan for a $650B SDR issuance.


Lancet World Report - Researchers slam UK cuts to global health research
https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00671-1/fulltext

“A £120 million cut by UK Research and Innovation has led to an outcry from experts who say health projects across the world will be affected. Jacqui Thornton reports.”

See also Healthy Societies - Over 3000 people protest UKRI funding cuts.

Devex - Exclusive: NGOs say FCDO gagging them on aid cuts
The British government is blocking some development organizations from talking publicly or with other organizations about the impact of the aid budget cuts on their programs, NGO leaders have claimed. Threats over remaining funding and closure costs have been used to keep some NGOs quiet, even as their budgets were slashed, NGO executives told Devex. Sources all spoke anonymously to avoid jeopardizing their professional relationships with the Foreign, Commonwealth & Development Office.

The Independent Panel for Pandemic Preparedness and Response Considers its Recommendations for May report


The Independent Panel has reviewed significant amounts of evidence and is now considering recommendations to improve #pandemic preparedness & response systems. Summary of the discussions at the 5th Panel Meeting (17-18 March).

Development today - OECD puts 53% cap on reporting CEPI grants for covid vaccine research as aid


(gated) “The OECD aid watch dog DAC will review the epidemic response agency CEPI’s business model to determine what portion of grants to the agency can be reported as aid in the future. For 2020, the OECD has decided that a maximum of 53 per cent of CEPI grants for COVID19 vaccine research can be reported as official development assistance.”

Lancet Letter – Health systems in the ACT-A

David Hipgrave et al; https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00442-6/fulltext

“The attention to health systems in the headline of Ann Usher’s World Report about the Access to COVID-19 Tools Accelerator (ACT-A) is most welcome. However, we were disappointed that the World Report focused on medical oxygen and personal protective equipment (PPE), interventions that, although important, are better described as components of clinical care. Unlimited medical oxygen and PPE will not benefit populations that are affected by COVID-19 if health facilities do not have enough staff or funding for other equipment, drugs, utilities, and transport, or if they have lost most supplies to pilfering. Additionally, populations will not benefit if health managers cannot effectively prepare budgets, use most of their recurrent budget on salaries, or do not reliably collect or use local data for outbreak identification, priority setting, and resource allocation.”

“COVID-19 and the ACT-A provide an enormous opportunity for strengthening health systems. ... The diagnostics, treatments, and vaccines that are being developed with ACT-A funding all depend on strong health systems for their efficient and effective introduction. A WHO–UNICEF operational framework described a health-systems approach to universal coverage of quality primary care and essential public health functions and provided related guidance for governments, donors, and
partners. Funding this approach, in addition to medical oxygen and PPE, should be prioritised by the ACT-A.”

Link:

Reuters - [Britain to launch new health security agency to battle pandemics](https://www.reuters.com/health/britain-launch-new-health-security-agency-battle-pandemics-2021-02-18/)

“**Britain will launch a new health security agency** next week to better prepare for and tackle pandemics by bringing together its testing, analytical and scientific capabilities, health minister Matt Hancock said on Wednesday. The new agency will be called the **UK Health Security Agency (UKHSA)**…” See also the Guardian - [UK to set up health agency to combat future pandemics](https://www.theguardian.com/uk-news/2021/feb/10/britain-to-launch-health-security-agency)

Launch on 1 April.

**Sexual & Reproductive / maternal, neonatal & child health**

Telegraph - Don’t let Covid-19 turn back progress on the health of women and children

M Vledder (GFF) [Telegraph](https://www.telegraph.co.uk/)

“**Since the start of the pandemic, the Global Financing Facility for Women, Children and Adolescents (GFF) estimates that access to life-saving health interventions for women, children and adolescents in 36 of the world’s poorest countries has slumped by as much as 25 per cent. That is equivalent to 82 million children not receiving oral rehydration, 4 million women losing access to care during childbirth, and 17 million children missing out on vaccinations. ...**”

... **To turn the tide, a substantial injection of funding is needed** to protect services and prevent years of progress from simply unravelling. **The GFF**, a partnership hosted at the World Bank, launched five years ago by global leaders to supercharge investments for women, children and adolescent health, **is leading a fundraising campaign to meet this challenge. ... The aim is to raise $2.5 billion total with $1.2 billion frontloaded this year – the majority of which will secure essential health services. Through the ACT- Accelerator funds will also help countries prepare for rapid, equitable, and safe delivery of vaccines and tools at scale while ensuring continuity of these essential services....”

See the GFF press release: [Global Financing Facility launches $1.2 billion funding campaign to stop secondary health crisis for women and children due to COVID-19 pandemic](https://globalfinancingfacility.org/news-and-stories/)

Cancer World - HPV vaccine “lying around” unused in Africa due to pandemic disruption


“**Vaccinations for human papillomavirus (HPV) in Africa are well below World Health Organisation (WHO) targets due to COVID-19 pandemic disruptions. The WHO Africa region target was to have 35 countries introduce the HPV vaccine by 2020, but only 16 countries have been able to meet that target, according to WHO.** There is low demand for the HPV vaccine as countries focus on rolling out...”
the COVID-19 vaccine, and access to eligible girls is limited due to school closures and government-imposed lockdowns. The price for the vaccine is particularly high for countries that do not receive funding from GAVI, the global health partnership aiming to increase access to immunisation in low to middle income countries.

Access to Medicine foundation - Handful of new children’s meds on the horizon. But will they be accessible to children in LMICs?


New analysis: “Just 7% of pharmaceutical companies’ R&D is for children under 12, despite significant gaps in paediatric treatment options.”

“Out of more than a thousand R&D projects assessed in the 2021 Access to Medicine Index, only 69 are for children under 12. Yet there are examples of treatments that could prove game-changers for children in low- and middle-income countries (LMICs). Children in LMICs cannot wait at the back of the queue. Planning ahead to ensure access to new medicines is critical. 31/56 late-stage projects have access plans....”

Open Democracy - Revealed: Doctors worldwide offer ‘dangerous’ treatment to ‘reverse’ abortions


“Health experts call for action from regulators to protect women from spread of controversial method supported by US Christian right activists.”

Covid key news: “Worrying trends”

With key trends, WHO messages & initiatives, ...

HPW - Brazil, India and Philippines Driving Global Increase in COVID-19 Cases – WHO


“For the fifth week in a row, global COVID-19 cases have increased, with substantial increases in South-East Asia (49%) and the Western Pacific (29%), according to the World Health Organization (WHO). India is driving up numbers in South-East Asia, while the Philippines and Papua New Guinea are responsible for the Western Pacific increases, according to Maria Van Kerkhove, WHO’s technical lead on COVID-19 speaking at the global body’s bi-weekly pandemic briefing. Europe’s 12% increase was largely being driven by the spread of the B.117 variant “that was first identified in the UK, that is now starting to circulate in many countries in the eastern part of Europe,” said Van Kerkhove. “The Americas and Africa have seen a slight decline in the last seven days, but overall,
we’re seeing increasing cases and these are worrying trends in Europe and across a number of countries,” she added.

“Brazilian Deaths Have Doubled in a Month: Despite a decline in the Americas, COVID-19 cases in Brazil have exploded with around 70,000 new cases a day and 2,000 deaths.”

See also UN News - COVID-19: Virus variants, vaccine inequity, contribute to rising caseload

“COVID-19 cases globally are on track to rise for a fourth consecutive week, the World Health Organization (WHO) reported [last week] on Friday. After six weeks of decline in January and February, cases are now increasing in most regions of the world. Meanwhile, deaths are falling, though at a slower rate. …”

UN News - Global COVID-19 infections rise for fourth consecutive week, deaths level off

And the Telegraph - Covid deaths on the rise again globally amid warning 'worst yet to come' for some countries

“Cases have been rising since the beginning of March, and this rise continued in the past week, too, WHO said, with just under 3.3 million new cases reported. There was a “marked increase” in cases reported from South-East Asia, Europe, the Eastern Mediterranean and Western Pacific regions, the WHO added, and there are “concerning trends” in some countries in the African and Americas regions too. … Public health experts said that the numbers showed that the worst of Covid-19 is far from behind us globally. Professor Adam Kucharski, an infectious disease epidemiologist at the London School of Hygiene and Tropical Medicine, tweeted the following on Wednesday, accompanied by a graph of Brazil’s rapidly escalating daily death toll: “The worst of the pandemic is likely over in a (relatively small) number of places, but in others, there are troubling signs it’s yet to come.” India, the eastern Mediterranean and much of east and Central Europe are also posting worrying numbers, the WHO said. …”

Economist - Covid-19 cases are rising again in much of the world


“More transmissible variants, rather than changes in behaviour, are largely to blame.”

COVID-19 vaccine makers should license technology to overcome 'grotesque' inequity: WHO

Reuters:

On Tedros’ media briefing on Monday. “More producers of COVID-19 vaccines should follow the example of AstraZeneca and license their technology to other manufacturers, the head of the World Health Organization (WHO) said on Monday, as he described vaccine inequity as "grotesque".
“WHO officials said that there was no sign of falling demand for the AstraZeneca shot through its COVAX vaccine-sharing programme after some countries temporarily paused its use over health concerns. “They did ask a lot of questions but the demand for the vaccine is extremely high,” said WHO senior adviser Bruce Aylward. He added, however, that COVAX was having some “teething problems” since manufacturers might not be able to keep up with their roll-out programme....”

See also Cidrap News - Global COVID-19 continues climb amid widening vaccine gaps

“...Bruce Aylward, MD, MPH, senior advisor to Tedros, said that, over the past 4 weeks, the COVAX program—the WHO’s equitable distribution effort—has deployed about 30 million doses to 50 countries. That number is a fraction of the more than 448 million doses that have been delivered across the world. He said there isn’t enough vaccine and manufacturers can’t keep up with orders. Soumya Swaminathan, MD, the WHO’s chief scientist, said the WHO is urging countries to share excess doses through COVAX and to allow raw materials and supplies to make them flow freely across country borders. She also said the WHO is encouraging countries with excess bulk vaccine to pair up with companies that have excess fill-and-finish capacity....”

HPW - Mayors Appeal for Equitable Access to Vaccines – Independent Panel calls for contributions ahead of WHO submission
https://healthpolicy-watch.news/mayors-appeal-for-vaccines/

From late last week. “Mayors from three capital cities in the global south have appealed for speedy “technology transfer” to enable them to produce their own COVID-19 vaccines at Friday’s World Health Organization (WHO) bi-weekly COVID-19 media briefing. The mayors’ appeal comes on the eve of a meeting next week between WHO Director General Dr Tedros Adhanom Ghebreyesus and World Trade Organization (WTO) Director General Dr Ngozi Okonjo-Iweala to discuss “how to overcome the barriers to boost production vaccine equity”, said Tedros...”

HPW - African Countries Serious About Improving Local Vaccine Production
https://healthpolicy-watch.news/african-countries-serious/

“African countries are hosting a large conference in April to discuss the local production of vaccines, as key players in Africa’s public health sector try to address the continent’s vaccine shortages. Circumstances surrounding the COVID-19 vaccine production and distribution had necessitated this conversation, William Kwabena Ampofo, Chairperson of African Vaccine Manufacturing Initiative, said during a press conference on Thursday. The conference will take place on 12 and 13 April. .... Africa only has about 10 vaccine manufacturers based in 5 countries – South Africa, Morocco, Tunisia, Egypt and Senegal – and most were only doing packaging, labelling and filling, rather than the actual production of the vaccine. But Africa has about 80 companies with pharmaceutical production capacity and the manufacturing of sterile injectables, which provided a great opportunity, added Ampofo....”
Reuters - U.N. rights body calls for equitable, affordable access to COVID-19 vaccines


“The United Nations Human Rights Council adopted a resolution on Tuesday calling for equitable, affordable access to COVID-19 vaccines and for fair pricing. The text, endorsed by more than 130 countries and adopted by consensus at the Geneva forum, affirmed the right of states to use the flexibility in World Trade Organization (WTO) existing rules on intellectual property for COVID-19 vaccines. China and the European Union endorsed the text, brought by Ecuador and the non-aligned movement. Britain clarified that any measures taken must be in accordance with international law but joined the consensus. The United States which has observer status did not co-sponsor the resolution.”

Covid science

Lancet - The first and second waves of the COVID-19 pandemic in Africa: a cross-sectional study

S Salyer et al ; https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00632-2/fulltext

Cfr the press release: The Lancet: First continent-wide analysis confirms Africa’s second COVID-19 wave was more severe than its first

“For the first time, the entire continent was analyzed in one study, enabling a more comprehensive understanding of the disease’s impact across African countries. The findings highlight the importance of continued surveillance and response efforts to mitigate the spread of COVID-19.”

“The authors say African countries’ rapid, coordinated initial responses to the pandemic likely limited severity of the first wave. Subsequent loosening of public health measures and a drop in adherence to public health and social measures (PHSMs) after the first wave (probably due to adherence fatigue and economic necessity) are thought to have contributed to the greater impacts observed during the second wave. The surge of cases during the second wave is also likely to have been partly driven by the emergence of COVID-19 variants, some of which are more transmissible than the original strain, though it was not possible to assess their affects in the analysis....”
Excerpts: “In The Lancet, Stephanie Salyer and colleagues’ comprehensive and elegant cross-sectional analysis of COVID-19 case counts, response measures, and mortality rates highlights the diversity of the COVID-19 burden and response across Africa. Between Feb 14 and Dec 31, 2020, 2 763 421 COVID-19 cases and 65 602 deaths were reported in African countries, accounting for 3·4% of the 82 312 150 cases and 3·6% of the 1 798 994 deaths reported globally. Their Article shows the variable effects of COVID-19 across Africa, which more severely affected the Northern and Southern regions during both waves of the pandemic. Strikingly, 43% of the reported COVID-19 cases and 46% of the deaths occurred in the Southern region, in contrast to 3% of the reported cases and 2% of the deaths in the Central region. At the end of 2020, there was clear asymmetry in the pandemic’s toll: nine countries (South Africa, Morocco, Tunisia, Egypt, Ethiopia, Libya, Algeria, Kenya, and Nigeria) accounted for 82·6% (2 283 613) of the cases reported and five countries (South Africa, Egypt, Morocco, Tunisia, and Algeria) accounted for 77% of the deaths reported. Although the statistics reported by Salyer and colleagues are sobering, they are limited by incomplete data for surveillance, testing, and reporting of COVID-19 cases, as well as potentially inconsistent case definitions.

“... An important conclusion from the Article by Salyer and colleagues is the need for country-specific solutions. No one-size-fits-all approach will succeed within a continent as diverse as Africa. Countries with a high number of COVID-19 deaths desperately need vaccination to prevent further illness and deaths from severe COVID-19. Some countries might not request the vaccines because of their COVID-19 epidemiology, whereas other countries have a greater need but will be limited by the 20% allowance. By contrast, countries with low case fatality ratios could instead invest in community engagement, health system strengthening, surveillance, and case reporting to adequately handle high case counts during this wave and beyond....”

Science - AstraZeneca reports powerful COVID-19 protection in new vaccine trial


“Based on trial in United States and South America, company claims 79% efficacy against symptomatic COVID-19 cases for troubled but low-cost vaccine...”

See also Reuters – “AstraZeneca and Oxford University’s coronavirus vaccine received a major boost on Monday as data from a large trial showed it was safe and effective, potentially paving the way for its emergency authorisation in the United States. ...”

Unfortunately, one day later Reuters reported “U.S. health body questions AstraZenea’s COVID-19 vaccine trial data”.

“AstraZeneca may have used “outdated information” in the results of a large-scale COVID-19 vaccine trial, a U.S. health agency said on Tuesday, casting fresh doubt on the shot, its potential U.S. rollout and plunging its developers, once again, into controversy....”

See also Science - Data concerns and safety worries fuel crisis of confidence in AstraZeneca vaccine.
“It is not yet clear, experts say, what impact the setbacks might have on global use of AstraZeneca’s vaccine, a cornerstone of the World Health Organization’s plan to help low-income countries beat the pandemic....”

And D Pilling’s view (via FT): AstraZeneca and the lessons of vaccine hesitancy: “Trust must be restored in the only jab that is offered at cost.”

“...The rollout of the AstraZeneca jab has appeared designed to shake faith in what is, almost certainly, an excellent vaccine. That is a calamity, especially for the developing world where — cheap, scaleable and easy to store — it was expected to be a global workhorse. ... ... It will be an uphill battle to restore faith in the AstraZeneca vaccine, and must be fought hardest in poorer countries, where the vaccine is needed most. This should have been a glory moment for AstraZeneca, which alone is offering its vaccine at cost. Instead, a jab that is safe and effective is fighting for its life.”

Meanwhile, link Stat - Pushing back against U.S. health officials, AstraZeneca says new analysis confirms efficacy of its Covid-19 vaccine

Reuters - Scientists probe new theories on whether AstraZeneca shot linked to blood clots

Guess you’ve been following this story last weekend, with some of the hypotheses.

Cidrap News - WHO review finds no blood clot link to AstraZeneca COVID vaccine

https://www.cidrap.umn.edu/news-perspective/2021/03/who-review-finds-no-blood-clot-link-astrazeneca-covid-vaccine

From late last week. “A review by the vaccine safety group from the World Health Organization (WHO) based on available data found no increased risk of blood clotting conditions in people who received the AstraZeneca-Oxford vaccine, which it says has great potential to prevent infections and reduce deaths....” See WHO - Statement of the WHO Global Advisory Committee on Vaccine Safety (GACVS) COVID-19 subcommittee on safety signals related to the AstraZeneca COVID-19 vaccine

Lancet Letter - Vaccines and SARS-CoV-2 variants: the urgent need for a correlate of protection

Salim A Karim ; https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00468-2/fulltext

« ... Adequate genomic surveillance, standardised variant nomenclature, and a repository of variants and vaccinee serum samples are needed to deal with the challenges of repeatedly emerging new SARS-CoV-2 variants, but there is a particularly pressing need to establish a correlate of protection so that vaccine efficacy results obtained with pre-existing variants can be translated to newly emerging variants because it is impractical and time consuming to repeat clinical trials with each new immune-escape variant. Furthermore, repeating clinical trials for each variant might take so
long that even newer variants could emerge while these clinical trials are underway. ... Because the immune responses required to prevent mild disease might be different to severe disease, correlates of protection might need to be stratified on the basis of disease severity. There are four key requirements to achieve this aim. ...”

And a link:


“**The expansion of the Randomised Evaluation of COVID-19 Therapy Trial, or RECOVERY** — a blockbuster U.K.-based clinical trial of potential COVID-19 treatments — to Indonesia and Nepal last month has called attention to the persistent dearth of similar efforts to find therapeutics that work within the resource constraints of the global south. ... DNDI is funding ANTICOV, a clinical trial consortium that will test COVID-19 treatments in 19 trial sites across 13 African countries and that, alongside RECOVERY, is one of the few existing efforts to shore up this gap. “... It is a need that remains pressing despite the acceleration of the global vaccine rollout. With better-resourced countries claiming the vast majority of available vaccines, some countries in the global south are predicting it could take years before their populations achieve herd immunity. ... RECOVERY’s expansion to Indonesia and Nepal — and eventually, according to current plans, to at least one African country — could be an important boost, both in terms of the research it produces and in signaling the necessity for others to join in the effort. It comes as the only truly global trial of COVID-19 treatments, the World Health Organization’s Solidarity Therapeutics Trial, was recently paused after its first four candidate treatments were found to offer no benefit....”

[Scientific American](https://www.scientificamerican.com/article/coronavirus-variants-dont-seem-to-be-highly-variable-so-far/)

Variants seem to be converging. “Evidence is growing that the SARS-CoV-2 variants that are evolving around the world share similar combinations of mutations, writes evolutionary microbiologist Vaughn Cooper....”

**Covid-19 vaccine access (and other bottlenecks)**

This is the heaviest Covid-related section, I’m sure you’ll understand why. Lots of news, much of which rather worrying. Among others, updates on ACT-A (including on an ACT-A facilitation council meeting this week), troubles for Covax (among others, due to rapidly rising cases in India again), analysis ahead of the African Union vaccine manufacturing meeting (mid-April), ...
Geneva Health Files - WHO donors seek a new tech transfer hub under ACT-A, C-TAP sidelined: Donors want a tech transfer hub to push for bilateral deals, WHO C-TAP at risk


Worrying must-read analysis. “A new technology transfer hub to facilitate bilateral licensing arrangements, is being proposed by France and powerful private groups, to be under established in the ACT Accelerator, away from the C-TAP.” (As usual, the foundation starting with a ‘B’ and ending with a ‘F’ also seems to be involved ☹.)

And a quote: “...What is however, increasingly cited as a preferred path by both the private sector and the new DG of the WTO, for example, is bilateral licensing arrangements. For all the woes facing the company, AstraZeneca’s model of licensing its vaccines to be produced by manufacturers in a few different countries has become a favorite example for technology transfer among international policymakers. ... ... It is this model, which is non-transparent and mostly subject to bilateral contractual negotiations, that is seen to be taking centerstage in this crucial discussion on how technology transfer be made possible during this stage of the pandemic that has seen a 10% increase of new reported cases in recent days. ...”

“A new ‘Covid Vaccine Capacity Connector’ that seeks to formalize bilateral arrangements for tech transfer, is now being proposed. ... under the aegis of the ACT Accelerator that is expected to “house” a technology transfer hub.”

“Sources familiar with the developments also say, that such an initiative is meant to also prepare for future pandemics. ... And: “Most of the major actors in the ACT Accelerator, are not in favor of C-TAP,” the source said....”

HPW - Norway Gives Up COVAX Doses Despite Domestic Pressure – ACT Accelerator proposes manufacturing task force

Coverage of the Access to COVID-19 Tools (ACT) Accelerator facilitation council meeting on Tuesday.

“In a decisive act of global solidarity, Norway has offered almost a third of its allocation of COVAX vaccines to poorer countries, according to Dag-Inge Ulstein, Norway’s Minister of International Development. Norway has only fully vaccinated about 5% of its population – 260,000 people – and unlike many other European countries, it has not stockpiled vaccines and is mainly depending on COVAX for vaccines. However, it decided to allow COVAX to redistribute 700,000 out of its 1.9 million vaccine doses to lower-income countries despite domestic pressure not to, Ulstein told the Access to COVID-19 Tools (ACT) Accelerator facilitation council meeting on Tuesday. He also expressed Norway’s support for a “colossal task force on expanding vaccine production” co-led by the World Health Organization (WHO) and the Coalition on Epidemic Preparedness Innovation (CEPI) to “do better” and expand beyond COVAX’s initial target of vaccinating 20% of the global population by the end of the year. “
“Earlier, CEPI CEO Richard Hatchett had announced that his organisation was setting up a task force to address vaccine manufacturing and invited all interesting parties to join. Highlighting global achievements, Hatchett reported that, in little over a year, “we have nine manufacturers that are scaling up rapidly across three technology platforms: inactivated vaccines, viral vector vaccines and mRNA vaccines.” Between them, the manufacturers had administered 400 million vaccine doses – but only 30-million of these doses had gone to COVAX. “The nine manufacturers envision manufacturing between 10 and 14 billion doses of vaccine in the coming year,” he added. “Those are very aspirational numbers, and they may be very difficult to achieve....”

Not everybody is convinced these numbers can indeed be reached...

PS: “...John Nkengasong, Director of Africa’s Centers for Disease Control (CDC), made two simple pleas: for any countries with excess doses of vaccines to “release them” to countries that do not have, and to “strengthen regional capabilities to manufacture vaccines across the world as part of our collective security”. “

For more coverage of the ACT-A Facilitation council meeting, see Devex - Jeremy Farrar: COVID-19 pandemic 'is nowhere near its end'.

“New waves of coronavirus infections in countries across the world serve as a reminder that the pandemic is far from ending, Wellcome Director Jeremy Farrar said Tuesday at the fifth meeting of the Facilitation Council for the Access to COVID-19 Tools Accelerator, or ACT-A....”

“...“There is no solution to any infectious disease which does not include the critical contribution of the health systems, of diagnostics, and of treatment, and that is ever true of COVID-19,” he said. Without diagnostics, he said the world is “blind to what is happening” or how the COVID-19 epidemic is developing without diagnostics. ...... Farrar said the world needs to have a “multipronged approach” to the crisis, ensuring there is diagnostics, including genomic surveillance at the global level and the data shared equitably, as well as treatments, whether it is dexamethasone, oxygen, immune therapies or monoclonal antibodies....”

Guardian – World’s poorest face vaccine delays through Covax programme
https://www.theguardian.com/world/2021/mar/25/worlds-poorest-face-vaccine-delays-through-covax-programme

Very worrying. “Some of the world’s poorest countries have been warned to expect delays in the delivery of Covid-19 vaccines through the UN-backed Covax programme after a double blow of technical problems at a South Korean manufacturing plant and setbacks in securing export licences from the Indian government, Unicef has said. Up to 90m doses of the Oxford/AstraZeneca vaccine may be affected by the twin issues....”

See also FT – India blocks vaccine exports in blow to dozens of nations

“...The Serum Institute of India, the largest manufacturer of vaccines in the world and the biggest supplier to the international Covax programme, said it had been told to halt exports and that the measures could last as long as “two to three months”. Gavi, the UN-backed international vaccine alliance, immediately warned that the controls would have a direct impact on the Covax scheme,
set up with the World Health Organisation to ensure the equitable global distribution of at least 2bn Covid-19 vaccine doses in 2021. “Deliveries of Covid-19 vaccines to lower-income economies participating in the Covax facility will face delays following a setback in securing export licences for further doses . . . produced by the Serum Institute of India (SII) expected to be shipped in March and April,” Gavi said in a statement on Thursday....”

See WHO - COVAX updates participants on delivery delays for vaccines from Serum Institute of India (SII) and AstraZeneca.

Devex - In Brief: Gavi approves COVAX vaccine allocation in humanitarian settings

“The board of Gavi, the Vaccine Alliance, has approved the allocation of up to 5% of total vaccine doses procured via COVAX for high-risk populations in humanitarian settings. The so-called COVAX Buffer also allows for the emergency release of vaccine doses in case of severe outbreaks of COVID-19. The allocation is equivalent to up to 100 million vaccine doses for 2021, according to the news release. All COVAX participant countries, regardless of income, will have access to doses allocated for the buffer....”

See also GAVI: “...The Inter-Agency Standing Committee (IASC) – a forum of UN and non-UN organisations working to improve the delivery of humanitarian assistance to affected populations – estimates that 167 million people are at risk of exclusion from COVID-19 vaccination....”

Nature (Special report) - What it will take to vaccinate the world against COVID-19
https://www.nature.com/articles/d41586-021-00727-3

“A special report outlines the challenges — from unleashing the power of mRNA vaccines, to the battle for temporary intellectual-property relief.”

Guardian - Covid vaccines made by end of 2021 could inoculate 70% of the world
https://www.theguardian.com/world/2021/mar/22/covid-vaccines-2021-could-inoculate-70-per-cent-of-the-world

Coverage of new Duke report.

“Enough Covid-19 vaccines are forecast to be produced in 2021 to inoculate 70% of the populations of every country, a quantity that could blunt the pandemic years sooner than predicted if it were distributed equitably, according to new analysis. But much of that supply is already reserved for wealthy countries, the report from the Duke University Global Health Innovation Centre said, while saying the actual amount of vaccines produced this year is likely to be less than forecast because of unforeseen delays including shortages of raw materials....”
The emergence of dangerous new variants may lead to demand for booster shots that would also constrict global supply, said the study released on Monday, which analysed manufacturers’ publicly available data. ... ... Figures from the data firm Airfinity show nearly a billion Covid-19 vaccine doses have been produced in the first four months of this year, but that figure is predicted to balloon to at least 9.4bn by the end of 2021. “If manufacturers are able to reach their goal of 12bn doses this year and if those doses were purchased and distributed equitably across the world’s population, we could meet much of the world’s needs in 2021,...”

"... The formulations produced by Oxford/AstraZeneca, Pfizer/BioNTech and Novavax will make up the bulk of the projected 2021 supply, the report showed, with 10 other vaccines contributing to the mix...."

HPW - Africa Warns Against COVID-19 Vaccine Wars: Pleads For Fair Distribution

“About 10 African countries have yet to receive any doses of a COVID vaccine, while at least one country, Rwanda, has already run out of the doses that it received through the WHO co-sponsored COVAX facility, said WHO's African Regional Office on Thursday, citing this as evidence of the vaccine inequalities that continue to mark the battle against the pandemic. ... ... So far, some 7.7 million doses have been administered in 32 African countries through COVAX or national initiatives, the WHO African region officials said. And some 44 countries have received vaccines through COVAX or other channels. ...

"...Speaking at a back-to-back Africa CDC briefing, Nkenkasong urged global leaders to pursue equitable access to vaccines, saying: “There is absolutely no need, absolutely no need for us as a world, as humanity, to go into a vaccine war to fight this pandemic. We’ll all be losers. ""

NYT - Rich Countries Signed Away a Chance to Vaccinate the World
Rich Countries Signed Away a Chance to Vaccinate the World - The New York Times (nytimes.com)

Must-read. “Despite warnings, American and European officials gave up leverage that could have guaranteed access for billions of people. That risks prolonging the pandemic.”

In case you’re not convinced yet that you have to read this, let’s quote Geneva Health Files: “A story that pulls everything together - the science, the technology, the law and the politics.”

BBC - Covid: Rich states 'block' vaccine plans for developing nations

“Wealthy countries - including the UK - are blocking proposals to help developing nations increase their vaccine manufacturing capabilities, documents leaked to BBC Newsnight show. Several poorer countries have asked the World Health Organization to help them. But richer nations are pushing back on provisions in international law that would enable them to achieve this. This is
according to a leaked copy of the negotiating text of a WHO resolution on the issue. Among those richer nations are the UK, the US, as well as the European Union....”

Geneva Health Files – Rich countries’ stance on local production of vaccines: Smoke and mirrors

*Geneva Health Files:*

“... Take, for example, the on-going discussions at WHO on local production of medicines and health technologies to improve access. If you want to understand the direction of the changes in global health, look at the reservations expressed by rich countries in these negotiations. In this edition, we take a quick look at the WHO resolution on local production, now gathering pace....”

It seems obvious many rich countries want technology transfers on “voluntary and mutually agreed terms”....

WP - Drug companies defend vaccine monopolies in face of global outcry

*Global vaccine supply shortages challenge drug company monopoly practices - The Washington Post*

“As immunization gap widens between rich and poor countries, the industry faces a battle over patents and know-how.”

Quote: “Abdul Muktadir, the chief executive of Bangladeshi pharmaceutical maker Incepta, has emailed executives of Moderna, Johnson & Johnson, and Novavax offering his company’s help. He said he has enough capacity to fill vials for 600 million to 800 million doses of coronavirus vaccine a year to distribute throughout Asia. He never heard back from any of them. The lack of interest has left Muktadir worried about prolonged coronavirus exposure for millions of citizens of Bangladesh and other low-income nations throughout Asia and Africa who are at the back of the global queue for shots. ..... But drug companies have rebuffed entreaties to face the emergency by sharing their proprietary technology more freely with companies in developing nations. They cite the rapid development of new vaccines as evidence that the drug industry’s traditional business model, based on exclusive patents and know-how, is working. The companies are lobbying the Biden administration and other members of the World Trade Organization against any erosion of their monopolies on individual coronavirus vaccines that are worth billions of dollars in annual sales....”

Blog - Buying Know-How to Scale Vaccine Manufacturing

*James Love; https://jamie-love.medium.com/buying-know-how-to-scale-vaccine-manufacturing-586dbdb304a36*

“... What has been less impressive has been the effort to scale the manufacturing efforts to meet demand. One tool that has not been used, and should be mobilized, right now, is to spend money to make the know-how a global public good. Buyouts of manufacturing know-how, access to cell lines, and rights in inventions and data, isn’t cheap, but it will be less expensive than trying to vaccinate the world without doing so....”
“...The fact that there are now several vaccines in the market and more in development makes the task more manageable. If governments could collaborate to create a buyout fund, they can offer to pay for full technology transfer. This can be done with or without royalties from generic suppliers, although, to truly open source the know-how, and make it a global public good, royalties, if desired, can be replaced with payments from a fund to reward vaccines that become the most important in terms of their use and efficacy, such as was proposed by Barbados and Bolivia to the WHO in 2008. (see discussions here and here ) for a Priority Medicines and Vaccines Prize Fund (PMV/pf), as well as similar proposals (see discussions here and here)...”

The Intercept – Drugmakers promise investors they’ll soon hike Covid-19 vaccine prices

[https://theintercept.com/2021/03/18/covid-vaccine-price-pfizer-moderna/](https://theintercept.com/2021/03/18/covid-vaccine-price-pfizer-moderna/)

“Pfizer, Moderna, and Johnson & Johnson pledged affordable vaccines — but only as long as there’s a “pandemic.””

“Johnson & Johnson, Moderna, and Pfizer — have quietly touted plans to raise prices on coronavirus vaccines in the near future and to capitalize on the virus’s lasting presence. While the companies have enjoyed a boost in goodwill from the rush to develop vaccines, drug industry executives have noted, the public is still sensitive to drug pricing and the reputational risk has, so far, curtailed their ability to reap large financial rewards. But that environment, they hope, will change once the pandemic ends: a date that drugmakers themselves reserve the right to declare. Pharmaceutical officials, speaking at recent conferences and on calls with investors, say they expect the virus will linger, morphing from a pandemic into a perennial endemic. And as Covid-19 mutations continue to spread and booster shots may be required on a regular basis, leaders from the three companies are enthusiastic about cashing in....”

PIIE - Here's how to get billions of COVID-19 vaccine doses to the world


Authors make a case for a Covid-19 Vaccine Investment and Trade Agreement: “... Governments and philanthropists have worked together to scale up HIV medicines and pediatric vaccines, but the level of policy cooperation for COVID-19 vaccine production is, admittedly, unprecedented. That’s why a global coordinating body will also be needed to help some countries scale up the production of early stage ingredients and critical equipment, knowing they can incentivize other countries to subsidize expansion of later steps in the manufacturing process that will also need to be scaled up. Skillfully combining those inputs into vaccine output and then guaranteeing access to the final doses and related supplies through international trade will require trust among governments that is currently in short supply. One way to accomplish this goal would be to set up a new and enforceable COVID-19 Vaccine Investment and Trade Agreement (CVITA)....”
Guardian - Vaccine tensions loom in Asia as China and India trade free shots for influence

“India and China have given away vaccine for diplomatic reasons. Now there’s pressure to save supply for their own people…”

FT - Doubts overshadow Beijing’s pledge to vaccinate the developing world
https://www.ft.com/content/a7625cd1-9c72-42c3-aaea-25ebde1a4c33

“Concerns over transparency, efficacy and supply weaken global demand for Chinese Covid-19 jabs.”

“... in recent weeks, China’s role in the global vaccination drive has been overshadowed by concerns over supplies, high prices and unexplained instances of low immunity. The incidents have led international health experts to caution that vaccines made by China’s state-run Sinopharm and privately owned Sinovac and CanSino remain far from a panacea for immunising the developing world. ... ... China’s commitments to Covax have been minimal. Beijing has pledged only 10m doses and has yet to gain WHO emergency use approval or to deliver any shots. All vaccines face logistic hurdles, supply constraints and credibility concerns when shipping doses overseas, but Beijing’s persistent lack of transparency has made it hard to rule out more fundamental problems with the jabs, experts said. “The lack of clear data and information is still the biggest piece of the story,” said Andrea Taylor at the Duke Global Health Institute. “It sets them apart from the other vaccine candidates that have come to market.”...”

“...Its decision to provide vaccines exclusively to participants in its Belt and Road Initiative, rather than countries with the largest burden of coronavirus cases, “undermines the notion of donations being made purely as a way to increase global access to a public good”, said Tom Bollyky at the Council on Foreign Relations....”

Guardian - Call for UK to share spare doses as Unicef launches global vaccine drive
https://www.theguardian.com/society/2021/mar/21/call-for-uk-to-share-spare-doses-as-unicef-launches-global-vaccine-drive

“Wellcome Trust director speaks out as Brits are urged to back huge fundraising campaign to deliver jabs to 190 other countries. ... Farrar’s intervention came as Unicef announced it is bringing together a coalition of faith groups, fundraisers, celebrities and businesses to deliver vaccines to 190 countries under the banner of VaccinAid. VaccinAid is part of the global vaccine rollout under Covax ...”

WSJ - Covid-19 Vaccine Manufacturing in U.S. Races Ahead
“Vaccine makers are expected to produce 132 million doses this month, nearly tripling last month’s figure, boosting vaccination drive...”

Covid-19 vaccine manufacturers are ramping up production, churning out far more doses a week than earlier in the year, progress that is accelerating mass vaccination campaigns in the U.S. After a slow start, Pfizer Inc., its partner BioNTech SE and Moderna Inc. have raised output by gaining experience, scaling up production lines and taking other steps like making certain raw materials on their own. ... The companies—along with Johnson & Johnson, which recently launched a Covid-19 vaccine—also are teaming up with other firms to further increase production. ... In addition, the U.S. government has helped vaccine makers access supplies under the Defense Production Act, suppliers and government officials say. The Biden administration this month said it used the act to provide $105 million in funding to help Merck & Co. make doses of J&J’s Covid-19 vaccine and to expedite materials used in its production. ...

Think Global Health – The Politics of Vaccine Donation and Diplomacy

“Based on government websites, official statements, and media reports, as of March 25, Think Global Health has identified 14 countries that have donated a total of 22.5 million doses to 97 nations. The first half of this article will explore the nature of these donations, and the second will explain how vaccine diplomacy—the use or delivery of vaccines to advance political goals—is motivating four vaccine donors: China, India, Israel, and Russia....”

“...If donors are not distributing COVID-19 vaccines on the basis of need or equity, what is driving donations? China, India, Israel, and Russia, the four countries that have taken a global approach to vaccine diplomacy—i.e., providing vaccines to at least ten countries on three continents or more—have largely done so in alignment with their national and strategic interests....”

“Rather than advance global equity or provide relief to those most in need, donations have cemented traditional spheres of influence....”

The Diplomat – The Logic of China’s Vaccine Diplomacy
https://thediplomat.com/2021/03/the-logic-of-chinas-vaccine-diplomacy/

“An in-depth look at where China’s vaccines are going hints at the motivations behind the campaign.”

With detailed comprehensive table. Country by country. Details every country that's received Chinese vaccines, whether they've been donated or purchased, quantities and the brand of vaccine.

HPW - Sputnik V Vaccine Developers Expand The Global Production Network; EU To Resolve Supply Dispute With AstraZeneca
https://healthpolicy-watch.news/83996-2/
“Developers of Russia’s Sputnik V vaccine have entered into a partnership with Stelis Biopharma, an India-based drugmaker, to produce 200 million doses of the COVID-19 vaccine. Stelis is now the latest addition to the global production network for Sputnik V. The Russian Direct Investment Fund (RDIF), the company responsible for marketing the Sputnik vaccine abroad, announced the partnership on Friday, making Stelis – the biopharmaceutical division of Strides, an Indian pharma company – the most recent in a series of manufacturers RDIF signed agreements with....”

“... The Gamaleya National Research Institute of Epidemiology and Microbiology, the developer of Sputnik V, and RDIF have signed contracts with over 15 manufacturers in ten countries to produce 1.4 billion jabs and expand the manufacturing capacity for the vaccine. Certain factories, including ones in Brazil and Serbia, will be producing vaccines for the domestic population and others – in China, South Korea, India, and Iran – will be exporting vaccines to meet global demand....”

SCMP - Asia once led the coronavirus battle. Why is it behind on vaccines?

“As Israel parties, the UK and US see an end in sight. Yet in Asia, supply issues and scepticism have slowed the vaccine roll-out to a crawl; Rich countries like South Korea can afford the wait-and-see approach, but for Thailand, the Philippines and Indonesia there could be a greater toll...”

TWN - International Research Organizations Support WTO TRIPS Waiver for COVID-19


“Over 250 organizations and prominent researchers and experts, representing millions of researchers, educators, libraries, and support organizations globally, call for reduction of copyright barriers to COVID-19 prevention, containment and treatment.”

Reuters - WTO chief 'disappointed' in EU vaccine export restrictions


“The director-general of the World Trade Organization said on Tuesday she was disappointed in the European Union’s export authorisation scheme for COVID-19 vaccines, saying that she was talking to the bloc about this measure....”

And Ngozi on the Trips waiver proposal: “... Asked about her position on stalled WTO talks on an intellectual property waiver for COVID-19 drugs proposed by India and South Africa, she said she was not opposed to it. However, she said that it was important to also seek to boost manufacturing through other routes because the talks were “taking some time”. “What I have proposed is a third way because people are dying,” she said, adding that this included lowering export barriers and using existing capacity to increase output.”
“Legal hurdles and political questions remain over a European Commission mechanism for donating COVID-19 vaccines to other nations. Ann Danaiya Usher reports.”

“On Jan 19, 2021, the European Commission proposed the creation of a mechanism to allow member states to share some of the COVID-19 vaccine doses they have procured with non-EU countries. It is envisioned as a global clearing-house, a “single point for requests and a pipeline”, an EU spokesperson says, through which doses can be provided, “preferably through COVAX”, the vaccine distribution facility managed by Gavi, The Vaccine Alliance....

“Two months later, the EU sharing mechanism is still not in place....” “...Whether donations from the EU will all go to Gavi and COVAX has also been questioned. Some EU countries are pushing for vaccines to be shared with Europe’s neighbours first, particularly countries in the Eastern Partnership, which includes Armenia, Azerbaijan, Belarus, Georgia, Moldova, and Ukraine...”

“An EU spokesperson suggests that the two approaches would complement each other. “COVAX is our best vehicle to deliver on international vaccine solidarity and for the EU is the key channel for sharing vaccines”, she says, but adds, “it is in the EU’s own interest to share doses early on with our immediate neighbourhood, the western Balkans and Africa, to break the vicious circle of new mutations and to reduce the health risk for us all”. Bergström plays down the importance of the visibility argument and says there is broad consensus in the EU about sharing doses through COVAX. However, some countries in the neighbouring regions have not been able to access vaccines through COVAX and a project is underway to share first with those countries. These doses will be shared imminently and will probably amount to fewer than 1 million doses, he says, while the number of doses planned to be shared with COVAX is far greater.”

Biden Can’t Correct Vaccine Apartheid on Big Pharma’s Terms
Brook Baker; https://healthgap.org/vaccine-apartheid-myths-facts/

Refutation of some of the errors in Rachael Silverman’s op-ed, Waiving vaccine patents won’t help inoculate poorer nations.

Very hard to argue with the gist of this article. “...Her most important error is ignoring the fact that the proposed waiver would bring positive pressure and expand supply and accelerate more equitable distribution of life-saving and variant-preventing vaccines to the entire global population.”

Devex – Broad manufacturing of COVID-19 vaccines in Africa a ‘very tall order’

“Increasing the manufacturing capacity for COVID-19 vaccines in Africa could help ensure that the continent doesn’t “have to beg for vaccines when there is an outbreak,” said William Ampofo, chair of the African Vaccine Manufacturing Initiative. But a wide-scale increase in production won’t be simple, vaccine manufacturing experts said. Currently, African nations only produce 1% of the
vaccines used on the continent, with scattered, limited capacity. Some of the barriers to quickly ramping up production include inadequate incentives for investment, skills gaps, weak regulatory environments, and unknowns around long-term demand for COVID-19 vaccines. According to Ampofo, countries already producing vaccines include South Africa, Morocco, Tunisia, Egypt, and Senegal...."

“... The African Union is hosting a virtual summit from April 12 to 13 focused on creating a road map for the continent in this area....”

Telegraph - Poor planning and weak infrastructure threaten Africa's vaccine rollout, report warns

“African nations should look to Rwanda's 'four-pillar' approach as a blueprint for vaccine deployment.”

“A report by the Tony Blair Institute says the “unprecedented efforts” by scientists to develop vaccines against Covid should be met by “unprecedented efforts” by governments to prepare for the jobs. But in Africa – where, according to the World Health Organization just 51 per cent of 46 countries are equipped to deliver vaccine campaigns – this will be particularly challenging, the report warns. ...”

CGD (blog) - COVID-19 Vaccination and the Multilateral Development Banks: Moving Towards a More Systematic and Strategic Approach


“How should the MDB vaccine effort intersect with global efforts like COVAX, or indeed plans to share or donate vaccine amongst countries? In this blog, we look at two issues raised by the World Bank's approach so far and offer options for a better way forward.”


https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00708-X/fulltext

“...As members of the newly established International AIDS Society–Lancet Commission on Health and Human Rights, we are dismayed at how little attention has been given to human rights in discussions of access to COVID-19 vaccines. This must change. ...”

“...The Commission had its first meeting in early 2021 and expects to produce its first full report in 2022. The key questions that will inform our work are shown in the panel. We are charged with examining how to ensure that human rights are at the core of global health efforts, enabling them to fulfil the lofty goals outlined in the WHO Constitution, in international human rights treaties, and in many national constitutions and legal frameworks: that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction and
that the health of all peoples is fundamental to the attainment of peace and security and is dependent on the fullest cooperation of individuals and states....”

Think Global Health - The Urgent Need to Better Monitor Vaccine Safety in the Real World
J Guzman et al: https://www.thinkglobalhealth.org/article/urgent-need-better-monitor-vaccine-safety-real-world

“The colossal undertaking of global vaccine rollout is facing another gargantuan challenge: monitoring their safety...”

“... Many low- and middle-income countries, particularly in sub-Saharan Africa, don't have the capacity to monitor and report adverse events as they occur. “

Politico Global Pulse – Businesses hunt for vaccines as government campaigns stumble

“Some countries facing sluggish rollouts of Covid-19 vaccines or worsening crises are privatizing part of their inoculation campaigns, hoping to jumpstart efforts to crush the pandemic. ...”

Pakistan kicks off, with perhaps Brazil, the Philippines & Indonesia following soon.

And some links:


- IPS - End Vaccine Apartheid Before Millions More Die

A Chowdhury et al: https://www.thedailystar.net/opinion/news/end-vaccine-apartheid-millions-more-die-2065601

“At least 85 poor countries will not have significant access to coronavirus vaccines before 2023. Unfortunately, a year's delay will cause an estimated 2.5 million avoidable deaths in low and lower-middle income countries. As the World Health Organization (WHO) Director-General has put it, the world is at the brink of a catastrophic moral failure....”

- Devex - Africans view COVID-19 vaccines as less safe than other vaccines
“A survey report released this month on perceptions of inoculation in 15 African nations found that in almost all of them, respondents tended to view new COVID-19 vaccines as less safe than other vaccines....”

- Reuters - CanSinoBIO offered tens of millions of COVID-19 vaccine doses to COVAX: exec

“China’s CanSino Biologics Inc (CanSinoBIO) has proposed supplying “tens of million of doses” of its single-dose COVID-19 vaccine to global vaccine sharing scheme COVAX, a senior company executive said. China has four locally developed COVID-19 vaccines approved for public use and pledged earlier to supply 10 million doses to COVAX without specifying the time frame of delivery. CanSinoBIO, Sinovac Biotech Ltd and China National Pharmaceutical Group Co Ltd (Sinopharm) have applied to join the initiative...”

“... The three Chinese vaccine makers are still awaiting decisions on whether they can be included in the WHO’s Emergency Use Listing, a prerequisite to join COVAX.”

Covid analysis

The Conversation - What we learned from tracking every COVID policy in the world

Well worth a read. One year ago, “...we launched the Oxford COVID-19 Government Response Tracker to help find these answers. It has now become the largest repository of global evidence relating to pandemic policies. To date, more than 600 data collectors from around the world have helped us track 20 different categories of coronavirus response, including lockdown, health, economic, and now vaccine policies in 186 countries....”

“...A year on, what ... have we learned about how governments have handled the largest health crisis in memory?...”


By Charles Ssemugabo & Shakira Choonara. Helicopter view.
Global Policy - West Africa Tackles COVID-19: Contrasting Regional Approaches to Combating the Pandemic


“The efficacy of governance varies across West Africa, as does the region’s record in tackling the spread of the coronavirus. There are clear signs that good governance can boost a country’s ability to deal with the pandemic and its fallout.” “Surveying the region, Senegal and Ghana have, so far, demonstrated stronger Covid-19 responses than weakly governed ones like Nigeria and Mauritania...”

UN News - Women ‘systematically excluded’ from COVID response, despite being worst affected


“Notwithstanding that women make up 70 per cent of healthcare workers globally, and have been most affected by the COVID-19 pandemic, they are also being “systematically excluded” from decision-making processes aimed at ending the pandemic, including government-run task forces around the world, according to the head of UN Women. Women have suffered the worst impacts of COVID not only on the frontlines of healthcare, but also through the loss of jobs as the informal economy shrinks; an alarming spike in domestic violence; and the unpaid care burden that threatens to push 47 million additional women into extreme poverty, said a report published on Monday by UN Women, the UN Development Programme (UNDP) and the Gender Inequality Research Lab at the University of Pittsburgh. The data reveals that of 225 COVID-19 task forces up and running across 137 countries, only 24 per cent of members were women. ...”

International Affairs - Threat not solution: gender, global health security and COVID

S Harman; https://academic.oup.com/ia/advance-article/doi/10.1093/ia/iia012/6180992

“COVID-19 had led to long overdue visibility of the gendered determinants and impacts of health emergencies and global health security. This article explores why gender was neglected in previous health emergencies, what led to change in visibility of gender issues during the first six months of the COVID-19 pandemic, and the implications of such change for understanding the relationship between gender and global health security. ... The article argues that the change in visibility, research and advocacy around gender equality during the COVID-19 outbreak does not demonstrate an advancement in gender equality in global health. To the contrary, such visibility reinforces the inherent problems of global health security evident in the 2014–16 Ebola outbreak that create and reproduce binaries of neglect and visibility, and hierarchies of the global health issues that matter, the people that matter and the women that matter. What unites neglect and visibility of gender in global health security is that gender is understood as solution rather than threat. Combined these factors make gender equality incompatible with global health security.”
WB paper – From Double Shock to Double Recovery - Implications and Options for Health Financing in The Time of COVID-19

*World Bank:*

“The COVID-19 pandemic has resulted in a double shock - health and economic. ... Part I of this paper explores the impact of this current macro-fiscal outlook on the three primary sources of health spending. Drawing on experiences from previous economic crises, scenario analyses suggest a fall in government per capita spending on health in 2021 and 2022 unless governments make bold choices to increase the share of health in general government spending. The projected drop in per capita government spending on health is expected to coincide with lower levels of household out-of-pocket spending on health and a possible decline in development assistance for health (DAH). Part II of the paper discusses policy options to meet the spending needs in health. These options encompass strategies to make fiscal adjustments work and channel funds where they are most needed, as well as policies to stabilize the balance sheets of social health insurance (SHI) schemes. The paper explains how the health sector can play an active role in expanding fiscal space, contributing to tax reforms, most importantly pro-health taxes, and mobilizing and absorbing external financing, including debt relief.”

Related blog by C Kurowsky, D Evans et al - *Shrinking pie, larger slice – and other health financing ingredients for a timely and strong COVID-19 recovery.*

Key message: “From a shrinking government spending pie, a larger slice for health makes a balanced diet for most economies ailing from COVID-19....”

**HIV**

UNAIDS – End Inequalities. End AIDS. Global AIDS Strategy 2021-2026


New UNAIDS strategy. With focus on reducing inequalities. The aim is still to end AIDS as a public health threat by 2030.

See UNAIDS – UNAIDS Board adopts new global AIDS strategy which paves the way to end AIDS by 2030

“The UNAIDS Programme Coordinating Board (PCB) has adopted by consensus a new Global AIDS Strategy 2021–2026 to get every country and every community on track to end AIDS as a public health threat by 2030. The strategy was adopted by the PCB during a special session, chaired by the Minister of Health of Namibia, held on 24 and 25 March 2021....”

“The Global AIDS Strategy 2021–2026, End Inequalities, End AIDS, uses an inequalities lens to close the gaps preventing progress to end AIDS and sets out bold new targets and polices to be reached by 2025 to propel new energy and commitment to ending AIDS .... The three strategic priorities are to: (1) maximize equitable and equal access to comprehensive people-centred HIV services; (2) break down legal and societal barriers to achieving HIV outcomes; and (3) fully resource and sustain HIV
responses and integrate them into systems for health, social protection and humanitarian settings.
... If the targets and commitments in the strategy are achieved, the number of people who newly acquire HIV will decrease from 1.7 million in 2019 to less than 370,000 by 2025 and the number of people dying from AIDS-related illnesses will decrease from 690,000 in 2019 to less than 250,000 in 2025. The goal of eliminating new HIV infections among children will see the number of new HIV infections drop from 150,000 in 2019 to less than 22,000 in 2025."

Ebola

HPW – Guinea Discharges Last Ebola Patient – But New Findings About Long Virus Life Demand Vigilance


“As Guinea and the Democratic Republic of Congo discharge their last Ebola patients, following the most recent outbreak, new research points to the virus’ long lasting ability to lurk within the body. So while the 42 day countdown begins to the day when both countries can declare that the current outbreak is over, preparedness remains key to heading off future infections everywhere in the region, warns the International Federation of Red Cross and Red Crescent Societies (IFRC).”

NCDs

BMJ GH - Understanding global mental health: a conceptual review

V Rajabzadeh et al; https://gh.bmj.com/content/6/3/e004631

“Mental health disorders are viewed as a global concern requiring globally led approaches to address them. Since the publication of the 2007 Lancet series on global mental health (GMH), the term has become widespread. Over the last two decades, GMH has become increasingly affiliated with policy reform, academic courses, funding bodies and research. However, it is not always obvious how those working in the field of GMH are using the term, resulting in a lack of clarity. Therefore, work is needed to synthesise the current understanding(s) of GMH to help characterise its meaning. “This review synthesises the literature and identifies the different ways GMH is understood. Results “We developed a conceptual framework of four understandings of GMH. These understandings of GMH are as follows: an area of research generating findings to establish a GMH evidence-base; implementation of research into practice; improving the mental health environment; learning from and supporting low-and-middle-income countries (LMICs). Our review proposes a simple framework, clarifying the key characteristics of the GMH landscape.”


https://www.regjeringen.no/contentassets/eafd0d04fdb6464bb80fd1c9734d4e6a/betterlives_strategy.pdf
“Norway is the first donor country in the world with an international development strategy on NCDs and mental health...”

**Lancet – Migraine: epidemiology and systems of care**
M Ashina et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)32160-7/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)32160-7/fulltext)

Part of a new Lancet series on Migraine.

“In this Series paper, we summarise the data on migraine epidemiology, including estimates of its very considerable burden on the global economy. First, we present the challenges that continue to obstruct provision of adequate care worldwide. Second, we outline the advantages of integrated and coordinated systems of care, in which primary and specialist care complement and support each other; the use of comprehensiveerral and linkage protocols should enable continuity of care between these systems levels. Finally, we describe challenges in low and middle-income countries, including countries with poor public health education, inadequate access to medication, and insufficient formal education and training of health-care professionals resulting in misdiagnosis, mismanagement, and wastage of resources...”

Link:

BMJ Global Health - [Developing more detailed taxonomies of tobacco industry political activity in low-income and middle-income countries: qualitative evidence from eight countries](https://gh.bmj.com/content/6/3/e005604)

**Global Tax Justice**

**Daily Maverick - What next for Brexit Britain’s tax haven empire?**
Alex Cobham; [https://www.dailymaverick.co.za/article/2021-03-23-what-next-for-brexit-britains-tax-haven-empire/amp/?__twitter_impression=true&s=09](https://www.dailymaverick.co.za/article/2021-03-23-what-next-for-brexit-britains-tax-haven-empire/amp/?__twitter_impression=true&s=09)

“The UK and its network of overseas territories are responsible for the loss of $160bn in public money around the world each year – more than one-third of the global total lost to tax abuse by companies and individuals. But the world just may be witnessing the beginning of the end of this ‘third age’ of illicit financial flows....”

**Decolonize Global Health**

**BMJ GH (Editorial) - Decolonising global health in 2021: a roadmap to move from rhetoric to reform**
M Khan, S Abimbola, T Aloudat et al ; [https://gh.bmj.com/content/6/3/e005604](https://gh.bmj.com/content/6/3/e005604)
“... As a group of global health practitioners from different backgrounds, we reflect on our personal and professional experiences of systems and processes that institutionalise power imbalances. In this article, we propose a roadmap for global health practitioners, like us, who want to see rhetoric turn into reforms, focusing on systemic changes needed in organisations led from HICs. This is important now, because the flurry of statements and virtue signalling in 2020, could, in fact, be counterproductive, if this builds an impression of commitment that allows the leadership of organisations in HICs to escape accountability. We fully acknowledge that colonial mindsets and systems that perpetuate power imbalances in global health are not confined by geographical boundaries; they are found in organisations based in low/middle-income countries (LMICs) too. While we focus here on one part of the problem and the solution, we encourage individuals and groups in LMICs to challenge the status quo.”

They propose 3 steps that global health practitioners could take to drive reforms. A key one being ‘metrics’.

And, “...To achieve the steps outlined in our roadmap, we are calling for an Action to Decolonise Global Health (ActDGH) collective that will work towards driving reforms in organisations headquartered in HICs....”

“There is an opportunity to build on the momentum of 2020, which has been instrumental in drawing widespread attention to unjust practices in global health. But rhetoric is far easier than reform when power and privilege is at stake. Reform will require not only identifying specific deficiencies within the current global health sector, but also actions to radically change the prevailing systems, so that the organisations that currently dominate global health end up being those that demonstrably address needs of people they claim to serve. In 2021, we need to see action and evidence of progress.”

See also a tweet by Seye Abimbola:

“It was inevitable that “decolonizing” global health will become a buzzword. It is in the nature of such words & concepts. Maybe it is also their strength. The dead(?) bird in Toni Morrison’s Nobel lecture reminds me it doesn’t have to remain a buzzword. nobelprize.org/prizes/literatur...”

R4D - Raising the visibility of health systems experts from around the globe


“Last month, we launched a new platform — The Experts Database — for health financing and health systems strengthening experts based in low- and middle-income countries (LMICs). The platform was designed to be similar to LinkedIn — where experts and institutions could advertise their skillsets and experience and, in turn, make connections and find new opportunities— but with a particular goal to elevate the visibility of experts from LMICs...."
Planetary Health

Despite Pledges to Cut Emissions, China Goes on a Coal Spree
https://e360.yale.edu/features/ despite-pledges-to-cut-emissions-china-goes-on-a-coal-spree

“China is building large numbers of coal-fired power plants to drive its post-pandemic economy. The government has promised a CO2 emissions peak by 2030, but the new coal binge jeopardizes both China’s decarbonization plans and global efforts to tackle climate change.”

Guardian - Big banks' trillion-dollar finance for fossil fuels ‘shocking’, says report

“The world’s biggest 60 banks have provided $3.8tn of financing for fossil fuel companies since the Paris climate deal in 2015, according to a report by a coalition of NGOs. Despite the Covid-19 pandemic cutting energy use, overall funding remains on an upward trend and the finance provided in 2020 was higher than in 2016 or 2017, a fact the report’s authors and others described as “shocking”.....”

Guardian - Disease outbreaks more likely in deforestation areas, study finds
https://www.theguardian.com/environment/2021/mar/24/disease-outbreaks-more-likely-in-deforestation-areas-study-finds

“Outbreaks of infectious diseases are more likely in areas of deforestation and monoculture plantations, according to a study that suggests epidemics are likely to increase as biodiversity declines. Land use change is a significant factor in the emergence of zoonotic viruses such as Covid-19 and vector-borne ailments such as malaria, says the paper, published on Wednesday in Frontiers in Veterinary Science.....”

“The world’s biggest 60 banks have provided $3.8tn of financing for fossil fuel companies since the Paris climate deal in 2015, according to a report by a coalition of NGOs. Despite the Covid-19 pandemic cutting energy use, overall funding remains on an upward trend and the finance provided in 2020 was higher than in 2016 or 2017, a fact the report’s authors and others described as “shocking”.....”

Tree-planting can also increase health risks if it focuses too narrowly on small number of species, paper says...

BMJ GH (Commentary) - The changing climates of global health
T Cousins et al ; https://gh.bmj.com/content/6/3/e005442

“The historical trajectories of three crises have converged in the 2020s: the COVID-19 pandemic, rising inequality and the climate crisis. Global health as an organising logic is being transformed by the COVID-19 pandemic. We point to an emerging consensus that the triple threats of global heating, zoonoses and worsening, often racialised inequalities, will need to be met by models of cooperation, equitable partnership and accountability that do not sustain exploitative logic of economic growth. Health governance is challenged to reconsider sustainability and justice in terms of how local and global, domestic and transnational, chronic and infectious, human and non-human are interdependent. In this article, we discuss their intersection and suggest that a new set of organising ideals, institutions and norms will need to emerge from their conjunction if a just and liveable world is to remain a possibility for humans and their cohabitants. Future health governance...
will need to integrate pandemic preparedness, racial justice, inequality and more-than-human life in a new architecture of global health. Such an agenda might be premised on solidarities that reach across national, class, spatial and species divisions, acknowledge historical debts and affirm mutual interdependencies.”

NPR - Next Pandemic: Scientists Fear Another Coronavirus Could Jump From Animals To Humans


Should spark a new version of the Coldplay classic: ‘We live in a coronavirus world’.

“... scientists are worried that another coronavirus will strike again, from either a bat or some other animal. So they’ve gone hunting for potential sources — and the news is a bit concerning. "Coronaviruses are under our feet in rodents. They are above our heads in bats. We live in a kind of coronavirus world," says virologist Edward Holmes at the University of Sydney....”

Some other news

Washington Post - World Happiness Report is out, with a surprising picture of global resilience


“In a conclusion that even surprised its editors, the 2021 World Happiness Report found that, amid global hardship, self-reported life satisfaction across 95 countries on average remained steady in 2020 from the previous year. .... The report is good news regarding global resilience, experts say....”

Check out the key results here: World Happiness report 2021.

Telegraph – Urgent action needed as millions across the globe are ‘one step away from starvation’

Telegraph:

“ People in 20 countries around the world are facing acute hunger over the next few months, with parts of South Sudan already in famine. Two United Nations agencies – the World Food Programme (WFP) and the Food and Agriculture Organisation (FAO) – have identified 20 “hunger hotspots” where food shortages are likely to get worse over the coming months with South Sudan, Yemen and northern Nigeria at the highest risk. Already, over 34 million people are facing emergency levels of acute hunger – meaning they are one step away from starvation – across the world....”
Some papers and reports of the week

Globalization & Health - The critical intersection of environmental and social justice: a commentary


“The global crises of ecological degradation and social injustice are mutually reinforcing products of the same flawed systems. Dominant human culture is morally obliged to challenge and reconstruct these systems in order to mitigate future planetary harm. In this commentary, we argue that doing so requires a critical examination of the values and narratives which underlie systems of oppression and power. We argue for the moral necessity of a socially just approach to the ecological crisis....”

Financing for Sustainable Development Report 2021

https://developmentfinance.un.org/fsdr2021

“The 2021 Financing for Sustainable Development Report (FSDR) of the Inter-agency Task Force on Financing for Development warns that COVID-19 could lead to a lost decade for development. The report highlights the risk of a sharply diverging world in the near term where the gaps between rich and poor widen because some countries lack the necessary financial resources to combat the COVID-19 crisis and its socioeconomic impact. Short-term risks are compounded by growing systemic risks that threaten to further derail progress, such as climate change....”

Lancet GH - The injustice of unfit clinical practice guidelines in low-resource realities

N Maaloe et al; https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(21)00059-0/fulltext

“To end the international crisis of preventable deaths in low-income and middle-income countries, evidence-informed and cost-efficient health care is urgently needed, and contextualised clinical practice guidelines are pivotal. However, as exposed by indirect consequences of poorly adapted COVID-19 guidelines, fundamental gaps continue to be reported between international recommendations and realistic best practice. To address this long-standing injustice of leaving health providers without useful guidance, we draw on examples from maternal health and the COVID-19 pandemic. We propose a framework for how global guideline developers can more effectively stratify recommendations for low-resource settings and account for predictable contextual barriers of implementation (eg, human resources) as well as gains and losses (eg, cost-efficiency). Such development of more realistic clinical practice guidelines at the global level will pave the way for simpler and achievable adaptation at local levels. We also urge the development and adaptation of high-quality clinical practice guidelines at national and subnational levels in low-income and middle-income countries through co-creation with end-users, and we encourage global sharing of these experiences.”
FT - Special Report Future of AI and Digital Healthcare


In this joint commission from The Lancet and Financial Times on Governing Health Futures 2030, we explore how AI and other digital advancements are being harnessed to improve healthcare in the world’s poorest regions. Check out this week: FT - Five ways AI can democratise African healthcare

“Barriers need to be overcome before data and information technology can be harnessed in poorer countries.” They are: Infrastructure; data culture; regulations and standards; adopting local institutions; funding.


I Abubakar et al; https://gh.bmj.com/content/6/3/e004793

“...As in other countries, Nigerian policymakers had to make rapid and consequential decisions with limited understanding of transmission dynamics and the efficacy of available control measures. We present an account of the Nigerian COVID-19 response based on co-production of evidence between political decision-makers, health policymakers and academics from Nigerian and foreign institutions, an approach that allowed a multidisciplinary group to collaborate on issues arising in real time....”

You might also want to read (in Health Research Policy & Systems) : Identifying advocacy strategies, challenges and opportunities for increasing domestic health policy and health systems research funding in Nigeria: Perspectives of researchers and policymakers

Global Public Health - Global Health Diplomacy (GHD) and the integration of health into foreign policy: Towards a conceptual approach

A Ruckert, R Labonté et al ;

“Since the end of the Cold War, health has gone from a peripheral concern in foreign policy negotiations to a prominent place on the global political agenda. While the rise of health onto the foreign policy agenda is by now old news, the driving forces behind its expansion into new political spheres remain understudied and undertheorized. This article builds on empirical findings from a four-country study of the integration of health into foreign policy, and proposes a conceptual approach to GHD to improve understanding of the conditions under which health is successfully positioned on the foreign policy agenda. Our approach consists of three dimensions: features of institutions and the interest various actors represent in GHD; the ideational environment in which GHD operates; and issue characteristics of the specific health concern entering foreign policy. Within each dimension, we identify specific variables that, in combination, make up the explanatory power of the proposed approach. The proposed approach does not relate to, or build upon, a single social sciences, public health, or international relations (IR) theory, but can be seen as a heuristic
device to identify dimensions and variables that may shape why certain health issues rise onto the foreign policy agenda.”

Health Research Policy & Systems -Should policy makers trust composite indices? A commentary on the pitfalls of inappropriate indices for policy formation


“This paper critically discusses the use and merits of global indices, in particular, the Global Health Security Index (GHSI; Cameron et al. https://www.ghsindex.org/#l-section--map) in times of an imminent crisis, such as the current pandemic....”

Results: “This paper analyses the reasons for the poor match between prediction and reality in the index, and mentions six general observations applying to global indices in this respect. These observations are based on methodological and conceptual analyses. The level of abstraction in these global indices builds uncertainties upon uncertainties and hides implicit value assumptions, which potentially removes them from the policy needs on the ground....”

World Development Report 2021: Data for better lives

“...World Development Report 2021: Data for Better Lives explores the tremendous potential of the changing data landscape to improve the lives of poor people, while also acknowledging its potential to open back doors that can harm individuals, businesses, and societies. To address this tension between the helpful and harmful potential of data, this Report calls for a new social contract that enables the use and reuse of data to create economic and social value, ensures equitable access to that value, and fosters trust that data will not be misused in harmful ways...”

Short coverage: Devex - In Brief: World Bank report highlights data's double-edged sword

“Data is “indispensable” to global challenges such as reducing carbon emissions, which requires a standardized approach among countries, Smith said. But fewer than one-third of low-income countries have provisions for best-practice safeguards to govern how data is handled and used.”

Some blogs of the week

K Bertram - The dilemma of vaccine equity – Walking the talk on advocacy?
https://katribertram.wordpress.com/2021/03/22/the-dilemma-of-vaccine-equity/

This blog went viral this week. “In this blog, I explore the personal dilemma that many vaccine equity advocates face. This dilemma is not new: global health and international development advocates don’t always walk their own talk.”
Some tweets of the week

Dr Tedros
“I left Africa Finance Ministers with 3 essential requests for the R&D & production of #COVID19 vaccines in Africa: 1. support the proposal by South Africa & India for intellectual property waivers at @wto; 2. Ratify the treaty for the Africa Medicines Agency; 3. Invest in local manufacturing.”

Stephanie Nebehay
“Review of China’s #Sinopharm and #Sinovac #Covid vaccines for #WHO emergency use listing now expected in April, while it still awaits full documentation for Russia’s #Sputnik submission - @WHO.”

Balasubramaniam
“Informed sources have disclosed to KEI that an informal session of the @WTO TRIPS Council will take place on 24 March 2021 to discuss the TRIPS waiver.”

Tim Schwab
“Or how bout we talk abt how #GlobalCitizen--AKA "Global Poverty Project, Inc"(not joking)--takes $40m from the #GatesFoundation....& doesn't disclose this when promoting #BillGates's book?

Soraya Chemaly
“It’s Equal Pay Day 2021, so please talk about how, globally, girls’ and women doing unpaid and largely invisible work is a *wealth transfer* in the form of time and support to men. Time as an asset also being distributed unequally between women. Pandemic illustrates this sharply.”

Global health events

- Coming up – 30 March: DNDi webinar: Medicines for the People: What will the next decade look like?

DNDi (i.e. the medical R&D non-profit Drugs for Neglected Diseases initiative) is launching its new Strategic Plan 2021-2028, which is an opportunity to look ahead and ask: what will the next decade look like? How can we deliver on our commitments to people whose diseases have been historically overlooked by the traditional R&D model?

Webinar with: Marie-Paule Kieny, Director of Research, INSERM and DNDi Board Chair, Dr Bernard Pécoul, Executive Director, DNDi, Dr Bernhards Ogutu, Chief Research Officer, KEMRI and DNDi Board Member, Dr Jeremy Farrar, Director, Wellcome, and Dr Soumya Swaminathan, Chief Scientist, WHO.
The discussion will take place on 30 March at 4.30 pm Geneva time. More info and registration here: Webinar Registration - Zoom

- Coming up: April 1 - Gender & Power: A Conversation with Women From the Biden-Harris Transition COVID-19 Advisory Board

April 1, 12-1pm EDT  Upcoming event hosted by WomenLift Health, an organization funded by the Bill & Melinda Gates Foundation that works to close the leadership gender gap in global health.

The event will spotlight four women who served on the Biden-Harris Transition COVID-19 Advisory Board to discuss the importance of bringing a gendered and intersectional lens to the pandemic response. The event features Loyce Pace, Director of Global Affairs, Department of Health and Human Services, and others. Register here.

Global governance of health

Lancet Editorial – COVID-19: building a stronger Europe

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00720-0/fulltext

“...Building resilient health systems through improving health security is about more than vertical programmes related to emerging infections. A European Health Union has been proposed by the European Commission that retains member states’ national competencies but identifies health as an issue that transcends borders. Currently, it is unclear how far these proposals will go: strengthening the European Medicines Agency, the European Centre for Disease Prevention and Control, and pharmaceutical procurement chains are important steps. Health security across Europe will be built by reducing inequalities in life expectancy, facilitating broad public health measures, and strengthening individual health systems. But a European Health Union is a contentious issue for member states. ... ... The coming months hold much uncertainty and danger, but the EU and the wider European region have an opportunity to steer the immense health issues facing countries away from politicisation and division and toward a health diplomacy that builds a stronger EU within a stronger Europe. ...”

Devex - In Brief: Norway aims for more 'courage' in development innovation


“The Norwegian Agency for Development Cooperation wants to be less risk-averse this decade, its director general tol Devex. ... Norad published its 2030 strategy last week, including the aim to ‘Be a champion of innovation within development cooperation.’ ... As part of the move, which coincides with a similar effort in France, Solhjell said the agency is considering a dedicated financing mechanism to quickly trial new ideas....”

Devex - Samantha Power shares vision for an elevated USAID

“Samantha Power’s confirmation hearing Tuesday offered an early glimpse of what it might mean for the U.S. Agency for International Development to be led by a high-profile figure with influence that extends beyond foreign aid. More than six weeks after President Joe Biden nominated her as USAID administrator — and more than two months after announcing that he planned to — Power appeared before the Senate Foreign Relations Committee to share her vision for U.S. foreign aid. ... ... Power framed U.S. development engagement around “four interconnected and gargantuan challenges” that overlap with key Biden administration priorities: the COVID-19 pandemic, climate change, conflict and state collapse, and democratic backsliding....”


Chris Beyrer’s view.


“COVID-19 has significantly changed the project and funding landscape for water, sanitation, and hygiene, and will continue to do so, experts say....”


“The Lancet–O’Neill Institute/Georgetown University Commission on Global Health and Law published its report on the Legal Determinants of Health in 2019. The term ‘legal determinants of health’ draws attention to the power of law to influence upstream social and economic influences on population health. In this article, we introduce the Commission, including its background and rationale, set out its methodology, summarize its key findings and recommendations and reflect on its impact since publication. We also look to the future, making suggestions as to how the global health community can make the best use of the Commission’s momentum in relation to using law and legal tools to advance population health.”

Link:

Politico - Trump vaccine chief Slaoui fired from pharma board over sexual harassment allegations
Health Systems & Reform - Is Universal Health Coverage Affordable? Estimated Costs and Fiscal Space Analysis for the Ethiopian Essential Health Services Package


“Estimating the required resources for implementing an essential health services package (EHSP) is vital to examine its feasibility and affordability. This study aimed to estimate the financial resources required to implement the Ethiopian EHSP from 2020 to 2030. Furthermore, we explored potential alternatives to increase the fiscal space for health in Ethiopia.”

Planetary health

Guardian - Top US scientists back $100m geoengineering research programme

https://www.theguardian.com/environment/2021/mar/25/top-us-scientists-back-100m-geoengineering-research-proposal

“The US should establish a multimillion-dollar research programme on solar geoengineering, according to the country’s national science academy. In a report it recommends funding of $100m (£73m) to $200m over five years to better understand the feasibility of interventions to dim the sun, the risk of harmful unintended consequences and how such technology could be governed in an ethical way. The National Academies of Sciences (NAS) said cutting fossil fuel emissions remained the most urgent and important action to tackle the climate crisis. But it said the worryingly slow progress on climate action meant all options needed to be understood.”

Guardian - The latest must-have among US billionaires? A plan to end the climate crisis


“Elon Musk, Jeff Bezos and Bill Gates have an estimated wealth of $466bn – and are emblematic of a Davos-centric worldview that sees free markets and tech as the answer.”

IISD - Brief Recommends Policy Shifts to Improve Health in the Anthropocene


“The brief titled ‘COVID-19 and Planetary Health: How a Pandemic Could Pave the Way for a Green Recovery’ uncovers a key lesson for building back better from the COVID-19 pandemic: policies must link climate, biodiversity and health. In recognition of the idea that “human health in the Anthropocene requires an integrated approach,” the brief sets out several priority areas for
policymakers. The brief is part of the Still Only One Earth series being published by IISD in the lead-up to Stockholm+50.”

Guardian - Climate fight 'is undermined by social media's toxic reports'
https://www.theguardian.com/environment/2021/mar/21/climate-fight-is-undermined-by-social-mediass-toxic-reports

“Scientists warn that Nobel summit and long-term decisions to save the planet are at risk from targeted attacks online.”

Guardian - Summers could last for half the year by 2100

“Heatwaves and wildfires will be more likely and winter will be squeezed to just 31 days.” Based on new research.

CGD Policy paper - How Do Development Agencies Support Climate Action?
R Calleja; https://www.cgdev.org/publication/how-do-development-agencies-support-climate-action

“This paper explores how development agencies are integrating climate action into development portfolios in response to calls to scale-up climate engagements in alignment with both the SDGs and the Paris Agreement. Using data compiled on all 30 members of the Organisation for Economic Co-operation and Development’s Development Assistance Committee (OECD-DAC), this paper maps and analyzes trends in both the scale and usage of official development assistance allocated to support climate activities and the tools and approaches used to integrate climate across development activities. This paper shows that while climate has become a key priority for development agencies, there remains scope for deepening integration by improving monitoring and reporting of climate and development results, integrating climate considerations across the life cycle of projects, and searching for complementarities across agencies.”

Link:

Guardian - Soil’s ability to absorb carbon emissions may be overestimated – study

Infectious diseases & NTDs

Lancet Global Health (Comment) - The optimum implementation of long-acting injectable cabotegravir–rilpivirine in sub-Saharan Africa
https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(21)00052-8/fulltext
“The current armamentarium for the treatment of HIV infection has advanced from taking multiple pills several times a day to a single-combination tablet daily. Now people living with HIV also have the promise of long-acting injectable antiretroviral treatment, such as long-acting injectable cabotegravir, an integrase strand inhibitor, together with rilpivirine, a long-acting nucleoside reverse transcriptase inhibitor. This advance in drug delivery is a potential game changer in the management of HIV infection....”

Comment linked to the Lancet GH study - The optimum implementation of long-acting injectable cabotegravir–rilpivirine in sub-Saharan Africa.

NCDs

Lancet Global Health (Comment) - Innovations for effective implementation of guideline-based hypertension care in low-income and middle-income countries

https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(21)00083-8/fulltext

Linked to a new study in the Lancet Global Health - Budget impact and cost-effectiveness analyses of the COBRA-BPS multicomponent hypertension management programme in rural communities in Bangladesh, Pakistan, and Sri Lanka.

Sexual & Reproductive / maternal, neonatal & child health

Devex - Despite pressure, WHO review keeps status quo malnutrition treatment


“The World Health Organization will not endorse plant-based ready-to-use therapeutic foods, saying more data is needed even after trials showing promise for recipes that could increase coverage of wasting treatment.”

Access to medicines

Global Health: Science & Practice - The Evolving Landscape of Medical Device Regulation in East, Central, and Southern Africa

S Hubner et al; https://www.ghspjournal.org/content/early/2021/03/24/GHSP-D-20-00578

“Most existing medical devices were not built for the challenges often present in many African countries. Regulatory systems for medical devices are essential to ensuring device safety and efficacy. Yet, currently, most African countries do not have a well-defined regulatory process. This discourages
both innovators within Africa and companies outside of Africa from developing quality medical devices suitable for these challenges.”

**Human resources for Health**

HRH- Hiding in plain sight: the absence of consideration of the gendered dimensions in ‘source’ country perspectives on health worker migration


“A Canadian-led research team partnered with co-investigators in the Philippines, South Africa, and India to examine the causes, consequences and policy responses to the international migration of health workers from these ‘source’ countries. ...” With explicit gender based analysis.

“The documentary analysis of health worker emigration from South Africa, India and the Philippines reveal that gender can mediate access to and participation in health worker training, employment, and ultimately migration. Our analysis of survey data from nurses, physicians and other health workers in South Africa, India and the Philippines and interviews with policy stakeholders, however, reveals a curious absence of how gender might mediate health worker migration....”

**Extra Covid section**

As mentioned, we will put more and more analyses & bits of Covid news in this extra section. Also relevant and interesting to know, make no mistake, but more for the “Covid die-hards” among you :)

**Telegraph - The idea of ‘zero Covid’ is an illusion**

[https://www.telegraph.co.uk/health-fitness/mind/idea-zero-covid-illusion/](https://www.telegraph.co.uk/health-fitness/mind/idea-zero-covid-illusion/)

The view of Peter Piot.

“... As for Covid, I think the most likely scenario a year from now is some seasonal outbreaks – just as we have for the flu – and endemic low grade coronavirus infections, but with much lower mortality thanks to vaccination. The future trajectory will also depend on the severity of unavoidable new variants and whether people will accept vaccines. I think a successful vaccination roll-out should also involve children otherwise they will be continuous reservoirs of infection. As for the idea of pursuing a ‘zero Covid’ strategy’ – I think that is an illusion. There is only one human virus that has ever been eradicated and that is smallpox.”

**BMJ Feature - Covid-19: What do we know about Sputnik V and other Russian vaccines?**

[https://www.bmj.com/content/372/bmj.n743](https://www.bmj.com/content/372/bmj.n743)
In August 2020, Russia’s President Vladimir Putin surprised the world by approving its first domestically developed covid-19 vaccine, before phase III clinical trials had even begun. Chris Baraniuk reviews what we know—and don’t.”

Telegraph - From inhaling steam to smoking dope: tackling Covid myths in West Africa
[Telegraph;]

“Misinformation about the virus has spread like wildfire but the region’s fragile health system means it can have ‘fatal consequences’.”

Nature - Rare COVID reactions might hold key to variant-proof vaccines
[https://www.nature.com/articles/d41586-021-00722-8?utm_source=twt_nnc&utm_medium=social&utm_campaign=naturenews]

“Some people mount an immune response able to fend off a menagerie of coronavirus variants.”

Reuters - China donates 400,000 doses of Sinopharm vaccine to Niger
[Reuters;]

“China donated 400,000 doses of the COVID-19 vaccine developed by Sinopharm to Niger on Sunday, the first vaccines the West African nation has received, Niger’s presidency said....”

AP - China urges unhurried public to get vaccinated against COVID
[https://news.yahoo.com/china-urges-unhurried-public-vaccinated-111141836.html]

“...Through Saturday, nearly 75 million vaccine doses have been given, the country’s National Health Commission said. The number of people inoculated would be less, as some people have taken two shots. China, with 1.4 billion people, has a much lower rate of vaccination than many other countries. “Many people mistakenly think there is no practical meaning to be vaccinated because the epidemic situation is under effective control and the virus is far away from us,” He Qinghua, a National Health Commission official, said at the same news conference....”

Guardian - Covid 'may leave 12 million children unable to read'

“More than half of all children who turn 10 this year will reach their milestone birthday without being able to read a simple sentence, according to a new analysis of UN data. Of those 70 million 10-year-olds, 11.5 million of them could be unable to read as a direct result of the impact on education of the Covid pandemic....”
WHO Bulletin - COVID-19-related misinformation on social media: a systematic review
https://cdn.who.int/media/docs/default-source/bulletin/online-first/blt.20.276782.pdf?sfvrsn=5550403_5

Reviews misinformation related to coronavirus disease 2019 (COVID-19) on social media during the first phase of the pandemic and discusses ways of countering misinformation.

Africa Journal of Management - Introduction to the special issue: Preliminary investigations into the COVID-19 pandemic and management in Africa

“...In this special issue, we take the initial steps in providing a broad overview of the effects of the pandemic and the management implications for Africa. We further present six studies that provide preliminary investigations into the impact and responses of individuals, organizations, and nations. The studies focus on the effects of the lockdowns in making sense of societal inequality through social class and race, how cultural orientation and strategic responses affect pandemic outcomes, how the pandemic engenders innovation and entrepreneurship, strategic responses of firms and performance, experiences of and prospects for management education post-COVID-19, and how the pandemic has affected artisanal small-scale miners and mining communities...”


“Following the extraordinarily rapid development of COVID-19 vaccines, immunisation is underway in many OECD countries. However, demand will continue to outstrip supply for some time and currently, distribution is strongly skewed in favour of high-income countries. This both inequitable and inefficient. Directing vaccine to where need is greatest would maximise the number of lives saved and speed bringing the pandemic under control, by slowing transmission and reducing the likelihood of the emergence of viral variants of concern. Governments should therefore act now to accelerate vaccination globally, regardless of international borders, by reallocating supplies to areas of greatest need; continuing the scaling-up of production; ensuring that necessary logistics and health care infrastructure are in place; providing further financial and in-kind support to COVAX; and developing long-term strategies that include commitments to making vaccines available where they are needed most, including through sharing intellectual property and facilitating technology transfer.”

Reuters - Ghana takes delivery of first COVID-19 vaccines donated by MTN Group
Reuters;

“The first 165,000 of up to 7 million COVID-19 vaccine doses that MTN Group is donating to African countries have arrived in Ghana, the South African telecoms company said on Tuesday. It is
donating $25 million to support the African Union’s vaccination programme. The vaccines are intended to be distributed to health workers across the AU’s 55 member states....”

Reuters - China triples output of COVID-19 vaccines from early February: Xinhua

Reuters;

“China’s daily output of COVID-19 vaccines has reached about 5 million doses, more than tripling the 1.5 million-dose daily production rate on Feb. 1, official media said on Wednesday. China has supplied more than 100 million doses domestically, the Xinhua news agency said on its social media page, citing Xiao Yaqing, the minister of industry and information technology....”

Cidrap News - Brazil’s COVID-19 crisis affecting nearby countries


“The worsening COVID-19 surge in Brazil—a dire situation that has filled much of the country’s intensive care unit (ICU) capacity—is affecting its neighbors, officials from the Pan American Health Organization (PAHO) said today....”

FT - India’s second Covid wave undermines herd immunity theory

https://www.ft.com/content/38f5398a-8588-48a1-86db-3e8050bace51

“Easing of lockdown restrictions, new variants and reinfections are cited as potential driving factors.”

Guardian - China denies offer of ‘vaccine diplomacy’ deal to Paraguay


“Brokers allegedly offered Paraguay Covid vaccine supplies in exchange for country cutting ties with Taiwan.”

Global Public Health - The necropolitics of COVID-19: Race, class and slow death in an ongoing pandemic


“Achille Mbembe states that ‘the ultimate expression of sovereignty resides, to a large degree, in the power and the capacity to dictate who may live and who must die [...]. To exercise sovereignty is to exercise control over mortality and to define life as the deployment and manifestation of power’ (Mbembe, 2003. Necropolitics. Public Culture, 15(1), 11–40. https://doi.org/10.1215/08992363-15-1-11). For Mbembe a key question is ‘under what practical conditions is the right to kill, to allow to live, or to expose to death exercised?’... This article will map the necropolitical underpinnings of
racial and class-based health disparities and vulnerabilities in the current COVID-19 pandemic. The article will directly engage with the question of ‘under what practical conditions are the right to expose to death’ unfolding in the current COVID-19 pandemic. Drawing on news media representations and public health data in the UK and the U.S, the article will provide a disciplinary conjecture arguing for the importance of looking at what I call a ‘state of acceptance’ plays into the necropolitical dynamics of the COVID-19 pandemic.”

Stat Plus – Behind the scenes, companies helping big Covid-19 vaccine makers are getting rich

Stat

“Pfizer and Moderna aren’t the only vaccine money-makers. Much of the revenue and profits from Covid-19 vaccines are flowing behind the scenes, going to the contract manufacturers and clinical-trial organizers that turn the shots from lab-bench theory to mass-produced reality…. ... contractors hired to test and produce these vaccines have enjoyed a share of the profits without the same level of public scrutiny....”

Global Public Health - Global justice and the COVID-19 vaccine: Limitations of the public goods framework


“As vaccines for COVID-19 were first being approved for use, there were widespread calls for it to be assigned a ‘global public good’. However, allocating the COVID-19 vaccine globally poses a novel challenge of redistribution, one that cannot be effectively undertaken using current mechanisms for the dispensation of aid. An examination of the origins and implicit logic of global public goods theory shows that it would not be effective as a framework in this context. I argue that while it is a useful rhetorical tool to underscore the need for global access, it fails to account for concerns arising out of structural inequities between countries in the Global South and North. In addition to being ill-defined, the phrase encodes a neoliberal logic – one that prioritises the protection of private capital over democratic claims of redistribution and social justice. To ensure global access, our attention must be focussed instead on explicitly accounting for inequities, securing access for countries in the Global South and addressing the norm-setting powers of pharmaceutical companies.”