IHP news 706 : The mammoth in the room

(27 January 2023)

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,

With Oxfam's annual Davos report on gross inequity behind us, the global health elite is all set to again "PPP & Super-PPP" for the remaining 51 weeks of the year. Whether that's wise in today's world is another issue.

Early this morning, **the PMAC 2023 conference** [kicked off](#) in Bangkok, themed "Setting a New Health Agenda – at the Nexus of Climate Change, Environment and Biodiversity". As the organizers correctly state, "***The triple planetary crisis – Climate Change, Biodiversity Loss, and Pollution** – has been identified as the most significant health threat of the 21st century*."   They even forgot to add another one, which has sadly become more prominent again since last year, as this week's Doomsday clock ["record" adjustment](#) pointed out. I've personally also noticed that the 'Pandemic Preparedness and Response' section of this newsletter seems to grow with every passing week (*which I doubt is a good sign either*). Nevertheless, you know us, there's always a silver lining in this newsletter, and so we've been told the newly started '**Year of the Rabbit'** will bring harmony, health and other goodies. If Xi himself says so, it must be true.

Speaking of these goodies, in spite of our undeniably dire times, I still think that many of these are actually up to us. I was reminded of that, as I was watching a [G2H2 webinar](#) (in the series of briefings and policy debates ahead of the **152ⁿᵈ WHO Executive Board meeting**)**,** "*Moving together for universal access to healthcare?* ***What to expect from a UN High Level Meeting on UHC and a related resolution of the WHO Executive Board?*"**

At some point during the discussion, **Nicoletta Dentico** forcefully referred to the 'elephant in the room' – **global financial injustice** (*also tackled in a G2H2 report from end of last year, [Financial Justice for Pandemic Prevention, Preparedness and Response](#)*). Actually, by now it feels more like the "**mammoth in the room"**, as not just health systems in the Global South but even [some in the North](#) increasingly seem close to imploding (*and that's just the health sector*). Nevertheless, it appears most "actors" and "stakeholders" prefer to ignore this mammoth, even if the forthcoming political declaration (in New York), EB resolution and similar documents will no doubt once again contain all the right words on UHC & Health for All.

True, there are some exceptions, like the [WHO Council on the Economics of Health for All](#) or the UNAIDS boss, but they badly need (y)our support.   For example via the **UHC 2030 survey**, which "*invites you to participate, as an individual or a representative of your country, organisation, or community, to **provide feedback on the high-level political messages in the Action Agenda**. …. The consultation will be open until 6th February 2023 and is available in English, French and Spanish. You can access the survey [here](#) "*.

On a side note: for the many 'realists' among you, I'm aware that at least in the medium term, defence budgets will rise further. Still, nothing prevents us from taxing the windfall profits from defence companies. It's a 'healthy principle' anyway in our late capitalist times to '**tax the bejesus'** (*HT a* [tweet](#)) **out of all multinational companies who've been making obscene profits since 2020** (whether Big Pharma, Big Tech, Big Shipping and more recently fossil fuel companies, and now also defence companies).

The alternative is to be 'prepared' and 'resilient' till we drop. Doubt that's how we want our kids to grow up.

Enjoy your reading.

Kristof Decoster

Featured Article

The global gap in access to opioid analgesics for pain management: why is this (still) a silent crisis?

Raffaella Ravinetto (ITM)

Opioid analgesics are essential medicines, needed for treating acute and chronic pain. Morphine, methadone, hydromorphone, oxycodone, codeine and fentanyl are all listed in the [WHO Model Lists of Essential Medicines](#). However, being "attractive" for illicit use and abuse, they are also listed as "controlled substances" under the [Single Convention on Narcotic Drugs](#) (UN Office on Drugs and Crime).

The illicit production and use of opioids keeps on causing a huge death toll, despite attempts to prevent and repress them. North America in particular is hit by an ["epidemic" of fentanyl-related overdoses](#) that receives broad coverage from the scientific and [lay press](#). But another crisis that causes a lot of human suffering is rarely or not covered by mainstream media, and almost ignored by the general public: thousands of children, adults and elderly living in low- and middle-income countries (LMICs) do not have access to the opioid medications they need for acute, chronic or terminal pain. In the words of a (2018) Lancet Commission, [Alleviating the access abyss in palliative care and pain relief—an imperative of universal health coverage: the Lancet Commission report](#): "*poor people in all parts of the world live and die with little or no palliative care or pain relief. Staring into this access abyss, one sees the depth of extreme suffering in the cruel face of poverty and inequity. The abyss is broad and deep, mirroring relative and absolute health and social deprivation*".

Let's look at some of these figures more in detail: "*Of the 298·5 metric tonnes of morphine-equivalent opioids distributed in the world per year (average distribution in 2010–13), only 0·1 metric tonne is distributed to low-income countries. The amount of morphine-equivalent opioids distributed in Haiti is 5 mg per patient in need of palliative care per year, which means that more than 99% of need goes unmet. By contrast, the annual distribution of morphine is 55 000 mg per patient in need of palliative care in the USA and more than 68 000 mg per patient in need of palliative care in Canada—much more than is needed to meet all palliative care and other medical needs for opioids on the basis of estimates*

of the *Commission*". These are 'killer stats', as is depicted in a very telling world map in the Commission. The global imbalance is very similar to the one observed for antiretrovirals during the HIV crisis in the 2000's, or for COVID19 vaccines and therapeutics during the pandemic. However, the issue does not attract the attention of the press or the public. Where does this neglect come from?

One possible explanation is linked to **complexity**. The barriers to access and use of opioid narcotics are multiple and located at various levels, both in-country and internationally. They include onerous legislation, regulation and policies, complex international trade controls, and issues in financing, sourcing and supply; but also cultural attitudes and fear of dependance, absence of knowledge and training among health professionals, and poorly-developed or absent palliative care systems. This complex web of responsibilities and shortcomings is difficult to translate into communication and advocacy language.

Another explanation is linked to opioids' **potential for misuse**. In order to adequately protect individual and public health, international and national regulations should achieve a delicate balance between ensuring access for medical needs on the one hand, and preventing abuse and diversion on the other. This is a challenging and somewhat controversial task, as proven by the long process to revise the WHO guideline on ensuring balanced national policies for access and safe use of controlled medicines (announced in 2019 already). The (perceived) thin line between medical use and abuse may discourage activists and journalists from taking the lead on a vocal advocacy campaign - differently from what happened for antiretrovirals and COVID19 vaccines.

A third explanation is suggested in the work of King and Fraser, who in 2013 linked this neglect to **prevailing ideologies in global health**. They noted that "*both the biomedical and public health approaches to global health marginalize or ignore pain management, viewing it as a drain on resources that would be better spent on cure or prevention*". De facto, many global health efforts indeed embrace a ''biomedical'' model, which prioritizes the treatment and eradication of disease and directs resources to treating the diseases, with the unwanted consequence of neglecting the suffering caused by the disease.

These three reasons – complexity, potential for misuse, and prevailing ideologies in global health- may jointly explain the neglect of untreated pain in global health, despite a *"growing consensus that freedom from unnecessary pain is a fundamental human right"*. They don't justify it, though. Efforts are needed to overcome this ethically unacceptable inequality in global health, and push for pain management to be systematically included in universal health coverage policies and packages.

For a start, let's make this one of the priorities later this year, at the UN High-Level Meeting on UHC in New York.

Highlights of the week

Run-up to the WHO's EB 152 meeting

https://apps.who.int/gb/e/e_eb152.html

WHO's 152nd Executive Board meeting starts on 30 January.

Below some stuff to get you a bit in the mood already.

Via HPW: "…. **WHO Executive Board focus on resources:** *The* **key issues to be discussed at next week's WHO's executive board meeting, involve money and resources,** *according to Dr Tim Armstrong, WHO's director of the department of governing bodies.* **Armstrong's top three issues** *from over 40 agenda items are* **the new programme budget for 2024/25, sustainable financing and an enhanced central role for the WHO in the global health architecture,** *particularly to support member states during health emergencies….."*

GHTC - WHO Executive Board preview: The next chapter for the global health architecture

P Kenol; https://www.ghtcoalition.org/blog/who-eb-2023-preview

With a focus on **4 issues** to watch: **Continued focus on global health security ; Limited progress on the implementation of the clinical trials resolution ; A new resolution on diagnostics could be passed ; UHC back in the spotlight.**

TGH - Topics Creating Buzz Ahead of WHO's Upcoming Executive Board Meeting

K Dodson; https://www.thinkglobalhealth.org/article/topics-creating-buzz-ahead-whos-upcoming-executive-board-meeting

Sketching three main themes ☹ 1) **Ten Bold Proposals for a Safer and More Equitable World to strengthen the global architecture for Health Emergency Preparedness and Response (HEPR).** (2) From Words to Action on **Sustainable Financing for the WHO** ("*The upcoming executive board meeting will be the first time member states will be expected to make good on their promise to approve recommendations for a 20 percent increase to the scale of assessed contributions for the 2024-2025 biennium budget"*) ; **(3) The Starting Gun for Global Health in 2023.**

G2H2 webinars: 23-27 January 2023: Series of public briefings and policy debates ahead of WHO EB 152, hosted by G2H2

https://g2h2.org/posts/january2023/

See this week's intro. With **recordings of the webinars** & key documents. Warmly recommended!

WHO Tracker

where you can search for specific items (eg: FENSA).

See also https://who-track.phmovement.org/eb152 (**organized per agenda item**, with also PHM comment already there in many cases).

Geneva Health Files - A Resolution on Diagnostics at The WHO Executive Board: A Test for Equity?

[Geneva Health Files](#);

Analysis of one resolution to be discussed at the WHO EB.

"*In December 2022, WTO members failed to reach an agreement on whether certain IP rules could be temporarily suspended to improve the access to diagnostics and treatments for COVID-19. This was after months of stalled discussions that eventually resulted in no headway. Now, at WHO, in a matter of weeks, WHO member states (yes, the same set of countries) may have pulled off a good resolution on improving diagnostics capacity. Notwithstanding the fundamental difference between binding WTO rules and the non-binding nature of WHO resolutions, this is significant…..*"

"*A draft resolution on diagnostics currently being discussed in Geneva, that will be taken up at the Executive Board meeting next week, may well turn out to be a test case on how countries will address equity issues concretely in the Pandemic Accord negotiations. To be sure, the politics of IP mirrored in these discussions as well…..*"

"*…. This analysis is **based on the version of the draft resolution as on January 23rd, seen by** Geneva Health Files, **and looks at a few, key elements in the text. The resolution is being led by Eswatini**. ….*"

Covid still a PHEIC?

Later today, WHO's emergency committee on Covid-19 gets together on this issue.

Ahead of the meeting, a global update on Covid via **Cidrap News: [Global COVID deaths rise as WHO emergency committee weighs COVID status](#)** "*The World Health Organization (WHO) emergency committee will meet [today] to assess whether the situation still warrants a public health emergency of international concern (PHEIC) **against a backdrop of declining cases—but rising deaths…..**"*

"***The WHO said deaths have been rising since early December, even without adding the more than 72,000 hospital deaths reported from China's recent surge.*** *The WHO is still waiting for a province-level breakdown of deaths from China before adding its fatalities to the global total. **At a WHO media briefing this week, Director-General Tedros Adhanom Ghebreyesus, PhD, aired concerns about the death trend. He said over the past 8 weeks, more than 170,000 people have died from COVID-19, adding that the actual number is much higher due to unreported deaths…..**"*

HPW - Too Early to Decide on Annual COVID-19 Boosters as Virus Has No Seasonal Pattern Yet

https://healthpolicy-watch.news/seasonal-pattern-to-covid-19/

On Tuesday's WHO messagi*ng. "While the World Health Organization's (WHO) emergency committee on COVID-19 will decide this week whether the virus still constitutes a global health*

emergency, the body's Director-General, Dr Tedros Adhanom Ghebreyesus, is "very concerned" about the pandemic."

*" "While I will not pre-empt the advice of the emergency committee, I remain very concerned by the situation in many countries and the rising number of deaths," **Tedros told a media briefing on Tuesday. He described the global COVID-19 response as being "under strain" with too few vulnerable people adequately vaccinated, too many people behind on their boosters, antivirals remaining too expensive, fragile health systems struggling with COVID-19 and other diseases, alongside a "torrent of pseudoscience and misinformation"."***

*"… **Dr Joachim Hombach, executive secretary of the WHO Strategic Advisory Group of Experts on Immunization (SAGE) agreed**: "For the time being, **COVID hasn't really come down to the usual seasonal seasonality that we see for other viruses. The virus is still fairly unstable** so it is a bit of anticipation if we end up in a seasonal pattern as we have it for instance for influenza."" ""…. It **is conceivable that annual vaccination would be suitable**. You basically have to find the sweet spot between waning immunity and the benefit and the effort of providing an additional vaccination," said Hombach…."*

Stat - Is WHO ready to end the global health emergency over Covid? Maybe not just yet

https://www.statnews.com/2023/01/25/is-who-ready-to-end-covid-global-health-emergency/

Recommended read, starting from the same WHO media briefing on Tuesday. Some chunks:

*"**On Friday, an emergency committee will meet again to deliberate whether the time has come to recommend to WHO Director-General Tedros Adhanom Ghebreyesus that he declare the global health emergency is over**. The final decision rests with Tedros, who generally — [though not always](#) — follows the advice of WHO emergency committees. **This gathering, the committee's 14th, comes as Covid rips for the first time through the world's most populous nation, after China lifted the draconian ["zero Covid" policy](#) that kept the virus at bay for nearly three years. That factor alone could persuade the committee that this is not the time to advise Tedros to call an end to the PHEIC,** a designation that grants the WHO director-general certain powers, including the ability to issue recommendations for how countries should respond…."*

*"…. **Whatever the decision Friday — which likely won't be revealed until Monday — outside experts acknowledge the Covid pandemic may no longer strictly meet the criteria for a PHEIC (pronounced "fake").** …. Under the **International Health Regulations (IHR**), a binding international treaty, **a public health emergency of international concern can be declared in the face of a health event that meets three criteria: it is serious, sudden, unusual, or unexpected; it has the potential to spread across borders; and it may require a coordinated international response.** Covid is still serious, but sudden, unusual, or unexpected? Not any more. Borders have been crossed; the virus has spread planet-wide. At this point in the pandemic, international responses are being wound down."*

*"Still, **Tom Bollyky,** director of the global health program at the Council on Foreign Relations, doesn't expect quick action on terminating the PHEIC. He **suspects the WHO may end the Covid PHEIC in 2023 — but not now."***

"…. The emergency committee itself has indicated, though, that it is thinking about how to land the plane. …. The discussion on how to safely end a PHEIC will take place Friday, in conjunction with the meeting of the emergency committee, WHO spokesperson Tarik Jašarević told STAT. "It is an informal technical discussion of the committee with the secretariat on the criteria for terminating the PHEIC." …. … One of the problems for this committee, and for the WHO, is that while there are guidelines for when a PHEIC may be declared, there are none for when one should be ended."

"…. Ending the PHEIC would not be a declaration that Covid no longer poses a threat to the world, nor would it constitute a declaration by the WHO that the pandemic is over. In fact, there is unlikely to be a declaration of the end of the pandemic — not now, not later….."

UHC

Lancet Comment -Human security and universal health coverage: Japan's vision for the G7 Hiroshima Summit

F Kishida; https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)00014-4/fulltext

By the **current prime minister of Japan**, so you know you have to read this.

"***The international community, including Japan, is now discussing the way forward for global health architecture to ensure better health and living standards for all people—with a sense of urgency. I firmly believe that global health should be based on a human-centred approach in line with human securi****ty. The concept of human security in the Anthropocene, which focuses on the importance of global solidarity, can help guide efforts to address this planetary challenge…..*

*I believe that human security remains critical to strengthen the global capacity to prevent, prepare for, and respond to public health emergencies and contribute to achieving UHC. Realising and sustaining UHC is crucial to improve people's health and provide the safety net that contributes to inclusive growth and the creation of peaceful and stable societies. **This commitment to UHC** is how Japan has achieved one of the healthiest societies in the world…..*

*…. Embracing these ideas, the **Japanese Government launched its Global Health Strategy in May, 2022.** The strategy **reflects the concept of human security as a core principle of Japan's diplomacy and reiterates the Japanese Government's commitment to global health…..**"*

*"In **May, 2023, Japan will host the G7 Summit Meeting in Hiroshima and the G7 Health Ministers' Meeting in Nagasaki—in the Cities of Peace.** At these meetings, building on the discussions and outcomes of previous G7 meetings, I intend to highlight the **strategic importance of undertaking efforts on human security and UHC as central to the Japanese Government's vision for the Summit.** To this end, I **emphasise three important areas** in support of this vision…..".* Check out what they are.

Telegraph - British taxpayers funding Kenyan hospital accused of imprisoning patients

https://www.telegraph.co.uk/global-health/climate-and-people/british-taxpayers-funding-kenyan-hospital-accused-imprisoning/

"British taxpayers' money is being invested in private overseas hospitals that have detained patients for months at a time over unpaid medical bills and charged impoverished women more than £1,300 to give birth, it has emerged. Every year hundreds of millions of pounds are taken from the UK aid budget and invested into foreign businesses and programmes in poor countries via the British International Investment (BII), which is owned and managed by the Foreign Office. A proportion of this money is channelled directly or indirectly into overseas healthcare providers – as seen in 2017, when the BII invested in the scandal-hit Nairobi Women's Hospital group via an equity fund. The group, which has nine facilities across Kenya, has been taken to court on two occasions for imprisoning patients who failed to pay their bills – a practice which stretches back to at least 2017….."

Global Health Governance

People over Profit : Manifesto – Our Future is public

https://peopleoverprof.it/campaigns/our-future-is-public?id=13579&lang=en

"*The climate emergency, rising inequalities and the COVID-19 pandemic have reaffirmed the failures and limitations of the current neoliberal model to respond to crises and ensure a dignified life for all. Transformation in the organisation of our economy is needed in order to confront the challenges the world is currently facing and to create societies that are fair, inclusive, socially-just, equitable and sustainable. To this end, actors from a diverse range of movements, sectors and regions have, in recent years, been mobilising to reclaim and rebuild public services as the foundation of a fair and just economy that works for all."*

"… We are at a critical juncture. At a time when the world faces a series of crises, from the environmental emergency to hunger and deepening inequalities, increasing armed conflicts, pandemics, rising extremism, and escalating inflation, a collective response is growing. A large movement is building and concrete solutions are emerging to counter the dominant paradigm of growth, privatisation and commodification. Hundreds of organisations across socio-economic justice and public services sectors, from education and health services, to care, energy, food, housing, water, transportation and social protection, are coming together to address the harmful effects of commercialising public services, to reclaim democratic public control, and to reimagine a truly equal and human rights oriented economy that works for people and the planet.

We demand universal access to quality, gender-transformative and equitable public services as the foundation of a fair and just society."

Review of International Political Economy -The political economy of consulting firms in reform processes: the case of the World Health Organization

"Existing research interprets the rise of consulting firms in intergovernmental organizations (IGOs) primarily as evidence of the global spread of managerialism. We highlight that consultants are not merely carriers of business-like world cultural norms, but also part of contentious IGO politics and governance. We unpack the consulting black box and reconstruct how consulting firms are hired and active in IGOs. Analyzing the experiences of the World Health Organization (WHO), we show how IGOs have been informally 'opened up' to consulting firms (and to their funders) and we investigate what the consequences of their privileged access are in practice.
Consultants curate voices and input (including their own) into reform packages, promote certain contents, and engage in self-effacement practices that undermine accountability to stakeholders. The pivotal position of the consultants can have a disempowering effect on actors excluded from the consulting agreement or marginalized through consulting practices. We illustrate our general discussion by zooming in on the consultant-mediated reform of WHO's Roll Back Malaria partnership in 2015…."

Critical Policy Studies (Forum) - Pandemic consulting. How private consultants leverage public crisis management

"This forum article discusses how the Covid19-pandemic as a major public crisis is transforming the relationship between governments and management consultants, contributing to the deepening presence of consulting firms in policy-making and governance. It shows how the crisis has entrenched private advice in public policymaking as governments are spending millions of dollars on transnational professional service firms like McKinsey, KPMG, Deloitte and Accenture to coordinate their pandemic responses. *Drawing from comparative **research of India, Australia, UK, Germany and Canada**, we outline how interests have been aligned through both the state's demand for quick advice and the readily available supply of expertise provided by firms seeking to expand their markets. In this context, **we note that professional services firms have been able to leverage their scope, scale, speed and networks in deepening their role in governance, moving beyond simply advising governments to providing core administrative functions**. We conclude by discussing the implications for democracy and the possibilities for contestation."*

Globalization & Health - Framing policy objectives in the sustainable development goals: hierarchy, balance, or transformation?

*"….**The Sustainable Development Goals (SDGs**) were born out of the recognition that dramatic changes were needed to address these intersecting challenges. There is general recognition that transformation of global systems and the relationship between sectors is needed. **We conduct a structured, theoretically-informed analysis of SDG documents produced by United Nations agencies with the aim of examining the framing of economic policy goals, a historically dominant***

domain of consideration in development policy, in relation to health, social and environmental goals. We apply a novel typology to categorize the framing of policy goals. This analysis identified that the formal discourse associated with the SDGs marks a notable change from the pre-SDG development discourse. The 'transformational' agenda issued in the SDG documents is in part situated in relation to a critique of previous and existing approaches to development that privilege economic goals over health, social and environmental goals, and position economic policy as the solution to societal concerns. At the same time, we find that there is tension between the aspiration of transformation and an overwhelming focus on economic goals. This work has implications for health governance, where we find that health goals are still often framed as a means to achieve economic policy goals….."

TGH – PEPFAR's 20th anniversary might be its last

E Bass; [*PEPFAR's Twentieth Anniversary Might Be Its Last*](#)
Think Global Health has a number of articles this week related to PEPFAR's 20th anniversary, among others this one.

*"**Proposed changes to the mold-breaking program could break it for good**".*

*"….**On December 13, 2022, Secretary of State Antony Blinken submitted a congressional notification of a proposed reorganization of the State Department's global health security and diplomacy functions.** It is a well-intentioned and needed effort to bring various efforts, including work on the Pandemic Fund, the Pandemic Accord, global health diplomacy, and security under one roof. **Under the new, proposed structure, the current PEPFAR head (formally known as the U.S. Global AIDS Coordinator) would hold the new role of Ambassador-at-Large for global health security and Diplomacy.** …."*

"An exceptionally helpful **analysis by amfAR** *compares and contrasts the PEPFAR role and the new global health security position. The latter has none of the statutory authorities of the PEPFAR coordinator. There is no programmatic budget, no ability to set policy or resolve interagency issues. Instead, the global health ambassador (GHS) ambassador will, per the legislation, enter a range, if not a mire, of collaborative processes with other agencies, as well as coordinating with not one but two newly-legislated positions with potentially overlapping job descriptions. …."*

*"If **the GHS Ambassador had the assets that the PEPFAR coordinator has—a budget, targets, presidential backing, and a broad mandate—then the reorganization might look much less threatening to the AIDS fight, and much more promising to the U.S. strategy for pandemic preparedness and response…..**"*

TGH - PEPFAR Meets Climate Change

D Fidler; https://www.thinkglobalhealth.org/article/pepfar-meets-climate-change

"Another president's emergency plan for another global health crisis".

*"…. on the cusp of PEPFAR's twentieth anniversary, **the Joe Biden administration has formulated the President's Emergency Plan for Adaptation and Resilience (PREPARE)** for a different global health crisis—climate change. **PREPARE is, however, unlikely to enter the U.S. policy pantheon. None of the factors associated with PEPFAR's achievements are present in the nascent U.S. foreign policy efforts on climate change adaptation**. Adaptation is a different policy beast from HIV/AIDS, which limits how much PEPFAR can inform actions against the health dangers that climate change threatens to create around the world now and into the rest of this century and beyond. …"*

In-depth **analysis of PREPARE based on a comparison with PEPFAR.**

PS: *"…. **In launching PREPARE in November 2021 and issuing the PREPARE Action Plan in September 2022, the Biden administration connected the plan with PEPFAR.** The administration called this initiative on climate change adaptation **a "president's emergency plan"** to mirror the PEPFAR moniker. The administration stated that PREPARE "is the largest U.S. commitment ever made to reduce climate impacts on those most vulnerable to climate change worldwide"—language that mimics the description of PEPFAR as "the largest commitment by any nation to address a single disease in history." ….."*

PS: *" … Although understandable, linking PEPFAR with a strategy on climate change adaptation raises difficult questions. **The linkage highlights an endemic problem with U.S. global health engagement also witnessed with COVID-19—the failure to act decisively before health threats become dangerous emergencies. …"***

HPW - Brazil to Call for Protection of Indigenous People's Health After Bolsonaro 'Abandonment' During COVID-19

https://healthpolicy-watch.news/brazil-to-call-for-protection-of-indigenous-peoples-health-after-bolsonaro-abandonment-during-covid-19/

*"**The new Brazilian government under President Lula da Silva intends to propose that the World Health Organization (WHO) addresses the health of indigenous people systematically, including by training indigenous health workers.**"*

*"Santiago Alcazar, the former head of WHO in Brazil, told a **discussion convened by the Geneva Global Health Hub (G2H2) on Monday** that **Brazil would propose that the WHO establish a project on indigenous people's health at the body's executive board meeting**, which starts this weekend. Alcazar was addressing a **G2H2 discussion on authoritarianism in a pandemic**, which focused on the judgement of **the Permanent People's Tribunal (PPT) that former Brazilian president Jair Bolsonaro was "liable for crimes against humanity" during the COVID-19 pandemic…..**"*

*"…. G2H2 co-chair Nicoletta Dentico, who was part of the PPT jury that heard evidence against Bolsonaro, said that the **tribunal had drawn global attention to Bolsonaro's "genocidal weaponization of COVID".** Dentico indicated that having public hearings was one of the few tools that civil society could use against authoritarian governments during a pandemic….."*

People's Health Tribunal Concept Note/ Nota conceptual sobre el Tribunal Popular de Salud / Note conceptuelle pour un tribunal sur la la santé des peuples

https://phmovement.org/peoples-health-tribunal-concept-note-tribunal-popular-de-salud-nota-conceptual-note-conceptuelle-pour-un-tribunal-sur-la-la-sante-des-peuples/

See above. "***This paper provides an overview of the proposed People's Tribunal** on Transnational Corporations' Violations of the Right to Health, and will guide the development of a more detailed roadmap to realise, secure and guarantee the universal right to health against transnational corporate violation. The proposed Tribunal has been endorsed in principle by the Steering Council of the People's Health Movement, but its implementation will require the enthusiasm and energy of PHM's country circles and thematic groups and a wide range of civil society partners and supporters…. "*

"The People's Health Tribunal will be publicly launched at the fifth People's Health Assembly (PHA5) to be held in Colombia in the first week of December 2023."

Edelman Trust Barometer 2023

https://www.edelman.com/sites/g/files/aatuss191/files/2023-01/2023%20Edelman%20Trust%20Barometer%20Global%20Report.pdf

Cfr a tweet: *"The 2023 Edelman Trust Barometer shows **WHO as the most trusted international organization;** however, overall trust in UN institutions has decreased……".*

Still, I couldn't help noticing another result from the barometer, *'Business most trusted institution'. (#Covidcough*)

Pandemic Preparedness & response (& GHS)

Let's start with a **Twitter thread by [Nina Schwalbe](#):**

*"**Negations on pandemic instruments are underway. Countries submitted proposed amendments to International Health Regulations (IHR) and have given input for the pandemic accord "zero draft**." Update in this thread: "*

*"**The Working Group on Amendments to the IHR (WGIHR) and Intergovernmental Negotiating Body (INB) negotiations will run in parallel for a year**. Significant overlap in themes across both processes may be tactical."*

*"**A number of issues are thorny**: Definition of a pandemic (though none offered yet); ½ "Common but differentiated responsibilities"; Access and benefits; sharing Intellectual property; Monitoring of implementation. "*

What's next for the IHR? *Technical committee to review amendments and submit report by EB meeting in late Jan. . And* *for the accord?* *Zero Draft expected on 1 February; Monthly negotiations through March 2024. "*

HPW – Amendments to International Health Regulations Focus on Accountability, Compliance and Equity

https://healthpolicy-watch.news/amendments-to-international-health-regulations-focus-on-accountability-compliance-and-equity/

"*Proposed amendments to the World Health Organization's (WHO) International Health Regulations (IHR) focus on improving accountability and compliance*, *according to Director General Dr Tedros Adhanom Ghebreyesus. Speaking at the start of* *last week's meeting of the IHR review committee*, *Tedros said that he expected a report from the committee, which is considering the amendments, by last Friday…..*" *The report …. is expected to be considered by the WHO's executive board meeting that starts at the end of the month. …*"

"*By late December,* over 300 amendments *had been proposed by member states to the IHR*, *which provides the global legal framework of countries' rights and obligations in public health emergencies…..*"

PS: "*….The WHO Africa region, India, Bangladesh and Malaysia want Article 3 of the IHR, which sets out the principles for implementing the regulations, to be amended to equity and solidarity*. *Detailed* analysis *of the 55 developing countries' proposals on equity has been published by Third World Network (TWN). These include the inclusion of equitable access to the health products, technologies and know-how; health systems strengthening, and an access and benefit sharing mechanism for genetic material. Other amendments from African member states have focused on intellectual property, licensing, transfer of technology, and know-how, as* summarised *by Knowledge Ecology International.* *The key amendment in this regard, proposed by Eswatini on behalf of the WHO Africa region, is for the inclusion of a new article on Access to Health Products, Technologies and Know-How.* *According to this proposal,* *once a public health emergency of international concern has been declared, there should be "exemptions and limitations to the exclusive rights of intellectual property holders" to "facilitate the manufacture, export and import of the required health products, including their materials and components"…..*"

Telegraph -Political will to tackle health security 'melting away', warns Tony Blair

https://www.telegraph.co.uk/global-health/science-and-disease/political-will-tackle-health-security-melting-away-warns-tony/

"*Despite the unprecedented global crisis of the Covid-19 pandemic, there has been no turning point in policy and preparedness.* " At least, that's Tony's worry.

"*….Mr Blair's warning kickstarts 'Disease X: The 100 Days Mission to End Pandemics'. The upcoming book –* written by the Coalition for Epidemic Preparedness Innovations's (Cepi's) chief scientific writer, Kate Kelland *– traces the organisation's Covid-19 response and sets out its strategy to rapidly control and neutralise potentially dangerous emerging viruses…..*"

Lancet Global Health - Global investments in pandemic preparedness and COVID-19: development assistance and domestic spending on health between 1990 and 2026

Global Burden of Disease 2021 Health Financing Collaborator Network;
https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(23)00007-4/fulltext#%20

"*We aimed to provide a comparative assessment of global health spending at the onset of the pandemic; characterise the amount of development assistance for pandemic preparedness and response disbursed in the first 2 years of the COVID-19 pandemic; and examine expectations for future health spending and put into context the expected need for investment in pandemic preparedness.*"

Some findings*: "…. In 2019, at the onset of the COVID-19 pandemic, US$9·2 trillion (95% uncertainty interval [UI] 9·1–9·3) was spent on health worldwide. We found great disparities in the amount of resources devoted to health, with high-income countries spending $7·3 trillion (95% UI 7·2–7·4) in 2019; 293·7 times the $24·8 billion (95% UI 24·3–25·3) spent by low-income countries in 2019. That same year, $43·1 billion in development assistance was provided to maintain or improve health. **The pandemic led to an unprecedented increase in development assistance targeted towards health; in 2020 and 2021, $1·8 billion in DAH contributions was provided towards pandemic preparedness in LMICs, and $37·8 billion was provided for the health-related COVID-19 response**. Although the support for pandemic preparedness is 12·2% of the recommended target by the High-Level Independent Panel (HLIP), the support provided for the health-related COVID-19 response is 252·2% of the recommended target. Additionally, **projected spending estimates suggest that between 2022 and 2026, governments in 17 (95% UI 11–21) of the 137 LMICs will observe an increase in national government health spending equivalent to an addition of 1% of GDP, as recommended by the HLIP***."

Interpretation: "**There was an unprecedented scale-up in DAH in 2020 and 2021. We have a unique opportunity at this time to sustain funding for crucial global health functions, including pandemic preparedness. However, historical patterns of underfunding of pandemic preparedness suggest that deliberate effort must be made to ensure funding is maintained.**"

PS: Related (and important) **Lancet GH Comment (by R Katz):** [*Challenges of tracking funding for pandemic preparedness and response*](#)

"*The Global Burden of Disease 2021 Health Financing Collaborator Network's study* **highlights the difficulties of finding and analysing financial data associated with pandemic preparedness and response. ….**"

"*…. **The Global Burden of Disease 2021 Health Financing Collaborator Network conclude that funding for pandemic preparedness and response has not historically been prioritised, but that funding could be made available if countries and donors did prioritise it***. Our current analyses find that **approximately $124 billion will be required over the next 5 years to build and sustain sufficient capacity for every nation in the world to meet its obligations under the International Health Regulations** to prevent, detect, and respond to potential public health emergencies….. … **This estimate does not include the funds required to build global manufacturing capacity, supply chain management, or research and development. Nor does this current assessment yet include a full***"

accounting of subnational capacity requirements, infection prevention and control, or more robust health-care systems, as called for in the latest edition of the JEE…..”

KFF - Assessing the Role of Treaties, Conventions, Institutions, and Other International Agreements in the Global COVID-19 Response: Implications for the Future

A Rouw, R Katz et al ; [KFF](KFF);

*“As global leaders work to negotiate a new pandemic treaty, we **examined the role of existing global health agreements in pandemic preparedness & response, and whether they were used to respond to COVID-19. “   Key findings** are as follows….*

- Finally, last week, experts from O'Neill, @FNIH_Org @WHO, @UNAIDS and other global organizations **convened** to explore development of protocols for defining, incorporating, and funding elements to support equity issues during the next global pandemic.

For more, see   O 'Neill institute - supporting a new international pandemic agreement.

Access to Medicines & health technology

WHO urges action to protect children from contaminated medicines

https://www.who.int/news/item/23-01-2023-who-urges-action-to-protect-children-from-contaminated-medicines

*“**WHO is releasing an urgent call to action to countries to prevent, detect and respond to incidents of substandard and falsified medical products**.”*

*“**Over the past four months, countries have reported on several incidents of over-the-counter cough syrups for children with confirmed or suspected contamination with high levels of diethylene glycol (DEG) and ethylene glycol (EG). The cases are from at least seven countries, associated with more than 300 fatalities in three of these countries**. Most are young children under the age of five. These contaminants are toxic chemicals used as industrial solvents and antifreeze agents that can be fatal even taken in small amounts, and should never be found in medicines….. …. **Since these are not isolated incidents WHO calls on various key stakeholders engaged in the medical supply chain to take immediate and coordinated action…..”***

Coverage via **the Guardian** – *WHO urges action after cough syrups linked to more than 300 child deaths*

Reuters - Exclusive: WHO investigating links between cough syrup deaths, considers advice for parents

[Reuters](#);

*"The World Health Organization (WHO) is investigating whether there is any connection between manufacturers whose contaminated cough syrups it has linked to the deaths of more than 300 children in three countries, a person familiar with the matter told Reuters. …. **WHO is seeking more information about specific raw materials used by six manufacturers in India and Indonesia to produce medicines linked to recent deaths…..**"*

And a link:

The Wire - [WHO Refuses To Accept Indian Expert Committee Report on Gambia Cough Syrups Deaths](#)

Devex - Global south watches as South Africa's Aspen ventures into vaccines

A Green; **https://www.devex.com/news/global-south-watches-as-south-africa-s-aspen-ventures-into-vaccines-104794**

(gated) "*Can the company usher a more favorable environment on the continent while helping address an entrenched procurement system that takes little account of African producers***?"**

*"**African manufacturers and potential investors are looking at one pharmaceutical company as a test case, namely South African company Aspen Pharmacare, dubbed by one expert as "a titan of the African pharmaceutical production landscape."** Last year, Aspen signed a 10-year deal with the Serum Institute of India, the world's largest vaccine maker, to manufacture and distribute four vaccines across Africa. It also secured $30 million in funding from CEPI and the Bill & Melinda Gates Foundation in support of this effort. **There's no set date yet when the actual vaccines will be available. But the big question for Aspen and others in the continent is what the market will be for these locally produced vaccines.** In late 2021, the company struck a deal to produce and sell its own version of Johnson & Johnson's COVID-19 vaccine for the African market. But no orders came. **Local manufacturers are also worried they won't be a priority for international procurement agencies, although Gavi, the Vaccine Alliance, which claims to be the biggest supplier of vaccines in Africa, has announced plans to include more African manufacturers in its procurement process.** "Ultimately, the proof will be in the pudding in terms of whether we start seeing regional procurement mechanisms put into place," Stavros Nicolaou, the senior executive for strategic trade development at Aspen,** tells Devex contributor Andrew Green**."*

New mRNA vaccine factory is made from shipping containers

https://www.freethink.com/health/mrna-vaccine-factory

Update on the BioNTainers*. "Each "BioNTainer" can produce 50 million COVID-19 vaccine doses per year."*

"German biotech company BioNTech is sending a modular mRNA vaccine factory to Rwanda to allow the country to produce more COVID-19 shots for Africa, in Africa — and perhaps one day help the continent easily vaccinate its citizens against other deadly diseases, too.;…"

"…. This factory consists of two modules, each made from six shipping containers. In the first module, mRNA is produced and purified. In the second, it is made into a vaccine. Local partners can then package the mRNA vaccine into doses.

….BioNTech has now finished building its first BioNTainer module in Europe and is preparing to ship it to Kigali, Rwanda, before the end of Q1 2023. It's not clear when the second module will follow, but production of vaccines is expected to begin one year after it arrives. …. BioNTech will staff and run the factory itself at first, but the plan is to transfer the operation to locals to run independently. The company expects any mRNA vaccines made at the facility to be used domestically or exported to other members of the African Union at a not-for-profit price."

"…. BioNTech's goal is to set up two BioNtainers in Kigali before shipping others to Senegal and possibly South Africa — and these factories might not be limited to producing COVID-19 shots."

HPW - Africans Struggled to Get COVID-19 Tests – What Must Change Before the Next Pandemic?

https://healthpolicy-watch.news/africans-struggled-to-get-covid-19-tests-what-must-change-before-the-next-pandemic/

Most Africans could not get a COVID-19 test unless they were hospitalised or could afford to pay a private laboratory for a pricey test – yet rapid tests were being dished out free in the US and Europe. High prices, slow regulatory approval, and outdated ideas about self-testing were some of the barriers that prevented low and middle income countries, particularly in Africa, from getting COVID-19 tests, according to a forthcoming report from the People's Vaccine Alliance. And these problems will repeat themselves in the next pandemic unless there are systematic global and regional efforts to ensure better access to diagnostics, according to Dr Fifa Rahman, lead author of the report….."

"….The report, due for imminent release on the People's Vaccine Alliance website, proposes increased investment for the local production of diagnostics along the entire pipeline, to reduce reliance on foreign supplies, diversification of molecular platforms to reduce reliance on patented technologies and monopolies, and the expansion of the WTO June 2022 TRIPS ministerial decision to include diagnostics. **But Rahman is also wary of country dependence on WHO processes, pointing out that the regulatory process within the global body had delayed access to COVID tests** because it required guidelines to be published before manufacturers could apply for emergency use listing. In addition, some WHO officials also wanted a feasibility study on self-tests….."

PS: "….*Earlier in the week, a* report published by Health Action International *(HAI) has appealed for urgent investment in the development of effective diagnostics to fight antimicrobial resistance (AMR). "Currently, treatment decisions are often made without diagnostic tests, increasing the chance that an ineffective therapy could be prescribed, for example, an antibiotic to treat a viral infection, or a bacterial infection resistant to that drug," according to the '*Diagnostics to treat AMR'* report. …."*

Lancet Infectious Diseases - Breakthrough treatments for Ebola virus disease, but no access—what went wrong, and how can we do better?

E Torreele et al ;
https://www.sciencedirect.com/science/article/pii/S1473309922008106?dgcid=author

« Three years since proving effective for Ebola virus disease in a clinical trial, two breakthrough treatments are registered and stockpiled in the USA but still not registered and generally available in the countries most affected by this deadly infection of epidemic potential. Analysing the reasons for this, we see a fragmentation of the research and development value chain, with different stakeholders taking on different steps of the research and development process, without the public health-focused leadership needed to ensure the end goal of equitable access in countries where Ebola virus disease is prevalent. Current financial incentives for companies to overcome market failures and engage in epidemic-prone diseases are geared towards registration and stockpiling in the USA, without responsibility to provide access where and when needed. Ebola virus disease is the case in point, but not unique—a situation seen again for mpox and likely to occur again for other epidemics primarily affecting disempowered communities….”

Plos Med - The cost and cost-effectiveness of novel tuberculosis vaccines in low- and middle-income countries: A modeling study

A Portnoy et al ; https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1004155

« We assessed future costs, cost-savings, and cost-effectiveness of introducing novel TB vaccines in low- and middle-income countries (LMICs) for a range of product characteristics and delivery strategies.”

Wellcome (report) - Scaling up African vaccine manufacturing capacity: perspectives from the African vaccine-manufacturing industry

https://wellcome.org/reports/scaling-african-vaccine-manufacturing-capacity?utm_source=twitter&utm_medium=o-wellcome

“This report gathers the perspectives of vaccine manufacturers in Africa, highlighting the challenges to scaling up vaccine manufacturing capacity and capabilities, and the areas where manufacturers most need support. It provides a guide for public health initiatives and investment decisions while recognising that each manufacturer has its own needs and areas of focus.”

Global Health Financing

WHO launches funding appeal to help a record number of people in complex, intersecting health emergencies

https://www.who.int/news/item/23-01-2023-who-launches-funding-appeal-to-help-a-record-number-of-people-in-complex--intersecting-health-emergencies

*"**WHO is launching its 2023 health emergency appeal today for US$ 2.54 billion to provide assistance to millions of people around the world facing health emergencies**. The number of people in need of humanitarian relief has increased by almost a quarter compared to 2022, to a record 339 million. …. **Currently, WHO is responding to an unprecedented number of intersecting health emergencies:** climate change-related disasters such as flooding in Pakistan and food insecurity across the Sahel and in the greater Horn of Africa; the war in Ukraine; and the health impact of conflict in Yemen, Afghanistan, Syria and northern Ethiopia – all of these emergencies overlapping with the health system disruptions caused by the COVID-19 pandemic and outbreaks of measles, cholera, and other killers……"*

Money Matters: Who were the World Bank's top contractors in 2022?

https://www.devex.com/news/money-matters-who-were-the-world-bank-s-top-contractors-in-2022-104726

***The World Bank,** one of the world's leading funders to low- and middle-income countries, **disbursed $67 billion in the fiscal year that ended June 30, 2022**. Some of the top receivers of the bank's funding include **Pfizer, Moderna and China National Biotec Group — all pharmaceutical firms behind COVID-19 vaccines**. The funding period also coincided with the Russian invasion of Ukraine. Overall, the bank's spending jumped by $6.4 billion from the previous year….."*

SRHR

HPW - Contraception Use Soars Despite Cuts in Donor Funds

https://healthpolicy-watch.news/contraception-use-soars-despite-cuts-in-donor-funds/

*"In the past year alone, women's use of contraception in 82 low- and lower-middle-income countries has averted more than 141 million unintended pregnancies, 29 million unsafe abortions and almost 150,000 maternal deaths. This is according to the **global family planning partnership, FP2030, which released its 2022 Measurement Report** on Wednesday. Today, **371 million women of reproductive age are using modern contraception – an increase of 87 million over the past decade**, according to the report."*

*"**The biggest increase in contraceptive use is in sub-Saharan Africa**, where there has been an increase of over 6% in the past decade, to cover 23% of women and girls of reproductive age. ….in sub-Saharan Africa, young married women aged 15-24 relied on methods such as injections and pills obtained from government facilities, while most unmarried sexually active women in the same age*

*group relied on condoms from private health sources. **Globally, there has been "a steady shift towards long-acting and reversible contraception"**, according to FP2030's Jason Bremner. ….Today, implants are the most common method in 10 sub-Saharan African countries and the second most common method in another 14. …"*

*"…. **However, the report shows that donor funding for family planning is not keeping up with the growing demand for modern contraception.** In 2021, donor government funding totalled approximately **US$1.4 billion**, which was **substantially lower than the US$1.52 billion received in 2019**. …."*

See also **the Telegraph** - [Family planning in Global South hit by UK aid cuts, research finds](#)

Soon Guinea worm disease eradication?

Guardian - Guinea worm disease could be second ever human illness to be eradicated

https://www.theguardian.com/global-development/2023/jan/25/guinea-worm-disease-could-be-second-ever-human-illness-to-be-eradicated

*"**Only 13 cases of guinea worm disease were reported worldwide in 2022, a provisional figure that if confirmed would be the smallest ever documented,** the US-based Carter Center [has said](#). The tiny number of cases, down from 15 the previous year, is the result of more than four decades of global efforts to stamp out the parasitic disease by mobilising communities and improving drinking water quality in transmission hotspots. If **those efforts ultimately prove successful, guinea worm will not only be the second disease in history to be eradicated, after smallpox, it will be the first to be wiped out without a vaccine or medicine….."***

And via [Stat](#):

*"Cases of Guinea worm disease fell to a historic low of 13 last year, including **six in Chad, five in South Sudan, one in Ethiopia, and one (still under investigation) in the Central African Republic**. After low case counts recorded in 2021, that decline moves the disease closer to eradication, The Carter Center reported yesterday. **For some perspective, in 1986 about 3.5 million human cases occurred each year in 21 countries in Africa and Asia. …."***

One Health: a call for ecological equity, not just health equity

We already flagged t**he [Lancet series on One Health and Global Health Security](#)** last week, but as the official launch was yesterday, we think it's good to draw your attention to it again.

With 4 papers and a must-read **Editorial - [One Health: A call for ecological equity](#).**

*"The One Health High-Level Expert panel **defines One Health** as "an integrated, unifying approach that aims to sustainably balance and optimise the health of people, animals, and ecosystems. It recognises the health of humans, domestic and wild animals, plants, and the wider environment (including ecosystems) are closely linked and inter-dependent."…."*

*"…. **One huge concern is the risk of worsening inequalities as One Health networks are largely situated and resourced in high-income countries**. The **current One Health architecture** of institutions, processes, regulatory frameworks, and legal instruments has led to a fragmented, multilateral health security landscape. **As the second paper in The Series points out, a more egalitarian approach is needed, one that is not paternalistic or colonial in telling low-income and middle-income countries what they should do. …."***

*"…The reality is that One Health will be delivered in countries, not by concordats between multilateral organisations, but by taking a fundamentally different approach to the natural world, one in which we are as concerned about the welfare of non-human animals and the environment as we are about humans. **In its truest sense, One Health is a call for ecological, not merely health, equity."***

Global health events

HPW - A Kickstart Towards Health Care 'Ecosystems'

https://healthpolicy-watch.news/a-kickstart-towards-health-care-ecosystems/

*"**Across disciplines and sectors, experts say it will take treating health care as 'ecosystems' and a greater focus on access and equity to achieve solutions to critical health challenges of tomorrow and beyond…."***

*"In the wake of the COVID-19 pandemic, huge inequities in access to health care have been exposed that demand more multi-sectoral cooperation to solve, a roundtable of leading health experts agreed. …. The discussion among a small group of leading experts in health care focused on equity in health care – finding ways for everyone to attain their full health potential regardless of race or ethnicity, age, disability, gender identity, sexual orientation, nationality, socioeconomic status, or geographical background. …. "**I'm afraid to say the whole ecosystem needs to be cured,"** said Dr **Victor Dzau,** a 1989 Nobel Prize winner who is president of the National Academy of Medicine and co-chair of the National Research Council in the United States. "**Equity needs to be central to it,"** he said. "**Whatever the technology is, it has to address that."….***

Global health governance & governance of health

Lancet Comment – Health in global biodiversity governance: what is next?

L Willetts et al; https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)00130-7/fulltext

*"…. **The 196 parties to the UN Convention on Biological Diversity (CBD) have called for increased engagement on biodiversity and health since 2014**, while calls from stakeholders for integrated decision making are similarly long standing. **Yet few civil society health organisations have historically engaged with the CBD and its intergovernmental negotiating process. This situation is, however, changing. In 2022, civil society health professionals and organisations were involved in the CBD agenda-setting (intersessional subsidiary body) and decision-making (Conference of the Parties [COP]) meetings.** Five civil society health organisations attended the **15th UN Biodiversity Conference (COP 15) in Montréal, Canad**a, as newly accredited delegations to the CBD. The new participation of these organisations in global biodiversity governance embodies the interdisciplinary work needed to take a whole-of-society approach to respecting planetary boundaries and prioritising the environmental determinants of health. **The agenda of the UN CBD recognises and increasingly includes health. Now is the time to mobilise contributions from diverse health experts to inform integrated policy…..*"*

*"….Importantly, the [2022 Kunming-Montréal Global Biodiversity Framework] **GBF's four global biodiversity goals for 2050 and its 23 targets for 2030 do not explicitly define a role for health organisations.** Health stakeholders will need to translate the GBF targets into the global health agenda….. "*

Do check out the **panel** with elements of the biodiversity and health dialogue that deserve greater attention in global governance.

Telegraph - UK's global influence declines in wake of foreign aid cuts, report warns

[Telegraph](#);

*"Review scrutinising quality of development assistance says **UK's democratic and human rights work is significantly affected by budget cuts.**"*

Devex - Africa CDC aims to be more tech-savvy with new digital health strategy

https://www.devex.com/news/africa-cdc-aims-to-be-more-tech-savvy-with-new-digital-health-strategy-104757

*"**At least 41 African countries have digital health strategies — and while some have started to implement them, others gather dust on shelves.** The strategies are sometimes overly ambitious, leaving countries overburdened with unrealistic goals rather than small, solvable problems. **Countries requested guidance on how to best forge the nexus between public health and advancements in technology from the Africa Centres for Disease Control and Prevention**. The agency has worked to **craft its first digital health strategy over the past eight months,** which it **expects to launch on March 6 in Kigali, Rwanda, at the Africa Health Agenda International Conference…..**"*

*"Devex sat down with **Jean Philbert Nsengimana, the chief digital health adviser for Africa CD**C, to gain better insight into the agency's vision of digital health….."*

*"…. He said **the new strategy has two main goals:** transforming Africa CDC into a digitalized, "informatics savvy organization" and helping African nations on their "own journey for transforming their health care provision using technology."…."*

TGH- PEPFAR in a Global Democratic Recession

M Lagon; https://www.thinkglobalhealth.org/article/pepfar-global-democratic-recession

*"**At age twenty, PEPFAR's** continued success depends on weathering an illiberal wave worldwide."*

*"**Since PEPFAR's founding, democratic decline as a global trend included sub-Saharan Africa. Freedom House reported in 2022 the region's rising tide of authoritarianism, crackdowns on dissent and independent media, and rights abuses—including PEPFAR partner countries** like the Democratic Republic of the Congo, Uganda, and Tanzania. Civicus, which tracks civil society leeway, documented many African governments passing restrictive laws that prevent protests, allow for the arrest of dissenters, and dissolve organizations and political parties posing a threat to their grip on power. …. **The COVID-19 pandemic has accelerated global democratic recession."***

*"… **This accelerant of illiberal governance complicates PEPFAR's quest for epidemic control** of a more long-standing infectious disease. …."*

*"… **PEPFAR's current leadership** is well-poised to grapple with HIV/AIDS and regression on governance…. "* (Nkengasong, that is).

*… **PEPFAR can help increase equitable healthcare access and achieve HIV epidemic control during a democratic recession, if U.S. policy addresses four needs….."***

Devex – Scoop: World Bank reshuffles senior leadership ahead of reforms

https://www.devex.com/news/scoop-world-bank-reshuffles-senior-leadership-ahead-of-reforms-104849

"Anna Bjerde has been named new managing director of operations, replacing Axel von Trotsenburg, who has been promoted to senior managing director."

Related, a **CGD blog (by Charles Kenny):** Evolving the World Bank's Twin Goals

*"**The World Bank management's Evolution Roadmap suggests the institution is reconsidering its 'twin goals' mission statement of eradicating extreme poverty** (ending $2.15 poverty by 2030) and boosting **shared prosperity** (raising the incomes of the bottom 40 percent in each country).*

*"…. It is reassuring that Bank management wants to keep the twin goals focused on consumption and prosperity. It is an important counterblast against those who see progress on the number of people living under the $2.15/day poverty line and suggest that the fight against poverty is close to being won, and other priorities can take center stage—as if $2.16 is an adequate daily consumption for a high quality of life. **But the proposed fixes to the twin goals, alongside the Bank's existing approach to higher poverty lines, are a mistake."***

With also some reflection on the **need for a third goal, related to Global Public Goods**.

UHC & PHC

WHO - Exploring the role for strategic purchasing instruments to support improvements in the quality of care

https://www.who.int/publications/i/item/9789240058613

"….This paper looks at how – and which – purchasing instruments can serve as levers to improve quality in service provision, with the focus here on personal health services. The paper is geared towards both health financing and purchasing policy makers and analysts as well as stakeholders involved in efforts to improve the quality of care….."

BMJ GH (Analysis) - The role of the private sector in delivering essential packages of health services: lessons from country experiences

S Siddiqi et al ; *https://gh.bmj.com/content/8/Suppl_1/e010742*
Part of the supplement already flagged last week.

Link:

- Health Research Policy & Systems - Evaluation of the National Health Insurance Program of Nepal: are political promises translated into actions?

Pandemic preparedness & response/ Global Health Security

Plos GPH - Improving the response to future pandemics requires an improved understanding of the role played by institutions, politics, organization, and governance

P Berman et al;
https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0001501

*"As countries emerge from the pandemic, global efforts are taking shape to use the lessons from COVID-19 to improve preparedness for future pandemics. **Although many assessments have already been made regarding overall national performance in responding to COVID-19, these have mostly focused on more 'downstream' actions and factors** such as measures taken to reduce infection, clinical approaches to disease management, and technical capacity and **have overlooked the 'upstream' forces that shaped and drove those response**s. However, for the proposed reform initiatives to be effective will require a more in-depth understanding of the 'upstream' factors that drove the wide variation in responses to COVID-19. To address this, **an interdisciplinary team at the***

University of British Columbia has proposed a framework to unite scholarship into the institutional, political, organizational, and governance (IPOG) aspects of the COVID-19 response….."

Migration Policy Institute (report) - Using Risk Analysis to Shape Border Management: A Review of Approaches during the COVID-19 Pandemic

*K Lee et al; [**https://www.migrationpolicy.org/research/risk-analysis-border-covid19**](https://www.migrationpolicy.org/research/risk-analysis-border-covid19)*

*"….This report presents a comparative analysis of 11 publicly available methodologies used to assess travel-related risks during the pandemic—those of Hong Kong, New Zealand, South Korea, Taiwan, United Kingdom, United States, International Civil Aviation Organization, International Air Transport Association, World Health Organization, Organization for Economic Cooperation and Development, and European Union. It offers a **set of lessons learned and recommendations, including a proposed decision instrument** that could improve the use of risk analysis for border management during future public-health emergencies…."*

So with a **new decision tree** for responding to pathogens to reduce chaos next time.

Stat (op-ed) The WHO's new pandemic treaty is good for the world — and the U.S.

S Imparato et al; https://www.statnews.com/2023/01/20/new-pandemic-treaty-good-for-world-and-america/

By Harvard researchers.

Science - U.S. should expand rules for risky virus research to more pathogens, panel says

https://www.science.org/content/article/u-s-should-expand-rules-risky-virus-research-more-pathogens-panel-says

"Draft report from biosecurity panel examining "gain-of-function" research policy gets mixed response from outside experts."

Science - 'Incredibly concerning': Bird flu outbreak at Spanish mink farm triggers pandemic fears

https://www.science.org/content/article/incredibly-concerning-bird-flu-outbreak-spanish-mink-farm-triggers-pandemic-fears

"Spread among captive mink could give the H5N1 strain opportunities to evolve and adapt to mammals."

See also **Nature (News) –** [**Mink-farm outbreak shows bird flu can spread between mammals**](https://www.nature.com).

Plos GPH - Leveraging the HIV response to strengthen pandemic preparedness

C Collins et al https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0001511

Review.

Plos GPH - The world health organization's disease outbreak news: A retrospective database

C J Carlson, R Katz et al ;
https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0001083

"….We conclude that sharing a transparent rubric for which outbreaks are considered reportable, and adopting more standardized formats for sharing epidemiological metadata, might help make the Disease Outbreak News (DON) more useful to researchers and policymakers."

Finally, via Devex:

*"**Ten Nigerians in Guangzhou, China, have been infected with an unknown deadly flu-like disease, said Dr. Ahmed Ogwell Ouma, the acting director of Africa CDC, during a press briefing today**. Of the 10 people infected, seven have been hospitalized, and three have died. He said he has not received information that any Chinese citizens have been affected by the disease, and those that have come down with it have recently traveled to Nigeria. They tested negative for COVID-19. **Africa CDC is monitoring this outbreak closely, he said, working with the Chinese Center for Disease Control and Prevention and authorities in Nigeria to identify the source of the outbreak and work toward an effective response in both countries….**"*

Planetary health

BMJ Editorial – Nourishing people and the planet

N De Paula et al ; https://www.bmj.com/content/380/bmj.p126

« **The strategic role of food systems** for promoting planetary health. »

*"…. **Three core areas are particularly fertile for combining ambitious sustainable development policies with policies to transform food systems: diets and nutrition, deforestation and agriculture, and food waste.** Public health leaders have a pivotal role in helping to produce evidence that supports healthier diets, more diverse agricultural production, more nutritious school food programmes and public food procurement as well as action to combat wasteful food practices and ensure transparency and accountability in policy making….."*

*"….more needs to be done to achieve sustainable food systems. **The forthcoming food systems stocktaking meeting in July, a follow-up to assess progress since the UN's 2021 food systems summit, will be another valuable strategic opportunity** to engage forward thinking healthcare professionals in national decision making about food….."*

Nature - Carbon capture nets 2 billion tonnes of CO2 each year — but it's not enough

https://www.nature.com/articles/d41586-023-00180-4

*"As well as cutting emissions, **governments need to ramp up investment in carbon dioxide removal technologies to hit climate goals**, researchers warn."*

*"**More than 2 billion tonnes of carbon dioxide is being removed from Earth's atmosphere each year, according to an analysis of global efforts to capture and store the greenhouse gas**. But this will not be enough to meet the Paris Agreement goal of limiting global warming to less than 2 °C above pre-industrial temperatures, even with pledges from governments worldwide to increase carbon dioxide removal (CDR) rates and invest in new technologies….."*

"The report, called [The State of Carbon Dioxide Removal](#), provides the first global estimates of the total amount of carbon that is being sucked out of the air each year, and predicts how much this will have to increase under various emissions scenarios. *It was published on 19 January…."*

"If we want to have a robust strategy for meeting the Paris Climate goal," says co-author Jan Minx, **"we need to limit the dependence on CDR, and this means we need to get on to track with our emission reductions.**" *Minx is a climate researcher at the Mercator Research Institute on Global Commons and Climate Change, Berlin.*

Plos Climate – The health burden of climate change: A call for global scientific action

Colin J Carlson et al ; https://journals.plos.org/climate/article?id=10.1371/journal.pclm.0000126

*« **We are issuing an urgent call for multilateral investment to commission a Global Burden of Climate Change Study, modeled off and complimentary to the Global Burden of Disease (GBD) study, but tasked with a global stocktake of the historical and real-time health impacts of the climate crisis.** By establishing a global scientific body responsible for climate-health assessment, researchers, decisionmakers, and other stakeholders have the opportunity to come together and address dozens of gaps in scientific knowledge. …."*

*« …. **we believe that (unlike the GBD Study) the leadership of a Global Burden of Climate Change Study should be based in countries at the frontlines of climate change impacts—more often than not, the same countries that are most marginalized by the existing colonial infrastructures of global health**. For example, a Secretariat for the GBCCS could be based on the African continent, which faces the greatest current and future risks from climate change…."*

TGH _ Deep Sea Discoveries and Global Health

M B Marcus; https://www.thinkglobalhealth.org/article/deep-sea-discoveries-and-global-health

"Humans have only begun to explore the ocean's potential for healing diseases."

Plos Climate - The labour force in a changing climate: Research and policy needs

S Dasgupta et al; https://journals.plos.org/climate/article?id=10.1371/journal.pclm.0000131

*"**Labour is one of the sectors most affected by heat stress**. Labour supply (number working hours) and labour productivity (output during these hours) are all affected by warming. …. With improved understanding of the complex links between labour, health, and output, policies can be better designed to protect workers, especially vulnerable groups of workers, such as outdoor workers, and enhance economic output and economic growth…."*

Guardian - Bill Gates backs new startup aiming to reduce emissions from cow burps

https://www.theguardian.com/us-news/2023/jan/24/bill-gates-startup-cow-burps-methane-emissions

*"**Microsoft co-founder leads $12m investment Rumin8**, which is developing supplements for cows to cut methane output."*

Covid

Via HPW:

(on Thursday), "**Africa CDC reported that 44% of the target population on the continent have been vaccinated, with four countries having surpassed the 70% COVID-19 vaccination target**. Of the nearly 1.1 billion doses of vaccines received by public health authorities, 83% – over 895 million doses – have been administered, including 45 million booster shots. **As the continent continues to make progress on immunization rates, Africa CDC encouraged its member states to continue targeted and public vaccination campaigns."**

Stat - FDA scientists propose an annual Covid shot matched to current strains

https://www.statnews.com/2023/01/23/fda-scientists-propose-an-annual-covid-shot-matched-to-current-strains/?utm_campaign=twitter_organic&utm_medium=social&utm_source=twitter

*"**Scientists at the [US] Food and Drug Administration propose making Covid vaccination a regular, once-a-year shot that is updated to match current strains of the SARS-CoV-2 virus**, according to documents posted by the FDA on Monday. For people who are older or immunocompromised, the FDA would recommend two annual doses of the revised shot….."*

See also **Science – What's next for COVID-19 vaccines? Scientists and regulators chart a course amid uncertainty**

"FDA panel will discuss switch to an annual booster in the fall, akin to flu vaccination strategy."

And the **Guardian** - [**US moves to simplify Covid vaccines into yearly dose to target variants**](#) (on Friday).

Stat - Two new studies paint encouraging picture of Covid-19 vaccine's performance

https://www.statnews.com/2023/01/25/updated-covid-19-booster-still-providing-strong-protection-against-newer-variants-cdc-study-finds/

"***Two new studies published Wednesday** report good news about the updated Covid-19 vaccine, with one suggesting it is more effective than the previous monovalent vaccine and the other showing that even though it targeted an earlier strain of the SARS-CoV-2 virus, its protection is holding up against current variants…."*

Science - Federal watchdog finds problems with NIH oversight of grant funding bat virus research in China

https://www.science.org/content/article/federal-watchdog-finds-problems-nih-oversight-grant-funding-bat-virus-research-china

*"Report resulting from 18-month audit also notes that **EcoHealth Alliance** overreported $90,000 in expenses."*

*"A federal watchdog has weighed in on problems with a U.S. government grant that funded work in Wuhan, China, on bat coronaviruses that some onlookers claim led to the COVID-19 pandemic. The audit found oversight issues by the National Institutes of Health (NIH), and that the grantee had misreported $90,000 in expenses. But it **sheds little new light on issues already widely covered and discussed in the media and Congress….**"*

HPW - China Downplays COVID Threat from Lunar New Year Travel

https://healthpolicy-watch.news/china-downplays-covid-threat-from-lunar-new-year-travel/

*"Although some experts predict that the past weekend's celebrations of China's lunar new year will hasten the spread of COVID-19 to rural parts of the country, one of the country's top scientists has disputed this. **Wu Zunyou, China Centre for Disease Control and Prevention's chief epidemiologist, downplayed the risk on the Chinese social media platform, Weibo, claiming that 80% of Chinese people had already been infected before the week-long celebrations…..**"*

UN News - COVID-19: China 'making enormous progress' to get every older adult vaccinated

https://news.un.org/en/story/2023/01/1132672

*"**China is "making enormous progress and effort" to get every older adult vaccinated against COVID-19, the UN health agency said [last week] on Friday, while also cautioning that it will take time to protect everyone.** Dr. Kate O'Brien from the World Health Organization (WHO) explained*

that the change in China's initial "zero-dose" policy for elderly people had left some unsure about asking for a coronavirus vaccine now….."

Guardian - China claims Covid wave has peaked with severe cases, deaths falling fast

https://www.theguardian.com/world/2023/jan/27/china-claims-covid-wave-has-peaked-with-severe-cases-deaths-falling-fast

"But reporting from inside China during the lunar new year period suggests rates of infection and fatalities exceeding official reports."

Fortune - Bill Gates says no country 'got an A' for COVID response and 'we'll never know the true death numbers' in China

https://fortune.com/2023/01/26/bill-gates-grades-covid-response-us-australia-china-vaccine-death-rate/

"Nobody, I would say, gets an A on this one," said the cofounder of the Bill & Melinda Gates Foundation and former CEO of Microsoft during an event with the Lowy Institute, an Australian think tank, on Monday."

"….Gates admitted that "we'll never know the true death numbers" coming out of China. …."

Nature News – The next worrisome coronavirus variant could come from China — will it get detected?

Nature News;

"China is ramping up efforts to monitor COVID-19 variants circulating in its population, and has announced plans to have 3 hospitals in each of its 31 provinces genetically sequence virus samples collected from 15 outpatients, 10 people with severe COVID-19 and all people who have died from COVID-19 each week. Scientists are divided on whether these plans will be enough to rapidly detect a concerning variant that could cause new waves of infection and death, in part because many other nations have reduced their genomic monitoring."

Plos GPH - The effects of COVID-19 lockdown measures on health and healthcare services in Uganda

D Musoke, D McCoy et al;
https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0001494

"…This study explored effects of the COVID-19 lockdown measures on health and healthcare services in Uganda….."

Seminars in Respiratory and Critical Care Medicine - The Origins of Severe Acute Respiratory Syndrome-Coronavirus-2

D E Dwyer; https://www.thieme-connect.com/products/ejournals/abstract/10.1055/s-0042-1759564

Cfr a **tweet L Garrett:**

"A careful review of competing theories about the origins of #SARSCoV2 -- "possible origins have been postulated, such as an accidental or deliberate laboratory leak, or virus present in frozen foods, but evidence for these ideas has not surfaced.""

WP – Ardern's covid policy was her 'greatest legacy' – but also her undoing

https://www.washingtonpost.com/world/2023/01/20/jacinda-ardern-new-zealand-covid-resignation/

*"**For almost two years, the charismatic Ardern was the global face of "zero covid":** an approach that drew admiration from other countries and also seemed to dovetail with her personal style of consensus-based governance. In the fight against covid, she referred to New Zealanders as "our team of 5 million." But **that sense of team unity began to fray in late 2021**, when Ardern introduced requirements that some types of workers be vaccinated, and that proof of vaccination be shown to enter gyms, hairdressers, events, cafes and restaurants."*

And a link:

- The Sydney Morning Herald - **We need new antivirals': Australia's 'Omicron soup' is blunting our best COVID treatments**

Monkeypox

Mpox has been silently circulating in non-mpox-endemic nations for 20 years, according to new study

https://www.news-medical.net/news/20230119/Mpox-has-been-silently-circulating-in-non-mpox-endemic-nations-for-20-years-according-to-new-study.aspx

"In a recent study published in Emerging Infectious Diseases, researchers described the evolution of the mpox virus (MPXV) before the 2022 outbreak….."

Infectious diseases & NTDs

HPW - African Health Authorities Juggle Concurrent Outbreak Responses

https://healthpolicy-watch.news/africa-health-authorities-juggle-outbreaks/

Coverage of this Thursday's **media briefings by WHO Afro & Africa CDC.**

"African public health authorities are juggling responses to concurrent cholera and diphtheria outbreaks with efforts to solidify gains made in the fight against COVID-19."

Lancet (Comment) - Getting ahead of insecticide-resistant malaria vector mosquitoes

G Killeen et al; https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)00102-2/fulltext

Comment accompanying a new study in the Lancet.

"***In The Lancet, Manfred Accrombessi and colleagues report the results of a rigorous cluster-randomised, controlled, superiority trial in Benin**, encompassing 54 030 households and 216 289 people, which confirms that the addition of the pyrrole insecticide chlorfenapyr to long-lasting insecticidal nets (LLINs), as a second active ingredient to back up the pyrethroids we have relied upon so heavily for so long, can have invaluable effects on malaria transmission and disease burden. …. ….. **Together with a similar study in Tanzania by Mosha and colleagues, these findings decisively confirm that dual-ingredient LLINs containing chlorfenapyr can improve on the epidemiological effect of pyrethroid-only nets in contemporary Africa, where resistance to pyrethroids has become ubiquitous*** over the 15 years since WHO embraced LLIN scale-up to universal coverage targets. …"*

Allafrica - Malawi Asks for 7.6 Million Doses of Cholera Vaccine

https://allafrica.com/stories/202301250046.html?utm_campaign=allafrica%3Aeditor&utm_medium=social&utm_source=twitter&utm_content=promote%3Aaans%3Aacbllp

*"**The Malawi government has asked for a donation of 7.6 million doses of cholera vaccine from the World Health Organisation (WHO).** The Ministry of Health announced that it had used all the 2.9 million cholera vaccines it had in all health facilities in the country….."*

Nature World View – Don't wait for an Ebola outbreak to vaccinate people against it

H K Bosa; Nature World View;

*"**Henry Kyobe Bosa,** the national incident manager for Ebola and COVID-19 for Uganda, and his colleagues worked tirelessly to quash a recent Ebola outbreak there. "Last October, just 3 weeks into the outbreak, the disease spread to Kampala, a well-connected city of 1.5 million people," he warns.*

"From there, it might easily have entered other countries." But the quarantines and lockdowns that controlled the spread came at a high cost, especially for the country's poorest people. **He calls for a preventative vaccination effort to protect vulnerable populations in sub-Saharan Africa and, through them, the rest of the world."**

He argues*: "… **The wisest use of this time between outbreaks is to map high-risk areas and vaccinate those in them, instead of waiting for another outbreak…..**"*

Links:

- *Lancet Comment – **[Developing a vaccine against Marburg virus disease](#)***

Comment related to a new study in the Lancet.

- *Plos GPH - [Estimates of the cost to build a stand-alone environmental surveillance system for typhoid in low- and middle-income countries](#)*

AMR

Nature (News) - How antidepressants help bacteria resist antibiotics

https://www.nature.com/articles/d41586-023-00186-y

"A laboratory study unravels ways non-antibiotic drugs can contribute to drug resistance."

NCDs

WHO - Five billion people unprotected from trans fat leading to heart disease

https://www.who.int/news/item/23-01-2023-five-billion-people-unprotected-from-trans-fat-leading-to-heart-disease

"Five billion people globally remain unprotected from harmful trans fat, a new status report from WHO has found, increasing their risk of heart disease and death."

"Since WHO first called for the global elimination of industrially produced trans fat in 2018 – with an elimination target set for 2023 – population coverage of best-practice policies has increased almost six-fold. Forty-three countries have now implemented best-practice policies for tackling trans fat in food, with 2.8 billion people protected globally. **Despite substantial progress, however, this still leaves 5 billion worldwide at risk from trans fat's devastating health impacts with the global goal for its total elimination in 2023 remaining unattainable at this time…..**"

Link:

- Plos GPH -   [Cardiovascular health promotion: A systematic review involving effectiveness of faith-based institutions in facilitating maintenance of normal blood pressure](#)

By A Sanusi et al.

Mental health & psycho-social wellbeing

Lancet World Report - New legislation to overhaul mental health care in Nigeria

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)00165-4/fulltext

"A new mental health law is hoped to transform care for patients in Nigeria. Paul Adepoju reports from Ibadan, Nigeria."

Stat - Chatbots are creating thorny ethical questions about transparency in mental health care

https://www.statnews.com/2023/01/23/mental-health-chatbot-chatgpt/

*"**The mental health field is increasingly looking to chatbots** to relieve escalating pressure on a limited pool of licensed therapists. But they're **entering uncharted ethical territory as they confront questions about how closely AI should be involved in such deeply sensitive support**….."*

Social & commercial determinants of health

Journal of Equity in Health - Action on the social determinants for advancing health equity in the time of COVID-19: perspectives of actors engaged in a WHO Special Initiative

O Solar et al ; https://equityhealthj.biomedcentral.com/articles/10.1186/s12939-022-01798-y

*« Since the 2008 publication of the reports of the Commission on Social Determinants of Health and its nine knowledge networks, substantial research has been undertaken to document and describe health inequities. The COVID-19 pandemic has underscored the need for a deeper understanding of, and broader action on, the social determinants of health. Building on this unique and critical opportunity, **the World Health Organization is steering a multi-country Initiative to reduce health inequities through an action-learning process in 'Pathfinder' countries. The Initiative aims to develop replicable and reliable models and practices that can be adopted by WHO offices and UN staff to address the social determinants of health to advance health equity.** This paper **provides an overview of the Initiative by describing its broad theory of change and work undertaken in three regions and six Pathfinder countries in its first year-and-a-half**. …."*

Sexual & Reproductive health rights

Guardian - Rape survivor wins case against 'cruel and inhumane' state of Bolivia

https://www.theguardian.com/global-development/2023/jan/20/survivor-brisa-de-angulo-wins-case-against-cruel-and-inhumane-state-of-bolivia

"An international court found that Brisa De Angulo, who was abused at 15, had her rights violated during the judicial process."

*"The **inter-American court of human rights** ruling found the Bolivian government to be "internationally responsible" for violating De Angulo's rights when she was unable to find justice in the country's courts when, aged 15, she was repeatedly raped over a period of months by a relative. It had failed to prevent, address, punish, and redress the sexual and institutional violence which she suffered, it said….."*

And a few links:

Devex - Are DIY menstrual pads an unsustainable trend?

Plos GPH - Interventions for treating obstetric fistula: An evidence gap map

Access to medicines & health technology

South Centre - Potential reforms and interpretations of the TRIPS Agreement to promote access to health technologies discussed at a webinar organized by the South Centre

https://us5.campaign-archive.com/?u=fa9cf38799136b5660f367ba6&id=f94417dd55

*"The **South Centre organized on 11 October 2022 a public webinar on the future of the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) to discuss whether a reform of the Agreement and/or authoritative interpretations of some its key provisions are needed**. The webinar was organized in light of the outcome of the 12th World Trade Organization (WTO) Ministerial Conference regarding the request for a waiver of certain TRIPS obligations for the Covid-19 pandemic…."*

Opinion Juris - Termination of the TRIPS Agreement: Necessary And Impossible

http://opiniojuris.org/2023/01/11/termination-of-the-trips-agreement-necessary-and-impossible/

By S Thambisetty.

Reuters - Amazon deepens healthcare push with $5 monthly subscription

[Reuters](#);

"*Amazon.com Inc (AMZN.O) said on Tuesday it is offering a $5 monthly subscription plan for U.S. Prime members* that will cover a range of generic drugs and their doorstep delivery, furthering the ecommerce giant's push into healthcare.....*"*

FT - Drug makers and governments at loggerheads on prices

[Drug makers and governments at loggerheads on prices | Financial Times (ft.com)](#)

"Tight budgets and US reforms are ending a truce between the industry and health authorities." Focus on HICs in this analysis.

"If *there was some sort of a truce on drug prices between big pharma and politicians during the coronavirus pandemic, it ended last week in spectacular fashion*. *US groups Eli Lilly and AbbVie pulled out of the strictest price regime in Europe — after NHS spending on branded drugs in 2022 handed the industry £3.3bn in clawback costs, about 26.5 per cent of UK sales. Drugmakers are also considering whether to withdraw from an agreement with the French government, according to one person familiar with the discussions. The pharma industry had hoped its role creating vaccines and drugs that helped lift lockdowns would prove its economic value to politicians, who have often accused it of putting profits before patients. But **Thomas Cueni, director-general of the International Federation of Pharmaceutical Manufacturers and Associations, said governments had gone from appreciating rapid innovation during the pandemic, to needing to "squeeze" drugmakers because of financial pressure elsewhere**. The industry is frustrated, he said, about the mismatch between politicians trying to attract investment and the much tougher commercial environment...."*

*PS: ".... When European health authorities head to the negotiating table, **they will have to come to terms with a drug industry that is no longer focused on producing daily pills to pop. Whereas drugmakers used to make a little from each patient in a large market, increasingly they are focused on charging more to treat small subsets of patients, with rare diseases, or in oncology, with a certain mutation in their tumour**. Governments have not been giving their health systems more money to cope with this change....."*

Chapter 44 in "Noncommunicable Diseases. A Compendium" - Access to medicines for NCD prevention and control

Open access via https://www.taylorfrancis.com/books/oa-edit/10.4324/9781003306689/noncommunicable-diseases-nick-banatvala-pascal-bovet

By C Macé, R Ravinetto et al.

JAMA viewpoint -Assessing—and Extending—California's Insulin Manufacturing Initiative

https://jamanetwork.com/journals/jama/fullarticle/2800773

"….California's recent proposal, the CalRx Biosimilar Insulin Initiative, may offer a path forward for states looking to curb prescription drug prices. CalRx seeks to lower the price of insulin by having the state of California manufacture the drug itself—in a facility owned and managed by the state, with or without a partnership with a pharmaceutical contractor. Because the state is manufacturing the drug, it can then set its own prices—ideally, far below the current market prices. Several nonprofit organizations—notably, Civica Rx—are currently attempting similar programs to manufacture and distribute insulin at set, transparent, and low prices. If successful, CalRx would be a novel and historic attempt to lower prescription drug costs by turning the state into a vehicle for drug supply. This Viewpoint reviews the mechanics of California's insulin initiative and the challenges it faces and suggests some broader implications if the effort proves successful….."

"…Importantly, though, if CalRx is successful, it can serve as a model for drug development beyond just insulin. …"

Cidrap News - The COVID vaccine success story as a springboard for future research

https://www.cidrap.umn.edu/covid-19/covid-vaccine-success-story-springboard-future-research

*"The harmonized approach and broad database created by the COVID-19 Prevention Network (CoVPN), or Operation Warp Speed (OWS), to rapidly develop life-saving SARS-CoV-2 vaccines can be harnessed for future research on other public health threats that require a speedy response, according to a **special communication** published yesterday in JAMA Network Open….."*

The Bureau of Investigative journalism - The drug was meant to save children's lives. Instead, they're dying.

https://www.thebureauinvestigates.com/stories/2023-01-25/the-drug-was-meant-to-save-childrens-lives-instead-theyre-dying

"How a useless, dangerous childhood cancer treatment flooded the world." Investigative report on a sub-standard cancer drug for children that is still on the market.

*"….**Reporting by the Bureau of Investigative Journalism, in partnership with STAT, reveals that at least a dozen brands of asparaginase have been proven to be poor quality, with ten still on the market…..**"*

*"….**In the past five years these poor-quality brands have been shipped to more than 90 countries**. Many receiving the drugs are **low- and middle-income nations** without strict regulatory authorities, but in several instances substandard drugs have been imported into Western Europe and given to patients in Italy. At least seven manufacturers have continued to sell their products despite being warned that they do not meet minimum manufacturing quality standards. **Experts estimate 70,000 children around the world are at risk, as contaminated and ineffective asparaginase slips through global safety nets…..**"*

Human resources for health

Human Resources for Health - Complexities of health and care worker migration pathways and corresponding international reporting requirements

Ivy L Bourgeault et al ; https://human-resources-health.biomedcentral.com/articles/10.1186/s12960-022-00780-7

"**The increasing complexity of the migration pathways of health and care workers** is a critical consideration in the reporting requirements of international agreements designed to address their impacts. There are inherent challenges across these different agreements including reporting functions that are misaligned across different data collection tools, variable capacity of country respondents, and a lack of transparency or accountability in the reporting process. Moreover, reporting processes often neglect to recognize the broader intersectional gendered and racialized political economy of health and care worker migration. **We argue for a more coordinated approach to the various international reporting requirements and processes** that involve **building capacity within countries to report on their domestic situation** in response to these codes and conventions, **and internationally** to make such reporting result in more than simply the sum of their responses, but to reflect cross-national and transnational interactions and relationships….."

People's Dispatch – Doctors in Kenya get ready to strike after six years of broken promises

https://peoplesdispatch.org/2023/01/20/doctors-in-kenya-get-ready-to-strike-after-six-years-of-broken-promises/

"Doctors in Kenya prepare for possible industrial action **as the 2016 Collective Bargaining Agreement remains unfulfilled** despite multiple court warnings to the government."

Policy & Society - Critical policy capacity factors in the implementation of the community health worker program in India

B Roy et al ; https://academic.oup.com/policyandsociety/advance-article/doi/10.1093/polsoc/puac032/6992949?login=false

"This paper employs the **policy capacity framework to develop a multidimensional and nested policy analysis that is able to examine how different types of capacity**—analytical, organizational, and political from different related levels of the health system—have contributed to both policy success and failure during the implementation of a politically significant **national community health worker (CHW) program in India….."

Decolonize Global Health

BMJ Feature -The uncomfortable truths about visa discrimination and global health conferences

https://www.bmj.com/content/380/bmj.p78

*"In 2022 there were several high profile cases of health professionals from Africa being barred from entering countries for global health conferences they had been invited to. **Abdullahi Tsanni** reports."*

Among others, with some info on a proposed **conference equity index.**

*"…. In 2021, Joseph [a trauma and orthopaedic surgeon at Harvard Medical School in Boston] and her team established **the Equity Research Hub**, an initiative that aims to promote equity in global health processes and collaborations. **They're currently developing a "conference equity index"—a set of metrics such as accessibility, costs, grants, scholarships, and diversity in attendees for conferences to measure their level of equity and to identify areas for growth.** "With the index ratings we aim to assist conferences in facilitating equity," Joseph told The BMJ.*

And a link:

- Lancet Viewpoint - [Deaths of despair and Indigenous data genocide](#)

Miscellaneous

Guardian - Africa has become 'less safe, secure and democratic' in past decade, report finds

https://www.theguardian.com/global-development/2023/jan/26/africa-less-safe-secure-and-democratic-in-past-decade-ibrahim-index

"**Africa is less safe, secure and democratic than a decade ago, with insecurity holding back progress in health, education and economic opportunities, according to an assessment of the continent. The [Ibrahim index of African governance](#),** which examines how well governments have delivered on policies and services, including security, health, education, rights and democratic participation, said Covid had contributed to the stalling of progress over the past three years….

*"…. According to the index, published on Wednesday, security, **rule of law and human rights have deteriorated in more than 30 countries….."***

Guardian - Pope Francis calls for end to anti-gay laws and LGBTQ+ welcome from church

https://www.theguardian.com/world/2023/jan/25/pope-francis-calls-for-end-to-anti-gay-laws-and-lgbtq-welcome

"LGBTQ+ advocates hail Pope's rejection of sexual orientation as crime and call to bishops to resist anti-gay laws as 'milestone'."

"….Francis's comments, which were hailed by gay rights advocates as a milestone, are the first uttered by a pope about such laws. But they are also consistent with his overall approach to LGBTQ+ people and his belief that the Catholic Church should welcome everyone and not discriminate. Some 67 countries or jurisdictions worldwide criminalise consensual same-sex sexual activity, 11 of which can or do impose the death penalty, according to The Human Dignity Trust, which works to end such laws. Experts say even where the laws are not enforced, they contribute to harassment, stigmatisation and violence against LGBTQ+ people….."

Guardian - Joseph Stiglitz: tax high earners at 70% to tackle widening inequality

https://www.theguardian.com/news/2023/jan/22/joseph-stiglitz-economist-income-tax-high-earners-70-per-cent-inequality

*"Nobel-prizewinning economist **calls for new top rate of income tax and 2-3% wealth tax on fortunes."***

Via [Devex](#):

"Broken debt relief: The Group of 20's common framework for debt treatments "isn't working," *Winnie Byanyima,* executive director of UNAIDS, told me. "Only three countries [Chad, Ethiopia, and Zambia] have accessed [it] and even those three, it's too little too late." (A fourth, Ghana, is seeking debt treatment as well.) … Byanyima said all public and private creditors need to be brought together in one place that every country can access while still paying for health, education, and climate adaptation. "The fact that rich countries are just marching on as if the world is coming out of the crisis, does not make it so for the developing countries," she said."*

IISD - UN Report Calls for "SDG Push" to Lift Millions of Africans out of Poverty

http://sdg.iisd.org/news/un-report-calls-for-sdg-push-to-lift-millions-of-africans-out-of-poverty/

*"If **countries adopt and implement policies to "push" the SDGs, the number of people in extreme poverty would drop from 489 million in 2021 to 442.4 million in 2030, and to 159.7 million in 2050.** The **report recommends that the region**: build resilient economic systems to reduce the over-reliance on food imports by transforming agricultural productivity through modernization; and make significant investments to promote equitable and affordable access to energy to sustain economic transformation."*

*"….**The African Union Commission (AUC), the UN Economic Commission for Africa (ECA), the African Development Bank (AfDB), and the UN Development Programme (UNDP) issued a report assessing Africa's progress towards the SDGs and related goals of Agenda 2063 in light of the COVID-19 pandemic and the war in Ukraine**. The report finds that **without "an SDG push**," by 2030, at least 492 million people will be left in extreme poverty, and at least 350 million by 2050. …. The **2022 Africa Sustainable Development Report is aligned with the 2022 High-level Political Forum on Sustainable Development (HLPF)**, which focused on the theme, '**Building back better from the***

Coronavirus disease while advancing the full implementation of the 2030 Agenda for Sustainable Development,' and conducted in-depth review of SDGs 4 (quality education), 5 (gender equality), 14 (life below water), 15 (life on land), and 17 (partnerships for the Goals)."

Telegraph - 'The Golden Triangle is back in the opiate business': Poppy production doubles in coup-hit Myanmar

https://www.telegraph.co.uk/global-health/terror-and-security/poppy-production-doubles-coup-hit-myanmar-desperate-farmers/

"Farmers have 'little choice' but return to poppy cultivation following the junta's takeover, United Nations warns."

Papers & reports

Book – Health as a Social System

João Costa; https://www.transcript-verlag.de/detail/index/sArticle/6363

"Luhmann's Theory Applied to Health Systems. An Introduction."

*"While it has become fashionable in the arena of international health to think about health systems, the theoretical underpinning of Niklas Luhmann's vast and productive theory has been given too little consideration in the field. It is rich in concepts that can facilitate a fuller understanding of what health systems are. **João Costa** applies these concepts and shows the analytical possibilities they open up. He **argues concisely how Luhmann's Social Systems Theory offers an integrated theoretical body as well as a consistent articulation of concepts that can lay the groundwork for a vastly improved health systems thinking**."*

SS&M - Wrangling for health: Moving beyond 'tinkering' to struggling against the odds

Supuni Liyanagunawardena ;
https://www.sciencedirect.com/science/article/abs/pii/S0277953623000813

*"**This article proposes and outlines a new metaphor – 'wrangling for health'– to think about the health seeking efforts occurring within the complex and exhausting everyday realities of resource-poor communities**. It draws on **fieldwork carried out in a rural community in Sri Lanka (in** 2019) with the aim of generating data on the therapeutic practices and health seeking activities of 20 households in the face of everyday ill-health matters. **For people in such resource-poor communities, achieving a 'good' health outcome(s) means a constant and ongoing struggle against the challenges of a low-income household, inhospitable healthcare settings and a diverse therapeutic landscape.** Based on my findings, I **present four key trends in this struggle**: a) negotiating the costs and economies of healthcare, b) seeking treatment only as a desperate measure, c) navigating the diverse therapeutic alternatives and d) circumventing the system….."*

IJHPM - Health System Resilience as the Basis for Explanation Versus Evaluation; Comment on "The COVID-19 System Shock Framework: Capturing Health System Innovation During the COVID-19 Pandemic"

S Topp; https://www.ijhpm.com/article_4395.html?utm_source=dlvr.it&utm_medium=twitter

".... health system resilience remains a slippery concept, defined and applied in multiple ways.
***Reflecting on the Hodgins et al's The COVID-19 System Shock Framework: Capturing Health System Innovation During the COVID-19 Pandemic**, this article restates the limitations of health systems resilience as a concept capable of anchoring evaluative assessments of health system performance but stresses its value in the context of explanatory research investigating how and why health systems adapt, with due attention to the power of actors' whose choices inform the nature and direction of change….."*

Blogs & op-eds

K Bertram - Staying healthy, not just getting care.

https://katribertram.wordpress.com/2023/01/23/staying-healthy-not-just-getting-care/

"In this third article in a series unpacking my personal 2023 global health manifesto, I explore my third goal: "staying healthy, not just getting care".

Excerpt:

"To get anywhere closer to ensuring people are healthy, not just getting health care, we need to:

1) ensure that health care is a means to health, not an end in itself. Where possible, our aim should always be to ensure that people become healthy, and stay healthy in the first place.

2) prevent illness and poor health. When possible, no matter where or what we work on, our primary aim should be to prevent illnesses and poor health, and not place all of our focus (and funding) to wait until people are so ill that they suffer or nearly die.

3) change how global health is funded. We have to stop equating "global health funding" only with charitable development assistance "to save lives", or "preventing deaths". Global health funding has to be organised around preventing illness or poor health, for all people, in all countries."

CGD - Is The Rate of Global Progress at a Peak?

C Kenny; https://www.cgdev.org/blog/rate-global-progress-peak

"***Over the last two hundred years of human history, we have seen some*** awesomely unprecedented progress *in global quality of life*. The world has many more people, living much longer and healthier, in massively improved material circumstances than it did two hundred years ago. ***In a new*** working paper, ***I explore a bit of what lies behind that progress and whether it will continu****e. The paper*

*presents a simple (and [derivative](#)) **model of progress based on the interaction between technology, population, and education….”***

Tweets of the week

Jocalyn Clark

(referring to the BMJ Feat article from above):

“Last year’s news is this year’s problem to solve - visa discrimination in #globalhealth conferences is ongoing & needs a fix.”

Podcasts & webinars

Global Health Matters - The promise and perils of future health technology

https://www.buzzsprout.com/1632040/12047937-the-promise-and-perils-of-future-health-technology

New episode in this podcast series.

*“We kick off the new year with a **conversation about new advances in technologies that are transforming public health practice. In this episode, we explore the promise and perils of artificial intelligence (AI), big data, infodemics and the importance of culturally appropriate innovations.***

While speaking with Florence 2.0, an AI health worker, I try to get advice on leading a healthier lifestyle. Yara Aboelwaffa, co-founder of Health 2.0 Egypt, tells us about the fastest-growing innovations in the Middle East. And Tim Mackey, co-founder of a health care big data startup, shares the realities of attracting funding for public health-focused innovations…..”