IHP news 738: BRICS leaders kick off 3 big summits

(25 August 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,

It’s not often I start on a personal note, but when I looked at the date of publication for this week’s issue (25 August), I realized the day has a special meaning for me. 30 years ago, I got hit (while cycling) by a car. Didn’t wear a helmet (they were a lot less common then), and neither did the brakes of my bicycle work properly. Still, the car’s driver was clearly the one to blame in the traffic situation. But anyway, although I wasn’t without blame myself, from the moment of the accident on, I was ‘lucky’ in the sense that emergency health workers and the health care system in Belgium did all they could then to help me as fast and as much as possible. Which allowed me - though with a bit of brain damage - to live on after that fateful 25th of August in 1993, when I was discharged from the hospital a few weeks later. It’s obvious that in many places around the world, that wouldn’t have been the case in the same circumstances. It’s for a reason that road injuries (and health systems) should be much higher on the global agenda.

With that, let’s move on to some of the highlights of the week. As noted by others, the BRICS summit in South Africa kicked off three (!) top-level meetings in a short timespan (with on Sept 9, G20 leaders also holding their yearly event in India, and a few weeks later, a new UNGA meeting in New York – featuring also three UN HL meetings on global health this year). Busy weeks ahead for sherpas & co, in other words. Let’s hope the summits will be worth the carbon footprint. (well, at least Vlad the war criminal stayed on the ground, which is probably not a bad idea in his country these days)

In this issue, we’ll come back on the G20 Health Ministers’ meeting in India from late last week/weekend (and related events). In case you forgot, the overarching theme of India’s G20 Presidency remains the merry ‘One Earth, One Family, One Future’. I don’t know who came up with the idea for that slogan, but surely he or she must have been a bit deluded. On a more positive note, I’d like to congratulate the Indian people for their successful moon landing. It’s quite a feat, and even taking into account caveats, uplifting news in dire times. So let’s add perhaps “One Moon” to the abovementioned G20 slogan by September 9 😊?

On Thursday, the WHO Civil Society Commission was launched – a gamechanger according to Tedros. We also came across the term ‘global health vandalism’ for the first time – a nice new addition to global health vocabulary. The webinar season is obviously also kicking off again, after a few quiet (Global North) summer weeks in that respect. And as you might have noticed in your local newspaper, there was also a fair amount of Covid (and even Mpox) related news this week, but we refer you to the dedicated sections (i.e. in the part after ‘Highlights’) for this.
Regional WHO elections are currently also being organized in some regions. On X, Kent Buse wondered about some of the nepotism (though perhaps we should label it a ‘special electoral operation’) involved in one of them, see “@WHO South-East Asia Regional Director elections: Bangladesh 2day nominated daughter of its Prime Minister. Is this the world we want? Imagine what the UN would look like if all country leaders nominated their family members for senior elected UN posts.”

That is not to say that the world and the UN look in great shape at present. Lately, mainstream economists got some (well-deserved though belated) flak for their role in the “economics of climate change”. Check out for example Ann Pettifor’s “Blame economists for decades of false security” (focusing on ‘Nobel Prize’ winner Nordhaus in particular). Somewhat related, you should also have a good look at a new paper by S Fukuda-Parr et al, “Why are Macroeconomics neglected in equity and inclusion strategies for sustainable development? An Exploration of Four Systemic Barriers” in which, among others, the authors also notice a “contradiction between mainstream economic paradigms and the SDG agenda which puts people, planet and equality first as priority social goals rather than market efficiency and economic growth. With the current “planetary/SDG mess” as a consequence, I would add.

Borrowing a quote from Pettifor, we’re now witnessing the “cataclysmic gap between theory, policy and ecosystem collapse”.

It ain’t a pretty sight.

Enjoy your reading.

Kristof Decoster

Featured Article

Why non-HPSR conferences matter to the HPSR field: musings from the 2023 International conference on Public Policy in Toronto

Meena Putturaj, Veena Sriram, Shinjini Mondal, Sara Van Belle & Okiki Olu Badejo

The 6th edition of the International Conference on Public Policy (ICPP6) was held between June 27th and 29th, 2023 in Toronto, Canada. ICPP6 had 1180 registered participants coming from 78 different countries. It is one of the world’s largest international events on public policy: no less than 1522 papers related to various public policies were presented in 156 panels this year. The Faculty of Arts at Toronto Metropolitan University hosted the ICPP6. In many ways, public policy conferences like these are sources of inspiration and learning new ideas, knowledge and innovative policy approaches that are critical to the field of health policy and systems research (HPSR). Given the multidisciplinary nature of the HPSR field, it’s vital to better understand and apply the ontology, epistemology and methodologies used in other disciplines such as political science, sociology, anthropology, history etc. In this regard, an ICPP meeting is a “one stop” source that enables
multi/cross/trans/ inter/intra disciplinary learning and networking. In this featured article, almost two months after attending ICCP6 (I blame the perils of multi-tasking and task switching here!), I feel compelled to critically reflect upon the learnings from ICCP6, 2023 and their implications to the HPSR field.

Attending ICCP6 felt like breaking out of the cocoon of the usual HPSR related conferences, which are organized every two years. This is not to undermine HPSR conferences. While it is important to have HPSR field specific conferences to build the field, it is equally pertinent to recognise the fresh leash of intellectual energy infused by non-HPSR conferences such as ICCP6 to the HPSR field (and thus HPSR researchers like us). A non-HPSR focussed conference is intellectually exhilarating because you get to learn new concepts and methodologies. For instance, exploring the political dimension of health policy formulation and implementation is recognised as a critical element in the HPSR field. There were a few panels at ICCP6 which discussed the role of emotions in the public policy processes. One of the presentations on the interpretive analysis of emotional climates in policy conflicts was fairly intriguing. The presenter emphasised the need for analysing emotional storylines in policies. Another presenter in the panel empirically studied emotions in migrant policies of the UK, using a concept called “neurotic citizen”- where the State governs its subjects by responding to their fears, anxieties and insecurities rather than based on more rational objectives. So that way, the state symptomatically addresses your anxieties but does not take steps to cure your anxieties. Another separate panel on policy termination in practice discussed various frameworks and the mechanics of dismantling public policies. No doubt there were many more examples of panels where HPSR researchers were introduced to relatively novel ideas, methodologies, etc.

Outstanding plenary sessions

The topics and the speakers chosen for the plenary sessions of ICCP6 were like icing on the cake. The conference featured three plenary sessions that included a keynote speech and two roundtables. I share here some titbits of the plenary sessions.

The first plenary session, a roundtable, addressed “ transformative policy futures in the age of Anthropocene”. Leading scholars who study the interface between economic, environment and social policies argued for transformative policy futures. Frank Biermann, an expert in global sustainability governance, in this panel advocated for multidisciplinary research in public policies to avert the dangers of unqualified quantification, false reductionism and engineer approaches with false (or at least one-sided) technological solutions. He also underlined the need for building a globally inclusive discourse and a normative debate on planetary justice. The keynote speaker, Deborah Stone from the Massachusetts Institute of Technology spoke about the paradox of democracy. While normatively we have accepted democracy as the ideal form of government, democracy remains unseen in most spheres of our policy work. She emphasised the significance of interpretivist scientists to make the invisible norms visible, in order to claim/reclaim democracy and science. For example, she urged to interrogate the colour black sociologically, economically and politically. She critically examined the politics of science and illustrated how science has become unnecessarily quantitative. She urged policy analysts to do science rigorously but disseminate it with good story telling elements in order to create impacts in people’s lives. The third plenary focused on the “inclusive State”- where structural inequities are adequately addressed through State policies. This plenary analysed if the existing theories of public policy and governance sufficiently explain the rise of the inclusive State and the processes to advance its goals.

Exploring Toronto (if you were lucky enough to make it to the conference)
ICPP6 also gave an opportunity to some of us (who were fortunate to attend in person) to explore and experience a bit of Toronto. We also got to meet and interact with some accomplished political science scholars whose theories and frameworks we have used in our HPSR work. The cultural enrichment one gets through experiences in places outside one’s home country is also gratifying.

The cross-disciplinary nature of the HPSR field requires us to attend global conferences such as ICPP (although we are aware they come with an environmental cost). Such meetings and platforms provide new ideas, inspirations and tools for critical analysis and deeper understanding of the problems confronted by health systems. Sadly, as is well known by now, not all aspiring scholars from the global south make it to big scientific events like this due to expensive air travel, exorbitant registration fees and/or biased visa norms in rich (and many other) countries. The International Public Policy Association (the organiser of ICCP6) offered more than 200 scholarships to PhD students to cover participation and accommodation expenses. Nevertheless, two thirds of the ICCP6 participants were from Europe and Americas- the number says it all (doubt carbon footprint was a criterion). Anyway, the next ICCP will be held in Thailand at the Chiang Mai University in 2025. This could probably assure more diversity in participation and address epistemic oppression to an extent.

A few concluding thoughts

Participation in non-HPSR global conferences such as ICCP6 has numerous benefits that can positively benefit HPSR scholars and their work. The benefits include (but are not limited to) exposure to cutting-edge scholarship in public policy, help gaining a global perspective on public policy challenges and opportunities and seed collaborations for HPSR work with scholars from diverse backgrounds. Conferences like these can also equip HPSR scholars/practitioners with novel tools and analytical lenses to situate and critically examine health systems within the public policy arena. By the way: a few ICCP6 panels were specifically dedicated to health. Nevertheless, there is more work to be done to bring together and enhance interaction between the public policy scholars working on health and the HPSR community.

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Highlights of the week

G20 Health Ministers’ Summit (17-19 August, India) & related events/news

Focus under this heading among others on the Health Ministers’ meeting, the Joint Finance & Health Ministers’ meeting, a new Global Initiative on digital health, and (see also last week’s newsletter) the Global Summit on Traditional Medicine.
Health Ministers’ Outcome document

https://www.g20.org/content/dam/gtwenty/gtwenty_new/document/G20_HMM_Outcome_Document_and_Chair_Summary.pdf

9-pager & worth to read in full.

With focus on three themes as you know. As a reminder, they are: “Health Emergencies Prevention, Preparedness, and Response [PPR] (with focus on One Health and Antimicrobial Resistance [AMR])
● Strengthening Cooperation in the Pharmaceutical sector with focus on availability & access to safe, effective, quality, and affordable Medical Countermeasures-VTDs (Vaccines, Therapeutics, and Diagnostics), and ● Digital Health Innovation and Solutions to Aid Universal Health Coverage and Improve Healthcare Service Delivery.”

• Among others, the G20 seems to have backed the Medical Countermeasures platform. (but see below for some “qualification” of this assessment)

Reaction Tedros on X: “I welcome the @g20org consensus on an inclusive interim mechanism for equitable and timely access to vaccines, tests, therapeutics and other medical countermeasures in the face of pandemics. We encourage continued dialogue among Member States to broaden support on all aspects of the mechanism.”

And another tweet by Tedros: “Thank you #India & all @g20org countries for a constructive Health Ministers’ Meeting, where I was encouraged by support for the: -Global Initiative on Digital Health - Interim mechanism for medical countermeasures -Joint Finance-Health Task Force; Pandemic Accord”.

• Check out also this tweet by Helen Clark (which went viral):

“Note #G20 Health Ministerial Outcome Document reference to “technology transfer and knowledge sharing on voluntary & mutually agreed terms”. That doesn’t even nod towards compulsory licensing, let alone a #TRIPSwaiver. @peoplesvaccine @Winnie_Byanyima @TheIndPanel @ElsTorreele”

The Wire - G20 Health Ministers' Meet Ends Without Joint Statement Due to Objections From Russia, China

https://thewire.in/diplomacy/g20-health-ministers-meet-ends-without-joint-statement-due-to-objections-from-russia-china

Must-read coverage & analysis of the Health Ministers meeting.

“At the end of the meeting, an outcome document and a chair summary was issued which highlighted several priorities of G20 members to improve healthcare around the world.”

“...The two-day G20 meeting of health ministers ended on August 19 without a joint statement being issued – just like G20 gatherings of other ministers that took place after India took over the
presidency of the group. The bone of contention was, again, the Russia-Ukraine war. Instead, a chair summary and an outcome document was issued at the end of the meeting.”

“...Except for this issue, the rest of the document was unanimously agreed upon by all the G20 members. They reiterated that the World Health Organisation (WHO) has a central role in the global health architecture. .... The members also acknowledged that “safe, effective and quality-assured” medicines, vaccines and diagnostics must be equitably available to all countries..... On another note, the members concurred on the need for low and middle income countries (LMICs) and other developing countries to become a part of a global consultative mechanism that takes calls on access to medicines, diagnostics and vaccines, should another pandemic strike.....”

And much more. Do read on.

Managing IP - G20 urges ‘voluntary’ tech transfer amid IP row at WHO
https://www.managingip.com/article/2c3fu3mjdxwnmljk552bk/g20-urges-voluntary-tech-transfer-amid-ip-row-at-who

“G20 health ministers have hailed the importance of tech transfer and knowledge sharing to prevent future pandemics, but only on “voluntary and mutually agreed terms”.....”

PS: “Negotiations to achieve [that aim] are ongoing at the World Health Organization (WHO), which is preparing the text of a new pandemic preparedness treaty. But developed countries have so far resisted lower-income nations’ demands to make rights owners share their intellectual property. The shadow of that debate is visible in the wording of the G20 statement, says Ellen ‘t Hoen, director at Medicines Law & Policy in Amsterdam. “This statement does not detract from the rights countries have to use compulsory patent licensing. But the G20 does seem to want to pre-empt the outcome of the pandemic treaty negotiations at the WHO by stressing voluntary measures,” she said.”

TWN - WHO: G20 health ministers refuse to endorse establishment of interim MCM Platform

“The Group of 20 health ministers have refused to endorse the establishment of an interim platform for medical counter measures (MCM platform). .... The World Health Organization (WHO) and a few developed countries have been aggressively pushing in various international fora, including G20 and the UN General Assembly, to obtain endorsement for the establishment of the MCM Platform. However, the WHO Director-General’s Tweet wrongly conveys that there is consensus on the establishment of an interim mechanism. The Tweet states: “I welcome @g20org consensus on an inclusive interim mechanism for equitable and timely access to vaccines, tests, therapeutics and other medical countermeasures in the face of pandemics. We encourage continued dialogue among Member States to broaden support on all aspects of the mechanism”. However, the reading of the actual outcome document of the G20 Health Ministers’ Meeting shows that the consensus is limited to the WHO consultation process for the establishment of an interim mechanism and not for the mechanism per se...”
PS: “... Many developing country delegates told Third World Network that WHO is extraordinarily keen to establish the MCM Platform as a successor to its Access to COVID-19 Tools -Accelerator (ACT-A), a multi-stakeholder platform aimed to develop diagnostics, therapeutics and vaccines. .... WHO's enthusiasm to establish the MCM platform citing the urgency of the next pandemic has created suspicion among Member States. TWN learned that many developing countries from Africa, Latin America and Asia have raised concerns on the WHO Secretariat’s rush to establish the MCM platform bypassing the on-going negotiations to amend the International Health Regulations (IHR) 2005 and on a new pandemic instrument. Many developing countries view that establishment of the MCM platform outside the framework of IHR and the new pandemic instrument as an attempt to bypass a concrete legal obligation to establish regional and national production facilities to ensure equitable access to health products required for the health emergency response. These countries also point out that the current proposal on the MCM Platform as a multistakeholder mechanism lacks accountability to WHO governing bodies. Furthermore, developing country delegates also highlight that the concept note provides few details of the functioning of the MCM platform and maintain a strategic silence on the management of intellectual property and technology transfer related to the health products concerned. .... In addition, the outcome document supports the expansion of the scope of the pandemic instrument to include antimicrobial resistance (AMR) as part of the new instrument, which is a proposal from the European Union (EU).....”

WHO launches a new global Initiative on digital health supported by the G20 Presidency


“The World Health Organization (WHO) and the G20 India presidency announced a new Global Initiative on Digital Health (GiDh) today at the Health Minister’s Meeting of the G20 Summit hosted by the Government of India.”

“The new GiDh initiative (pronounced “guide” for short) will operate as a WHO-managed network and platform to support the implementation of the Global Strategy on Digital Health 2020–2025. WHO serves as the Secretariat for the strategy implementation to converge and convene global standards, best practices and resources to fast track digital health system transformation.....”

Livemint - G20 ministers agree to strengthen global health architecture


With coverage of the Joint Finance and Health Ministers’ meeting (Aug 19).

“Finance and health ministers of G20 nations have agreed to continuously strengthen global health architecture for pandemic prevention, preparedness and response (PPR) through enhanced collaboration between their finance and health ministries, India’s finance ministry said in a statement after the joint finance and health ministers’ meeting on August 19.”

See also Joint Statement After G20 Finance and Health Ministerial Meeting
“The G20 Finance and Health Ministers have decided to work more closely together in order to maintain the global health architecture for pandemic prevention, preparedness, and response (PPR)....”

“... Ministers welcomed the multi-year work plan of the Task Force, approved under the Indian Presidency. Ministers welcomed the reports developed by the Task Force under the Indian Presidency, since these reports not only help members deepen their understanding of how future pandemics can impact the economy but also brought out the gaps in existing pandemic response institutional/funding arrangements. Some of the views expressed by countries in the discussions were those that are suggestive of future course for the Task Force including but not limited to development of an operational play book to ensure swift and adequate pandemic response financing; development of pandemic stress test; strengthening the supportive role of Task Force to WHO in global health architecture while duly considering country specific circumstances.....”

WB (report) - Investments in Digital Can Accelerate Improvements in Health Care


“Digital technology can strengthen health systems, improve health financing and public health, and increase reach to underserved populations, according to a new World Bank report launched today. The report also finds that digital technology and data are especially helpful to prevent and manage chronic diseases, care for both young and aging populations, and prepare for future health emergencies and health risks triggered by climate change.”

“The report, Digital-in-Health: Unlocking the Value for Everyone, was launched today during the G20 Health Ministers Meeting in Gandhinagar, India. It presents a new way of thinking from simple digitization of health data to fully integrating digital technology in health systems: Digital-in-health. This means, for example, infusing digital technologies in health financing, service delivery, diagnostics, medical education, pandemic preparedness, climate and health efforts, nutrition, and aging. The report also underscores that the successful use of digital technologies must be inclusive of all population groups, and ensure access to digital infrastructure, modern technologies, and skills, especially for vulnerable people.....”

Related WB blog (by J P Uribe) - Digital-in-health: Unlocking the value for everyone

And some bits & pieces:

- WHO praises India for advancements in UHC, Ayushman Bharat Scheme  (Tedros did so, after visiting a Health & Wellness centre)

- Via DNDi -  DNDi urges G20 to operationalize equity in response to major global health challenges and priorities  “...DNDi welcomes the G20’s focus on the impact of climate change on health: “For many climate-sensitive diseases, underinvestment in medical R&D results in a lack of simple and effective tools for prevention, diagnosis, and treatment that can be easily integrated into already overburdened health systems. We urge the G20 to go further in prioritizing action to ensure availability of and equitable access to tools to diagnose and treat climate-sensitive diseases, which are vital to building resilient communities and health systems. We encourage the Brazilian Government to maintain a focus on climate and health as a priority area for its December 2023-November 2024 G20
**presidency**, including a review of the actions needed to ensure R&D and equitable access for new health tools to prevent, diagnose, and treat climate-sensitive diseases as part of efforts to build climate-resilient health systems.”

*Times of India* - *India’s strength lies in pharma, digital innovations: Rottingen*


In conjunction with the G20 Health Ministers meeting, Norway’s J-A Rottingen had the opportunity to speak with the Times of India on the collaboration between India & Norway on global health through innovations. Among others in 4 Indian provinces.

*BMJ Opinion* - *The G20 must act now for the health and wellbeing of women, children, and adolescents around the world*

Amitab Kant (India’s G20 Sherpa) & Helen Clark; [https://www.bmj.com/content/382/bmj.p1897](https://www.bmj.com/content/382/bmj.p1897)

High-level advocacy. “G20 countries must also take more substantial action to overcome the health and wellbeing challenges faced by women, children, and adolescents.”

The authors stress **four points**.

*WHO* - *Global partners commit to advance evidence-based traditional, complementary and integrative medicine*


**Official press statement** after the **Traditional Medicine Global Summit** (see also last week’s iHP news).

“The first-ever **World Health Organization (WHO) Traditional Medicine Global Summit 2023** closed on 18 August, with a strong commitment from the diverse and unique groups of partners and stakeholders to harness the potential of the evidence-based traditional, complementary and integrative medicine (TCIM) to improve progress towards universal health coverage and Sustainable Development Goals by 2030 for the health and well-being of people and the planet.”

“Health ministers from G20 and other countries, scientists, practitioners of traditional medicine, health workers and members of civil society **from 88 countries** participated in the Summit that took place in Gandhinagar, Gujarat, India on 17 and 18 August 2023. **The Summit provided a platform for all stakeholders to share their unique experiences, best practices and ideas for collaboration. It included a diverse group of Indigenous Peoples from different regions of the world** (e.g. Australia, Bolivia, Brazil, Canada, Guatemala and New Zealand, among others) for whom many TCIM approaches play a fundamental role in not just health care, but also culture and livelihoods.....”

“Preliminary findings from the WHO Global Survey on Traditional Medicine 2023 shared at the Summit indicate that around 100 countries have TCIM related national policies and strategies. In many WHO Member States, TCIM treatments are part of the essential medicine lists, essential
health service packages, and are covered by national health insurance schemes. A large majority of people seek traditional, complementary and integrative medicine interventions for treatment, prevention and management of noncommunicable diseases, palliative care and rehabilitation. “

“Dr Bruce Aylward, Assistant Director-General, Universal Health Coverage, Life Course at WHO, highlighted the need for a “stronger evidence base—a WHO priority—to enable countries to develop appropriate regulations and policies around traditional, complementary, and integrative medicine.” ..... The Summit’s summary document included conclusions and commitments from participants on wide-ranging issues, from global policy, leadership, innovation, health workforce, data, evidence, monitoring, regulation, legal frameworks and protecting biodiversity and sustainable development. “

- See also HPW – Concern About WHO Messaging at First Traditional Medicine Summit

For coverage. (see also last week’s IHP newsletter)

“...The World Health Organization’s (WHO) two-day summit on traditional medicine, held last week in the Indian city of Gandhinagar, was an attempt to start a dialogue about how to integrate evidence-based traditional medicine into modern medicine – but many were disconcerted about social media posts from the global health body that appeared to offer support for unproven treatments. In addition, with India as summit co-host, Indian officials and programmes that have made controversial, unscientific claims were also given prominence.....”

On the latter: “.... The summit also allowed co-host India to promote controversial officials at press conferences – most notably, joint secretary of the Ministry of Health and Family Welfare (MoHFW) Lav Agarwal. During the COVID-19 pandemic, Agarwal repeatedly linked rising COVID-19 cases to a meeting held by a Muslim group, driving misinformation and stigmatization in an already charged religious environment in the country. India’s Ministry of Ayurveda, Yoga, and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) also announced at the summit that it is in discussions with Malaysia about how to cooperate on traditional medicine and homeopathy. The official inclusion of homeopathy in the Ministry of AYUSH has long been a subject of controversy in India. .....”

Global health governance

Launch of WHO Civil Society Commission

https://www.who.int/about/collaboration/civil-society-and-ngo-engagement/civil-society-commission

Officially launched on Thursday (24 August), together with the inaugural meeting of the Steering committee. See New WHO Civil Society Commission to strengthen civil society organizations’ role in accelerating progress in global health (press release)

“The Commission provides, for the first time, the ability to channel advice and recommendations in a more structured and systematic manner from civil society to WHO on health priorities and related issues....”
“The mission of the WHO Civil Society Commission is to strengthen dialogue, foster collaboration and provide recommendations to support WHO on its engagement with civil society at global, regional and national levels to achieve health for all and the objectives of the WHO General Programme of Work as well as to accelerate attainment of health-related SDGs. Its goal is, taking into consideration the civil society’s voices available to WHO, to support WHO’s efforts towards improving engagement between WHO and civil society at global, regional, and national levels, rendering it more systematic with the aim of advancing WHO’s work and public health outcomes. “

“The Civil Society Commission is a WHO network consisting of a Steering Committee, a General Meeting and Working Groups. Overall strategic direction and main deliverables for the work of the WHO Civil Society Commission will be provided by its Steering Committee of maximum 25 members. Its responsibilities include supporting the development of the overall WHO Civil Society Commission workplans and strategies and coordinate the general meetings. It meets 4 times a year. The annual general meeting of all the WHO Civil Society Commission participants will take place once a year in hybrid or virtual format, and it will review the Commission annual reports as well as proposed work plans.....”

PS: “Over 350 Organizations have so far applied to be part of the Commission. Today, WHO, will begin to notify the 120 organizations that have been accepted so far. Others will be notified in the coming weeks. A list of participants can be found of the WHO website and will be regularly updated. The application process will remain open and organizations that wish to apply to join the Commission are encouraged to do so. ....”

PS: if you want, you can also re-watch the first WHO Civil Society Steering Committee meeting

- Related tweet by dr Tedros:

“A game-changing day for #GlobalHealth with the launch of the @WHO Civil Society Commission. I am so proud to be working closely with our WHOCSOCommission Steering Committee members and all CSOs that are part of the Commission. Partnership has been a major pillar of @WHO’s Transformation to help the world achieve #HealthForAll. The only we can achieve our goals, including the #SDGs, is to work with civil society because you know the problems, needs and solutions for grassroots and global action.”

TGH - An Inside View of the New Bureau of Global Health Security and Diplomacy


“An interview with Ambassador Dr. John Nkengasong.”

The Wire - 'We20': Economists and Activists Come Together to Hold a Mirror to G20

https://thewire.in/government/we20-g20-new-delhi-event-teesta-setalvad-manoj-jha
On an event organized in Delhi last weekend. “The event placed at the front and centre the fact that the G20 is an 'informal elite club' of traditional and selected powers whose decisions impact the policies and financial architecture of the whole world.....”

“Over 500 economists, activists, journalists and politicians from across the country come together for a 'We20' people’s summit in the national capital, which aims to hold a mirror to the glitz surrounding the G20 summit that India is set to host. ..... While economists Arun Kumar and Jayati Ghosh highlighted how the G20 was moving away from “people-centric” decisions, activists Medha Patkar and Teesta Setalvad questioned whose interests the G20 was serving in the first place......”

Unfortunately, the Delhi police didn’t quit agree.... (see below)

The Wire - By Shutting Down We20 Peoples’ Summit, the Modi Govt Showed It Was Scared of the Truth

LF Saldanha et al ; https://thewire.in/rights/we20-summit-modi-truth-g20

“For the present administration, We20 offered an incredible opportunity to demonstrate to the world that it is serious about building an inclusive India.”

Re the official C20 process: “.... Invoking the legacy of “Mahatma Basaveshwara, Dayanand Saraswati, Ramakrishna Paramahamsa, Ishwar Chandra Vidyasagar, Mahatma Phule, Lokmanya Tilak, Mahatma Gandhi and Dr Babasaheb Ambedkar”, the Civil20 (C20) India process was projected as “one of the official engagement groups of the G20 that provides a platform for civil society organisations (CSO) around the world to voice people’s aspirations to the world leaders in G20.” ..... The C20 process conducted under the guidance of spiritual leader Mata Amritanandamayi (Amma) and the Rashtriya Swayamsevak Sangh (RSS) has been curated to project a majoritarian view of the country. Using massive public resources, C20 events involved only those civil society organisations, academics and media comfortable with the bigoted Hindutva vision of India that is ideologically core to the RSS and the Bharatiya Janata Party (BJP) – Modi’s party. The BJP’s electoral symbol, the lotus, is also etched into this year’s G20 logo, leaving little doubt of its purpose....” 

And so, enter We20: “.... It became essential, therefore, for progressive and independent voluntary organisations, people’s movements, independent research initiatives, free academics, media etc. to articulate their concerns about how the G20 process was being employed – to project a deliberately coloured version of India’s polity. It was important to highlight how Narendra Modi is governing India and causing massive democratic deficits. Such voices would never find a place in the official G20 or C20 engagement groups .....”

Spotlight - A new African HIV Control Working Group to propel African voices in the global HIV response


“.... To address these inequities and propel African voices and perspectives in the next phase of the HIV response in Africa, a group of Africans approached the Bill and Melinda Gates
Foundation to fund the establishment of an African-led HIV control working group (HCWG) of experts from the continent to come together as a working group to develop consensus perspectives on the definition of long-term sustained control of HIV and prioritise the systems and capabilities to achieve it. The HCWG is currently co-chaired by Dr Izukanji Sikazwe and Dr Yogan Pillay. Its members have expertise in a wide range of topics from epidemiology, clinical aspects of HIV, financing, and economics, lived experiences with HIV, advocates, and policy makers. The vision of the HCWG is an “African-led response for long-term HIV control on the continent” and its mission is “finding sustainable solutions to end HIV as a public health threat in Africa led by African stakeholders, in partnership and solidarity with the global community”.

“The working group was convened for the first time on 10 August…..”

Global Health Financing

SS&M - Donor versus recipient preferences for aid allocation: A systematic review of stated-preference studies


“Alignment of donor and recipient preferences for aid is increasingly important. This is the first systematic review of donor and recipient preferences for aid. There is a paucity of literature assessing recipient perspectives for aid. Donors tend to prefer aid towards the health sector compared to recipients. Aid effectiveness may be more important to donors in allocating aid.”

PS: “….While the different approaches, methods, and attributes specified by included studies led to difficulties drawing comparisons, we found that donors had a stronger preference than recipients for aid to the health sector, and that aid effectiveness could be more important to donors than recipients when deciding how to allocate aid. Importantly, our review identifies a paucity of literature assessing recipient perspectives for aid using stated preference methods. The dearth of studies conducted from the recipient perspective is perplexing after more than 30 years of ‘alignment with recipient preferences’, ‘local ownership of aid’, ‘locally-led development’ and ‘decolonisation of aid’. ….”

Devex Newswire: What’s delaying USAID’s $17B NextGen contracts?


“The U.S. Agency for International Development’s process for delivering the much-hyped, multibillion-dollar series of Next Generation global health supply chain contracts has been unusually slow, even for a government agency. USAID has been reluctant to comment on the process, so our team talked to former staff and others who provided some insight on what could be holding things up….”

“…. My colleagues David Ainsworth and Omar Mohammed were among the many scratching their heads when USAID announced in May that it had awarded the first of nine contracts known as the NextGen Global Health Supply Chain to Deloitte. The contract came two years after
originally intended with no clear explanation as to why it was delayed. ..... NextGen — worth a maximum of $16.8 billion over 10 years — is expected to replace the agency’s current global health supply chain program. Most of that work currently flows through a single contract to private sector implementer Chemonics that is set to expire at the end of this year. And USAID’s website still says that it intends to replace that contract in 2022. But we’re now well into 2023. So what’s going on? ..... An insufficient number of USAID employees with expertise relevant to the work, risk aversion within the agency, indecisiveness, and internal disagreements about what the awards should look like are among the issues slowing down the process, former USAID staffers, contractors, and others tell Devex. They also say the agency may have taken advantage of flexibility granted by the U.S. government to extend existing contracts during the COVID-19 pandemic, which is now running out.....

Pandemic Preparedness & Response

BMJ Opinion - We need a universally endorsed definition of a pandemic for the Pandemic Accord to be effective

https://www.bmj.com/content/382/bmj.p1946

“For the Pandemic Accord to be effective, member states must urgently focus negotiations to define its scope, including its definition of “pandemic,” and ensure the definition avoids the pitfalls of past mistakes, argue Noor Shakfeh, Fifa Rahman, and Katri Bertram.”

In this Op-ed, they analyse, among others, the definition offered for a pandemic in the current INB Bureau text. That one “attempts to offer a definition for pandemic, which references a global outbreak of a pathogen with sustained human transmission, little immunity, high mortality, and causing social and economic disruptions that would require global collaboration to control...”.

The authors call on member states to: “1) Urgently prioritise defining “pandemic,” ensuring alignment with all other pandemic-related agreements and processes being negotiated in parallel. 2) Ensure that technical data, such as mortality and immunity data, are not the sole or overemphasised metrics for defining a pandemic. The risk of an outbreak must be calibrated with socio-economic context. 3) Agree on a clear definition and resulting triggers, to ensure that past mistakes are not repeated, and utilise the expertise and experience of civil society, including communities and academia, to develop an effective definition conducive to a “no-regrets” approach. 4) Prioritise language that ensures solidarity and garners political mobilization, and overcomes narrow, national self-interests of a few countries at the cost of billions of people around the world.”

Preprint - A Medical Countermeasures Platform for Future Pandemics: Essential Elements for Equity

Fifa Rahman, A Lal, Brook Baker et al ;
By civil society representatives in the MCP. From July. “The WHO and other stakeholders, including CSOs, are developing a medical countermeasures platform (MCP) for future pandemics. Many are concerned that this will repeat key mistakes in the global COVID-19 response. The global COVID-19 response was coordinated through the Access to COVID-19 Tools Accelerator (ACTA), which demonstrated some success, but also missteps and failures. Given the likelihood of a pandemic as serious as COVID-19 occurring in the 25 years, we unpack several reforms that are needed to increase equity in the next pandemic.”

FT - WHO’s chief scientist urges greater collaboration against dangerous pathogens

https://www.ft.com/content/91ab571b-d487-4210-af18-8aa2af1da7d5

“The World Health Organization’s new chief scientist has urged countries to share work on vaccines, diagnostics and treatments for the 20 most dangerous pathogens to avoid the “deep scars” caused by inequitable access to countermeasures at the height of the Covid-19 crisis. As national health systems continue to reel from the pandemic, Jeremy Farrar said “there has got to be a mutual understanding” between countries to ensure better preparedness.”

“In his first interview with a newspaper since he started in the job three months ago, Farrar said the world faced a number of health challenges, namely ageing and more unwell populations and a shrinking pool of health workers; conditions caused by climate change and the loss of biodiversity; and health crises stemming from economic trends such as youth unemployment and inequality. “If we don’t address those key drivers in the 21st century, we’re going to face more…..”

PS: “… Farrar said he was still open to all hypotheses on Covid’s origins, including an accidental laboratory leak from the Institute of Virology in Wuhan, China, or its transmission from animals being sold in the city’s wet markets. His interpretation of the evidence accumulated over three years suggested that it “is increasingly that actually the natural origin is much more likely”. “But you can’t ignore the geography, you can’t ignore the centre,” he added, referring to the potential leak from labs in Wuhan. … Preparing for the next pandemic will take a global commitment Farrar is open to the idea of a WHO new mission to China to trace Covid’s origins, “if there was a willingness to share all information, and this could be done in a way that will actually shed light on it”. …… The WHO should be more of a public “conductor” of initiatives to improve global health rather than running them inside the organization…..”

Preprint - ‘Equity’ in the Pandemic Treaty: The False Hope of ‘Access and Benefit-Sharing’

(International and Comparative Law Quarterly, forthcoming)
“Current negotiations for the new Pandemic Treaty under the World Health Organization (WHO) attempt to narrow the gap between rhetoric and behaviour by building the concept of equity into the Treaty’s substantive content. But equity is difficult to define, much less to operationalize. Presently, WHO member states appear to have chosen “access and benefit sharing” (ABS) as the sole mechanism for operationalizing equity in the Treaty. This paper examines ABS as a mechanism, its use in public health, and argues that ABS is fundamentally flawed, unable to achieve equity. It proposes other options for an equitable international response to future pandemic threats.”

AMR

Cidrap News - Report outlines steps needed for more responsible antibiotic manufacturing

https://www.cidrap.umn.edu/antimicrobial-stewardship/report-outlines-steps-needed-more-responsible-antibiotic-manufacturing

“A new report on responsible antibiotic manufacturing suggests that while a handful of companies are taking steps to reduce the amount of antibiotic manufacturing waste released into the environment, more needs to be done.”

“The report from the Access to Medicine Foundation, released today, provides a closer look at an issue the group has been studying for several years in its assessment of how pharmaceutical companies are addressing antimicrobial resistance (AMR). Although overuse of antibiotics in human and animal health is considered the primary factor in the rise and spread of AMR, there is growing concern that the release of antibiotic residues from manufacturing sites into local waterways—and subsequent interaction with bacteria and antibiotic resistance genes—contributes to the problem by promoting drug resistance in the environment. The authors of the report say that manufacturing antibiotics responsibly and in ways that don’t promote AMR is both a "moral imperative" and a business priority. Using examples from both large and small pharmaceutical companies, the report identifies three specific areas where steps can be taken to limit antibiotic waste more effectively.”

Access to Medicines & Health technologies

Global Fund Announces New Mechanism to Increase Access to More Effective Mosquito Nets to Prevent Malaria


“The Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund) is launching a new Revolving Facility to negotiate improved supply terms for global health products for the countries
it supports. This financial mechanism uses advanced market commitments, including volume guarantees, to drive more affordable access to quality-assured health products and accelerate health product introductions and innovations at greater scale...."

".... The first agreement to come through the Facility will be with Vestergaard, manufacturers of PermaNet® malaria mosquito nets, for its new dual active ingredient (Dual AI) insecticide-treated net. Dual AI nets are more effective against insecticide-resistant mosquitoes than conventional ones. By implementing an innovative operating model, the Global Fund aims to secure sustainable prices for a set of commonly used specifications for Dual AI nets that are comparable to existing nets. ...

See also UN News — New financing tool aims to increase access to lifesaving mosquito nets

"....The Revolving Facility was established with an initial commitment of $100 million from the Bill & Melinda Gates Foundation....."

Devex - Activists worry drug access may be sacrificed in trade deals

With focus, among others, on EU-India trade talks, and UK-India trade talks, and EU-Indonesia discussions.

"...When the European Union and India decided to relaunch trade talks in 2022, activists were surprised to see the EU insert some intellectual property protections that go beyond minimum internationally agreed practices in its proposal..... If New Delhi were to concede to the EU proposals, Roshan Joseph, an analyst with Médecins Sans Frontières' Access Campaign, warns of international consequences — particularly in the global south. India produces 20% of the world’s generic medicines and serves as the single-largest supplier of pharmaceutical products in Africa...."

"The protections regularly crop up in trade discussions, as countries and regions that are home to pharmaceutical companies try to lengthen IP protections and secure the industry additional profit. For instance, in separate negotiations, the United Kingdom is asking India for even stricter controls than the EU. And in ongoing discussions with Indonesia, the EU is also seeking strict IP protections...."

Also with some prognosis on whether EU partners will give in (or not).

The Nation - Scientists call on AU leaders to prioritise mRNA vaccine technology
https://nation.africa/kenya/health/scientists-call-on-au-leaders-to-prioritise-mrna-vaccine-technology-4325592

“Leading scientists are calling upon African Union (AU) leaders to prioritise mRNA vaccine technology transfer projects that are about equity, public purpose, and the open sharing of knowledge and technology rather than supporting big pharma-backed projects."
“... Nation. Africa had a sit-down with three international experts to understand whether the big pharma projects are aimed at undercutting the WHO and Medicines Patent Pool mRNA technology transfer programme....”

Including this paragraph:

“.... What do you think of pharmaceutical companies’ African manufacturing activities, like Moderna’s planned site in Kenya or BioNTech’s container-ship mRNA factories in Rwanda and Senegal?”

“The key is in the word “local”. Africa needs LOCAL vaccine manufacturing so any vaccine manufacturing in the continent is an improvement. But we have reason to be sceptical – where was this progress during the pandemic? African leaders should remember that, during the COVID-19 pandemic, pharmaceutical companies ignored the health needs of Africans and focused on selling high-priced doses to the richest countries. That made them enormous profits. It was only after a huge public campaign against vaccine apartheid that Moderna and BioNTech announced that they would set up production facilities in a few African countries. Africa could not rely on other Global South vaccine manufacturers during the pandemic. At the height of the Delta variant outbreak in early 2021, India halted vaccine exports to Africa. So LOCAL is very much key. Questions need to be asked about the Big Pharma-backed projects. What technology will they transfer to Africans? Are they actually training local people in the end-to-end manufacturing process? What will happen with the doses produced? Will any or all of the doses produced be reserved for African countries? What price will they charge the countries where doses are produced? And, crucially, these announcements came after the WHO announced the technology transfer programme. From its conception, Moderna, Pfizer, and BioNTech have refused to cooperate with the programme, ignoring repeated requests for technology transfer. “We must ask: is this an attempt to undercut the WHO-backed mRNA Technology Transfer Programme? The value of the total African vaccine market could reach between $3 billion and $17 billion by 2040 according to some estimates. Leaders need to ensure that such a local African vaccine market is sustainable for African countries themselves, and this does not become another case where value is extracted out of the continent for private profit”.”

Perinatal depression

Lancet Editorial – Perinatal depression: a neglected aspect of maternal health

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)01786-5/fulltext

“Perinatal depression, among the most common morbidities of pregnancy and the postnatal period, is a major public health challenge. The US Food and Drug Administration’s approval of zuranolone, the first oral drug indicated for the treatment of postpartum depression, on Aug 4, is a welcome development given that drug innovation in this area has been relatively static. However, cautious enthusiasm is warranted. Perinatal mental health is a drastically underappreciated determinant of maternal health, and medication is only one aspect to addressing perinatal depression. .... Improving maternal health is a key concern of the Sustainable Development Goals and Global Strategy for Women’s, Children’s and Adolescents’ Health, but much of the focus is on physical health. WHO indicators of maternal health provide little, if any, data on perinatal mental health, neglecting related adverse events in this period. Physical health is crucial—bleeding,
infections, and eclampsia are the major causes of maternal deaths—but without consideration of their mental health, mothers are being let down..... Perinatal depression is not an individual issue but a complex interaction of biological, societal, and systemic factors. Although it is encouraging to see investment in new treatments, such as zuranolone, medication is not a quick fix. To establish meaningful change on a global scale, strategies focused on social determinants and early intervention for perinatal depression must be implemented into the agenda for maternal health. And for that to happen, the neglect of mental health in the field of global maternal health must end.”

COP28 & other Planetary Health updates

2023 WHO review of health in nationally determined contributions and long-term strategies: health at the heart of the Paris Agreement


« The 2023 WHO review of Health in Nationally Determined Contributions and long-term strategies provides a snapshot of the overall progress governments have made in addressing the health risks of climate change to achieve the goals of the Paris Agreement. .... This report synthesizes information from the latest available NDCs, communicated by 193 Parties to the Paris Agreement and recorded in the official registry of the UNFCCC, as of 23 September 2022. ... The report also synthesizes information from the latest available LT-LEDs, communicated by 62 Parties to the Paris Agreement and recorded on the UNFCCC website, as of 23 September 2022.....”

HPW - ‘Put Air Pollution Firmly on COP28 Agenda’

https://healthpolicy-watch.news/put-air-pollution-firmly-on-cop28-agenda/

“Almost 50 organisations have written to the head of the upcoming United Nations climate change meeting, Conference of the Parties (COP) 28, calling for substantive progress against air pollution, which they describe as “the nexus of climate and health”.”

“With 100 days to go until COP28 in the United Arab Emirates, the groups organised by the Clean Air Fund, have written to president-designate Dr Ahmed Al Jaber, asking him to “put air pollution firmly on the agenda and to catalyse national commitments and international funding to improve air quality”. “Air pollution is a pervasive public health crisis and an accelerator of climate change,” the letter notes. The letter anticipates that the global stocktake process to evaluate progress towards meeting the goals of the Paris Climate Change Agreement, which concludes at COP28, “will be a devastating reality check, showing that countries are massively off track from their commitments”....”
HPW - As Global Warming Surpasses Limits of Human Survival, Non-Communicable Diseases Need to be on COP28 Agenda

“The 28th United Nations climate conference, scheduled to open on 30 November in Dubai, has pledged to elevate health issues, but non-communicable diseases – which are set to become dramatically worse as temperatures rise – are nowhere on the agenda. Prevention of climate- and heat-related diseases need to be on the formal Conference of Parties (COP) 28 negotiating agenda – not just on the sidelines.”

Vital read. When WHO staff begin to sound dystopian, you now we’re in deep shit, collectively.

Guardian - Rich countries ‘trap’ poor nations into relying on fossil fuels

“Campaigners criticise ‘new form of colonialism’, where countries in the global south are forced to invest in fossil fuel projects to repay debts.”

“Richer countries and private lenders are trapping heavily indebted countries into reliance on fossil fuels, according to a new report. The pressure to repay debts is forcing poor nations to continue investing in fossil fuel projects to make their repayments on what are usually loans from richer nations and financial institutions, according to new analysis from the anti-debt campaigners Debt Justice and partners in affected countries. The group is calling for creditors to cancel all debts for countries facing crisis – and especially those linked to fossil fuel projects.”

“According to the report, the debt owed by global south countries has increased by 150% since 2011 and 54 countries are in a debt crisis, having to spend five times more on repayments than on addressing the climate crisis.....”

Devex - World Bank’s private sector lab to focus on energy transition financing

“How to expand private investment toward helping low-income countries transition to renewable energy is the inaugural focus of the World Bank’s newly launched Private Sector Investment Lab. .... ....The lab’s initial focus will be on scaling transition finance in renewable energy and energy infrastructure to help countries move away from fossil fuels, according to a press release.....”
Guardian - G20 poured more than $1tn on fossil fuel subsidies despite Cop26 pledges – report

“The **G20** poured record levels of public money into fossil fuels last year despite having promised to reduce some of it, a report has found. The amount of public money flowing into **coal, oil and gas in 20 of the world’s biggest economies** reached a **record $1.4tn (£1.1tn)** in 2022, according to the **International Institute for Sustainable Development (IISD) thinktank**, even though world leaders agreed to phase out “inefficient” fossil fuel subsidies at the Cop26 climate summit in Glasgow two years ago. The report comes ahead of a meeting of G20 countries in Delhi next month that could set the tone for the next big climate conference, which takes place in the United Arab Emirates in November.....”

Nature - Science’s carbon footprint: how health research can cut emissions
https://www.nature.com/articles/d41586-023-02642-1

“**Wellcome report** identifies more than 140 initiatives to make health research more environmentally sustainable.” “...Implementing a series of sustainable practices in health research could help the field to reduce its hefty carbon footprint, according to a **report commissioned by health-research funder Wellcome**.....”

TGH – Amid Global Boiling, the Foreign Policy Response Remains Lacking

D Fidler; https://www.thinkglobalhealth.org/article/amid-global-boiling-foreign-policy-response-remains-lacking

“Record heat clarifies the severity of the foreign policy problems climate mitigation and adaptation pose.”

Excerpt on the arrival of the ‘age of adaptation’: “... **Public health advocacy for mitigation measures had sought to prevent, as much as possible, the climate-related threats to health experienced around the world in July.** Extreme heat, wildfire flames and smoke, flooding, storms, and damage to freshwater resources, agriculture, and infrastructure **harm** individual well-being, population health, and social determinants of health in countries at all levels of development. **That month’s cascade of health threats signaled that the age of climate adaptation has arrived** — a reality reinforced when August became another health-endangering “**month of extremes**” around the world. **However, the age of adaptation begins with past, present, and future political burdens. National and foreign policies on climate change have long focused more on mitigation than adaptation. ...”

Fidler concludes, on ‘July 2023’: “The extreme temperatures, human suffering, and escalated rhetoric about climate change witnessed last month will feature in climate diplomacy leading up to COP28 in Dubai at the end of the year. The portents for transformative diplomacy on mitigation and adaptation in Dubai are not good. However, more than one month is needed to grapple with the **unprecedented reality of July 2023**. That reckoning is imperative. States will start
to define what the hottest month in recorded history means for human history as they prepare for COP28.”

Decolonize Global Health

Reuters - UN agency head alleges 'racist harassment' in Switzerland
https://www.reuters.com/world/europe/un-agency-head-alleges-racist-harassment-switzerland-2023-08-23/

“The Ugandan head of a United Nations agency complained on Wednesday that she was subjected to "racist harassment" by Swiss police who she said arrived outside her home and stopped her workout for no apparent reason. Winnie Byanyima, executive-director of the Geneva-based agency tasked with fighting AIDS (UNAIDS), said in a post on X, the social network formerly known as Twitter, that a security guard called police as she exercised in a private park outside the building where she has lived for three years. .... More recently, a group of U.N. experts said last year there was systemic racism in Switzerland in a report that raised serious concerns about "excessive use of force and the expectation of immunity by police".

Plos GPH – Imagining a future in global health without visa and passport inequities
S Bandara et al;
https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0002310

“.... We, as a group of young global health practitioners and trainees with diverse citizenship impacted by these challenges, offer a suite of options to reform current practices and reimagine ways to minimize visa and passport inequities. Recognizing the need for urgent action and the complexity of the challenge we outline short, medium, and long-term solutions....”

Some papers, books, reports...

Journal of Human Development & Capabilities - Why are Macroeconomics neglected in equity and inclusion strategies for sustainable development? An Exploration of Four Systemic Barriers
S Fukuda-Parr et al ;

“The literatures on Macroeconomics and Human development and capabilities have been described as constituting “two different worlds” that never intersect despite the importance of macroeconomics for human development .... This paper explores the barriers that keep the two worlds apart in policy making. It considers the case of national strategies for one is implementing UN Agenda 2030 (better known as the SDGs) with a commitment to equity and inclusion; the
majority of which rely on social protection and neglect macroeconomic policies. **This paper proposes four systemic barriers in the policy making processes**: institutional silos and gaps, informational deficits, ideology, and interests. We **highlight how these barriers play out in mutually reinforcing ways to construct resilient barriers**: narrowly defined mandates of central banks and other economic agencies are reinforced by ideological commitments and the influence of vested interests to neglect inclusion, equity and sustainable development as policy objectives, and in policy research agendas. This in turn creates a vicious circle of information deficits with respect to policy alternatives. The paper discusses how these barriers play out differently in different policy making contexts for different stakeholders.”

**Book – Making Health Policy (3rd edition)**


“.... This **fully revised edition**:

• Responds to the movement to ‘decolonise’ and broaden the practice of global health and its related scholarship  
• Provides new examples of health policy processes that bring additional theoretical perspectives and empirical studies from researchers outside North America and Europe  
• Responds to developments in health policy such as the ecological crisis, the experience of the COVID-19 pandemic and the role of social media as well as having greater treatment of policy related to the social and commercial determinants of health  
• Includes new chapters on the role of the values that underpin health policy debates and on how local policy is shaped by national, regional and global influences and organisations.”

**Global health events**

**World Water Week in Stockholm**

Via Devex:

“.... While some ministers and (relatively) senior officials are there — including a strong African contingent — the gathering, organized by Stockholm International Water Institute, or SIWI, is a pretty techy affair. Its attendees are a mix of water, sanitation, and hygiene devotees, environmental officials, multilateral development bank types, and the private sector.”

“.... Rather than discussing the current geopolitical scramble to manage multiple crises, the event has had a near single-minded focus on water policy. Some big-picture issues, such as the overexploitation of water resources for consumers in the global north and the tax avoidance of thirsty corporates, were mostly skated over in the high-level talks, though campaigners tried to highlight them..... The somewhat business-as-usual approach comes despite what many experts told Devex was a disappointing recent outcome for global water policy at the first United Nations summit dedicated to the topic in March, and the ever-more dire outlook for global water security. The world is way off track in ensuring everyone has access to clean water, for which
existing efforts need to be increased by six times to achieve universal coverage by 2030, according to a recent report from the World Health Organization and UNICEF….”

PHM Public Memo on the PHA5
https://phmovement.org/phm-public-memo-pha5

“The International Organizing Committee (IOC) of the Fifth People’s Health Assembly (PHA5) was called for two successive meetings on Saturday, August 12 and Friday, August 18, 2023, to look at two expressions of interest to host PHAS. These were received from the PHM circles in Morocco and Argentina. The PHA5 IOC considered the two expressions of interests, thorough presentations from representatives of the two PHM circles during the meetings, and a report from the PHM financial committee – and decided: (1) The Fifth People’s Health Assembly of the People’s Health Movement will be held in Mar del Plata, Argentina from 7-11 April 2024. For taking this decision, the IOC considered the following aspects….”

Global health governance & Governance of Health

HPW - Eastern Mediterranean Countries Deserve Better Health: Will the New WHO Regional Director Deliver That?
https://healthpolicy-watch.news/eastern-mediterranean-countries-deserve-better-health/

By Mukesh Kapila. On the importance of the EMRO region election. “The @WHO East Mediterranean region faces massive health, climate & humanitarian challenges, whoever @WHOEMRO elects as new regional director needs courage, writes @mukeshkapila.”

Devex - Australia overhauls its international aid policy, ups China competition

“The Australian government has overhauled its foreign aid policy for the first time in almost a decade, pledging to develop aid programs in consultation with country, development, and civil society partners.”

“The previous international development policy, released in 2014 during Prime Minister Tony Abbott’s administration, brought gender into aid and fostered innovation in development delivery and financing. Many of these initiatives were cut and international development transparency downgraded after then-Foreign Minister Julie Bishop resigned. The new policy has reinstated and expanded many of these ideas, with some media observers highlighting that the new policy is a means of competing against Chinese development and Chinese presence in the Indo-Pacific region…..”
Development Today – Denmark drops out of 0.7% donor club, reveals flaws in Danish aid funding model


“Denmark has failed to meet the UN aid benchmark of 0.7 per cent of GNI for the first time in four decades, revealing flaws in the Danish aid financing model. The backlog in Danish aid budgeting adds up to billions of crowns.”

Book - When Misfortune Becomes Injustice
Alicia E Yamin & S Fukuda-Parr  https://www.sup.org/books/title/?id=35342

“When Misfortune Becomes Injustice surveys the progress and challenges in deploying human rights to advance health and social equality over recent decades. Alicia Ely Yamin weaves together theory and firsthand experience in a compelling narrative of how evolving legal norms, empirical knowledge, and development paradigms have interacted in the realization of health rights, and challenges us to consider why these advances have failed to produce greater equality within and between nations. In this revised and expanded second edition, Yamin incorporates crucial lessons learned about the state of global health equity and public health systems during the COVID-19 pandemic, demonstrating just how incompatible the current institutionalized world order—based on neoliberal, financialized capitalism—is with one in which the rights of diverse people around the globe can be realized. ....”

R J Kolesar et al ; https://www.ghspjournal.org/content/early/2023/08/22/GHSP-D-22-00536

“ After transitioning from Gavi support, most countries in this analysis maintained or improved key outcomes compared to expected performance. Transition planning should include assessing risk factors and engaging country actors for post-transition assistance. »

Peter Singer (blog) - “Some personal news”
https://singerp.substack.com/p/some-personal-news?r=1ytch0&utm_medium=ios&utm_campaign=post

“Today is my last day in the WHO Secretariat. But it’s not my last day with WHO. Because we are all WHO.....” (@Peter: hope you sang a WHO version of Sinead O’Connor’s “this is the last day of our acquaintance)

Also with some news on his future plans.
UHC & PHC

Lancet Public Health (Editorial) – The path to Universal Health Coverage
https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(23)00187-1/fulltext

“....At The Lancet 200 UHC Spotlight, we have two main asks [for the UN HL meeting on UHC]. Governments should measure their progress to advance the availability, accessibility, acceptability, and quality of health care provided to their populations; and all sectors of society should recognise that health is not only the product of a well-functioning health system—but also that decisive political, economic, and social actions must be taken to protect and strengthen health. UHC is not a set target. It is a constant political choice, made alongside addressing the determinants of health.....”

Editorial with focus on Mexico.

Premium Times - We’ll prioritise health security, reverse medical tourism – Pate

“The minister of state for health, Mr Alausa, in his comment said lack of basic healthcare to any Nigerian from now on “will be considered as a violation of the human right of that Nigerian”....”
First statements by Muhammed Pate in his new role (Coordinating Minister of Health and Social Welfare in Nigeria).

Guardian - Hospital detentions for new mothers challenged in Ugandan court

“Two cases to be heard this month could serve as legal precedent to outlaw the holding of patients against their will for unpaid bills.”

HP&P - The genesis of the PM-JAY health insurance scheme in India: technical and political elements influencing a national reform towards universal health coverage
https://academic.oup.com/heapol/article-abstract/38/7/862/7218387?redirectedFrom=fulltext

by S Srivastava, M Bertone et al.

Health Economics Review - The impact of health insurance enrollment on health outcomes in Kenya
CFR - Anti-Corruption Campaign in China's Medical Sector: Unmasking the Hidden Agenda

Yanzhong Huang; https://www.cfr.org/blog/anti-corruption-campaign-chinas-medical-sector-unmasking-hidden-agenda

“While the Chinese government’s new anti-corruption campaign has the potential to significantly advance China’s healthcare reform, it may also have unforeseen and potentially dire consequences.”

- See also a Lancet World Report - China’s crackdown on health-care corruption

Archives of Public Health - Health financing challenges in Southeast Asian countries for universal health coverage: a systematic review


« Universal Health Coverage (UHC) has received much attention and many countries are striving to achieve it. The Southeast Asian region, in particular, comprises many developing countries with limited resources, exacerbating challenges around attaining UHC. This paper aims to specifically explore the health financing challenges these countries face in achieving UHC via a systematic review approach and formulate recommendations that will be useful for policymakers.....”

Pandemic preparedness & response/ Global Health Security

Stat - ProMED sees offers of support, but its future remains unclear


“With its future in doubt, ProMED, the financially strapped infectious diseases surveillance network, has seen waves of support pour in in recent weeks, with universities and other funders seeking to rescue it, according to the president of the committee that oversees it. Both the International Society for Infectious Diseases, which has hosted ProMED since 1999, and its moderators, many of whom went on strike earlier this month to protest plans to put the service behind a paywall, have been in discussions with academic and scientific entities and others interested in finding a way to save what the global public health community sees as a vital service....”

““We are in serious negotiation with some major universities and a number of major funders. At least one of those initiatives is making significant progress,” Paul Tambyah, president of ISID’s executive committee, told STAT via email. The striking moderators have suggested ProMED needs a new home — potentially an academic partner that could host the website and govern the operation of the service. Tambyah, a professor of medicine at the National University of Singapore, said the ISID has not ruled out transferring ProMED and its archive to another entity....”
PS: “…. Long-time fans of ProMED worry that a service based on a subscription model would put its disease intelligence out of reach for researchers and public health officials in low-income countries. And anything that narrowed the readership of ProMED would likely also reduce the number of tips it receives — tips like the intel that first alerted the world to the 2003 SARS-1 outbreak, the emergence of a new camel coronavirus in the Middle East in 2012 — now known as MERS — and the start of the Covid-19 pandemic…..”

CGD (blog) - The Resilience and Sustainability Facility’s Recent Programs Still Fall Short of its Ambitious Goals

“In an earlier paper (and blog) published in March, we assessed the initial five programs supported by the IMF’s the Resilience and Sustainability Trust (RST), a new financing vehicle designed to help countries address climate change and pandemic preparedness. Among our findings, four stood out. Firstly, program measures did not appear sufficiently ambitious to ensure the achievement of the underlying objectives. Secondly, inclusion of reform measures in the programs would be more robust if there were increased provision of diagnostics by international financial institutions and other stakeholders. Thirdly, it would be beneficial for countries to identify climate-related investments as a proportion of their overall public investments, providing a clearer measure of their commitment to climate transition. Finally, future programs should not overlook the necessity of assisting countries to prepare for impending pandemics, in addition to climate change.”

“Since our initial assessment, the IMF has approved five additional programs for Kenya, Kosovo, Niger, Senegal, and Seychelles under the Resilience and Sustainability Fund (RSF), the facility that is backed by the RST. The purpose of this post is to evaluate whether the second batch of programs addressed the points raised above, while recognizing that implementing changes in program design takes time. Our conclusion is that while the second batch of RSF programs shows improvements, they still fall short of the ambitious goals set by the facility.”

Re “Pandemic preparedness” in particular:

“Like earlier RSF programs, recent programs do not contain any measures to prepare countries for future pandemics, suggesting that these countries also believe that another pandemic is not imminent. This contrasts with studies suggesting that the likelihood of another pandemic is not low. Additionally, government health sector expenditures in these countries range between 2 and 3 percent of GDP, significantly lower than on education. These countries should take the opportunity to incorporate the lessons learned from the COVID-19 crisis and act to be better prepared in the future. ....” “... RSF programs cannot continue to overlook the necessity of preparing for future pandemics. Undoubtedly, these matters will surface in the forthcoming IMF review of the RSF....”

The Royal Society - Effectiveness of international border control measures during the COVID-19 pandemic: a narrative synthesis of published systematic reviews

Part of a theme issue (see below in the Covid section) - The effectiveness of non-pharmaceutical interventions on the COVID-19 pandemic: the evidence'.
Some of the findings: “...We find that symptomatic screening measures were not particularly effective, but that diagnostic-based screening methods were more effective at identifying infected travellers. Targeted travel restrictions levied against travellers from Wuhan were likely temporarily effective but insufficient to stop the exportation of the virus to the rest of the world. Quarantine of inbound travellers was also likely effective at reducing transmission, but only with relatively long quarantine periods, and came with important economic and social effects. There is little evidence that most travel restrictions, including border closure and those implemented to stop the introduction of new variants of concern, were particularly effective. Border control measures played an important role in former elimination locations but only when coupled with strong domestic public health measures. In future outbreaks, if border control measures are to be adopted, they should be seen as part of a broader strategy that includes other non-pharmaceutical interventions.”

Lancet Digital Health (Viewpoint) - Digital health funding for COVID-19 vaccine deployment across four major donor agencies

D Helldén et al;


“...The international response to the COVID-19 pandemic provided opportunities for countries to use digital technologies for vaccine deployment and associated activities, but misaligned digital investments could weaken or fragment national systems. In this review of 311 funding applications from 120 country governments to four donor agencies (UNICEF; Gavi, the Vaccine Alliance; the Global Fund to Fight AIDS, Tuberculosis and Malaria; and the World Bank) up to May 1, 2022, we found that 272 (87%) of the applications included at least one digital aspect and that substantial funding has been dedicated towards digital aspects from donors. The majority of digital aspects concerned immunisation information systems, vaccine acceptance and uptake, and COVID-19 surveillance. As the global community sets its sights on a COVID-19-free world, continued coordinated investments in digital health and health information systems for pandemic preparedness and response will be key to strengthening the resilience of health systems.”

And a link:

- Journal of Global Health - Lao PDR as an emergency preparedness model for developing countries: Lessons learned from the COVID-19 pandemic

Planetary health

AP - Ecuadorians reject oil drilling in the Amazon, ending operations in a protected area

AP;

“Ecuadorians have voted in a binding referendum to ban new oil extraction in the Yasuni national park in the Amazon. The area is a world biosphere reserve, designated by United Nations cultural organization UNESCO, and home to Indigenous groups including the Tagaeri and Taromenane peoples, who live in isolation. It also contains a huge reservoir of crude oil,
Ecuador’s main export. The cash-strapped country had tried to realize some of its resources’ value by offering rich countries the chance to pay to keep the oil in the ground, but the bid failed. Now the state oil company will be legally compelled to dismantle its operations in Yasuní in the coming months.”

Guardian - Fossil fuels being subsidised at rate of $13m a minute, says IMF


“Oh, gas and coal benefited from $7tn in support in 2022 despite being primary cause of climate crisis.”

Thomson Reuters - What are the environmental costs of AI?

https://www.context.news/climate-risks/what-are-the-environmental-costs-of-ai

“All training requires vast amounts of data, computing power; Tech firms face pressure over environmental impacts of AI; Radical approaches required from industry, experts say.”

“As artificial intelligence advances at breakneck pace, the world’s biggest tech companies face growing pressure to address the environmental and climate impacts of AI - which requires large amounts of electricity and water to run. Tech giants such as Amazon, Google and Microsoft have pledged to tackle the climate crisis, yet green experts say the sector is not doing enough to mitigate the rising consumption of resources.....”

Guardian - Overhaul poultry farming to tackle spread of bird flu, urge campaigners


“The industrial poultry farming sector needs to be radically restructured to stop the spread of bird flu, says a report that argues wild birds are victims rather than the main vectors of the disease.”

“Bird flu is spiralling out of control and being spread by intensive poultry farms, according to a report by the campaign group Compassion in World Farming (CIWF). Overcrowded sheds provide a perfect place for viruses to mutate and spread, it argues. Chickens should instead be kept in much smaller flocks and given more space. The report suggests a three-point action plan: mass vaccination of poultry to stop the spread; a radical restructuring of the industry to raise healthier birds in better environments; and changing the way pigs are farmed, as it says factory farmed pigs can act as “mixing vessels” to create new pig, bird and human viruses.....”

Guardian - ‘Gigantic’ power of meat industry blocking green alternatives, study finds

“Analysis of EU and US shows livestock farmers receive about 1,000 times more public funding than plant-based and cultivated meat.”

Guardian - Anger is most powerful emotion by far for spurring climate action, study finds

“Link to climate activism is seven times stronger for anger than it is for hope, say Norwegian researchers.”

“Anger is by far the most powerful emotional predictor of whether somebody plans to take part in a climate protest, research suggests. ... The study, which asked 2,000 Norwegian adults how they felt about the climate crisis, found the link to activism was seven times stronger for anger than it was for hope. The effects were smaller for other actions, but fear and guilt were the best predictors of policy support, while sadness, fear and hope were the best predictors of behavioural change.....”

Foreign Policy - Can We Learn from Oppenheimer in Responding to Climate Change?
By Cynthia Scharf, the senior strategy director at the Carnegie Climate Governance Initiative (C2G).

(gated) “Like atomic energy, geoengineering could change the nature of the world. That’s why it needs international guardrails and guidelines.”

Covid

Nature (News) - Why a highly mutated coronavirus variant has scientists on alert
[Nature (News)](https://nature.com/)

“Research is under way to determine whether the mutation-laden lineage BA.2.86 is nothing to worry about — or has the potential to spread globally.”

Geneva Solutions - Maria Van Kerkhove: ‘Now is not the time to let our guard down with Covid-19’

“The WHO’s technical lead on Covid warns that the virus continues to circulate a lot. From the American epidemiologist’s point of view, the pandemic is not over.”
PS: “….We never said the pandemic was over but we did end the Public Health Emergency of International Concern (PHEIC). We are still in a pandemic situation. I understand that the population no longer wants to use this term and wants to move forward, but the virus continues to claim the lives of many innocent people. It still constitutes a serious public health threat even if it does not have the acuity of what we experienced two or three years ago. ....

Stat - Covid-19, a disease with tricks up its sleeve, hasn't fallen into a seasonal pattern — yet

“To most people on the planet, the Covid-19 pandemic is over. But for many scientists who have been tracking the largest global infectious disease event in the era of molecular biology, there is still a step that the virus that caused it, SARS-CoV-2, hasn’t yet taken. It has not fallen into a predictable seasonal pattern of the type most respiratory pathogens follow. .... It’s been widely expected that SARS-2 will ease into that type of a transmission pattern, once human immune systems and the virus reach a sort of detente. But most experts STAT spoke to about this question said that, so far, the virus has not obliged. Their views differ on the margins. Some expect seasonality to set in soon while others don’t venture to guess when the virus will settle into a seasonal pattern.....”. Informative read.

Cidrap News - HHS awards $1.4 billion for Project NextGen COVID countermeasures
https://www.cidrap.umn.edu/business-preparedness/hhs-awards-14-billion-project-nextgen-covid-countermeasures

“The US Department of Health and Human Services (HHS), through its Administration for Strategic Preparedness and Response (ASPR) announced recipients for the first round of funding through the White House’s $5 billion Project NextGen program. First announced in April, Project NextGen is designed to speed the development of new COVID-19 vaccines and treatments. In a news release, HHS said the awards announced today are geared toward developing more effective and longer lasting vaccines, a new monoclonal antibody, and technologies to streamline the manufacturing process.....”

See also Reuters – US govt awards $1.4 bln for development of new COVID therapies, vaccines

PS: “”HHS confirmed Pfizer and Moderna will not be receiving any new funds.””

Politico Pro - Top review says COVID lockdowns and masks worked, period

“They might not be popular, but a major report shows combining these interventions can keep case numbers low.”
“Speedy implementation of a combination of measures such as face masks, lock downs and international border controls, “unequivocally” reduced COVID-19 infections, a major review has shown. The report published Thursday by the Royal Society looked at findings from six evidence reviews that analyzed thousands of studies to assess the effect of masks, social distancing and lockdowns, test trace and isolate systems, border controls, environmental controls and communications. It found evidence that each of these measures — which are called "non-pharmaceutical interventions" — were effective, albeit to varying degrees, when looked at individually. However, the evidence in favor of using these tools was stronger when countries combined several measures. The report could have significant implications for decision-making in future outbreaks....”

PS: “.... However, responding to the report, Kevin McConway, emeritus professor of applied statistics at the Open University cautioned that impact on virus transmission is not the only factor that should be taken into account when deciding to use such measures. "The report does point out explicitly that NPIs can impose a great number of costs and burdens, in terms social and economic impacts, and indeed of increasing ill health … but makes it very explicit that this piece of work isn’t going to consider any of that." I think that limits quite severely its effectiveness in helping decisions on what should be done in the next pandemic, whenever it arises." ....”

PS: "One of the most important lessons from this pandemic is that the effective application of NPIs (societal measures to reduce transmission) ‘buys time’ to allow the development and manufacturing of drugs and vaccines”....”

For the executive summary of the report, see Executive Summary to the Royal Society report “COVID-19: examining the effectiveness of non-pharmaceutical interventions”

Science News - COVID-19 boosts risks of health problems 2 years later, giant study of veterans says

https://www.science.org/content/article/covid-19-boosts-risks-health-problems-2-years-later-giant-study-veterans-says

“SARS-CoV-2’s public health impact is worse than that of heart disease or cancer, study claims; others say the work may overestimate harm for the general population.”

Science - Pandemic school closures were especially hard on the mental health of younger, more vulnerable children

https://www.science.org/content/article/pandemic-school-closures-were-especially-hard-mental-health-younger-more-vulnerable

“German study finds worse quality of life in kids home schooled for longer–but the effects weren’t universal.”
**Mpox**

WHO - Report of the Review Committee regarding standing recommendations for mpox

[https://www.who.int/publications/m/item/report-of-the-review-committee-regarding-standing-recommendations-for-mpox](https://www.who.int/publications/m/item/report-of-the-review-committee-regarding-standing-recommendations-for-mpox)

“Throughout the declared public health emergency of International concern associated with the multi-country outbreak of mpox spanning July 2022 to May 2023, countries’ response efforts were guided by temporary recommendations issued under the International Health Regulations (2005) (IHR). As the elimination phase unfolds, countries’ preparedness and response actions can be steered by the standing recommendations set forth under the IHR. In this report, the Review Committee advises the Director-General on the contents of such recommendations.....”

The goal is to halt human-to-human transmission of the disease.

“The #mpox recommendations cover 7 major areas with the goal being to control & eliminate human-to-human transmission of mpox.....”

South-China Morning Post - Mpox cases rise in China, but response is affected by anti-LGBTQ bias and ‘technology nationalism’

[SCMP](https://scmp.com/)

“Mpox is on the rise in China, but assumptions it is just spread through gay sex and an unwillingness to use foreign vaccines are hampering containment efforts.”

Related: [BMJ News – Mpox: China’s health authorities fight surge in cases of unknown origin](https://www.bmj.com/content/376/bmj-2023-000126)

Lancet Infectious Disease (Comment) - Mpox: interdependence and inequity


Comment linked to a new Lancet Infectious Diseases study.

“In this issue of The Lancet Infectious Diseases, Ogoina and colleagues present the results of the largest African study of 160 patients with mpox in Nigeria, describing the clinical characteristics and treatment outcomes of the disease during the 2022–23 global epidemic.....”
Infectious diseases & NTDs

Cidrap News - Trial of malaria vaccine plus drugs confirms two-thirds reduction in infections, deaths


Important new study. “The final results of a phase 3 trial on the combination of a seasonal malaria vaccine and antimalarial drugs in children confirms a two-thirds decrease in the mosquito-borne illness, including severe cases and deaths, over 5 years in Burkina Faso and Mali.”

“Yesterday in *The Lancet Infectious Diseases*, a team led by researchers from the University of Science, Technology and Techniques of Bamako (USTTB) in Mali describe the comparison of seasonal malaria chemoprevention (SMC) with sulphadoxine-pyrimethamine and amodiaquine plus control vaccines, the RTS,S/AS01 vaccine plus placebo SMC, or SMC plus RTS,S/AS01. The World Health Organization (WHO) recommends monthly SMC during the rainy season, when malaria transmission peaks…..”

Guardian - New technique cuts time to detect polio in half, study finds

https://www.theguardian.com/society/2023/aug/17/polio-sewage-detection-study

“Outbreaks may be addressed sooner by avoiding need for sending stool samples abroad.”

“Polio could be detected in wastewater in half the time using a new technique, helping public health authorities to respond quickly to deadly outbreaks, a study has found. The research in the Democratic Republic of the Congo (DRC), supported by the UK’s Medicines and Healthcare Products Regulatory Agency (MHRA), represents the first time that (DDNS) has been used to detect polio, reducing the average testing time from 42 to 23 days, with an accuracy rate exceeding 99%.....”

“Alex Shaw, a research fellow at the School of Public Health at Imperial College London, who was the lead author of study, said: “This method allows the rapid confirmation of polio strains, facilitating swifter vaccine responses that can reduce the number of polio cases stemming from an outbreak.” The method can be adapted for detecting various pathogens, laying the groundwork for broader disease surveillance, he said......”

Cidrap News - Four African nations report more vaccine-derived polio cases

https://www.cidrap.umn.edu/polio/four-african-nations-report-more-vaccine-derived-polio-cases

“Four African countries reported more polio cases this week, all involving vaccine-derived strains, including the first of the year in Burundi and Guinea, according to the latest weekly update from the Global Polio Eradication Initiative (GPEI)....”
UN News - DR Congo: Children facing worst cholera outbreak in six years

“A spike in conflict and displacement in the eastern Democratic Republic of the Congo (DRC) is pushing children into the worst cholera crisis since 2017, warns UNICEF.”

NPR - Chikungunya virus surges in South America. But a new discovery could help outfox it

Coverage on a new study, on chikungunya’s way of spreading among human cells

“….in a new study conducted in mice and published in Nature Microbiology, Kielian and her colleagues found something that could bring us a step closer to solving this mystery…..”

BMJ GH - How and why snakebite became a global health priority: a policy analysis
Soumyadeep Bhaumik et al; https://gh.bmj.com/content/8/8/e011923

“…Snakebite was added to the WHO neglected tropical disease (NTD) list in 2017, followed by a World Health Assembly resolution in 2018, and an explicit global target being set to reduce the burden in 2019. We aimed to understand how and why snakebite became a global health priority….. The prioritisation of snakebite occurred in four phases: pre-crescendo, crescendo, de-crescendo and re-crescendo. The core snakebite network consisted of academics, which expanded during the re-crescendo phase to include civil society organisations and state actors. The involvement of diverse stakeholders led to better understanding of WHO processes. The use of intersecting and layered issue framing, framing solutions around snake antivenoms, in a background of cross-cultural fascination and fear of snakes enabled prioritisation in the re-crescendo phase. Ebbs and flows in legitimacy of the network and reluctant acceptance of snakebite within the NTD community are challenges. Conclusion: Our analyses imply a fragile placement of snakebite in the global agenda. We identify two challenges, which need to be overcome. The study highlights the need to review the WHO criteria for classifying diseases as NTD. We propose that future prioritisation analysis should consider identifying temporal patterns, as well as integrating legitimacy dimensions, as in our study.”

Nature (Outlook) - In search of a vaccine for leishmaniasis
Nature;

“Decades of work has failed to produce a vaccine against leishmaniasis, a sometimes deadly parasitic disease that is cruelly affecting people fleeing from war and conflict in the border regions of Ethiopia and Sudan. Now, researchers are pursuing two very different strategies. Some teams are using engineered viruses, similar to those in the Oxford–AstraZeneca COVID-19 vaccine, to generate an immune-system memory. Others are working to emulate the process of leishmanization, a
centuries-old practice among Bedouin people in which children are infected with a milder form of the disease to protect them against the much more severe version.”

“Researchers hope that immunization will provide much needed protection against the neglected parasitic disease in conflict zones……”

CGD (blog) - Did Economists Really Get Africa’s AIDS Epidemic “Analytically Wrong”? (A Reply)

Reply to the « recent, thought-provoking blog by our colleague, Justin Sandefur, titled “How Economists got Africa’s AIDS Epidemic Wrong”, [which] has sparked a debate about the historical role of cost-effectiveness analysis in assessing the investments of the President's Emergency Plan for AIDS Relief (PEPFAR) and, implicitly, the value of such analysis in making similar global health decisions.”

And a link:

- NEJM - Evolution of Partial Resistance to Artemisinins in Malaria Parasites in Uganda

AMR

FT - New bacterial ‘dark matter’ offers hope for a drug-resistant world
https://www.ft.com/content/a8d62524-3f3f-4d61-a27f-a689a13f9232

“As the antibiotic pipeline empties, a fresh approach to studying bacteria has emerged.”

“….Just as most of the energy and matter in the cosmos is invisible, most of the world’s bacterial species go unseen because they cannot be conventionally grown in the lab. Now scientists are finding ways to sift through this so-called bacterial “dark matter”. On Tuesday, an international team announced in the journal Cell that they had identified a potential new antibiotic lurking unnoticed in the sandy soil of North Carolina. The compound, called clovibactin, employs an unusual method of killing bacteria that makes it tough for targets to develop resistance. While clinical trials in humans are several years away, the finding is a glimmer of hope in an increasingly drug-resistant world…..”

Global Policy - Health systems appraisal of the response to antimicrobial resistance in low- and middle-income countries in relation to COVID-19: Application of the WHO building blocks
“COVID-19 has inflicted both beneficial and damaging effects on health systems responding to antimicrobial resistance (AMR). Data shows that the positive impacts of the pandemic (including enhanced hygiene, mask wearing and widespread use of personal protective equipment), are likely to have been overshadowed by the negative effects: emerging AMR pathogens and mechanisms; further outbreaks and geographic spread of AMR to non-endemic countries; rising infections from multidrug-resistant pathogen; an overall higher burden of AMR. The multisectoral complexities of AMR and the totality of health systems challenge our ability to understand the impact of the COVID-19 pandemic on country responses to AMR. In this analysis, we synthesise international evidence characterising the role of the pandemic on the six key building blocks of health systems in responding to AMR across low- and middle-income countries (LMICs). We apply systems thinking within and between the building blocks to contextualise the impact of one pandemic on another.”

**NCDs**

**Politico Pro - Inside the toxic world of vaping scientists**


“Big Tobacco is the clear winner from all the fighting.”

“Their former colleagues and collaborators have turned on them; they are hounded by lobbyists and campaigners; and in some cases, the accusations have led them to question whether their work is helping or harming people. That’s been the reality faced by scientists, public health experts, and doctors working on e-cigarette research. Experts have described being ridiculed publicly, bullied by colleagues, and accused of being in the pocket of industry in their quest to investigate the benefits and harms of e-cigarettes. Meanwhile, it’s a boon for industry lobbyists, who can co-opt supportive messages from independent researchers and dismiss negative ones as relying on bad science…..”

**Globalization & Health - Brexit, trade and the governance of non-communicable diseases: a research agenda**

B Hawkins, P Barlow et al;


« The UK’s post-Brexit trade strategy has potentially important implications for population health and equity. In particular, it will impact on the structural risk factors for non-communicable diseases (NCDs), including the consumption of health-harming commodities such as tobacco, alcohol and ultra-processed food and beverages. This article catalogues recent developments in UK trade policy. It then presents a narrative review of the existing research literature on trade and health and previous, prospective studies on the health impacts of Brexit. In so doing it identifies key questions and foci for a future research agenda on the implications of UK’s emerging trade regime for NCD prevention…..”

- And a link: Plos GPH - "I tell you, getting data for this is hell"—Exploring the use of evidence for noncommunicable disease policies in Ghana
Mental health & psycho-social wellbeing

BMJ GH - Health problems faced by left-behind children in low/middle-income countries

Z Zhu et al; https://gh.bmj.com/content/8/8/e013502

« Left-behind children are children whose parents, or one of them, have left their children behind in their hometown or home countries for work for more than 6 months and are cared for by grandparents or other relatives. The problem of left-behind children is a legacy of uneven global economic development and profoundly impacts children’s growth. As children, they should have had a happy childhood with their parents by their side, enjoying the love and education from their parents. However, many parents worldwide have to be separated from their children for the long term to make a living, and their children are called left-behind children. These left-behind children are separated from their families and lack long-term parental companionship, care and education. Their physical and mental health and development should have received more attention. A key element of the third target of the 2030 Sustainable Development Goals is to focus on children’s physical and mental health and to eliminate child inequalities in poverty areas. However, the current situation regarding left-behind children worldwide does not seem to have improved, and a large number of left-behind children still exist, and they should not be ignored…..”

Social & commercial determinants of health

Stat - Kellogg’s is going to war over Mexico’s nutrition label rules. A similar fight is coming to the U.S.

https://www.statnews.com/2023/08/21/kelloggs-mexico-nutrition-label/

“Kellogg’s is desperate to save Tony the Tiger and Toucan Sam from Mexico’s healthy food rules — rules the U.S. may soon copy.”

Globalization & Health - Public health advocacy strategies to influence policy agendas: lessons from a narrative review of success in trade policy


Review. Authors conclude: “...The analysis demonstrates that while technical evidence is important, political strategy is necessary for elevating health on trade agendas. The analysis provides lessons that can be explored in the wider commercial determinants of health where economic and health interests often collide.”
IJHPM - Taking on the Corporate Determinants of Ill-health and Health Inequity: A Scoping Review of Actions to Address Excessive Corporate Power to Protect and Promote the Public’s Health


By B Woods et al.

‘Stop drinking beer, he will poison it’ – Mzansi beer-drinkers on Bill Gates’ acquisition of Ab InBev


“Social media users consider quitting booze following billionaire Bill Gate's new stake in brewer Ab InBev.” Certainly provides CDH scholars with an innovative strategy to tackle Big Booze – get Bill to invest in something, and then leave it to the conspiracists of this world 😊.

**Sexual & Reproductive health rights**

Devex - ‘There is anger’: UK aid cuts leave sexual health pledge in tatters


“From his base in Kenya, Dr. Elias Girma contemplates the impact of U.K. aid cuts on promises to provide lifesaving contraception and family planning across East Africa…..”

Plos GPH - Hidden in plain sight: A systematic review of coercion and Long-Acting Reversible Contraceptive methods (LARC)

V Boydell et al;

https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0002131

“In recent years there has been extensive promotion of long-acting reversible contraceptives (LARC) globally to increase access to what is widely considered a highly effective contraceptive method. Yet, despite these efforts, evidence points towards the worrying propensity for LARCS to be associated with coercion. Hence, we undertook a meta-narrative review across nine databases to draw together the heterogeneous and complex evidence on the coercive practices associated with LARC programs. ....”

* Link: BMJ GH - Mistreatment of women during childbirth and postpartum depression: secondary analysis of WHO community survey across four countries (by C Guure et al)
Access to medicines & health technology

World Bank (report) - Synthesis Report: Why is the Safety of Medicines Important for Resilient Health Systems?

https://documents.worldbank.org/en/publication/documents-reports/documentdetail/099855108172335548/idu090d1be4d0188f040e108dc303d5bff302fa1

“This report discusses the importance of pharmacovigilance (PV) in contributing to building up resilient health systems. It is based on and summarizes the findings of a review of available literature on the topic and relevant case studies focusing on a set of country and regional experiences. Although indispensable in improving health outcomes, the administration and use of medicines may produce adverse reactions, requiring continuous monitoring to ensure that the benefits outweigh the risks. PV, which involves the systematic detection, reporting, assessment, understanding, and prevention of adverse drug reactions (ADRs), is an essential public health function, but it is often overlooked. The review suggests that successful PV programs are built on three essential pillars: statutory provisions that establish standards for PV centers and programs, well-trained health professionals and associated stakeholders, and engaged PV reporters using effective reporting systems. Aided by emerging opportunities for development through automation and machine learning, PV programs show immense potential to enhance the monitoring of patient safety and improve the use of medicines. The report offers policy considerations for countries and international partners in building PV capacity as an essential public function of a health system.”

PHM - UK uses free trade negotiations to impose strict intellectual property rules on India

https://phmovement.org/uk-uses-free-trade-negotiations-impose-strict-intellectual-property-rules-india

From the UK Missing Medicines Coalition (STOPAIDS, Global Justice Now, MSF UK and others), with the support of the People's Vaccine Alliance.

“UK and India trade ministers are meeting, 24 and 25 August, for another session on their 12th round of negotiations on free trade that began in early August 2023. The UK is using free trade talks with India to push for extremely strict intellectual property rules in India, and a deal may be imminent. If approved, these measures could threaten the supply of generic medicines to low and middle-income countries. We ask health and development organizations in Asia, Africa and Latin America to sign an open letter telling the UK Trade Secretary to drop these demands. The letter will be published next week.....”

PS: Clearly, there's also the Indian partner in this whole story....
Main barriers were: at the individual level, the lack of knowledge about ICEMs; at the health service delivery level, low availability, stockouts, affordability, long distances to health facilities, insufficient infrastructure to store and distribute ICEMs, and lack of ICEM knowledge and training among healthcare workers; at the health sector level, lack of prioritisation of ICEM-related healthcare fields by governments and subsequent insufficient budget allocation. Cross-cutting, governance-related barriers pertained to lack of proper quantification systems, cumbersome procurement processes, and strict national laws controlling ICEMs, leading to overly restrictive prescription practices. **Conclusion:** This review showed that there are a multitude of barriers to accessing ICEMs in SSA across all health system levels. Many of the barriers identified are applicable to all ICEMs, highlighting the importance of tackling barriers for this entire class of drugs together....”

**AP - Power cuts in Niger threaten to spoil millions of vaccines as sanctions take their toll, UN says**

**AP**

“The U.N. is spending over 20 times more money than usual on fuel for generators to keep millions of vaccines in Niger from spoiling due to incessant power cuts. The outages are the result of severe economic and travel sanctions imposed by regional countries after mutinous soldiers toppled the country’s president last month.....”

**National Academies - Toward equitable innovation in health and medicine: a framework**

**NAP:**

“The National Academies of Sciences, Engineering, and Medicine, in collaboration with the National Academy of Medicine, established the Committee on Creating a Framework for Emerging Science, Technology, and Innovation in Health and Medicine to provide leadership and engage broad communities in developing a framework for aligning the development and use of transformative technologies with ethical and equitable principles. The committees resulting report describes a governance framework for decisions throughout the innovation life cycle to advance equitable innovation and support an ecosystem that is more responsive to the needs of a broader range of individuals and is better able to recognize and address inequities as they arise.....”
Human resources for health

HRH - Expanding Community Health Worker decision space: learning from a Participatory Action Research training intervention in a rural South African district


by L D’Ambruoso et al.

HRH - A novel approach to estimate the impact of health workforce investments on health outcomes through increased coverage of HIV, TB and malaria services


By Tim Bruckner, G Cornetto et al.

Decolonize Global Health

NPJ (biodiversity) - Three pathways to better recognize the expertise of Global South researchers

G Nakamura et al; https://www.nature.com/articles/s44185-023-00021-7

« ... In this piece, we bring secondary data that reinforce biased patterns in academic recognition between Global North and South (geographical markers and citation bias), and propose three actions that should be adopted by researchers, research institutes, journals, and scientific societies from the Global North that allows for a fairer recognition of the academic expertise produced by the Global South. .... ...”

Miscellaneous

Erlasjahr.de - Focus paper: “Debt crisis not yet bad enough” – How creditors downplay the need to act


“This focus paper explores the question of whether a study by the IMF claiming that the situation of indebted countries in the Global South is less dramatic today than in the mid-1990s, is tenable or whether this can be seen as a politically motivated discourse of the creditors.”
Telegraph - Food banks are on the rise across the world – but are they the answer?

The Telegraph:

“While proponents see them as central to tackling record levels of hunger, critics say the West is ‘exporting a failed system’.”

Nature (Editorial) - Want a sustainable future? Then look to the world’s cities

https://www.nature.com/articles/d41586-023-02597-3

“In a rapidly urbanizing world, what happens in cities matters — and sustainability success stories show what can be achieved when researchers and policymakers work together.”

PS: “.... Some ideas are emerging from a small but focused international collaboration called PEAK Urban, which connects researchers at institutions in China, Colombia, India, South Africa and the United Kingdom. These researchers are among those calling for a “new urban narrative for sustainable development” that foregrounds complexity and systems science (M. Keith et al. Nature Sustain. 6, 115–117; 2023)......”

Nature Editorial - Tackle ever-growing consumption to safeguard sustainability gains

https://www.nature.com/articles/d41586-023-02596-4

“The world is consuming more efficiently, but still using more stuff. More-concerted efforts to change both consumer and producer behaviour are needed.” Focus on SDG 12 in this editorial, “to “ensure sustainable consumption and production patterns”...”

Papers & reports

Harvard (School of Public Health ) - A Guide to Health Reform: Eight Practical Steps

M Reich et al; https://www.hsph.harvard.edu/india-health-systems/guide-to-health-reform/

“A Guide to Health Reform: Eight Practical Steps instructs readers, in clear language and general terms, about how to navigate the complex process of health system reform. It is written for health reformers (including government policy makers, analysts, advisors, advocates and other stakeholders) in any country to use as they plan and implement health reform. The Guide breaks down the health system reform process into eight steps. ....”

“The Eight Steps are: 1) Decide to start the health reform process; 2) Create a health reform team; 3) Assess the health system’s performance and define its performance problems; 4) Diagnose the causes of performance problems; 5) Decide on a reform package; 6) Conduct political analysis and
design political strategies; 7) Manage the implementation of health reform to achieve results; and 8) Evaluate impacts and create sustainability for health reform....”


IJHPM - Policy Makes Politics; Comment on "Modelling the Health Policy Process: One Size Fits All or Horses for Courses?"

Scott Greer; [https://www.ijhpm.com/article_4493.html](https://www.ijhpm.com/article_4493.html)

“Powell and Mannion’s review of reviews maps the landscape of health policy research, showing a number of problematic and longstanding features. This commentary focuses on the extent to which health parochialism is good for the scientific development of the literature, the extent to which a “tournament of theories” actually develops our understanding of health policy process, and, finally, whether circumscribed theories of the policy process might be missing some of the most important and useful findings of broader comparative politics, which focus on the ways policies create politics over time. It concludes that health parochialism and focus on a circumscribed policy process is not likely to be helpful because it distracts attention from the ways in which coalitions and institutions over time shape politics and policy, a finding explored by scholars of many sectors whose findings should influence health policy research.”

**Tweets of the week**

**Joe Karp-Sawey**

“Global South civil society orgs in @POLITICOEurope Morning Healthcare calling out the "global health vandalism" of the UK's IP demands in trade deal negotiations with India.”

**Michel Sidibé**

“ The world is witnessing a seismic political shift, with multiple centers of power emerging. This calls for a new paradigm in global health governance. #BRICS2023 nations are at the forefront, bringing fresh perspectives and innovative solutions, shaping a transformative future.”

(and I would add: and thug leaders, many thug leaders 😊)

**Podcasts & webinars**


“Dialogues is a new series from the Global Health Matters podcast that includes interviews with some of the world’s sharpest global health minds and brightest thinkers. The goal of each Dialogue is to go beyond the echo chambers that exist in global health and to have in-depth conversations with guests who have explored global health issues from their multi-disciplinary perspectives.

In this episode of Dialogues, host Garry Aslanyan speaks with Daisy Hernández about her personal experience with Chagas disease and the journey she undertook to understand it while writing her book. Daisy is an essayist, memoirist and journalist. Her work focuses on the intersections of race, ethnicity, immigration, class and sexuality. She is the author of “The Kissing Bug: A true story of a family, an insect and a nation’s neglect of a deadly disease” (Tin House, 2021), which won the PEN/Jean Stein Book Award and was named a top 10 nonfiction book of 2021 by Time magazine. ....”