

IHP news 751 : Hoping for a bold(er) ‘Team Europe’

(24 November 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,

We start this week’s intro by flagging our [IHP call for correspondents 2024](#). Deadline is **15 December**. Do apply if you fit the profile!

Next week features both the [Third International Conference on Public Health in Africa](#) in Zambia (27-30 November), and the kick-off of - the by now slightly notorious - COP28 (on 30 Nov). Especially the run-up to the latter conference is fairly hectic, with **plenty of reports & last minute high-level advocacy, including from a health angle** – as you’ll notice in this issue.

Anyway. On Monday, I attended a (European) [Global Health Policy Forum](#) in Brussels – for the first time since Covid. Focus was, among others, on the **EU Global Health Strategy** and ‘**Team Europe**’, also from a M&E point of view. It was an informative meeting, and so I was happy to attend and learn from the many panelists & other participants. Nevertheless (*and in spite of the upcoming Belgian EU (Council) presidency in 2024* 😊), I hope you allow me a short, slightly critical reflection: I do have my **doubts about the current ‘Team Europe’ brand**. Let me explain briefly why.

It’s one thing to project a ‘Team Europe’ image towards one’s own citizens (*as done in the pandemic, eg via ‘pooled procurement’ – and even that was anything but easy*), it’s quite another thing to do this versus others. But first a bit of background: as you probably know, [Team Europe](#) “.... consists of the European Union (eg, European Commission, European External Action Service, ...) , EU Member States — including their implementing agencies and public development banks — as well as the European Investment Bank (EIB) and the European Bank for Reconstruction and Development (EBRD).” And as the [website](#) puts it nicely, “**Team Europe Initiatives (‘TEIs’) focus on identifying critical priorities that constrain development in a given country or region, where a coordinated and coherent effort by ‘Team Europe’ would ensure results with a transformative impact. This ‘Team Europe approach’ means joining forces so that our joint external action becomes more than the sum of its parts. By working together & pooling our resources and expertise, we deliver more effectiveness and greater impact.**”

In spite of all these laudable aims, while I have little doubt that ‘Team Europe’ is already doing (and planning) valuable stuff on global health and far beyond, I wonder how the “outside world” is currently looking at this blend of ‘geopolitics, soft power projection and a genuine attempt to help save the SDG agenda’. While the people in the room were the first to argue, rightly, for a ‘**Health in all policies**’ approach (*while admitting that’s damned hard*), **it’s blatantly obvious that many of the current EU policies & stances, and also those from the past few years (eg. the sorry Covid vaccination/IP saga, the vote at the UN this week on [global tax justice](#), Fortress Europe (migration), ... and let’s not get into the Gaza horror double standards) severely damage(d) the EU ‘brand’**. To

the extent that even a merry term like ‘Team Europe’ probably sounds a bit odd in the ears of many, including people in sub-Saharan Africa, I assume. After all, this is not the Olympics. And worse, ‘the EU’ often seems to be “a Team” on the wrong issues.

Although no doubt a bit naïve in the current environment, my best guess is that ‘Team Europe’ would have far more impact, including in terms of soft power, if the whole Union (including Council, Parliament, Commission, member states) realized that **some things are just too outrageous to do, or to let them pass**. Trade-offs will always have to be made, but there should be a **‘rock bottom’ core of values and principles** underneath which the EU refuses to go. The past few years, that doesn’t seem to be the case, if not in rhetoric, then certainly when it comes to the facts on the ground, in policies or in multilateral fora. (*ps: my own personal “indicator” for ‘fairness’ thresholds being crossed: when my old mother gets in the mood to go to Brussels to join a demonstration* 😊).

Let me put it perhaps differently: **In the 21st century “polycrisis era”, it would be nice if at least one actor didn’t give up altogether on a rules-based order, and continued to try make this a better and fairer world**. These days, you get the impression that the EU has (also) given up on these lofty goals. Let’s face it, it surely won’t come from the US, China, India, let alone Russia in the current circumstances, all very much into (geopolitical) realpolitik or (much) worse. Sadly, at least for now, it’s also not coming from the EU (anymore). Even if I know ‘the EU’ is a multi-institutional and -country entity.

Nobody says it would be easy for the EU to do so, I’m well aware these are tricky geopolitical times (among others, with increased defense requirements), and [clearly the time of lecturing others is over](#) as well. However, if also the EU gives up on at least ***trying*** to live up to its ‘values’ (of which Charles Michel and other Ursula’s are so proud), then things look really grim this century. As no doubt the worst is yet to come in terms of crises in this century. We’re already starting to see the Hobbesian traits of such a world.

By the way, while we’re probably still in a slightly better position than the US, **also for the EU, I’m afraid time is running out to get it right**, with the pressure of far/radical-right wing parties increasing in country after country (with the Netherlands as the latest case in point). At some point, the whole construction risks to become unmanageable. Already, radical-right wing discourse is pushing ‘centre’ parties towards a place on the spectrum that doesn’t have to do much anymore with the so called “European values”.

Given the current fragmentation in the EU, perhaps the best we could hope for is a **‘vanguard’ of countries and entities** that would at least try to live up to the ‘best of what Europe should be about’, in terms of values and policies, and make them explicit. Positioning themselves systematically from that angle towards all policies and stances of EU decision makers, whether it’s on global tax justice, the climate emergency (at the COP and beyond), migration, pandemic accord negotiations, war crimes being committed.... You name it. We could call this ‘vanguard’ perhaps **‘Friends of a better EU’** 😊, or a **European version of “the Elders”**. They might get some support from a few other OECD democracies (New Zealand, Australia, ...) and democracies in the South that haven’t totally given up on a rights-based order.

Unfortunately, too often these days, the image you get from the EU **in many other sectors and areas** (migration, tax justice, pharmaceutical sector, trade, ...), is one of a European Union focused on **“win-wins”, but with emphasis on “what’s in there for us”**. At least when it comes to the African Union (and Latin America) (both geographical focuses of Team Europe), that should actually be the

other way around. In the “win-win” partnership, **most of the ‘win’ should go to them** – as they have some catching up to do.

That would be a ‘Team Europe’ I can believe in. And I suspect many other citizens in the world.

So let’s not go for the lowest common denominator, or what’s “politically feasible”, even if these are very difficult times. A bit of ‘blended’, ‘catalyzing’ or otherwise ‘innovative’ financing isn’t going to cut it, I’m afraid. And mind you, if ‘Team Europe’ actually started giving really the example by going after the ‘billionaire class’, late capitalism profiteering companies and other ‘polluter elites’ (in the words of the [latest Oxfam report](#)), or through embracing some of the [bold proposals listed by Agnès Soucat \(AFD\) these days](#), then I have a hunch even many of the disgruntled European citizens attracted by the radical right could still be won back (*after all, let’s not forget that a major factor in the vaccine distrust during the pandemic was the easy billions raked in by Pfizer & other Moderna’s*).

Dare I say, that would be a ‘win-win’ for ‘Team Europe’ 😊!

It’s an uphill battle, though. And time is clearly running out.

Enjoy your reading.

Kristof Decoster

Featured Article

World Children’s Day, a tragic one in Gaza!

Nourhan Nomier (IHP correspondent)

[World Children's Day](#) is a beautiful day that comes every year on the 20th of November to celebrate all the efforts made to protect a child’s wellbeing all over the world. This day is always different for a Palestinian child. But let’s have a look at what it has been for a child in Gaza in 2023, more in particular in the past month and a half.

First some brief info though on the day’s origins and what the rights of a child should, ideally, include. The day was originally proposed in the UN General assembly on 20th November 1959 to celebrate [the Geneva Declaration of the Rights of the Child](#). Below you find the declaration statement. Do have a look and imagine what a perfect world for a child should be like.

“Geneva Declaration of the Rights of the Child”

By the present Declaration of the Rights of the Child, commonly known as "Declaration of Geneva," men and women of all nations, recognizing that mankind owes to the Child the best that it has to give, declare and accept it as their duty that, beyond and above all considerations of race, nationality or creed:

- 1. The child must be given the means requisite for its normal development, both materially and spiritually;*
- 2. The child that is hungry must be fed; the child that is sick must be nursed; the child that is backward must be helped; the delinquent child must be reclaimed; and the orphan and the waif must be sheltered and succored;*
- 3. The child must be the first to receive relief in times of distress.*
- 4. The child must be put in a position to earn a livelihood and must be protected against every form of exploitation.*
- 5. The child must be brought up in the consciousness that its talents must be devoted to the service of fellow men."*

The declaration indeed aims to ensure the well-being of multiple aspects of a child's life and requires us to be vigilant about them and protect them.

Some data on the situation of children in Gaza on “World Children’s Day”

(Figures below refer to the situation before the temporary ceasefire)

Almost half of Gaza's population are children. [By 20 November, 5500 Palestinian children](#) had been killed by the IDF, since the 7th of October.

More than [22,000 children in Gaza are now orphans](#).

A child is killed [every 10 minutes in Gaza right now](#).

More than 1800 kids remain lost under the rubble in Gaza.

Thousands of injured children don't have access to medicine and undergo amputation [surgeries without anesthesia](#).

Thousands have nothing warm to wear to protect them from winter's cold. There is a shortage of food and water, and the [threat of disease](#).

[31 premature babies at imminent risk of death were relocated from Al-Shifa hospital](#).

The [two biggest children hospitals in Gaza were bombed on Friday](#).

On the 22nd of November, [the head of UNICEF called Gaza the most dangerous place in the world for a child](#).

This is a small glimpse of the ongoing struggle of the children of Gaza and what World Children's Day has been for them this year. The UN Secretary-General warned that the Gaza Strip was becoming a “a graveyard for children”.

The children of Gaza have been deprived of everything to survive.

Amidst the current loss, tens of thousands of children in Gaza face an uncertain future. I feel powerless, unable to comprehend and reflect on our true role as public health and global health professionals. We must always talk about the struggle and demand their rights. Let's hope the current temporary ceasefire can turn into a sustainable one, and hopefully in the medium term lasting peace. The children of Gaza require no less.

How can we remain silent when everyone of us has their own platform and voice!

On the author:

Nourhan Nomier is a clinical pharmacist passionate about public health. To fulfil her passion for Public Health, she's currently studying for her MSc in Public Health in the London School of Hygiene and Tropical Medicine. She's the Co-founder and Co-national lead of the Women in Global Health Egypt Chapter. Her research interests involve women's health, mental health and patient access.

Highlights of the week

Read of the week

BMJ - Health equity: we need political action not performative promises

<https://www.bmj.com/content/383/bmj.p2735>

"Kent Buse and Devaki Nambiar argue that **declarations of commitment to health equity are too often a charade intended to distract from the need to inspire political action on the social and commercial determinants of health"**. (eg: the latest Astana declaration)

Excerpt: **"... To achieve health equity, taming the commercial determinants of ill health must become a priority.** For most governments, that involves limiting and requiring transparency around commercial participation in politics and policymaking, anti-trust legislation to prevent monopolies, and progressive taxation on corporations. **Progress on health equity needs to be tied to advocacy for social justice more broadly.** This requires advocating for laws and policies that promote distributive justice for fairer allocation of resources and opportunity. This represents a movement away from individualising the causes of ill health and ensuring properly funded and functioning public institutions to ensure implementation and accountability for redistributive policies. **As the Alma Ata Declaration made clear, we need to shift our collective organising to the inequalities of daily living—of the privileged and the disadvantaged—which beget and perpetuate health inequity.** Critically, more efforts need to be made to hold governments to account for engaging with, and meeting the needs of, people who have been structurally excluded. **Anything less political will not be enough."**

World AMR Awareness Week (18-24 November)

<https://www.who.int/campaigns/world-amr-awareness-week/2023>

“[World AMR Awareness Week](#) starts on 18th November and focuses on the urgent actions needed to stop antimicrobial resistance (AMR) which contributes to almost 5 million human deaths from bacterial infections alone each year. This, coupled with the poor state of research & development investment into new antimicrobials, has led WHO to highlight AMR as one of the top 10 global public health threats facing humanity. The week-long campaign - under the theme of “[Preventing Antimicrobial Resistance Together](#)” - promotes joint actions by leaders and communities across various sectors who are working to preserve antimicrobials and protect the health of people, animals, plants and the environment...”

Cidrap News - WHO: 'Collective action' needed to effectively reduce antimicrobial resistance

<https://www.cidrap.umn.edu/antimicrobial-stewardship/who-collective-action-needed-effectively-reduce-antimicrobial-resistance>

“... CIDRAP News recently submitted a series of questions to WHO officials about the themes of this year's [World AMR Awareness Week](#), their assessment of the progress that countries have made in addressing AMR, and the challenges that lay ahead. Responses were provided by Sarah Sheppard, the WHO's communications lead for Medicines, Health Products & AMR.”

Opening question by CIDRAP News: *The theme of this year's World AMR Awareness Week is "Preventing antimicrobial resistance together." What is the message that the WHO wants to convey?* Sarah Sheppard, WHO: Preventing AMR requires collective action from all sectors of society. The misuse and overuse of antimicrobials primarily drive AMR, which happens in multiple sectors. To effectively reduce AMR, all sectors must use antimicrobials prudently and appropriately, and take preventive measures to decrease the incidence of infections. **We need a whole-of-society and multisectoral approach to tackle this global issue effectively.** We also need each sector to be adequately resourced so that they can effectively prioritize, cost, and implement their priority actions within their specific sectors and then monitor the impact...”

Do read on the for the rest of the interview.

The Conversation - Antibiotic resistance causes more deaths than malaria and HIV/Aids combined. What Africa is doing to fight this silent epidemic

T Nyirenda; <https://theconversation.com/antibiotic-resistance-causes-more-deaths-than-malaria-and-hiv-aids-combined-what-africa-is-doing-to-fight-this-silent-epidemic-217689>

Informative short article. Recommended.

« ... Africa bears the brunt of this [AMR] development, which thrives on inequality and poverty. Nadine Dreyer asked Tom Nyirenda, a research scientist with over 27 years' experience in infectious

diseases, what health organisations on the continent are doing to fight this threat to medical progress.....”

- Link: WB (blog) - [A fight we can't afford to lose: Tackling antimicrobial resistance through One Health](#)

On what the **World Bank** is doing in this respect.

Global Fund Board Meeting (14-16 Nov)

Global Fund - Global Fund Board Hails Recovery in Fight Against HIV, TB and Malaria After COVID-19 Setbacks, Commits to Strengthen Investments in Climate-Resilient Health Systems

<https://www.theglobalfund.org/en/news/2023/2023-11-17-board-hails-recovery-fight-against-hiv-tb-malaria-strengthen-investments-climate-resilient-health/>

Official press release after last week's GF Board meeting.

“The Board of the Global Fund to Fight AIDS, Tuberculosis, and Malaria held its 50th meeting this week in Geneva, Switzerland. Two months after the release of the Global Fund’s Results Report, Board members praised the unprecedented progress achieved in the fight against the three diseases in 2022 and the significant investments made to strengthen health systems around the world, including through the reprogramming of funds from the Global Fund’s COVID-19 pandemic response. However, they expressed concern that the growing challenges of climate change, conflict, and the erosion of human rights undermine the partnership’s ability to end the three diseases by 2030. Even Peter Sands, the Global Fund Executive Director, acknowledged, “ The world is in turmoil...” ... “ **But we continue to deliver extraordinary impact.** The dramatic changes in life expectancy across much of Africa, and the sharp declines in infection rates and mortality across the three diseases, plus the significant advances in health system capacities in many low- and middle-income countries, owe much to the work of the Global Fund partnership. **In a world where the concept of our common humanity seems diminished, the Global Fund remains a powerful expression of global solidarity.**” “.... Sands highlighted the unprecedented scale and breadth of the Global Fund’s investments in health systems, including in primary health care, community systems and community-led monitoring, and emphasized the massive investments made to enhance access to medical oxygen....”

PS: “...Keeping with the Global trend to keep climate change on the agenda and ahead of the COP 28, the Board said it’s, “...**committed to supporting actions across the partnership to adapt programs to the impact of climate change, build climate-resilient health systems, and respond to climate-related disasters.** The Board noted addressing climate change is a critical part of the Global Fund Strategy, and currently more than 70% of Global Fund resources support the 50 most climate-vulnerable countries, and 87% of both the global malaria burden and Global Fund allocations for malaria are in these climate-vulnerable countries.” “... **They committed to supporting actions across the partnership to adapt programs to the impact of climate change, build climate-resilient health systems, and respond to climate-related disaster”**

“Board members followed up on **their decision last May** to increase risk appetite for malaria interventions to adapt to the situation, and **approved adjustments to the Risk Appetite Statement for malaria** providing more flexibility for potential revisions in line with the risk landscape, the progress made against the disease and future funding. “

The Board approved the Global Fund’s updated approach to blended finance demonstrating understanding of many countries’ fiscal and financial constraints and support to explore innovative financing. The **blended finance “will allow the Global Fund to consider additional blended finance partners, beyond the World Bank,** to strengthen the financing of health systems and national responses to the three diseases in line with the Global Fund’s Strategy objective, with **the stated ambition of unlocking up to US\$300 million in additional investments.”**

GFO - Global Fund Board meeting approves four Decision Points

https://aidspan.org/global-fund-board-meeting-approves-four-decision-points/?utm_medium=email&utm_source=es

The latest Global Fund Observer issue offers more in-depth analysis. “This **GFO is a special post-Board issue** that brings you articles on the most interesting issues up for Board discussion, a summary of that discussion, stakeholder feedback, and the Decision Points approved by the Board. “

PS: “... **However, Peter Sands’ speech seemed to raise a lot of uncertainties about the future. ...** Just one comment on the **Executive Director’s speech.** It was 30 pages of many competing priorities, with many question marks and even more global challenges affecting the organization’s mission than previously. **One’s overriding impression was one of doubt and concern: is the Global Fund’s mission seriously at risk and what can be done to address this?”....”**

In this GFO issue, make sure you also check out:

- [The challenge of prioritization in resource-scarce conditions](#)

“As is customary, the Board meeting began its 50th session with the **report by the Executive Director, who reviewed the Secretariat’s activities over the past six months and reflected on the main challenges** faced in fighting HIV, TB and malaria and strengthening health systems.”

PS: “...**Peter Sands acknowledged that 2023 has been an extremely testing year for Global Fund stakeholders, both in the Secretariat and across the broader partnership.** On top of the usual cyclical peak of the final year of GC6 and grant preparation for GC7, implementation and reinvestment of C19RM has taken significant effort, and external crises (e.g., Niger, Sudan) have added to the pressures. Furthermore, the Global Fund has engaged in multiple new external initiatives (Future of Global Health Initiatives, an interim medical countermeasures network (i-MCM-Net), the Pandemic Fund, etc.) which have absorbed considerable time and energy....”

- [Update on Co-financing](#)

“A report providing an **Update on Co-financing** was submitted to the **Global Fund Board for its 50th meetingThis article summarizes the report.** It will be noticeable to readers that, despite many references to the stated need for clarity and improved data, **the Update itself fails to state**

what is estimated to have been the actual total amount of co-financing compared with commitments. This suggests a bigger problem than disclosed in the report.”

- [Updated Global Fund Approach to Blended Financing](#)

“**Blended finance and joint investments** (referred to as “blended finance” throughout the paper) refer to **efforts to combine Global Fund grants with other sources of funding, primarily loans from development finance institutions, including multi-lateral development banks**. These complement, but do not replace, traditional Global Fund grant investments and could play an important role in enhancing national sustainable financing for health and the delivery of the Global Fund’s Strategy objectives...” “... As outlined in Figure 1, there are a variety of strategic, programmatic and operational reasons to pursue blended finance. In addition, blended finance may play a role in helping the Global Fund navigate current global trends in development finance, in particular the growing climate finance and pandemic preparedness...”

PS: “... **Since 2017 the Global Fund has completed eight blended finance transactions, investing a total of \$125 million** (not including smaller investments focused on technical assistance), **a small fraction of the total amount of resources invested by the Global Fund across its portfolio**. ... Based on the historic efforts in blended finance as well as the need to maintain an ambitious approach under the new Strategy, **the expected ambition under which the Secretariat will use this new approach is \$300 million in total Global Fund investments in blended finance transactions**, above and beyond the \$125 million invested since 2017. ...”

Global Health Governance

Devex - World Bank, Global Fund team up to tackle health toll of climate change

<https://www.devex.com/news/world-bank-global-fund-team-up-to-tackle-health-toll-of-climate-change-106639>

“The [World Bank](#) has teamed up with the [Global Fund to Fight AIDS, Tuberculosis, and Malaria](#) to fortify health systems in the global south against the effects of climate change. The two signed a memorandum of understanding on Wednesday “to support more efficient, effective, and sustainable financing to improve health outcomes in the face of climate change.” ...”

“...The two organizations will work together on climate and health priorities to reduce malaria, HIV/AIDS, and tuberculosis via stronger health systems, including better access to primary health care services for the most vulnerable. They will also advocate for increased financing to make better use of scarce domestic and international health resources, including through better public finance management in countries. In addition, **they will use various financing mechanisms, such as joint investments and blended finance, and collaborate on joint investments**. Another focus area is **bolstering the regional production and procurement of health supplies**, such as drugs and medical devices. The World Bank and Global Fund will help localize health supply chains by supporting sustainable manufacturing in Africa and low- and middle-income countries.....”

- Press release: [World Bank and Global Fund: Stronger Collaboration to Tackle the Impact of Climate Change on Health](#).

Unitaid - Executive Board approves ambitious new areas of work for Unitaid during its 43rd meeting

<https://unitaid.org/news-blog/executive-board-approves-ambitious-new-areas-of-work-for-unitaid-during-its-43rd-meeting/#en>

“Hosted by Brazil, one of Unitaid’s founding members, the 43rd session of Unitaid’s Executive Board concluded with **decisions that chart out ambitious new areas of work** that reaffirm Unitaid’s role as a pathfinder and innovator while adapting to today’s global health challenges....”

“...Unitaid is looking at **innovative solutions** that are needed now more than ever to help meet the needs of the most vulnerable populations and enable the global response to continue progressing toward 2030 targets. In support of these efforts, **the Board reiterated its support for Unitaid’s resource mobilization efforts, approved a new area for intervention to enable access to monoclonal antibodies to treat and prevent infectious disease in low and middle-income countries (LMICs), and approved a new climate and health strategy** to contribute to resilient health systems centered around climate-smart health products....”

UK (White paper) - International development in a contested world: ending extreme poverty and tackling climate change

<https://www.gov.uk/government/publications/international-development-in-a-contested-world-ending-extreme-poverty-and-tackling-climate-change>

Published on Monday. **“This white paper sets out the UK’s plan to accelerate progress to eliminate extreme poverty, and address climate change and biodiversity loss.”**

Chapter 6 focuses more specifically on **global health** (see 6.48 – 6.71) (p. 89 & following)

ODI (News) - UK’s new White Paper on International Development

<https://www.ids.ac.uk/news/uks-new-white-paper-on-international-development/>

“The UK government has today published a White Paper on International Development – a formal government document setting out future policy proposals – **to state its approach to international development until 2030.**”

“Its **key themes** include: Multiple, intersecting crises as the new context for development. Ending extreme poverty and tackling climate and environmental change through integrated approaches. Focusing on partnerships, with a ‘new approach’ to development founded on respectful partnerships rather than a charity model. Targeting the most marginalised, focusing UK ODA on the lowest income countries, and focusing efforts on women and girls, people living with disability and the LGBT community. Humanitarian action and long-term development. Integrating humanitarian action and long-term development, including via focusing development on crisis prevention and preparedness, and addressing underlying causes. Harnessing science and technology by drawing on the UK’s strengths in science and technology to support tackling the most urgent global challenges and achieving the Sustainable Development Goals. New approaches to development financing,

complementing ODA with initiatives to mobilise the power of private finance, multi-lateral development banks, trade and debt restructuring....”

Devex - UK aid plan attacked for unrealistic aims and silence on budget cuts

<https://www.devex.com/news/uk-aid-plan-attacked-for-unrealistic-aims-and-silence-on-budget-cuts-106619>

Analysis. “Blueprint praised for a renewed focus on ending poverty, but experts and aid organizations fear cautious Treasury department has reinforced its grip on policy and spending.”

“A new [United Kingdom development blueprint](#) has been praised for a renewed focus on tackling poverty after [years of policy chaos](#), but **criticized for lacking the resources to deliver on its ambitious aims**. Aid experts and organizations breathed a sigh of relief after the strategy ditched talk of [using aid to challenge China](#) and pursue U.K. strategic power, following the return of Andrew Mitchell as development minister a year ago. But **its shift to using the financial heft of London firms to rescue the Sustainable Development Goals — downplaying the role of government aid budgets — was branded unrealistic and its commitment to least-developed countries, or LDCs, was described as weak**. A target to spend 50% of bilateral official development assistance in LDCs fell short of a commitment to do so — and the U.K. is currently spending above that benchmark anyway....”

“Meanwhile, a lack of promised action in the blueprint to rein in U.K. tax havens, pursue fair trade, or [require private lenders](#) to offer desperately needed debt relief was seen as evidence that the powerful U.K. Treasury department still holds sway.”

“... The 140-page **strategy**, designed to run to 2030 and survive a likely Conservative defeat at an election next year, **wants insurance firms, pension funds, and private investors to “mobilize the money” for ending poverty**. ... There will be no early return to spending the U.N. benchmark of 0.7% of national income on aid — after [a cut to spending 0.5% in 2020](#) — as **the strategy argues instead that powering up private finance is key.....”**

And some links:

- Guardian – [David Cameron ‘wants to unlock billions of dollars for foreign aid’](#)

“... David Cameron is marking his return to frontline politics by saying he wants to unlock billions of dollars for foreign aid over the next decade, **as part of a “moral mission” to help the world’s poorest people**. In a remarkable change of tone for a government that closed the Department for International Development and slashed the foreign aid budget, the former prime minister is to say he wants to push for the restoration of aid’s status in British foreign policy....” (*Cameron & a ‘moral mission’, that’s an obvious fit*)

- Devex - [UK puts City of London finance at heart of new development strategy](#)

(gated) “Key document will **invite insurance firms, pension funds and private investors to do the heavy-lifting to rescue the 2030 Sustainable Development Goals.**”

- Guardian - [UK white paper raises concerns over China's growing foreign aid role](#)

“Government paper says Britain must act robustly if interests challenged by the Chinese development model.” “...The white paper warns “China’s growing role as an actor in international development marks a systemic shift in the global development landscape” and has wide implications for Britain’s own development policies....”

- ODI analysis - [The White Paper and the UK's future role in international development](#)

by Mark Miller.

- New Humanitarian - [Britain's international aid gets ambitious reboot](#) (by W Worley)

Global Health 50/50 (report) – The space between: Analysis of Gender and Ethnicity Pay Gaps in UK-Based Organisations Active in Global Health

<https://globalhealth5050.org/gender-pay-gap/>

“Analysis of gender and ethnicity pay gaps in UK organisations active in global health.”

“... The report reveals that **after five years of mandatory reporting, organisations are closing the gender pay gap. The pace, however, is glacial. ...**”

“This report looks at the gender pay gap of 42 organisations and the ethnicity pay gap of 13 organisations that have a presence in the UK, drawn from the larger GH5050 sample. ”

“We found that: The 2022 median gender pay gap was 10.9%, which was lower than the 2022 UK median of 14.9%. Since 2017, the median gender pay gap has decreased by 1.8 percentage points. The median gender bonus pay gap stood at 15.2%. This is a notable decrease of 8.2 percentage points since 2017, but remains wide. The median ethnicity pay gap in 2022 was 3.7% (favouring white employees), which was higher than the 2020 UK median of -1.6% (favouring ethnic minority employees). “

Malaria vaccines

Shipments to African countries herald final steps toward broader vaccination against malaria: Gavi, WHO and UNICEF

<https://www.who.int/news/item/22-11-2023-shipments-to-african-countries-herald-final-steps-toward-broader-vaccination-against-malaria--gavi--who-and-unicef>

“More than 330 000 doses of WHO-recommended RTS,S malaria vaccine arrived last night in Cameroon – a historic step towards broader vaccination against one of the deadliest diseases for African children. Malaria burden is the highest on the African continent, which accounted for

approximately 95% of global malaria cases and 96% of related deaths in 2021. **With several African countries now finalizing roll-out plans, an additional 1.7 million doses are set for delivery to Burkina Faso, Liberia, Niger and Sierra Leone in the coming weeks.** These shipments **signal that malaria vaccination is moving out of its pilot phase**, and lay the groundwork for countries to begin vaccinations through Gavi-supported routine immunization programmes in Q1 2024 ...”

The Conversation - Malaria: two groundbreaking vaccines have been developed, but access and rollout are still big stumbling blocks

R Leke (winner of the Virchow 2023 prize); <https://theconversation.com/malaria-two-groundbreaking-vaccines-have-been-developed-but-access-and-rollout-are-still-big-stumbling-blocks-217146>

Excerpt: **“There is great demand for malaria vaccines. The demand is estimated to be 40 to 60 million doses by 2026 alone.** Gavi, the Vaccine Alliance, has given the nod to Benin, the Democratic Republic of Congo and Uganda among 12 countries in Africa to receive the first doses of the vaccine. They **will be allocated a total of 18 million vaccines for the period up to 2025.** ... So as you can see **demand has been far greater than supply.**

PS: **“...When we had just one vaccine, the RTS/S, quantities were limited, and the WHO had to develop an equitable framework for the distribution of the limited doses.** Countries were categorised. Those in category 1 were most in need and the first to be vaccinated....”

Access to Medicines & other health products/technologies

HPW - WHO Is an Essential Forum for Debates on Intellectual Property and Public Health

Ellen 't Hoen ; <https://healthpolicy-watch.news/who-is-an-essential-forum-for-intellectual-property-and-public-health/>

« Health Policy Watch recently reported that some European countries at the World Health Organization (WHO) Pandemic Agreement negotiations maintain that intellectual property negotiations belong at the World Trade Organization (WTO) rather than the WHO. If they mean to say that new WTO laws cannot be established at the WHO, they have a point. But **if the objective of these countries is to silence IP debates at the WHO amid the current stalemate at the WTO on whether to extend the June 17th, 2022 Ministerial Decision on the TRIPS Agreement (which only applied to vaccines) to therapeutics and diagnostics, this stratagem is quite cynical....”**

« **This resistance to discussing IP at the WHO, often equated with “undermining IP,” is not new.** Similar objections arose in 1998 during the formulation of a new WHO medicines strategy....”

« **Preventing discussions on IP in the context of pandemic preparedness and response at the WHO would be a grave mistake.** We do not need further evidence than the gross inequities in access to pandemic countermeasures we have seen during the COVID-19 pandemic to know that a **robust public health approach to IP protection is necessary to ensure equitable access globally.** «

« ... The assertion that IP discussions belong exclusively to the WTO and not the WHO reflects a lack of understanding of the WHO's long-standing role in IP and health debates over the past three decades. Discussions on the impact of IP rules on public health have been occurring at the WHO since before the WTO was even fully operational.....". Ellen 't Hoen gives a great historical overview of these three decades in that respect.

And concludes: "... In summary, the WHO has a longstanding history of debating and advising on the impacts of IP on innovation and public health. Those who now argue that intellectual property policy is the exclusive domain of the WTO are either ill-informed or ill-intentioned. » (PS: my money is on the last option)

Guardian - South Africa 'can't afford' to pay for new anti-HIV drug, despite cut-price offer

<https://www.theguardian.com/global-development/2023/nov/17/south-africa-hiv-cab-la-cabotegravir-viiv-healthcare>

"The jab, given every two months, has been offered on a non-profit basis, but it can't compete with a cheap daily HIV-prevention pill."

"The South African health department says the reduced cost of a new anti-HIV injection is still three times more than it can afford to pay. "The UK-based drug company ViiV Healthcare has lowered the price from 729 rand per shot (£32) to between 540 and 570 rand (£23.66-£24.97)."

"...The medication, taken every eight weeks, essentially eliminates someone's chances of contracting HIV through sex. It contains an antiretroviral drug, [cabotegravir](#), that is released over a two-month period. The treatment is called CAB-LA (short for long-acting cabotegravir)."

"...The non-profit price of CAB-LA is much cheaper than in the US, where it costs [about \\$3 700](#) (£2,975) for a shot, but it is still four times what South Africa's health department pays for a daily HIV prevention pill (£2.85 [for a month's supply for each patient](#), according to the department). The South African government points out the **additional distribution costs** that have to be considered that is not included in the non profit price. "

"For CAB-LA to be cost effective to the South African government, the price would need to be within a reasonable range of oral PrEP [the daily pill], which is 129 rand [£5.68] for a two-month supply. We can't afford to pay double or thrice the price, especially not within the context of the budget cuts our department has faced," said the national health department's chief director of procurement, Khadija Jamaloodien...."

PS: **"...One way of getting round CAB-LA's high price is to allow donors such as the US government's [President's Emergency Plan for Aids Relief \(Pepfar\)](#), to pay for it. Pepfar has paid the most of any government donor for antiretroviral treatment in Africa and also [funds oral PrEP](#) in several African countries..."** Zambia, Malawi, and Zimbabwe were expected to receive PEPFAR-sponsored supplies. **"... the health department says it is yet to decide if it will accept CAB-LA donations... the country needs to ensure that its programmes are sustainable and that relying on donations means the rollout would have to stop if the funding came to an end". "**

PS: "In the case of HIV treatment, South Africa pays for its antiretroviral drugs itself."

CGD (blog) - Balancing the Scales: Navigating the Cost-Benefit Divide of Global Health Technologies

E Hannay, J Guzman et al; <https://www.cgdev.org/blog/balancing-scales-navigating-cost-benefit-divide-global-health-technologies>

“...The COVID-19 pandemic spurred an acceleration in the development of global health technologies. These technologies—many of which are only just coming to market—have the potential to reshape health systems, with significant positive impacts on global health security and pandemic preparedness. **However, inherent imbalances between who benefits and who pays, along with potential ‘dis-synergies’ within the system may leave them bound to fail.** It is **crucial to utilize newly established financing mechanisms and explore alternative approaches to ensure the effective implementation of these technologies and maximize the public health benefits for the world....”**

Re **“.... the imbalance on who must pay the cost of a new technology and who will see the benefits.** The status quo is that deploying these devices means costs for tests are borne by public budgets or by patients themselves. With fiscal and economic challenges being widespread, this limits use, particularly in low- and middle-income countries (LMICs), including amongst hard-to-reach communities who would benefit the most. **In contrast to who pays, national, regional, and global surveillance systems benefit from reducing selective pressure for antibiotic resistance, better surveillance, and faster epidemic response through strengthened global health security.** In other words, someone sitting in London or in New York does benefit from timely diagnosis in Maputo or rural Malawi. [The Lancet Commission on Synergies](#) describes these as ‘dis-synergies’ between the three agendas of global health—universal health coverage, health security and health promotion. **Similar imbalances around technologies are pervasive in public health, including support for the uptake of new vaccines to prevent disease, and genome sequencing capabilities to rapidly identify antibiotic-resistant strains of bacteria and new or variants of pathogens of pandemic potential.** We need new ideas to address these imbalances between who benefits and who pays. ...”

The authors then offer some solutions to these ‘dis-synergies’.

Guardian (op-ed) - Poor people in the developing world have a right to medicine

Bernie Sanders; https://www.theguardian.com/commentisfree/2023/nov/20/poor-people-in-the-developing-world-have-a-right-to-medicine?CMP=share_btn_tw

It appears **Bernie will be in Lusaka, Zambia** (3rd international conference on public health in Africa) **next week.** With this op-ed, he’s warming up. “People should not die because of their income or where they were born. We must have the courage to stand up to the pharmaceutical industry.”

“.... As Chairman of the US Senate Health, Education, Labor and Pensions Committee (Help) I’m going to do everything I can to develop a new approach to the development and manufacturing of prescription drugs that responds to medical need, rather than short-term shareholder profit. Given the power and greed of the pharmaceutical industry this is not an easy task, but it’s one that must be pursued....”

O'Neill – Universal Access to healthcare: Introducing the Diagnostics Equity Consortium (DEC)

https://oneill.law.georgetown.edu/wp-content/uploads/2023/11/GHPP_DiagnosticsEquityConsortium_2023_A4_1116.pdf

Two-pager. Linked to a civil society consultation held on the sidelines of United Nations global health meetings. Including a **call to action**.

Pandemic Accord Negotiations

Politico - Pandemic preparedness is in limbo

<https://www.politico.com/newsletters/future-pulse/2023/11/17/pandemic-preparedness-is-in-limbo-00127756>

As already flagged in last week's issue – with focus on the US stance.

“The Covid pandemic is fading into memory, and so is the impetus to do better next time.” “How so? The Biden administration seeks to water down language in a pandemic treaty the World Health Organization hopes to finalize next spring.” “A recent draft reviewed by POLITICO's health team in Europe found the U.S. repeatedly asking that binding commitments be made optional.” “The U.S. wants the word “shall” to be replaced with “intends” when the text says that countries “shall” cooperate on strengthening pandemic prevention or “shall” develop public health surveillance plans.” ...”

PS: **“...on Capitol Hill: “Reauthorization of the Pandemic and All-Hazards Preparedness Act, which instructs public health agencies on how to prepare for future health threats, faces a tough road.”** “Though a bill to re-up the expired law by Pennsylvania Democrat Bob Casey won bipartisan support in the Senate's health committee in July, the House is divided.” ...”

Run-up to the third International Conference on Public Health in Africa (CPHIA) (27-30 Nov), Lusaka, Zambia

BMJ – How African countries can prepare for the next pandemic

<https://www.bmj.com/content/383/bmj.p2762>

“To achieve health security in African countries, we must build resilience and collaboration in health systems and prioritise pandemic preparedness, prevention, and response, write **Jean Kaseya and Shingai Machingaidze.**”

Africa CDC leadership sets the scene for next week's conference, among others.

Gaza war

Lancet Offline – The moral clarity of WHO's Director-General

R Horton; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(23\)02627-2/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)02627-2/fulltext)

“Amid the claims and counterclaims about war crimes in Gaza and Israel, one voice has stood out as a beacon of moral clarity—that of WHO's Director-General Tedros Adhanom Ghebreyesus....”

“...I cannot recall WHO's leadership criticising a member state with such withering force. Tedros has drawn on his own experiences of conflict... HO convenes experts to set norms and standards in health and health care. And the agency's governing bodies bring countries together to set priorities in global health. The Director-General is the chief technical and administrative officer of WHO. But Tedros has added a further dimension to this role. He has been the moral conscience of the health community as we have watched Gaza become a graveyard for children and seen Israeli hostages cruelly held by Hamas. His voice has been one of principle, above the fray of national political interests and compromises. He has redefined the idea of ethical leadership.”

UN News - Gaza: ‘Endless needs’ reflect spiralling situation as hospitals shut down, WHO warns

<https://news.un.org/en/story/2023/11/1143697>

From late last week. **“The UN health agency, WHO, on Friday issued a new warning about the desperate situation for people in Gaza, with the number of medical facilities operational “clearly not enough to support the endless needs” created by more than five weeks of hostilities. ...”**

““What we do know is that the health system is on its knees,” said Dr. Richard Peeperkorn, World Health Organization Representative in the Occupied Palestinian Territory... “... Speaking from Jerusalem to journalists in Geneva via Zoom, he explained that 47 out of 72 primary healthcare centres were no longer functioning and others were only partially functioning. Close to 75 per cent of hospitals (35 to 36) were no longer operational. “So there’s clearly not enough support for this endless need,” he said. ...”

UN News - War and health crisis in Gaza a ‘recipe for epidemics’ warns WHO

<https://news.un.org/en/story/2023/11/1143802>

“The thousands of injuries sustained by civilians across Gaza combined with a burgeoning public health crisis is a ‘recipe for epidemics’, the World Health Organization’s emergency response director said on Monday.”

“WHO’s Dr. Mike Ryan was briefing journalists at UN Headquarters and added that “so many children” remain in danger, as fighting between Palestinian militants and Israeli forces continues, from hostages to those living under bombardment with no safe place to shelter....” “Up to 1,500 children in Gaza remain missing – many likely under rubble – he said, as the health system faces “extreme pressure”....”

Lancet (Letter) - Save the remaining people of Gaza—save the children

Espen Bjertness et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(23\)02556-4/fulltext#%20](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)02556-4/fulltext#%20)

“An immediate ceasefire in Gaza is an urgent priority, which is a sentiment echoed in Gaza and around the globe. Governments and leaders must understand that Palestinians are in the middle of a genocide—they must stop the massacres of innocent civilians in Gaza, including children.....”

Devex - Exclusive: UNICEF, WFP confront growing dissent in ranks over Gaza

<https://www.devex.com/news/exclusive-unicef-wfp-confront-growing-dissent-in-ranks-over-gaza-106607>

“The U.S.-led U.N. relief agencies face mounting pressure to call out Israel over siege and alleged war crimes against children.”

“...Catherine Russell, executive director of UNICEF, visited Gaza this week in a show of solidarity with the agency’s staff, who have endured weeks of Israeli bombardment and the death of family members. She got a rough reception. Local staff faulted the agency’s leadership, during a tense private meeting, for mounting what they see as a tepid public response to an unprecedented military assault on Gaza’s youth, and for failing to call out Israel for killing more than 11,000 Palestinians, including more than 4,500 children, in Gaza, according to figures compiled by the Hamas-run Health Ministry.... “..... The raw exchange reflects the deepening anger toward Israel within the U.N. system as Israeli forces prosecute a military campaign that has already resulted in the deaths of more than 100 U.N. staffers, the largest number of deaths in a conflict since the global agency’s founding. ... The staff meeting with Russell also underscored the degree to which the U.N.’s rank and file, in Gaza and beyond, demand that humanitarian leadership set aside their tradition of silent neutrality and wade into a complex political struggle with clear statements on who is responsible for the rising death toll in Gaza....”

“.... It has also reinforced lingering suspicions among many staff that senior U.S. heads of U.N. humanitarian agencies, like Russell and World Food Programme Executive Director Cindy McCain, are too close to the White House that nominated them for the jobs and the Western donors who sustain their agencies’ work. ...”

Global Policy - Why Human Rights Offer a Stronger Case for a Cease-Fire in Gaza

R Diab; <https://www.globalpolicyjournal.com/blog/20/11/2023/why-human-rights-offer-stronger-case-cease-fire-gaza>

“Robert Diab argues that we need to change the framing to protect civilians in Gaza.”

ICJ – Legal briefer: States’ Duty to Prevent Genocide under the 1948 Genocide Convention

<https://www.icj.org/gaza-occupied-palestinian-territory-states-have-a-duty-to-prevent-genocide/>

Cfr a tweet: **“The International Commission of Jurists (ICJ) is sounding the alarm about the significant risk of genocide in Gaza.** This is not some 'fringe', 'radical left' or 'dissident' group. These are mainstream international jurists from across the world.”

WHO staff member killed in Gaza

<https://www.who.int/news/item/21-11-2023-who-staff-member-killed-in-gaza>

“With heavy hearts, WHO announces the death of one of our staff in Gaza, in the occupied Palestinian territory. **Dima Abdullatif Mohammed Alhaj, 29 years old,** had been with WHO since December 2019. She worked as a patient administrator at the Limb Reconstruction Centre, a critical part of the WHO Trauma and Emergency Team.....”

Telegraph - Gaza races to disinfect refugee shelters as disease starts to spread

<https://www.telegraph.co.uk/global-health/science-and-disease/gazan-refugee-shelters-sprayed-with-chemical-agents-to-prev/>

“An epidemic of diarrhoea has broken out as experts fear typhoid and cholera outbreaks could be looming.”

And a link:

- Lancet Letter - [The need for medical sanctity in conflict zones](#) (by Y T Yang)

“... The ICC (International Criminal Court), established to prosecute crimes against humanity, has yet to issue an indictment for a strike on medical personnel or infrastructure. In an age in which the rules of war are being rewritten and states are seemingly emboldened to flout the very conventions they ratified, the international community must come together to re-establish the sanctity of medical facilities in conflict zones. This action is not just a matter of legal or diplomatic urgency; it is a moral imperative. **To curb this escalating aggression, international institutions, including the ICC, need to actively prosecute culprits. The UN member states should collectively ensure culpable states face consequences.** If the essence of our shared humanity fails to motivate protective measures, then stringent legal repercussions should do so.”

Run-up to COP 28 in Dubai (including from a health angle)

Economist - Three climate fights will dominate COP28

<https://www.economist.com/business/2023/11/16/three-climate-fights-will-dominate-cop28>

One of many analyses you'll probably read in the final run-up to COP28. This one focuses among others on the **summit's president, Sultan Al Jaber.** **“Whether the summit ends in breakdown or breakthrough depends on one man”.** That's perhaps a bit of a stretch, but there's certainly some truth to it also. You all know why.

“... So low is trust among many delegates that the talks may break down. ...”

“... Amid the summit’s myriad technical and procedural goals, **three big topics** cry out for action. The first is the task of **cracking down on emissions of methane**, an overlooked greenhouse gas (ghg). The second is the **need to fill massive shortfalls in climate finance**. And the third is an **ideological battle over how and how fast to end the use of fossil fuels**. The outlook for meaningful progress can be summed up as good, bad and ugly, respectively....”

Guardian - World facing ‘hellish’ 3C of climate heating, UN warns before Cop28

<https://www.theguardian.com/environment/2023/nov/20/world-facing-hellish-3c-of-climate-heating-un-warns-before-cop28>

“**The world is on track for a “hellish” 3C of global heating, the UN has warned** before the crucial [Cop28](#) climate summit that begins next week in the United Arab Emirates. **The report found that today’s carbon-cutting policies are so inadequate that 3C of heating would be reached this century.**”

“... **The [UN Environment Programme \(Unep\) report](#)** said that implementing future policies already promised by countries would shave 0.1C off the 3C limit. Putting in place emissions cuts pledged by developing countries on condition of receiving financial and technical support would cut the temperature rise to 2.5C, still a catastrophic scenario. **To get on track for the internationally agreed target of 1.5C, 22bn tonnes of CO₂ must be cut from the currently projected total in 2030, the report said. That is 42% of global emissions and equivalent to the output of the world’s five worst polluters: China, US, India, Russia and Japan....”**

PS: “... **Another [report, from UN Climate Change](#), published on 14 November, reached virtually the same conclusion as the Unep report.** It found that existing national pledges to cut emissions would mean global emissions in 2030 were 2% below 2019 levels, rather than the 43% cut required to limit global heating to 1.5C....”

- For more coverage on this new UNEP report, see HPW - [Planet Faces Nearly 3°C Warming Without ‘Relentless’ Emissions Cuts, UN Report Finds](#)

“**The world is on a trajectory to heat up by nearly 3°C this century unless governments take “relentless” action to cut greenhouse gas emissions**, according to a **[new report](#)** released Monday by the United Nations Environment Programme (UNEP). **The Emissions Gap report, an annual assessment by UNEP that measures the difference between government pledges to combat climate change and the emissions reductions scientists say are necessary to avert planetary catastrophe**, found that current policies are leading to between 2.5°C and 2.9°C of warming above pre-industrial levels by 2100....”

Lancet World Report - Health at COP28: three things to watch for

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(23\)02614-4/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)02614-4/fulltext)

“The 28th UN climate change conference will see declarations related to health and humanitarian crises, as well as an assessment of progress on the Paris Agreement. Talha Burki reports.”

Re **'The Global Stocktake'** (on progress towards the targets set by the 2015 Paris Agreement) ; **the Declaration on Climate and Health** (on the 'Health Day'); **Declaration on Climate, Relief, Recovery and Peace** (explicitly linking climate change with humanitarian crises).

HPW - Health groups pick fossil fuel phaseout as top priority at COP 28

<https://www.devex.com/news/health-groups-pick-fossil-fuel-phaseout-as-top-priority-at-cop-28-106608>

One of the must-reads of the week. **"While health is a core theme of this year's climate change conference, COP 28, Lancet's Richard Horton warned of the "danger of healthwashing.""**

"... The concern is that the Health Day at COP 28 could focus on adaptation and health care resilience and distract away from mitigation, which many in the health community argue is needed. According to a [report by Health Policy Watch](#) last month, a draft of the climate and health ministerial declaration expected to come out of COP 28 focuses on adaptation and makes no mention of fossil fuels..."

"... While calling for more resources for adaptation, **health campaigners have made clear the need to phase out fossil fuels for the benefit of public health.** Over 46 million health professionals [signed a letter](#) early this month addressed to the UAE COP presidency demanding that countries commit to "an accelerated, just and equitable phase-out of fossil fuels as the decisive path to health for all..."

"Panelists at the Lancet Countdown launch reiterated the importance of mitigation. Maria Neira, director of the environment, climate change and health department at the [World Health Organization](#), **said the goal is for both mitigation and adaptation.** ... Neira, meanwhile, said that while having a Health Day at COP 28 is historic, **her ambition is for health to be part of the negotiation process at COP 29.** "My personal desire for the COP will be to enter into the negotiation process and making sure that they have ... something about health," she said. That "something," she said, means **stopping the subsidies of fossil fuels, having adaptation funding, and the massive reduction of emissions to reduce air pollution...**"

"Another [letter](#), published Friday by a group of people working in both climate and health, identified the full phaseout of fossil fuels as the number one priority, followed by the inclusion of health in countries' national adaptation plans, the capitalization and operationalization of the "Loss and Damage Fund," and scale-up of climate finance. According to the letter, "Healthy climate action is impossible without adequate finance..."

PS: **"The health sector isn't expecting a dedicated health fund at COP 28. But they are expecting some funding announcements** from governments, the private sector, and philanthropic organizations on climate and health around the Health Day."

PS: "... **Jessica Beagley, policy lead of the Global Climate and Health Alliance....** : "... within the [U.N. Framework Convention on Climate Change](#) negotiations process, she said **"the best outcomes for health" will be "solid progress" on the [new collective quantified goal on climate finance](#) — essentially a new climate finance target that would replace the \$100 billion wealthy countries promised to help the global south with climate mitigation and adaptation.** Another is operationalizing and capitalizing a loss and damage fund that can respond to the health and other social needs of vulnerable countries and communities impacted by climate change..."

Lancet Comment - Further delays in tackling greenhouse gas emissions at COP28 will be an act of negligence

M Romanello, A Costello et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(23\)02584-9/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)02584-9/fulltext)

“... The COP28 Ministerial Declaration on Climate and Health must call for an immediate, safe, and people-centred transformation of not only our health systems, but also of the energy, transport, food, and agricultural systems that define people's health. Critically, this declaration must go beyond calls for health-system strengthening to **include an urgent appeal for an immediate, just, and equitable transition away from health-harming fossil fuels.**”

“... Above all, at the upcoming COP28, the health sector must lead the call for what could be the most important public health intervention of our time: the phase-out of fossil fuels. This intervention is crucial to ensure growing hazards do not exceed the capacity of health systems to respond to them. **Failing to address the root cause of the climate crisis would result in health-washing of international negotiations and a failure to protect people's future; it would also tarnish the health community's credibility with the same political roadblocks that have hindered global international climate negotiations.** At COP28 and beyond, further delays in tackling emissions reductions will be an act of negligence.”

WHO - Health at COP28

<https://climahealth.info/cop28-hub/>

Resource: Cfr **tweet Neira**: “What's the global health community doing at @COP28_UAE ? Find health-relevant #COP28 events, resources and news. “

WHO - Health needs to be front and centre of national plans to fight climate change

<https://www.who.int/news/item/23-11-2023-health-needs-to-be-front-and-centre-of-national-plans-to-fight-climate-change>

“Ahead of the UN Climate Change Conference (COP-28), WHO has published its **“2023 review of health in nationally determined contributions and long-term strategies”** highlighting the actions needed to ensure that people's health is fully prioritised and integrated into national plans to fight climate change.”

“... **Significant progress has been made in the integration of health into nationally determined contributions (NDCs) and long-term low emissions and development strategies (LT-LEDS)**, the main policy instruments to reduce emissions and build climate resilience as set out by the Paris Agreement. **91% of the available NDCs now include health considerations, compared to 70% of those reporting in 2019.** Compared to previous rounds of national climate plans, health-inclusive and health-promoting climate targets and policies are increasingly being developed for mitigation, adaptation, means of implementation, Loss and Damage, and long-term sustainable development strategies....”

“... Despite this progress, there remain huge gaps in the action being taken. Ambitious action on air pollution will save lives, yet only 16% of NDCs include standalone targets, measures or policies to reduce air pollution....”

“... Health-specific climate action is underfunded: Sustainable climate finance is essential for health adaptation, mitigation, and climate-resilient development, but health remains chronically underfunded in national plans to tackle climate change ”

“... Despite this reliance on multilateral climate financing, only 2% of adaptation funding and 0.5% of overall climate funding is currently allocated to projects that explicitly aim to protect or improve human health. ... To ensure an equitable and effective response to climate change, WHO is calling for multilateral climate financing mechanisms to allocate more funding to policies and initiatives that explicitly aim to protect or improve human health.”

- Coverage via HPW - [Most Countries Recognise Health Impact of Climate Change – But Many Lack Detailed Plans to Mitigate This](#)

“Almost all countries (91%) have included health considerations in their latest climate-mitigation plans – called nationally determined contributions (NDCs) – but those that have already felt the effects of extreme weather events appear more likely to have more detailed plans....”

“...While almost two-thirds (63%) of countries had health adaptation priorities, virtually all the low- and lower-middle-income countries (87%) had done so....”

HPW - Call to Redirect ‘Harmful’ Government Subsidies to Protect Health From Climate Impact

<https://healthpolicy-watch.news/call-to-redirect-harmful-government-subsidies-to-protect-health-from-climate-impact/>

“If government subsidies for fossil fuel were removed and redirected to addressing the impact of climate change on health, this would free up some \$6 trillion or 75% of what is spent on health annually, said Agnes Soucat from the French Development Agency. Soucat also called for scrutiny of agricultural subsidies “and how they contribute to our food system, and how this contributes to biodiversity loss and health impacts, such as impact on diabetes and cardiovascular diseases”.

“Governments should eliminate the “harmful subsidy mechanism to reduce or suppress the adverse effect on the environment, animal and human health”, and substitute it with “smart environment and health taxation for one sustainable planetary health”, such as taxes on fossil fuel and carbon, she proposed. Soucat also pointed out there are over 500 public investment banks worldwide with \$2.5 trillion of public investments. If only 10% was “mobilised” for investment in health, this would represent 10 times what is currently available in development aid....”

Devex - Opinion: How the climate-health connection shapes global development

<https://www.devex.com/news/sponsored/opinion-how-the-climate-health-connection-shapes-global-development-106580>

“On the eve of COP 28, the argument that the climate crisis is also a global health crisis is gaining momentum. African leaders Malaria Alliance’s Joy Phumaphi and Medicines for Malaria Venture’s David Reddy explain.”

“On the eve of the climate conference COP 28 — billed by many as the “Health COP” and the first-ever to feature a Health Day on its agenda — **the argument that [the climate crisis is also a global health crisis](#) is gaining momentum.** Whether looking through the lens of mitigating the causes or adapting to the impacts of climate change, global health must be a priority and serve as a key indicator for governments and businesses charting the way forward along the 1.5C pathway. Within this, **we cannot overlook the impacts climate change has on poverty-related diseases, particularly vector-borne diseases such as malaria, and how responding to these impacts can improve global health equity and security.....”**

WHO - Climate change is an urgent threat to pregnant women and children

[UN agencies urge action to safeguard maternal, child health amidst climate crisis](#)

“Pregnant women, babies and children face extreme health risks from climate catastrophes that warrant urgent attention, according to a Call for Action released today by United Nations (UN) agencies ahead of the global Conference of the Parties (COP28) negotiations on climate change in Dubai...”

According to the document— *Protecting maternal, newborn and child health from the impacts of climate change* — the effects of climate events on maternal and child health have been neglected, underreported and underestimated. It highlights that very few countries’ climate change response plans mention maternal or child health, describing this as “a glaring omission and emblematic of the inadequate attention to the needs of women, newborns, and children in the climate change discourse”.....” “ ... **The Call to Action was released by WHO, UNICEF and UNFPA at an online launch event, alongside an advocacy brief by the Partnership for Maternal, Newborn and Child Health (PMNCH)....”**

- And via [Politico](#):

“The United States is part of a dozen countries supporting a voluntary declaration on climate and health to be presented at this year’s U.N. climate summit in Dubai, which starts on Nov. 30. **The countries, including Brazil, Malawi, Kenya, India and Germany, are expected to commit to addressing the environmental factors impacting health and to “promote steps” to curb pollution and waste from their health sectors,** among other objectives outlined in the declaration obtained by POLITICO’s Zia Weise and Carlo Martuscelli. **The declaration, sent to the 200 governments participating in the talks,** also addresses the need for financing for climate and health from domestic budgets, development banks, climate funds and philanthropies.”

“Endorsing the declaration is voluntary since the United Arab Emirates health ministry drafted it outside of the usual U.N. process, which typically involves lengthy negotiations and compromise before governments reach agreement. The UAE [plans to launch the declaration on Dec. 2](#) ahead of a day dedicated to the health impacts of climate change at the summit...”

Plastic Pollution treaty process

Nature (News) - Progress on plastic pollution treaty too slow, scientists say

<https://www.nature.com/articles/d41586-023-03579-1>

“As national divisions widen over how to address the global waste crisis, researchers fight for more input into the process.”

“Scientists rallied last week to support **delegates working on a global treaty to eliminate plastic pollution at the United Nations Environment Programme (UNEP) headquarters in Nairobi**. But researchers told *Nature* that **progress was disappointing**. “We now only have about a year left in this process and are nowhere near where we need to be,” says Douglas McCauley, an ecologist at the University of California, Santa Barbara, who has modelled plastic pollution....”

““These negotiations have so far failed to deliver on their promise,” said Ana Rocha, plastics-policy director for the Global Alliance for Incinerator Alternatives (GAIA), [in a GAIA press release](#) after 13–19 November meeting. The statement added: **“A small group of mostly oil and plastic-producing countries halted progress toward an internationally binding legal document.”**”

“... The process was kick-started in March 2022, when 175 nations voted to create a legally binding international agreement aimed at plastic pollution — a problem that has [reached epic proportions](#) since the 1950s. **A ‘zero draft’ of the plastics treaty was hammered out in September, after the second meeting of UNEP’s International Negotiating Committee (INC)**. It lays out more than a dozen issues to be tackled, including the reduction of plastics production, managing waste and the use of recycled materials, phasing out single-use plastics, promoting alternative materials and limiting the use of chemicals of concern in new plastics. The draft lists a few proposals for addressing each issue, ranging from setting hard targets to making softer declarations of intent. ... **Last week’s meeting, which marked the third session of the INC and the halfway point towards the goal of finalizing the treaty in 2024, saw the zero draft get longer, rather than narrowing down the options. The next session will be in Ottawa in April....”**

“... The Scientists’ Coalition for an Effective Plastics Treaty, a group of some 250 experts from about 50 nations, is pushing for an agreement that will set legally binding targets to reduce plastics production, both for each signing party and for the planet as a whole. ... A separate High Ambition Coalition to End Plastic Pollution, including dozens of countries and chaired by Rwanda and Norway, is similarly calling for binding targets. Other nations, including Saudi Arabia, are pushing instead for countries to determine their own contributions to pollution-reduction goals, and are advocating an emphasis on boosting waste-management processes such as recycling, rather than restricting plastics production.....”

Devex – UN plastics treaty raises concerns for low-income countries

<https://www.devex.com/news/un-plastics-treaty-raises-concerns-for-low-income-countries-106564>

“While several countries in Asia support the creation of the plastics treaty, some stress that more support for lower-income countries needs to be factored in to make it a reality.”

“... .. Many of [these countries](#), however, rely on plastic production for a significant part of their income. Thailand, for example, derived [\\$36.9 billion](#) from the plastics industry in 2018 while Vietnam added [\\$17.5 billion](#) to its national economy through plastic in 2019; both representing 6.7% of the country’s GDP. The [current treaty draft](#) puts an emphasis on limiting the creation of primary plastic polymers. **While several Asian countries support the creation of a treaty, in statements some — such as [Vietnam](#), [Indonesia](#), and [Bangladesh](#) — stressed that to make it a reality, more support for lower-income countries would need to be factored in and that the treaty shouldn’t inhibit progress toward other Sustainable Development Goals....”**

PS: “... But plastic pollution must be dealt with if progress is to be made on climate change, [said](#) Kenyan President William Ruto at the opening of the session. “Plastics could account for up to 19 per cent of greenhouse gas emissions allowed under a 1.5°C by 2040. It is now time for investors, multinational corporations, and technology companies to shift strategic investments to reduce their plastics waste footprint,” he explained....”

- Related – HPW: [Time is Running Out to Avert Plastics Catastrophe as Global Treaty Negotiations Reach Stalemate](#)

“The third round of international negotiations over a global plastics treaty has ended in a stalemate, leaving nations no closer to an agreement to stem the tide of plastic pollution that is choking the planet and endangering human health. **The week-long talks at UN Environment Programme (UNEP) headquarters in Nairobi marked the halfway point towards the 2024 deadline** set for nations to hammer out a binding international treaty addressing the “full life cycle” of plastics, as set out in a UN resolution adopted by 175 countries in 2022.”

“While UNEP Executive Director Inger Andersen expressed optimism regarding the “forward motion of the negotiations towards a treaty that ends plastic pollution,” environmentalists, scientists, and civil society painted a different picture. **With only two rounds of negotiations remaining, a small but determined group of fossil fuel and plastic-producing nations, led by China, Russia, Iran and Saudi Arabia, is impeding progress and imperiling the prospects of a landmark treaty.....”**

More on Planetary health

Guardian - Richest 1% account for more carbon emissions than poorest 66%, report says

<https://www.theguardian.com/environment/2023/nov/20/richest-1-account-for-more-carbon-emissions-than-poorest-66-report-says>

With coverage of a new hard-hitting Oxfam report.

“The most comprehensive study of global climate inequality ever undertaken shows that this elite group, made up of 77 million people including billionaires, millionaires and those paid more than US\$140,000 (£112,500) a year, accounted for 16% of all CO2 emissions in 2019 – enough to cause more than a million excess deaths due to heat, according to the report....”

“For the past six months, the Guardian has worked with Oxfam, the Stockholm Environment Institute and other experts on an exclusive basis to produce a special investigation, The Great Carbon Divide. It explores the causes and consequences of carbon inequality and the disproportionate impact of super-rich individuals, who have been termed “the polluter elite”. Climate justice will be high on the agenda of this month’s UN Cop28 climate summit in the United Arab Emirates....”

“... The suffering falls disproportionately upon people living in poverty, marginalised ethnic communities, migrants and women and girls, who live and work outside or in homes vulnerable to extreme weather, according to the research. These groups are less likely to have savings, insurance or social protection, which leaves them more economically, as well as physically, at risk from floods, drought, heatwaves and forest fires. The UN says developing countries account for 91% of deaths related to extreme weather....”

“... Oxfam is calling for hefty wealth taxes on the super-rich and windfall taxes on fossil fuel companies to support the worst affected, reduce inequality and fund a transition to renewable energy. It says a 60% tax on the incomes of the wealthiest 1% would raise \$6.4tn a year and could cut emissions by 695m tonnes, which is more than the 2019 footprint of the UK....”

Lancet - Pathways to a healthy net-zero future: report of the Lancet Pathfinder Commission

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(23\)02466-2/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)02466-2/fulltext)

As a reminder: **“ The Lancet Pathfinder Commission was established to collate and assess the evidence on the near-term health effects of greenhouse gas mitigation, including both modelling studies and evaluated implemented actions. The Commission's aim is to assess the potential and achieved magnitude of the benefits for health and climate of different mitigation actions and, where possible, the factors facilitating or impeding implementation.”**

The new report reviews evidence on the co-benefits of Healthy climate action, identifies the main pathways to net zero, and provides recommendations ahead of COP28.

And some key messages:

“An abundance of modelled evidence attests to the health co-benefits of climate mitigation action across many sectors of society. Increased ambition is urgently needed to accelerate progress and achieve the health co-benefits from a just transition to a net-zero emissions future. Health co-benefits are additional to the benefits gained from reducing the impacts of climate change on health. Co-benefits are delivered through key pathways, such as reductions in air pollution from replacing fossil fuels with clean, renewable energy sources; consumption of healthy, sustainable diets; and the promotion of active travel and use of public transport. To capitalise on these additional health gains, while reducing inequities and meeting climate targets, health co-benefits must be incorporated into the delivery of the Paris Climate Agreement including through nationally determined contributions and long-term low greenhouse gas emission development strategies. Improved monitoring of progress alongside better harmonised research can support ambitious climate action. A greater emphasis must be placed on estimating the magnitude of both the health and greenhouse gas effects of implemented mitigation actions, including through processes such as the Global Stocktake. ...” **“ Systems approaches are needed; achievement of**

transformative change across sectors to achieve improved health equity at net-zero greenhouse gas emissions requires systems approaches that integrate adaptation and mitigation and address underlying structures driving inequity and rising greenhouse gas emissions. Examples of implemented and evaluated transformative action are urgently needed to inspire and inform change. A **coalition of organisations, and subnational and national initiatives, is proposed to accelerate progress towards net-zero greenhouse gas emissions and improve health**, with a commitment to monitor and evaluate effects on health and greenhouse gas emissions as well as to share experiences about successes and failures.”

Guardian – The climate emergency really is a new type of crisis – consider the ‘triple inequality’ at the heart of it

A Tooze; <https://www.theguardian.com/environment/commentisfree/2023/nov/23/climate-emergency-crisis-conference-cop-28>

“This is **the triple inequality that defines the climate global equation**: the disparity in responsibility for producing the problem; the disparity in experiencing the impacts of the climate crisis; and the disparity in the available resources for mitigation and adaptation.

Global Food security summit (London, 20 November)

UN News - Child deaths from wasting are predictable and preventable: WHO chief

<https://news.un.org/en/story/2023/11/1143787>

“**Worldwide, 45 million children under five are wasted**, meaning they are dangerously thin for their height, **and roughly one million die each year from the condition**, the Director-General of the World Health Organization told the Global Food Security Summit held on Monday in London. ...”

“**Convened by the Government of the United Kingdom**, the day-long conference brought together representatives from more than 20 countries to shore up efforts to achieve zero hunger and end malnutrition, in line with the [Sustainable Development Goals](#) (SDGs).”

“... Tedros said severe acute malnutrition can be treated with therapeutic milks, foods and fluid support, according to the needs of the child. However, **although treatment coverage has increased, many children who need it cannot access sufficient care. WHO this year added ready-to-use therapeutic foods to its [Essential Medicines List](#)** which he hopes will increase their production and availability while also reducing costs. ... **WHO and other UN agencies have also developed a [Global Action Plan on Child Wasting](#) while a new [guideline](#) on prevention and management was published on Monday....”**

- For the new guideline, see WHO - [WHO issues new guideline to tackle acute malnutrition in children under five](#)

“... **In 2022, approximately 7.3 million children received treatment for severe acute malnutrition (SAM)**. Although treatment coverage has increased, children with SAM in many of the worst affected countries are still unable to access the full necessary care for them to recover.... ... **This is the first**

WHO guideline focusing on both prevention and management of acute malnutrition and highlights the vital importance of investing in both these aspects to have real impact on reducing the prevalence and negative impacts of acute malnutrition on children and their families around the world. ...”

IDS - The UK’s Global Food Security Summit – what about social protection?

N Nisbett et al ; <https://www.ids.ac.uk/opinions/the-uks-global-food-security-summit-what-about-social-protection/>

“On 20 November the UK government, alongside the Bill and Melinda Gates Foundation and the Children’s Investment Foundation ... host[ed] a [Global Food Security Summit](#) to “explore how innovation, partnerships and the latest technological advances can ensure long term food security and improved nutrition for people in the hardest-hit countries.”

“... With the world off-course to meet globally agreed [Sustainable Development Goal targets](#), both to end hunger and malnutrition and to ‘leave no-one behind’, any focus on food (in)security is welcome. [But the roots of hunger and malnutrition and the global injustices they represent run deep and beyond the suggested focus of the summit on scientific and technological solutions.](#) Income inequalities and food price rises, in particular, have combined over the past few years to push millions more people into acute food insecurity and chronic malnutrition. [Many measures mentioned in the press briefing](#) ahead of the summit seem narrowly focused on the agricultural supply side. What of supporting the demand for and distribution of nutritious food, using a range of different measures such as cash transfers, fresh food vouchers and school feeding? Across the world, these measures that fall under the rubric of [social protection](#) are seen as essential tools in the fight against food insecurity.”

“... Last month, the report of the High Level Panel of Experts (HLPE) to the UN Committee World Food Security (CFS) on [Reducing Inequalities for Food Security and Nutrition](#) was [presented to the Committee](#) in Rome, highlighting the importance of social protection in reducing inequalities and helping to achieve global goals. At a series of CFS side-events, global experts and government representatives also [reflected on a decade of progress](#) in understanding the links between social protection and food security outcomes, building on [an earlier HLPE report](#) on this topic.....”

Global Tax Justice

Euractiv - UN tax body to go ahead after EU, US and UK fail to defeat it

https://www.euractiv.com/section/economy-jobs/news/un-tax-body-to-go-ahead-after-eu-us-and-uk-fail-to-defeat-it/?utm_source=divr.it&utm_medium=twitter

Coverage of the vote on Wednesday. “The international community will move forward with plans to establish a UN convention to set global rules on tax and illicit financial flows after a campaign led by the EU, United States and UK failed to kill off the plan. “

“... Following a debate and vote in New York on Wednesday (22 November), a resolution on the ‘promotion of inclusive and effective international tax co-operation’ and a UN tax convention, **tabled by Nigeria, on behalf of the Africa group at the UN**, was passed by 125 votes to 48 on Wednesday. “

“The EU27 formed the bulk of the 48 countries which voted against establishing a UN tax convention. The United States, UK and Japan were also among those to oppose the convention. ...”

PS: all **BRICS countries** voted in favour.

“... The convention will now be organised in the coming months and is expected to report back with proposals in 2025. ...”

Related: **Tax Justice Network statement** - [UN adopts plans for historic tax reform](#)

Cfr a tweet: “This starts the negotiation of a UN Framework Convention on International Tax Cooperation through a process where all countries participate as equals.”

International Consortium of investigative journalists - UN votes to create ‘historic’ global tax convention despite EU, UK moves to ‘kill’ proposal

<https://www.icij.org/investigations/paradise-papers/un-votes-to-create-historic-global-tax-convention-despite-eu-uk-moves-to-kill-proposal/>

“Advocates celebrated the resolution as a key step towards better representation for developing countries, but **warned wealthy countries against further attempts to delay the much-needed reforms.**”

And a quote: “**“Tax havens and corporate lobbyists have had too much influence on global tax policy at the OECD for too long,”** said Alex Cobham, chief executive of the Tax Justice Network advocacy group in a statement following the vote. **“Today, we start to take back power over global tax rules that affect all of us.”** “

Project Syndicate - Put the UN in Charge of International Taxation

J Ghosh, J Antonio Ocampo & J Stiglitz (all **members of the Independent Commission for the Reform of International Corporate Taxation (ICRICT)**); <https://www.project-syndicate.org/commentary/back-un-resolution-for-framework-convention-on-international-taxation-by-jayati-ghosh-et-al-2023-11?barrier=accesspaylog>

Op-ed (from Monday) published ahead of the vote on Wednesday. **“Almost a decade of multilateral negotiations on a global tax treaty at the OECD has yielded insufficient progress. The question to be decided this week is whether the United States and the European Union will see the light and support a different approach.”**

“... The question to be decided this week is what rich economies like the United States and the European Union will do. If they oppose a binding UN framework convention (as they have signaled **they will do**), they will be sending a message that they prefer the current ineffective and unfair arrangements to the possibility of reforms that would benefit their own people by stemming the

revenue losses their governments currently suffer.... ... We, the members of the Independent Commission for the Reform of International Corporate Taxation (ICRICT) believe that opposition to moving forward with negotiations for a specific convention at the UN would have dire consequences for the entire international system. It is politically unwise to dismiss such broad support for global tax negotiations. And it is simply short-sighted to squander this opportunity to curb the revenue losses that all countries (including rich countries) and their people suffer due to untamed tax abuse. **The US and EU should reconsider their stance, and back the African Group’s resolution.”**

Clearly: to be continued....

SRHR

Devex - How one UN agency is getting countries to help pay for contraceptives

<https://www.devex.com/news/how-one-un-agency-is-getting-countries-to-help-pay-for-contraceptives-106554>

(gated) **“UNFPA is a major provider of donated reproductive health products in many LIMCs, but has suffered from funding cuts over the years. Under a new model, governments commit to making mandatory contributions to its supplies program.”**

(Third) Cervical cancer elimination day of action (17 Nov)

WHO - Global partners cheer progress towards eliminating cervical cancer and underline challenges

<https://www.who.int/news/item/17-11-2023-global-partners-cheer-progress-towards-eliminating-cervical-cancer-and-underline-challenges>

From end of last week.

“World leaders, cervical cancer survivors, advocates, partners, and civil society ... mark[ed] **the third Cervical cancer elimination day of action**. The initiative, which marked the first time Member States adopted a resolution to eliminate a noncommunicable disease, has continued to gain momentum....”

“PS: **Since the launch of the Global strategy to eliminate cervical cancer three years ago, a further 30 countries, including countries with large populations and cervical cancer burden such as Bangladesh, Indonesia and Nigeria, introduced the HPV vaccine**. As of today, 140 countries have introduced HPV vaccine into national immunization programmes. ... **The global HPV vaccination coverage of girls that received at least one dose of HPV vaccine has increased to 21% in 2022 – exceeding the pre-pandemic levels for the first time**. If this rate of progress is maintained the world would be on track to meet the 2030 target to make HPV vaccines available to all girls everywhere....”

World Toilet Day (19 Nov)

UN News - World Toilet Day, flush with innovations for safer sanitation

<https://news.un.org/en/story/2023/11/1143757>

“Innovation abounds in the race to broaden access to clean water and sanitation around the world on World Toilet Day, marked on 19 November.” “...In line with this year’s theme of accelerating change, innovators have been part of ongoing efforts to address the needs of some of the world’s 3.5 billion people living without safe toilets.....”

Devex - Lack of school toilet maintenance costs the world billions, report says

<https://www.devex.com/news/lack-of-school-toilet-maintenance-costs-the-world-billions-report-says-106596>

“Losing toilets to neglect costs countries billions of dollars due to its negative impact on children's health, families' incomes and job creation, a new study finds.”

“The lack of maintenance of school toilets costs the world billions of dollars mainly because of the health issues that come with poor cleanliness, like faster transmission of diseases such as worms and diarrhea, according to a new report. “Tackling Toilet Loss,” released this week, studied the impact of the lack of maintenance of school toilets in four countries: Nigeria, India, the Philippines, and Ecuador. It found that the societal costs added up to \$10 billion in those countries alone between 2015 and 2021, largely due to the knock-on effect on health care costs....”

“The report — published by Economist Impact, the partnerships division of the Economist Group, and sponsored by Unilever — comes as access to safe and clean sanitation remains one of the farthest behind SDGs, with the United Nations recently saying a “major boost” was needed to reach the target by 2030. The report makes a financial case for governments not only to build school toilets but to invest in operations and maintenance, too, saying that would yield billions of dollars worth of net benefits every year....”

Human Resources for Health

HPW - Brain Drain: Africa’s Trainee Doctors Are (Barely) Holding Healthcare Together

<https://healthpolicy-watch.news/brain-drain-africas-trainee-doctors-are-barely-holding-healthcare-together/>

“As the Global North poaches African doctors, healthcare falls to overworked and unmentored interns, some of whom learn medical procedures from YouTube.”

“... Fifteen of the world’s (fiscally) richest countries have over 55,000 African doctors in their health systems, a new data analysis by [The Continent](#) shows. These are doctors who qualified before entering those countries. ... **The United Kingdom is the top culprit, followed by the United States, France, Canada, Germany and Ireland**, in that order. **Of the African countries being drained of doctors, an analysis of the latest data from the Organisation for Economic Cooperation and Development shows that Egypt has lost the most, followed by Nigeria, South Africa, Algeria and Sudan.** “

“These countries have consequently paid a significant price in the quality of healthcare they can offer their own residents. **Egypt, for example**, has the lowest doctor-to-patient ratio of its north African neighbours. In many of the drained countries, **there are so few trained doctors left that the bulk of healthcare falls to doctors in training: medical interns.** ...”

“...**Research in Uganda and Kenya details the cost to those interns.** The study titled “We were treated like we are nobody” was [published this month](#) in the *British Medical Journal for Global Health* and is based on data on more than 700 medical interns in the two countries, as well as interviews with 54 junior doctors and 14 consultant physicians. **The Kenya and Uganda findings echo those of a Nigeria study [published in May](#) in the Public Library of Science journal.** ...”

Global health events

PHM - Buen vivir as a pathway to health for all

<https://peoplesdispatch.org/2023/11/13/buen-vivir-as-a-pathway-to-health-for-all/?ref=peoples-health-dispatch.ghost.io>

“The People’s Health Movement announced updated plans for the 5th People’s Health Assembly, to be held in Mar de Plata, Argentina, in April 2024.”

“The People’s Health Movement (PHM) [Julio Monsalvo](#) region, encompassing Argentina, Chile, Paraguay, and Uruguay, on Saturday, November 11, welcomed general medicine practitioners and other activists for a launch event ahead of the 5th People’s Health Assembly. **The Assembly, scheduled to take place in Mar de Plata, Argentina, from April 7-11, 2024, will be rooted in the understanding of the concept of *buen vivir* (Good living) and the importance this concept holds for the global building of health for all...**”

Should be interesting, now that Argentina has a new nutcase leader.

Global health governance & Governance of Health

WHO Director-General's remarks at the Virtual G20 Leaders' Summit – 22 November 2023

<https://www.who.int/director-general/speeches/detail/who-director-general-s-remarks-at-the-virtual-g20-leaders--summit--22-november-2023>

With among others: “...**We are also continuing work on the establishment of an interim coordination mechanism for timely and equitable access to medical countermeasures during pandemics.** Since the G20 Summit we have held consultations with our Member States, and we are pleased to see growing support for the establishment of this mechanism.....”

CGD (blog) – Strengthening Multilateral Development Banks: A Response to Critics

M Ahmed & H Kharas; <https://www.cgdev.org/blog/strengthening-multilateral-development-banks-response-critics>

“Under the Indian presidency, the G20 tasked N.K. Singh and Larry Summers to convene an independent expert group (IEG) to recommend how to strengthen multilateral development banks (MDBs) and address the shared global challenges of the 21st century (disclosure: we were both part of the Secretariat supporting the group). [Volume 1](#) and [Volume 2](#) of the IEG’s report have been [welcomed by G20 Finance Ministers](#) meeting at Marrakech, as well as by [MDBs](#) themselves. **These volumes recommend radical reform of the MDBs involving hard trade-offs** but leaving everyone better off if the package is adopted in its entirety.....”

The authors of this blog **respond to 5 criticisms.**

GF - FIND Joins the Global Health Campus

<https://www.theglobalfund.org/en/updates/2023/2023-11-17-find-joins-the-global-health-campus/>

“FIND will join the Global Health Campus in the second quarter of 2024.”

“FIND works to ensure equitable access to reliable diagnosis around the world, by connecting countries and communities with funders, decision-makers, health care providers and developers to spur diagnostic innovation and make testing an integral part of sustainable, resilient health systems. They are a **long-time partner of the Global Fund and other organizations based at the Global Health Campus, having worked as a co-convenor of the Access to COVID-19 Tools Accelerator (ACT-A) diagnostics pillar during the COVID-19 pandemic.**”

“The Global Health Campus opened in 2018 as a hub to support and expand collaboration among global health organizations. Since it opened, the building has housed **five organizations: The Global Fund, Gavi, the Vaccine Alliance, the Stop TB Partnership, RBM Partnership to End Malaria and Unitaid....”**

Devex - How the European Commission spends its aid money

<https://www.devex.com/news/how-the-european-commission-spends-its-aid-money-106551>

(gated) **“The European Commission's Directorate-General for International Partnerships has committed \$55.7 billion to projects ongoing in 2022.** Devex looked into the data.”

Global health financing

Devex - Opinion: How global development can shift to finance uber-resilience

Rabah Arezki; <https://www.devex.com/news/opinion-how-global-development-can-shift-to-finance-uber-resilience-106528>

“In a world increasingly shaped by shocks, low-income countries cannot rely on a reactive development architecture. A **shift toward a proactive, market-based approach is essential to build uber-resilience.**”

“... The development architecture, with its focus on emergency funding and interventions, has proven inadequate in addressing the recurring and intensifying shocks faced by low-income countries. **A shift toward uber-resilience, defined as building back a stronger capacity to anticipate, prepare for, and respond effectively to shocks, while also seizing opportunities for growth and development, is needed.** ... To achieve uber-resilience, the architecture for financing development must rethink its approach. A continuum between aid and market-based instruments should be created, ensuring that reforms and interventions effectively graduate low-income countries from aid dependency....”

(PS: not being the most 'uber resilient' person on earth, I refrain from commenting)

UHC & PHC

Social Work & Social Sciences Review - Strengthening social work services in the health sectors of Low- and Middle-Income Countries: Taking lessons from social work actions/inactions in Covid-19 response in Nigeria

<https://journals.whitingbirch.net/index.php/SWSSR/article/view/2194>

By Prince Agwu et al.

HP&P - Coordinating external assistance for UHC: Pakistan's early experience of the SDG3 GAP

<https://academic.oup.com/heapol/advance-article-abstract/doi/10.1093/heapol/czad105/7425825?redirectedFrom=fulltext>

By Faraz Khalid et al.

HP&P - Health Reform in Nigeria: The Politics of Primary Health Care and Universal Health Coverage

<https://academic.oup.com/heapol/advance-article/doi/10.1093/heapol/czad107/7426850?searchresult=1>

By Kevin Croke et al.

ISPOR - Estimation of Societal Values of Health States Preferences at the National Level for Low- and Middle-Income Countries

Oscar Espinosa et al; [https://www.valuehealthregionalissues.com/article/S2212-1099\(23\)00068-7/fulltext?utm_source=substack&utm_medium=email](https://www.valuehealthregionalissues.com/article/S2212-1099(23)00068-7/fulltext?utm_source=substack&utm_medium=email)

“A **systematic review** of studies that estimated nationally representative health states preferences values for LMICs identified 35 studies from 19 countries (all middle income), most of which used the Eq-5D instrument. “

Pandemic preparedness & response/ Global Health Security

Guardian - WHO requests details about respiratory illness clusters in parts of China

<https://www.theguardian.com/world/2023/nov/23/china-respiratory-illness-spike-children-who>

“Epidemiologists say wave in north, particularly among children, may be partly caused by ‘immunity debt’.”

- See also FT - [WHO asks China for data on ‘undiagnosed pneumonia’ cases](#)

“Health body’s concern reflects heightened vigilance over signs of disease outbreaks since Covid pandemic.”

“... The **WHO’s data request, made under the International Health Regulations mechanism**, reflects a **focus on prompt investigation of possible respiratory illness surges** after Covid spread from China in late 2019 to cause a global health crisis. The UN health agency said it was unclear whether the latest reported problems in children were associated with an overall increase in respiratory infections cited by the Chinese authorities or separate events. The WHO had requested additional epidemiologic and clinical information, as well as laboratory results from the reported clusters among children, the body said late on Wednesday. It has also asked for data on trends in the circulation of known respiratory illness pathogens, as well as making contact with clinicians and scientists.”

- Guardian - [China supplies data to WHO about clusters of respiratory illness](#)

“Chinese health authorities have provided the requested data on an increase in respiratory illnesses and reported clusters of pneumonia in children, and have not detected any unusual or novel pathogens, the World Health Organization (WHO) said on Thursday....”

JAMA (Forum) - A Historic Moment in Global Health—“Futureproofing” the World Against Pandemics

L Gostin et al; <https://jamanetwork.com/journals/jama-health-forum/fullarticle/2812246>

“Here are **5 fundamental reforms to futureproof the world against pandemics....**”: “Facilitate Sharing of Research Findings and Scientific Data; Promoting Equitable Investment in Technology and Innovation; Financing for Prevention and Response; Mechanisms to Ensure Compliance and Accountability; Adopting a One Health Approach.”

“... **If these 5 reforms succeed in the Geneva negotiations**, the world would be far better prepared to detect, report, and respond to novel outbreaks. ... “

GHF - Want to Boost Regional Vaccine Manufacturing? Let Countries Prioritize, Ensure Tech Transfer

https://genevahealthfiles.substack.com/p/boost-regional-vaccine-manufacturing-pandemic-ip?utm_campaign=email-post&r=97mey&utm_source=substack&utm_medium=email

Wide ranging analysis of the current state of affairs by **A Britto**.

Lancet GH (Comment) - Where there is a will, there is a way: independent assessment of member state compliance with the pandemic agreement

Susanna Lehtimäki, N Schwalbe et al; [https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(23\)00515-6/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(23)00515-6/fulltext)

“**On Oct 16, the world got its first glimpse of the complete draft negotiating text of the proposed pandemic agreement** aimed at improving collective pandemic prevention, preparedness, and response. This is a **crucial juncture in the 2-year negotiations** and for the fate of the agreement as the Intergovernmental Negotiating Body pushes to present the final outcome in May, 2024, at the World Health Assembly. **From the text, it's clear there remains work to be done.** Whether countries can find common ground on building resilient health systems, strengthening surveillance, benefits sharing, and ensuring equitable access to pandemic countermeasures, among many other issues, will go a long way in determining how ambitious the pact ends up being. **But there is also a notable absence of commitment to an element essential to the agreement's success: an independent accountability mechanism designed to promote compliance with the agreement....**”

“... **The good news is that creating an independent monitoring committee is feasible, viable, and achievable if there is political will to put it in place.** Existing treaties, from human rights to the prohibition of chemical weapons, offer a guide for how to go about constructing such a mechanism...”

They conclude: “...Enshrining these principles of independence and building on existing treaty monitoring mechanisms provides a baseline starting point for developing a term of reference for what an implementation and compliance committee could and should look like for a pandemic agreement. In other words, **there is a clear way forward on codifying compliance and accountability—what is needed now is the will to make it a reality.**”

Globalization & Health - Examining the militarised hierarchy of Sierra Leone's Ebola response and implications for decision making during public health emergencies

<https://globalizationandhealth.biomedcentral.com/articles/10.1186/s12992-023-00995-w>

By S T Boland, S Mayhew et al.

Telegraph - Inside one of the world's deadliest forests – and the bushmeat hunters risking contagion

[Telegraph;](#)

“Ebola, Marburg and never-before-seen infections are spilling over into Guinea’s hunter communities. Scientists fear biological catastrophe.”

Planetary health

Nature (Editorial) - ‘Loss and damage’ — the most controversial words in climate finance today

<https://www.nature.com/articles/d41586-023-03615-0>

“Crucial talks on how richer countries should compensate poorer countries for the effects of climate-related extreme weather are stuck. **The COP28 climate summit must make a breakthrough.**”

This week’s Nature issue features some proposals in this respect.

Climate Change News - France, Kenya set to launch Cop28 coalition for global taxes to fund climate action

[Climate Change News;](#)

“The taskforce, set to be launched at Cop28, will consider the feasibility of levies on shipping, aviation, financial transactions and fossil fuels.”

“... **Taxes on fossil fuel extraction and the emissions of the shipping industry could raise up to \$210 billion and \$60 billion a year respectively, according to a [recent study](#) by Climate Action Network and the European Commission.** Macron found a crucial ally in Kenya’s President William Ruto, who put the issue on the agenda at the **African climate summit in Nairobi in September**.... That summit’s final statement [floated](#) the **idea of a global carbon taxation regime**, formed by levies on fossil fuel trade, maritime transport and aviation, and potentially “augmented” by a global financial transaction tax (FTT)....”

Guardian - Companies still investing too much in fossil fuels, global energy watchdog says

<https://www.theguardian.com/business/2023/nov/23/companies-still-investing-too-much-in-fossil-fuels-global-energy-watchdog-says>

“Head of International Energy Agency says the industry faces a ‘moment of truth’ as Cop28 talks approach.”

“Fossil fuel companies are investing twice as much in oil and gas as they should if the world hopes to limit rising global temperatures to avert a climate catastrophe, according to the International Energy Agency (IEA). The world’s energy watchdog said that the sector still had “minimal” engagement with the global clean energy transition, and continued to contribute just 1% of clean energy investment globally.”

“In a special report before the [Cop28 climate talks](#) in Dubai, which begin on 30 November, the agency called on the oil and gas industry to show commitment to tackling pollution by balancing its investments in clean energy and fossil fuels...”

Guardian - Solar energy could power all health facilities in poorer countries and save lives, experts say

[Guardian](#);

“Move would cost less than \$5bn and cut toll of deaths from power outages and lack of supply, Cop28 delegates will hear.”

Nature (News) – Record-breaking heat set to hit southern hemisphere as summer begins

[Nature](#);

“The northern hemisphere experienced a sweltering summer due to climate and meteorological patterns. Scientists say the south will not escape.”

“ The Southern Hemisphere is facing a summer of record-high temperatures and extreme weather, following on from a record-breaking summer in the Northern Hemisphere. Powerful oceanic patterns — including El Niño in the Pacific Ocean and a positive Indian Ocean Dipole — could deliver a mix of heatwaves and drought in some places, and increased rainfall and floods in others. In 2019 and 2020, the same combination of climatic drivers contributed to unprecedented and catastrophic wildfires in Australia. And worse might be to come: the biggest impact of El Niño is likely to be felt in the summers of 2024–25.”

World Bank - Within Reach: Navigating the Political Economy of Decarbonization

https://www.worldbank.org/en/topic/climatechange/publication/within-reach-navigating-the-political-economy-of-decarbonization?cid=ECR TT_worldbank_EN_EXT

“How is it possible that despite multiple pledges and commitments, rapid progress in key technologies, and the implementation of more than 4,500 climate policies, the world is not on track to meet the objectives of the Paris Agreement? **"Within Reach: Navigating the Political Economy of Decarbonization"** discusses **within-country political economy as a key barrier to progress**. It shows that the **political economy is dynamic** and that it can be changed to achieve impactful climate action. To do this, **the book unpacks four dimensions which hold the key for translating ambition into climate action—climate governance, policy sequencing, policy design, and policy process**—and it is rich with examples of what has worked and how.”

Lancet Comment - Seeding a planetary health education revolution: institutional sign-on challenge

C Howard et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(23\)02526-6/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)02526-6/fulltext)

“... It is time for a global planetary health education revolution to equip the health sector to treat the Code Red Emergency we face. **The Academic Health Institutions' Declaration on Planetary Health**, signed by individuals (including authors of this Comment), universities, and health organisations from around the world, was announced at the International Conference on Academic Medicine in April, 2023. **This declaration commits signatories to adopt a planetary health lens in their education, research, policy, and advocacy, collaborating with other disciplines to de-silo efforts and lead work to implement solutions.** The Declaration includes **pledges to work on climate-resilient, low-carbon health systems; to incorporate Indigenous Traditional Knowledges and ways of knowing in order to benefit from community-based, land-informed information that centres the connection between humans and ecosystems, led and informed by Indigenous Peoples; to divest from fossil fuels; and to endorse the call for a fossil fuel non-proliferation treaty....”**

Economist – Solar geoengineering is becoming a respectable idea

<https://www.economist.com/science-and-technology/2023/11/22/solar-geoengineering-is-becoming-a-respectable-idea>

Analysis of the state of affairs re solar geoengineering, including among policy makers.

Quote: “...Since the start of this year, solar geoengineering, sometimes known as solar radiation modification (SRM), has been the whole or partial focus of reports published by the European Commission and Parliament, America’s government, the Climate Oversight Commission (COC; a collection of global bigwigs and worthies), and four separate bits of the UN. **A common thread in all of them was that, given the world’s failure to cut greenhouse-gas emissions fast enough, the risks and benefits of SRM should be properly examined....”**

HPW - Air Pollution Crisis Looms Over Africa’s Expanding Cities

<https://healthpolicy-watch.news/air-pollution-crisis-looms-over-africas-expanding-cities/>

“Africa’s soaring economic and demographic growth, driven by rapidly expanding cities, is on a collision course with a looming air pollution crisis, according to a **new Clean Air Fund report** released Thursday. ...”

“...The study zeroes in on **six major and rapidly expanding African cities—Accra, Cairo, Johannesburg, Lagos, Nairobi, and Yaoundé. ...**”

“The report also highlights the startling lack of international and multilateral development funding to fight air pollution in Africa. Despite the rising crisis, only 5% of total aid is directed at reducing air pollution on the continent....”

Covid

NYT – Omicron, now two years old, is not done with us yet

<https://www.nytimes.com/2023/11/21/science/covid-omicron-variant.html>

It’s staggeringly infectious, as well as an evolutionary marvel.

BMJ Editorial - Does timely vaccination help prevent post-viral conditions?

<https://www.bmj.com/content/383/bmj.p2633>

“Incidence of post-covid-19 condition is substantially reduced among vaccinated adults.”

Mpox

Tweets Kai Kupferschmidt

Re WHO - [Mpox \(monkeypox\)- Democratic Republic of the Congo](#)

“The ongoing and rapidly expanding outbreak of mpox in DRC is concerning for many reasons incl.: It’s clade I MPXV (different from clade II causing global outbreak) First time sexual transmission has been documented for clade I MPXV; First time spreading in Kinshasa.”

““These new reports of human-to-human transmission of mpox in a large urban area such as Kinshasa clearly illustrate that the epidemiology of mpox in the Democratic Republic of the Congo is changing... The risk of mpox further spreading to neighbouring countries and worldwide appears to be significant””

Infectious diseases & NTDs

Devex – The key to overcoming the dual burden of TB and HIV

<https://www.devex.com/news/the-key-to-overcoming-the-dual-burden-of-tb-and-hiv-106569>

“Tuberculosis is the leading cause of death among people with HIV, so **better integrating care for the two diseases is seen as crucial to ending TB.**” Among others, re some **MSF projects.**

Lancet Infectious Diseases - Shifting targets: typhoid's transformation from an environmental to a vaccine-preventable disease, 1940–2019

[https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(23\)00500-5/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(23)00500-5/fulltext)

By Emily Webster et al.

Nature (News) - Polio is on the brink of eradication. Here's how to keep it from coming back

<https://www.nature.com/articles/d41586-023-03602-5>

“The campaign to eradicate polio **could succeed** in the next few years. But **that’s just the beginning of a new challenge — keeping it away.**”

“... **Although the world has not yet eliminated poliovirus, many observers think it could be gone within three years.** The polio-eradication campaign has increased its intensity and funding in the past year in the hope of finally meeting a deadline that’s been postponed many times since efforts were launched in 1988. **The front lines are Afghanistan and Pakistan, where pockets of wild polio persist but are shrinking** (see ‘Wild polio tamed’), **and a swathe of Africa, where a polio vaccine that includes live virus has itself seeded outbreaks.** There are signs that health campaigns are now bringing these vaccine-derived episodes under control...”

“...The final steps towards eradication are formidable, and it’s not clear when — or whether — nations will reach this goal. **Nonetheless, with the demise of the virus in sight, health authorities are planning what happens next.** That’s because eradication is not extinction. Polio could lurk in testing labs and manufacturing facilities — from which it has leaked in the past — and even in some people. **The end of polio is only the beginning of another effort: developing the resilience to keep it away, says Liam Donaldson, a public-health specialist at the London School of Hygiene & Tropical Medicine, UK, and the lead author of a series of independent reports on the campaign’s progress...**”

Read on to see what this might entail.

“...In rare cases, the oral poliovirus vaccine can itself seed a polio outbreak. But withdrawing that vaccine will leave people unprotected. The inactivated poliovirus vaccine doesn’t have the same flaw, but it doesn’t block transmission, so a broad vaccination programme would have to continue. And we will have to be sure that polio can never escape from a research institute or vaccine-

manufacturing facility. Finally, a very tiny — but unknown — number of people have immune-deficiency disorders that mean they can carry and spread polio without knowing it, for years...”

Telegraph - ‘Super mosquito’ driving malaria surge in Africa, study confirms

<https://www.telegraph.co.uk/global-health/science-and-disease/asian-super-mosquito-driving-malaria-surge-in-africa/>

“Scientists tracking an outbreak in Ethiopia found the ‘strongest evidence yet’ that the *Anopheles stephensi* is behind rising cases.”

“... in a **new report, published in *Nature Medicine***, researchers tracked a specific outbreak in a university campus in Dire Dawa – a city in eastern Ethiopia, less than 150 miles from the border with Djibouti – and **found the “strongest evidence to date” that the *stephensi* mosquito is driving urban malaria outbreaks in Africa....”**

Guardian - Cheap fungal nail infection drug found to work on crippling flesh-eating disease

<https://www.theguardian.com/global-development/2023/nov/23/fungal-nail-drug-fosravuconazole-breakthrough-treating-neglected-flesheating-disease-mycetoma>

“‘Momentous’ breakthrough in treating neglected tropical disease as trial finds *fosravuconazole* to be highly effective for *mycetoma*.”

“...Results of the first clinical trial for a new treatment for mycetoma, which took place in [Sudan](#), have shown that the oral drug *fosravuconazole* is up to 85% effective and has no side-effects.....”

NCDs

Reuters - COVID-19 slowed global progress in tobacco control - report

[Reuters](#);

“Global progress in policies to reduce tobacco use slowed for the first time in 12 years following the outbreak of the COVID-19 pandemic, according to analysis published on Wednesday by the Global Tobacco Control Progress Hub, which warned millions of people worldwide likely continued to smoke as a result. The hub, a collaboration between the non-profit Action on Smoking and Health (ASH) Canada and the John Hopkins Bloomberg School of Public Health, tracks the enactment of the World Health Organization's (WHO) Framework Convention on Tobacco Control, a global treaty aimed at reducing smoking.”

“It found that **between 2020 and 2022, there was a slowdown in the implementation of six of the treaty's core, high-impact measures**, including tax increases, advertising and promotion bans and rules prohibiting smoking in public places.The **biggest declines were registered in low-income countries, and particularly in the eastern Mediterranean and south east Asian regions**, the hub said.....”

Annals of Global Health - Efforts to Address the Burden of Non-Communicable Diseases Need Local Evidence and Shared Lessons from High-Burden Countries

J E Ngowi et al ; <https://annalsofglobalhealth.org/articles/10.5334/aogh.4118>

Editorial from a **new Series**.

“... This series presents efforts by countries facing epidemiological transition with the surge of NCDs amid the persistent burden of communicable diseases. The majority of these countries are in low and middle-income brackets. Such countries are making various efforts to contain the unprecedented burden, drawing several lessons from one another in reaching epidemiological control. Some of the initiatives presented in this series are unique and can be adopted with modifications to suit other countries or regions with similar contexts....” Among others, with **three papers on Tanzania.**

BMJ GH - Strengthening evidence to inform health systems: opportunities for the WHO and partners to accelerate progress on non-communicable diseases

A Hyder et al ; <https://gh.bmj.com/content/8/11/e013994>

« **The World Health Assembly endorsed the Global Action Plan for the Prevention and Control of Non-Communicable Diseases (NCDs) 2013–2020 (NCD-GAP), now extended to 2030.** An evaluation of the NCD-GAP, published in 2020, found that **research has been the weakest NCD-GAP objective in terms of implementation.** »

« **Implementation research, aligned with NCD-GAP,** offers a pathway to accelerate progress in scaling cost-effective NCD interventions, demanding collaboration, stakeholder engagement, capacity strengthening and financial investment. **A renewed research agenda for NCDs is needed to answer the important research questions for resource-limited settings.** These often relate to the social and commercial determinants of health, prevention of shared risk factors or management within the broader health system and how to implement integrated strategies at the primary healthcare level. **Contextualisation is imperative to translating knowledge into policy and impact.** **Research agendas should, therefore, be shaped by national and regional priorities.** »

BMJ - Sleep disorders are an overlooked risk factor for non-communicable diseases

<https://www.bmj.com/content/383/bmj.p2721>

“Ignoring sleep disorders will prevent countries from reaching the sustainable development goal to reduce premature mortality from non-communicable diseases by 2023, write **Mark Thomaz Ugliara Barone and colleagues.**”

Nature Food - Life expectancy can increase by up to 10 years following sustained shifts towards healthier diets in the United Kingdom

Lars T. Fadnes et al ; <https://www.nature.com/articles/s43016-023-00868-w>

« ... Adherence to healthy dietary patterns can prevent the development of non-communicable diseases and affect life expectancy. Here, using a prospective population-based cohort data from the UK Biobank, **we show that sustained dietary change from unhealthy dietary patterns to the Eatwell Guide dietary recommendations is associated with 8.9 and 8.6 years gain in life expectancy for 40-year-old males and females, respectively.** In the same population, sustained dietary change from unhealthy to longevity-associated dietary patterns is associated with 10.8 and 10.4 years gain in life expectancy in males and females, respectively. The largest gains are obtained from consuming more whole grains, nuts and fruits and less sugar-sweetened beverages and processed meats...”

Lancet World Report - Colombia introduces junk food tax

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(23\)02628-4/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)02628-4/fulltext)

“The country is one of the first to tax food high in salt and saturated fat to reduce obesity and other diseases. Joe Parkin Daniels reports from Bogotá.”

Mental health & psycho-social wellbeing

Lancet Psychiatry - The WHO Mental Health Gap Action Programme for mental, neurological, and substance use conditions: the new and updated guideline recommendations

E Brohan et al; [https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366\(23\)00370-X/fulltext](https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(23)00370-X/fulltext)

“The WHO Mental Health Gap Action Programme (mhGAP) guideline update reflects 15 years of investment in reducing the treatment gap and scaling up care for people with mental, neurological, and substance use (MNS) conditions. It was produced by a guideline development group and steering group, with support from topic experts, using quantitative and qualitative evidence and a systematic review of use of mhGAP. 90 recommendations from the 2015 guideline update were validated and endorsed for use in their current format. These are joined by 30 revised recommendations and 18 new recommendations, including a new module on anxiety. Psychological interventions are emphasised as treatments and digitally delivered interventions feature across many modules, as well as updated recommendations for psychotropic medicines. Research gaps identified include the need for evidence from low-resource settings and on the views of people with lived experience of MNS conditions.”

- Related link: WHO - [WHO issues new and updated recommendations on treatment of mental, neurological and substance use conditions](#)

BMC Health Services Research - Understanding the mix of services for mental health care in urban DR Congo: a qualitative descriptive study

E M Mayoyo, F Chenge et al ; <https://pubmed.ncbi.nlm.nih.gov/37925407/>

“Mental health workers (MHWs) are exposed to conflicts of competence daily when performing tasks related to the provision of mental health services. This may be linked to a lack of understanding of their tasks as caregivers and providers. Furthermore, in most low-income settings, it is unclear how the available services are organized and coordinated to provide mental health care. To understand the above, **this study aimed to identify the current mix of services for mental health care in the urban Democratic Republic of the Congo (DRC).**”

SS&M - Experiences of loneliness in lower- and middle-income countries: A systematic review of qualitative studies

S C. Akhter-Khan a et al; <https://www.sciencedirect.com/science/article/pii/S0277953623007955>

“... **Common features of loneliness** included rejection, overthinking, and pain. Loneliness was related to depression across regions. Whereas loneliness tended to be distinguished from social isolation in studies from Africa, it tended to be related with being alone in studies from Asia. Poverty and stigma were common barriers to fulfilling social relationship expectations. **This review illustrates how loneliness and expectations are contextually embedded, with some expectations possibly being specific to a certain culture or life stage,** having implications for assessment of and interventions for loneliness worldwide.....”

Social & commercial determinants of health

Health Promotion International (Editorial) - Harmful marketing by commercial actors and policy ideas from youth

Maria Soraghan, Sarah L Dalglish et al;

<https://academic.oup.com/heapro/article/38/6/daad149/7425361?login=false>

“...**Our research highlights how youth experiences and ideas can improve adults’ understanding of policy issues and solutions, however garnering children and young people’s meaningful participation can be challenging....** Yet there is growing momentum to include children in decision-making despite challenges in doing so in a representative, effective and safe manner (Forde et al., 2020). **Our experience suggests three practical lessons.**”

IJHPM - Introducing Critical Accounting for Governance as a Tool in Exploring the Commercial Determinants of Health

L Stevenson et al ;

https://www.ijhpm.com/article_4539.html?utm_source=dlvr.it&utm_medium=twitter

“... **We offer here an additional tool for future research efforts.** It has been argued that due to the pervasive nature, scale, and cumulative health effects of commercial actors, there is a need for wider, more interdisciplinary lenses in their study. **In their call for more CDoH research the WHO highlighted particular areas of need around “governance considerations, including transparency and accountability”, which we use as our departure point.** Taking as a focus the health effects of corporate power, particularly on employees through corporate governance, **the key objective here**

is to outline the relevance of critical accounting as a research tool for CDoH. Critical accounting examines corporate power in the contexts of social and environmental justice.....”

Sexual & Reproductive health rights

International Journal for Equity in Health - Evaluating equity across the continuum of care for maternal health services: analysis of national health surveys from 25 sub-Saharan African countries

<https://equityhealthj.biomedcentral.com/articles/10.1186/s12939-023-02047-6>

By F T Bobo et al.

Plos GPH – Influences on policy-formulation, decision-making, organisation and management for maternal, newborn and child health in Bangladesh, Ethiopia, Malawi and Uganda: The roles and legitimacy of a multi-country network

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0001742>

by K Akter et al.

Neonatal and child health

Plos Med - Burden of diarrhea and antibiotic use among children in low-resource settings preventable by *Shigella* vaccination: A simulation study

<https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1004271>

By S A Brennhofer et al.

Access to medicines & health technology

Devex - Why African pharmaceutical manufacturers struggle for sustainability

<https://www.devex.com/news/why-african-pharmaceutical-manufacturers-struggle-for-sustainability-106593>

(gated) “Africa imports most of the medicines its population uses. And while there is a huge need to scale up the pharmaceutical manufacturing sector, **companies that have worked to produce drugs locally have the odds stacked against them.**”

““We are not yet sustainable. We are surviving.” Those are the words of Palu Dhanani, managing director of **Universal Corporation, an African medicines manufacturer based in Kenya** that serves as a model for what the continent should have more of — **medicines produced in Africa, by Africans, for Africans. The company has passed World Health Organization assessments for ensuring the quality and safety** of producing medicines for diseases such as HIV and malaria **But the company is not making profits from its operations across the African continent.** As an example, it hasn’t received a single order for antiretroviral medicines over a decade since receiving WHO prequalification in 2011, and **remains reliant on donor support from entities such as the Global Fund, UNICEF, and USAID**, my colleague Sara Jerving reports. The **challenges** range from the lack of a Pan-African regulatory body that could harmonize and speed up the regulation process for medicines produced in the continent, to pricing. It’s expensive to run a facility, and it’s hard to compete with more established manufacturers outside of the continent that can offer cheaper drugs. It’s also hard to access financing.”

“But some things are changing. The African Union is setting up the African Medicines Agency in Rwanda, and several countries have taken steps to support local manufacturing in the continent. The Kenyan government, for example, has mandated a list of essential medicines the government must buy from local manufacturers. “It’s not an easy road, but we can get it done,” Pushpa Vijayaraghavan, a member of the governance board of the Medicines Patent Pool, said during the **Global Health Supply Chain Summit last week in Nairobi....”**

Devex - Opinion: What we can learn from USAID’s \$9.5B supply chain struggle

E Ojomo; <https://www.devex.com/news/opinion-what-we-can-learn-from-usaid-s-9-5b-supply-chain-struggle-106630>

“USAID’s \$9.5 billion health supply chain project failed in part due to a push strategy and lack of participation from local innovators. Future projects can avoid these mistakes.”

TGH - Turning Crisis Into Opportunity: Building Supply Chain Resilience in Africa

J Frazer et al; <https://www.thinkglobalhealth.org/article/turning-crisis-opportunity-building-supply-chain-resilience-africa>

“Absorbing the lessons of COVID-19 requires adopting a broader and longer-term perspective.”

Among others, re ... “... the **creation of the Africa Medical Supplies Platform (AMSP)** in response to medical supply chain shortages in 2020 caused by the COVID-19 pandemic. Funded by the African Export-Import Bank (Afreximbank) and run through the African Union by the Africa CDC, AMSP is an **e-commerce platform aimed at connecting medical suppliers with medical providers so that governments, national health systems, NGOs, and donor organizations can purchase necessary medical supplies, including N95 masks, test kits, and ventilators.** By January 2021, AMSP had begun implementing a vaccine procurement plan to minimize vaccine distribution inequities.....”

“.... **The Case for Local Manufacturing and Supply in Africa : Absorbing the lessons of COVID-19 requires adopting a broader and longer-term perspective that can justify the cost of realignment or establishing more resilient regional supply chains.** The COVID-19 critical market failure provides a window of opportunity for companies to reevaluate their manufacturing and sourcing

footprints. **Global health companies must address the COVID-19 exposed fragility of pharmaceutical supply chains.** They should also adopt a forward-looking approach that calculates the market opportunity on a continent projected to have 40 percent of the world's population by the turn of the century; under a unified market, creating the necessary economy of scale for local manufacturing; and in a region that has proven resilient to repeated global shocks. “

Politico - AI, drug development, and big, big bucks

[Politico](#); .

“A leading use case for artificial intelligence in health care is in the development of new drugs. Market researchers agree that **employing AI to develop drugs is nascent, but they expect it to grow fast.**”

« In a **new report**, the consulting firm MarketsandMarkets [predicts growth in revenue](#) related to AI's use in drug discovery to rise from \$0.9 billion this year to \$4.9 billion by 2028. Vantage Market Research [expects big growth](#), too: 24 percent a year to \$7.1 billion in 2030.....”

Human resources for health

WHO Bulletin -Health workforce data needed to minimize inequities associated with health worker migration

Margaret Walton-Roberts & Ivy L Bourgeault; https://cdn.who.int/media/docs/default-source/bulletin/online-first/blt.23.290028.pdf?sfvrsn=dbfa4cda_3

“A persistent challenge with health-worker migration is the inequities it creates. To minimize these inequities, systems of global governance of health-worker migration have arisen which include various global codes of practice, agreements and reporting requirements. Reporting that is rigorous, open and transparent, and subject to scrutiny from the public, researchers, civil society organizations and other interested stakeholders, is important. **One element of these codes and agreements with perhaps the greatest potential to deal with the impact of health-worker migration is more robust planning of the health workforce to address the goal of self-sufficiency. Open platforms for data sharing enable engagement of the public and stakeholders with data on the distribution and national origin of health workers and reveal policy strengths and weaknesses related to health-workforce planning. We explore recent policies directed at reducing the inequities from health-worker migration.** While many of the examples used focus on nurses and doctors, the issues discussed are relevant to all cadres of internationally trained health workers.”

Decolonize Global Health

Lancet Child & Adolescent Health - Ending epistemic exclusion: toward a truly global science and practice of early childhood development

Gabriel Scheidecker et al; [https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642\(23\)00292-4/fulltext](https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642(23)00292-4/fulltext)

“The science and practice of Early Childhood Development (ECD) rely heavily on research from the Euro-American middle class—a minority of the world's population—and research in or from the majority world is severely under-represented. This problem has been acknowledged in ECD, an applied field aiming to assess and improve child development globally, and in the related fields of global health and developmental sciences. Thus, **now is the time to search for effective pathways towards global representation.** To date, most calls for change within ECD and related fields have focused on various aspects of knowledge production and publication....”

BMJ GH - Global Health Mentorship: Challenges and Opportunities for Equitable Partnership

<https://gh.bmj.com/content/8/11/e013751>

By L E Bain et al.

Miscellaneous

Lancet Editorial - Drug decriminalisation: grounding policy in evidence

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(23\)02617-X/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)02617-X/fulltext)

“The Global Commission on Drug Policy's latest report, published ahead of World AIDS Day on Dec 1, describes decriminalisation of drug use as an essential precursor to ending HIV and viral hepatitis as public health threats. Since its formation in 2011 by political, economic, and cultural leaders, the Commission has advocated for decriminalisation as part of a rights-based approach to drug policy, rooted in scientific evidence and principles of public health, to minimise the harms arising from drug use. The [UN recognises criminalisation of drugs](#) as “proven to have negative health outcomes” and to “counter established public health evidence”; yet a disconnection between discourse and policy action persists. **National drug policies largely remain punitive; they are polarised, simplified, and based more on ideology than evidence.** According to the [Global State of Harm Reduction 2022 report](#), 115 of 128 included countries still criminalise drug use, and only 105 countries support harm reduction as an official policy. **Decriminalisation alone is, of course, not sufficient. In its report, the Commission emphasises the need to expand harm-reduction approaches alongside decriminalisation of personal drug possession and use.”**

Guardian - Rapists and kidnappers increasingly targeting migrants crossing Darién Gap

<https://www.theguardian.com/global-development/2023/nov/21/rapists-and-kidnappers-increasingly-targeting-migrants-crossing-darien-gap>

“As record numbers make the perilous journey between Colombia and Panama, **Médecins Sans Frontières is treating far more survivors of sexual violence, including children.**”

“**Armed bandits are exploiting the [record number of people crossing the Darién Gap](#) – a 100km stretch of jungle connecting Colombia and Panama – to kidnap and rape desperate migrants, according to Médecins Sans Frontières (MSF). The [organisation said](#) it treated **397 survivors of sexual violence this year – many of them children – once they safely reached Panama.** There have been reports of “group rapes in tents set up for that purpose in the mountainous rainforest and swampland”. **The number far exceeds the 172 recorded in 2022, and the charity says it is the latest example of how the suffering of migrants in the Darién is becoming normalised.** MSF is urging the Panama and Colombian authorities to deploy an effective security presence in the jungle to protect migrants.....”**

ODI - Navigating fragility: the new multilateral agenda (Briefing paper)

H P Lankes et al ;

<https://odi.org/en/publications/navigating-fragility-the-new-multilateral-agenda/>

“ODI and the International Growth Centre convened a **side event at the 2023 Annual Meetings of the International Monetary Fund and the World Bank Group in Marrakech, entitled ‘Navigating fragility: The new multilateral agenda’.** “

“The event was specifically focused on: (1) raising the profile and unpacking our understanding of fragility as a global public challenge; and (2) mapping out the ways in which multilateral development bank reform could be effectively designed to address issues of fragility. **This brief summarises key learnings from the event** and highlights the points that appeared to resonate most strongly with the participants....”

Papers & reports

WHO _ United Nations agencies launch first report on the Decade of Healthy Ageing, 2021-2030

<https://www.who.int/news/item/22-11-2023-united-nations-agencies-launch-first-report-on-the-decade-of-healthy-ageing--2021-2030>

“**WHO and UN partners have launched the first [UN Decade of Healthy Ageing progress report](#), which charts efforts to improve the lives of older people since 2020, capturing the impact of major challenges such as the COVID-19 pandemic, during which over 80% of deaths were among over 60-year-olds. The report also highlights activities in support of healthy ageing in nearly 50 countries.**”

“The report features results from a survey of 136 countries, conducted between late 2022 and early 2023, and notes the areas of greatest progress, by comparing with a previous survey from 2020. This comparison showed **an over 20% increase in the number of countries reporting: legislation against ageism, legislation to support older people’s access to assistive products; national policies on comprehensive assessments of health and social care needs of ageing populations; and national programmes for age-friendly cities and communities.**”

“Despite this progress, further efforts are needed as the Decade – which runs from 2021 to 2030 – continues. The report highlights that **less than a third of countries reported having adequate resources to deliver on the UN Decade’s four areas of action:** changing how people think, feel and act about age and ageing; ensuring communities foster the abilities of older people; delivering person-centred, integrated care and primary health services responsive to older people; and providing access to long-term care for older people in need....”

IJHPM - Doing Health Policy Analysis: The Enduring Relevance of Simple Models; Comment on “Modelling the Health Policy process: One Size Fits All or Horses for Courses”

L Gilson & G Walt ; https://www.ijhpm.com/article_4537.html

“The analysis of health policy processes in low and middle income countries (LMICs) emerged as a research area in the early 1990s. **In their recent editorial Powell and Mannion (2023) argue that such research can be deepened by applying public policy theory.** In response, **we raise three questions to consider:** are public policy models fit for purpose in today’s world in LMICs (and what other theory can be used)? is using theory the most important factor in deepening such research? why do we, as researchers, do this work? **Ultimately, we argue that the value of simple models, such as those already used in health policy analysis, lies in their enduring relevance and widespread use. They are supporting the development of the shared understandings that can, in turn, provide the basis for collective action addressing inequities in health and well-being.**”

HP&P (Supplement) – Health Equity: Access to services and caring for underserved populations

https://academic.oup.com/heapol/issue/38/Supplement_2

Start with the **Editorial by M Lazo-Porrás et al - [Health equity: access to quality services and caring for underserved populations](#)**

“..... This editorial serves to present this journal issue that includes the articles of young women from low- and middle-income countries. Different methodologies are used to demonstrate the problem of access to quality services and care in a comprehensive way....”

International Journal for Equity in Health - Assessing the interactions of people and policy-makers in social participation for health: an inventory of participatory governance measures from a rapid systematic literature review

<https://equityhealthj.biomedcentral.com/articles/10.1186/s12939-023-01918-2>

By Prateek Gupta et al.

Global Health: Science & Practice - Many Cooks in the Kitchen: Iterating a Qualitative Analysis Process Across Multiple Countries, Sites, and Teams

L Suchman, P Waiswa et al ; <https://www.ghspjournal.org/content/early/2023/11/15/GHSP-D-23-00143>

“The authors propose a model for multinational modified grounded theory studies and describe their team’s process of collaborating and adapting the model to allow for local needs across countries.”

Lancet Comment – Prevention, healing, and justice: a survivor-centred framework for ending violence against women and children

D Ligiero et al ; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(23\)02518-7/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)02518-7/fulltext)

« **Several frameworks have sought to tackle the complex issues surrounding violence against women and children.** Among the internationally accepted global frameworks, **the central concepts of prevention and response have guided actions against both forms of violence.** However, **this approach falls short in crucial ways.** Although prevention aligns with the goal of eliminating violence, which we wholeheartedly support, the concept of response does not offer sufficient guidance for advocates and policy makers or comprehensively address the multifaceted, often enduring, needs of survivors, their families, and communities. **The global [Brave Movement](#), which was launched in 2022, builds on the work of survivor advocates and puts forward a new, comprehensive framework for action that encompasses prevention, healing, and justice. ...”**

And a link:

- SS&M – [We're implementing AI now, so why not ask us what to do? – How AI providers perceive and navigate the spread of diagnostic AI in complex healthcare systems](#) (by S Gillner)

Blogs & op-eds

The Conversation - Development aid cuts will hit fragile countries hard, could fuel violent conflict

P Justino et al; https://theconversation.com/development-aid-cuts-will-hit-fragile-countries-hard-could-fuel-violent-conflict-215914?utm_source=twitter&utm_medium=bylinetwitterbutton

« **Fragile and least developed countries have had their development assistance cut drastically, according to the Organisation for Economic Co-operation and Development.** For instance, net official development assistance to sub-Saharan African countries has shrunk by 7.8% compared to 2021. And development aid for peace and conflict prevention has declined to its lowest in 15 years. **These cuts will hit fragile countries hard. Fragile countries make up 24% of the world's population and account for 73% of the world's extreme poor.** The list includes Mali, Lebanon, Somalia, Syria and Iraq....”

Tweets (via X & Bluesky)

Empowering South

“Without a decision, @WHO #INB Bureau says their proposal is the default text of the new #PandemicAccord and treats it differently from Member State's text proposals. Excerpt from a leaked email reveals dishonesty in negotiations? “

Victoria Fan

“Each degree increase in global temp means an additional 1 billion in climate refugees,” Jeremy Rifkin, noting the nowness of climate passports, climate pop-up cities, at World Health City Forum <https://worldhealthcityforum.org> #Korea #WHCF.”

Jayati Ghosh

(re the Global tax justice vote from Wednesday) “Happy to learn that the vote on the convention has PASSED! **The rich country governments voting against this motion have shown that they are on the wrong side of history--and on the side of the rich and big corporations rather than their own people.**”