

IHP news 770 : Sometimes it snows in April ... global health (or is it Global Health?) events

(12 April 2024)

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,

In this newsletter issue, we first briefly come back on **World Health Day** (7 April) (with the ultra-dire situation in Gaza prominent in WHO messaging, among others [via Tedros himself](#)), and then also zoom in on **a number of global health related meetings**, among others, the **5th People's Health Assembly** in Mar del Plata (7-11 April) (*while dengue is raging in Argentina, we hear*); **The WomenLift conference** in Dar es Salaam, Tanzania (6-8 April); and a **G20 Health Working Group meeting** in Brasília (9 April). As is our habit, we also keep an eye out on various global health stakeholders, whether it's the **Pandemic Fund** (*which held a **board meeting**, again shrewdly [positioning itself](#) vs the ongoing PPPR discussions in Geneva*), **GAVI-reform related discussions** (*ahead of the replenishment in June*), **IMF/WB** (*with the annual [Spring meetings](#) upon us, also including [the annual Health Financing Forum](#)*), ...

We also already flag an **upcoming regional World Health Summit**, in Melbourne (22-24 April), with focus on [advancing indigenous people's rights and wellbeing](#) and **two must-read reports/collections** from this week: **WHO's 2024 Global hepatitis report** and a **BMJ Collection on Healthier Societies for Healthier Populations** (done in partnership with the Alliance for Health Policy and Systems Research). The latter lists among others [10 key policies & interventions](#) for our times.

The agonizingly slow journey towards 'Healthy societies' brings us almost effortlessly to one of the more upbeat news items of the week, on **planetary health** more in particular: Tuesday's **landmark ruling by the European court of human rights** arguing that 'Weak government climate policies violate fundamental human rights'. It was the first ruling by an international court in this respect, and a win for a number of elderly Swiss women (**KlimaSeniorinnen**) who had taken the initiative. It's remarkable by the way that it's citizens and activists who are going to court for climate litigation, not the global health institutes in Geneva (*nor in my country, for that matter...*), or planetary health institutes from Ivy League universities.... Although not everybody is convinced of this being the right approach, they have my full support. Indeed, as the World Bank will again ponder its '**livable planet**' framework in the coming ten days or so, it's increasingly clear that "**World War III**" **has already started**. While arguably there's some stiff competition in that respect these days, WW III is the one we're currently waging with our own home, the planet. Yes, you gotta be as dumb as Sapiens to start war with your own home – "thanks to" our global economic system. And I say this fully cognizant of the fact that in public health, we are usually reluctant to use the 'war' metaphor, and that also this war clearly has its own 'Putins'. The global challenge of a systemic transformation towards a more sustainable (and thus also fairer) economic system will in my opinion characterize the 21st century like WWI, II and the Cold War did for the 20th. In this war, the KlimaSeniorinnen won a vital **battle** this week. Nevertheless, for the time being, it still feels more like 1938/39 than 1944...

Enjoy your reading.

Kristof Decoster

Featured Article

Value of partnerships, evidence and dialogue in increasing access to post-abortion care in Pakistan

As a reminder: The IHP newsletter will be publishing a selection of stories from the [WHO & UNFPA SRHR-UHC Learning by Sharing Portal](#) over the coming months. The stories showcase experiences of implementing policies and programmes relating to sexual and reproductive health and rights and universal health coverage in a range of countries and the lessons learned. This is [the second story](#) in the series.

60 SECOND SUMMARY

Unsafe abortions account for 6–13% of maternal deaths in Pakistan. The amended Pakistan Penal Code allows for abortion. Against a context of wider universal health coverage (UHC) reforms including devolution of policy-making and implementation to the provincial level, the Punjab Reproductive Health Technology Assessment Committee recommended inclusion of misoprostol and a manual vacuum aspirator in the Essential Package of Health Services for safe uterine evacuation and post-abortion care including post-abortion contraception. This was achieved through strengthening partnerships and dialogue among government, health professional associations, networks and civil society and using evidence on maternal deaths arising from unsafe abortions to advocate for policy and programmatic change.

SEXUAL AND REPRODUCTIVE HEALTH & RIGHTS CHALLENGE

In Pakistan, women and girls have limited access to contraceptives, contributing to 2.2 million abortions recorded in the country annually. Unsafe abortions account for 6–13% of maternal deaths in Pakistan. Before 1990, abortion in Pakistan was a punishable crime except in instances where it was a lifesaving measure. The Government amended the Pakistan Penal Code to allow abortion in cases of necessity up to 12 weeks. Providing post abortion care is important in meeting women and girls' SRH needs within the universal health coverage (UHC) agenda.

INTERVENTION

In 2011, the Ministry of Health devolved policy-making and implementation to the provincial level. Ipas Pakistan – an international nongovernmental organization (NGO) – implemented its advocacy efforts at a provincial level in Punjab. It engaged and worked with professional associations, such as the Society of Obstetricians and Gynaecologists of Pakistan (SOGP), College of Physicians and Surgeons of Pakistan (CPSP), and Midwifery Association of Pakistan (MAP) and collaborated with the Ministry of National Health Services, Regulations, and Coordination. In addition, the Punjab Reproductive Health Technology Assessment Committee (PRHTAC) brought together key experts to provide guidance on best practices and post abortion services.

Civil society organizations (CSOs) used the latest clinical evidence to shape Pakistan’s commitment towards post abortion care, including introducing use of uterine evacuation (UE) technologies in the Essential Package of Health Services (EPHS) at both provincial and national levels. Ipas Pakistan also worked with the Pakistan Nursing Council and SOGP to strengthen the national midwifery curriculum with a focus on post abortion services.

Ipas Pakistan held values clarification workshops to ensure the respectful treatment of women and to strengthen the quality of post abortion services. In partnership with the Pakistan Alliance for Post-Abortion Care – a coalition of NGOs and government and United Nations agencies – it developed the Service Delivery Standards and Guidelines for High-Quality Safe Uterine Evacuation and Post Abortion Care and a quality assurance tool.

OUTCOMES

Success

CSOs together with the Government played a central role in raising stakeholder awareness and support for post abortion care. Factors that helped to improve decision-makers’ attitudes towards abortion included partnerships between government stakeholders and civil society, being open to dialogue on the issue of abortion, working within the confines of the evidence, and being sensitive to contexts. Through CSO efforts, the Punjab Reproductive Health Technology Assessment Committee recommended inclusion of misoprostol and manual vacuum aspiration (MVA) in the EPHS for safe UE and post abortion care including post-abortion contraception.

By 2015, the Department of Health in Punjab had procured 10 million misoprostol pills with the Government’s budget. In 2016, the Drug Regulatory Authority of Pakistan included misoprostol on the National Essential Medicines List for UE or PAC. CSOs in partnership with Government trained mid-level providers in MVA.

LESSONS

Integrating SRH services such as post abortion care into the EPHS will ensure the provision of post abortion services in the long-term and will expand coverage.

There is value in multi-sectoral efforts including partnerships between civil society and governments in advancing SRHR and UHC.

The utilization of the evidence which indicates that unsafe abortion results in dire health consequences such as high levels of maternal mortality was useful in shaping the current progress on post abortion care in Pakistan.

It is important to ensure that a wide range of stakeholders are included in UHC processes, specifically health professional associations/ networks such as SOGP, CPSP and MAP given their critical role in the provision of SRH services.

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Main Source:

Monga T, Bajracharya M, Aziz H, Sherpa LY, Shaikh I, Shabbir, G, et al. Increasing safe abortion access through universal health care: promising signs from Nepal and Pakistan. *Sex Reprod Health Matters*. 2020;28(2):1763008. doi:10.1080/26410397.2020.1763008.

Other sources:

Sathar Z, Singh S, Rashida G, et al. Induced abortions and unintended pregnancies in Pakistan. *Stud Fam Plann*. 2014. 45(4):471–491

Highlights of the week

The read of the week

Journal of Critical Public Health (Commentary) – Divorcing Global Health from global health: heuristics for the future of a social organization and an idea

https://twitter.com/d_krugman/status/1778485672434659748

See the **abstract via X**. (the [link](#) didn't work anymore when I checked it, but will soon be fine again, I guess – part of the first issue of this new journal).

World Health Day (7 April)

HPW - On World Health Day, WHO Director General Decries Gaza Hospital Destruction, Blaming Israel

<https://healthpolicy-watch.news/on-world-health-day-who-director-general-decries-gaza-hospital-destruction-blaming-israel/>

“Speaking out on [World Health Day](#), WHO Director General Dr Tedros Adhanom Ghebreyesus [decried the destruction](#) of Gaza’s Al-Shifa hospital and blamed Israel for the devastation, saying that the “atrocities” of the Hamas attacks on Israeli communities 7 October, did not justify “the horrific ongoing bombardment, seige and health system demolition by Israel in Gaza.” “ He made his remarks Sunday, two days after the first WHO visit to Shifa Hospital following the 1 April withdrawal of Israeli forces from the hospital compound after a fierce two-week battle with Hamas forces in and around it.....”

WHO - WHO calls for action to uphold right to health amidst inaction, injustice and crises

<https://www.who.int/news/item/05-04-2024-who-calls-for-action-to-uphold-right-to-health-amidst-inaction--injustice-and-crisis>

“On the anniversary of its founding, the Organization urges countries to invest, tackle discrimination and intolerance, and expand equitable access to quality health services....” “ To mark World Health Day (7 April), the World Health Organization (WHO) is running the “My health, my right” campaign to champion [the right to health of everyone, everywhere](#). The campaign advocates for ensuring universal access to quality health services, education, and information, as well as safe drinking water, clean air, good nutrition, quality housing, decent working and environmental conditions, and freedom from discrimination.....”

PS: To expand coverage, an additional [US\\$ 200–328 billion a year is needed globally](#) to scale up primary health care in low- and middle-income countries (i.e. 3.3% of national forecast GDP). Progress has shown to be possible where there is political will. Since 2000, [42 countries, representing all regions and income levels, succeeded in improving both health service coverage and protection](#) against catastrophic health spending.”

People’s Dispatch - Over 800 public health experts sign letter to demand ceasefire in Gaza

<https://peoplesdispatch.org/2024/04/09/over-800-public-health-experts-sign-letter-to-demand-ceasefire-in-gaza/>

“The single most impactful public health intervention that could be implemented in Gaza today would be a cessation of hostilities,” write the health experts. “

“An open letter signed by over 800 public health experts decries the “public health catastrophe” created by Israel’s incessant attacks on Gaza. The letter was published on April 7, which marks

World Health Day, as well as the six-month anniversary of the Al-Aqsa Flood operation and the start of the Israeli genocide in Gaza.”

- PS: If you want, you can still sign the letter till end of April. See here: <https://docs.google.com/forms/d/e/1FAIpQLScUcYTKiwQxLEkDiXoRFu-J2jD7LXbp2M60zcnFnDQK6oYMMg/viewform>

HPW - Sexual Violence During Conflicts is a ‘Major Challenge for Health Sector’

<https://healthpolicy-watch.news/sexual-violence-during-conflicts-is-a-major-challenge-for-health-sector/>

“The “weaponization of sexual violence” during conflicts is a major challenge facing the health sector, and it needs the serious attention of the international community, said World Health Organization (WHO) Director General Dr Tedros Adhanom Ghebreyesus. “

“Tedros broke down while recounting that his own cousins had been raped and his uncle had been killed during recent violence in Tigray in Ethiopia as gender-based violence has become an instrument of war. “Tens of thousands of women have been raped during that conflict, and there is no capacity in the region or within WHO to handle it. But you see it not only in Ethiopia, but you see it in DRC, you see it in Haiti, you see it in Sudan. You see it everywhere,” **said Tedros during a high-level dialogue with UN High Commissioner for Human Rights Volker Türk in Geneva on Monday** – a day after International Health Day and the WHO’s 76th anniversary.”

“Tedros admitted that addressing gender-based violence was “beyond the capacity” of the WHO....”

“... **UN High Commissioner for Human Rights Volker Türk** recalled that a number of countries, including Sudan, denied that their soldiers were involved in rape “but it happens in every army”.

Türk proposed a strategic dialogue between his Office – known as OHCHR – and the WHO to address human rights in the health sector and how to secure the right to health. The two organisations have a framework of cooperation, said Türk, but they hadn’t been able to “bring it to the next level” during the pandemic.....”

- To watch again, see **high-level dialogue between WHO DG + UN High Commissioner for Human Rights – via [YouTube](#)** : “ HL dialogue between Tedros & **the UN High Commissioner for Human Rights, Mr Volker Türk** - marking the 75th anniversaries of the Universal Declaration of Human Rights and the World Health Organization. This event looked at how to continue to advance human rights for health, even in the face of serious emergencies. “

Allafrica - Africa Needs a New Health Order Focusing Expenditures on Key Outcomes

Githinji Gitahi; <https://allafrica.com/stories/202404070016.html>

Important read. “Thirteen years ago this month, member states of the African Union met in the Nigerian capital and adopted binding commitments to spend at least 15 percent of their national

*budgets on health and urges donor countries to increase financial support for the continent's health sector. What is now known as the **Abuja Declaration** recognized that Africa's future rests on the health of its people. In this guest column **Dr. Githinji Gitahi**, head of one of Africa's leading health organizations, **looks back at that goal and forward at what needs to be done.**"*

And argues for a paradigm shift. "..... while the spending benchmark serves as a tangible indicator of a government's commitment to healthcare, **it falls short in addressing the broader determinants of population health....."**. **Social & commercial determinants of health**, that is.

Quote: "...Let's do some math. The GDP of sub-Saharan Africa stands at US\$2 trillion (2024). Since social services like health are paid for largely through taxes, applying a 15 percent tax-to-GDP ratio puts total tax collections at \$300 billion. A 15 percent allocation of these taxes to health would produce \$45 billion. Dividing this figure by the region's population of 1.2 billion in 2024 yields a crude calculation of what may be available on average as Government General Expenditure on health per capita. **A meagre \$37.5!"**

- Related **video address by Githinji** on Youtube: [A Call for a Shift to Pro-poor Policies for Universal Health Coverage in Africa](#)

"UHC is a destination with a winding difficult path and must be achieved systematically and in context. **For low resource settings where Government taxes are low and population high, a pro-poor approach is the first and important step followed by a focus on disease prevention.** Sub-Saharan Africa affords only \$40 per person per year of public expenditure on health services while Europe spends \$4000 and US \$5000 of public money. It's clear our paths can never be the same though the goal is the same - **a pro-poor UHC as a starting point and a tighter focus on disease prevention is the pragmatic path...."**

BMJ Collection - Healthier Societies for Healthier Populations

<https://www.bmj.com/collections/healthier-societies>

".... **The UN's sustainable development goal 3, to ensure healthy lives and advance wellbeing for everyone**, requires the promotion of population health, the achievement of universal health coverage goals, and improving health security. But **compared with UHC and health security, healthy societies as an overarching aim are insufficiently studied, theorised, and valued.** A resulting lack of consensus on how to create and sustain these greener, more equitable, and more sustainable societies limits efforts to develop and implement healthier policies and to improve population health. **A new BMJ Collection on Healthier Societies for Healthier Populations, which includes examples from Thailand and cities in Africa, aims to stimulate debate among policymakers, researchers, and communities on how to create healthy societies by considering the political economy, whole of society approaches, and social movements. It was done in partnership with the Alliance for Health Policy and Systems Research."**

"**The Collection shows that governments and other societal actors must steward a multisectoral approach** to build and maintain equitable, greener, and sustainable societies that benefit everyone. The health sector is just one actor among the many that needs to act to create healthy societies around the world...."

- We recommend you start with this Analysis: [Can current interlinked crises stimulate the structural and policy choices required for healthy societies?](#)

“Kumanan Rasanathan and colleagues argue that governments and other societal actors, including the health sector, **must ensure current global crises lead to choices and action** to build healthy societies that enhance social, economic, and environmental equity and sustainability.”

Make sure you check out **box 2** (with the 10 policies & interventions needed for healthy societies).

5th People’s Health Assembly in Mar del Plata (7-11 April)

PHM - Global health activists rally for justice at the 5th People’s Health Assembly in Argentina

<https://phmovement.org/pha5-global-health-activists-rally-for-justice>

Coverage of the opening session. “**The inaugural session** spotlighted the recent assaults on health rights, notably under the shadow of the ongoing conflict in the Gaza Strip and the challenges posed by the local [Argentinian] government, impacting health and education systems’ efficacy....”

PHM- The 5th People's Health Assembly champions holistic health transformations

<https://phmovement.org/pha5-holistic-health-transformations>

“On the **second day of the 5th People's Health Assembly (PHA 5)**, discussions broadened to encompass various forms of transformation: from reimagining health systems to better meet people's needs, to dismantling embedded elements of imperialism and colonialism across societies, and fostering movements that enhance women's participation and leadership. ... Highlighting the day was a **dialogue on traditional and ancestral knowledge systems**, led by Sandra Payan from the People's Health Movement (PHM) Colombia. **This conversation followed the PHA 5's formal inauguration, which was marked by an ancestral opening ceremony featuring activists from various global regions.**”

PHM - People's Health Movement calls for action against corporate dominance in global health and economy

<https://phmovement.org/pha5-phm-calls-for-action-against-corporate-dominance-in-global-health>

“During the 5th People's Health Assembly (PHA 5), **the People's Health Movement (PHM) is raising its voice against the overwhelming control of transnational corporations (TNCs) over the global economy, health, and welfare systems.** In a stand against the corporatization, marketization, and colonization of public goods, PHM is spotlighting the dire consequences of corporate dominance, emphasizing the pressing need for systemic change....”

PHA5 Mar del Plata 2024 Call to Action

<https://phmovement.org/pha5-mar-del-plata-2024-call-to-action>

“Our Call to Action includes the demands and commitments of the People’s Health Movement following the debates and discussion leading up to and during the 5th People’s Health Assembly held in Mar del Plata, Argentina. It should be read in conjunction with the PHA5 Background Paper: The Struggle for Health: Confronting the role of Capitalism and Imperialism (https://phmovement.org/discussion-paper-for-pha5) ...”

See [Call to Action](#).

Links:

- [Activists urge unity and solidarity in the struggle for women's health and lives](#)
- [PHA5 Comics](#)

“More than a format, they are a genre, even more, they are a universe. **Comics** constitute a narrative that entertains, builds emotional experiences and imaginaries of both fiction and non-fiction, with such a variety of forms and contents that they also inform, educate and communicate, reaching a wide spectrum of audiences. **Under the editorial line of Chiara Bodini and Ronald Labonté**, co-editors of the Global Health Watch 6, **the People's Health Movement launches its comic book series to accompany the discussions of the thematic axes of the 5th People's Health Assembly**. Together with the GHW Podcast, this comic book series is part of the editorial production of the Global Health Watch 6.....”

World Hepatitis summit (9-11 April, Lisbon)

<https://worldhepatitissummit.org/>

A major report was launched at the summit. See below:

WHO sounds alarm on viral hepatitis infections claiming 3500 lives each day

<https://www.who.int/news/item/09-04-2024-who-sounds-alarm-on-viral-hepatitis-infections-claiming-3500-lives-each-day>

“According to the World Health Organization (WHO) 2024 Global Hepatitis Report, the number of lives lost due to viral hepatitis is increasing. The disease is the second leading infectious cause of death globally -- with **1.3 million deaths per year**, the same as tuberculosis, a top infectious killer.”

“The report, released at the World Hepatitis Summit, highlights that despite better tools for diagnosis and treatment, and decreasing product prices, testing and treatment coverage rates have stalled. But, reaching the WHO elimination goal by 2030 should still be achievable, if swift

actions are taken now.” “**....New data from 187 countries show that the estimated number of deaths from viral hepatitis increased from 1.1 million in 2019 to 1.3 million in 2022.** Of these, 83% were caused by hepatitis B, and 17% by hepatitis C. Every day, there are 3500 people dying globally due to hepatitis B and C infections. ...”

“... Updated WHO estimates indicate that 254 million people live with hepatitis B and 50 million with hepatitis C in 2022. Half the burden of chronic hepatitis B and C infections is among people 30–54 years old, with 12% among children under 18 years of age. Men account for 58% of all cases. ... **New incidence estimates indicate a slight decrease compared to 2019, but the overall incidence of viral hepatitis remains high. In 2022, there were 2.2 million new infections, down from 2.5 million in 2019....**”

“Across all regions, **only 13% of people living with chronic hepatitis B infection had been diagnosed and approximately 3% (7 million) had received antiviral therapy at the end of 2022.** Regarding **hepatitis C, 36% had been diagnosed and 20% (12.5 million) had received curative treatment.** These results fall well below the global targets to treat 80% of people living with chronic hepatitis B and hepatitis C by 2030. However, they do indicate slight but consistent improvement in diagnosis and treatment coverage since the last reported estimates in 2019.”

“... **The burden of viral hepatitis varies regionally.** The WHO African Region bears 63% of new hepatitis B infections, yet despite this burden, only 18% of newborns in the region receive the hepatitis B birth-dose vaccination. ... **.... Bangladesh, China, Ethiopia, India, Indonesia, Nigeria, Pakistan, the Philippines, the Russian Federation and Viet Nam, collectively shoulder nearly two-thirds of the global burden of hepatitis B and C. Achieving universal access to prevention, diagnosis, and treatment in these ten countries by 2025, alongside intensified efforts in the African Region, is essential to get the global response back on track to meet the Sustainable Development Goals.**”

“**Disparities in pricing and service delivery:** Despite the availability of affordable generic viral hepatitis medicines, many countries fail to procure them at these lower prices. **Pricing disparities persist both across and within WHO regions, with many countries paying above global benchmarks, even for off-patent drugs or when included in voluntary licensing agreements.** For example, although tenofovir for treatment of hepatitis B is off patent and available at a global benchmark price of US\$2.4 per month, only 7 of the 26 reporting countries paid prices at or below the benchmark...”

“... **The report outlines a series of actions to advance a public health approach to viral hepatitis, designed to accelerate progress towards ending the epidemic by 2030....**”

Coverage via HPW – [Deaths from Viral Hepatitis Increase Globally With Limited Access to Diagnostics and Treatment](#)

PS: “... the World Health Organization (WHO) [2024 Global Hepatitis Report](#) – **the first to document epidemiology, service and product access** – which was released on Tuesday at the start of the [World Hepatitis Summit](#) in Portugal.”

- As a reminder, via [Politico](#):

“... Egypt offers a convincing example: In one decade, the country went from having one of the highest hepatitis C rates in the world to being on track to eradicating the disease. The North African country has diagnosed 87 percent of people living with hepatitis C and provided 93 percent of those diagnosed with curative treatment, exceeding the WHO gold-tier targets of diagnosing at least 80 percent of people with hepatitis C and providing treatment to at least 70 percent of diagnosed people. **The key to Egypt’s success was locally manufactured copies of curative hepatitis C drugs**, said the WHO. **The country is using its success as part of a health diplomacy campaign, aiming to treat a million African patients against hepatitis C**, according to **The New York Times**....”

G20 Health Working group meeting (Brasilia, 9 April)

G20 – Sherpa track health

<https://www.g20.org/en/tracks/sherpa-track/health>

With some general info on the Health Working Group of the G20 under the Brazilian Presidency.

“**The Health Working Group of the G20, under the Brazilian Presidency**, focuses on building resilient health systems to achieve Sustainable Development Goals; strengthening inclusive, efficient, and quality national health systems, with emphasis on primary health care. To help achieve these goals, the group has established **the following priorities**: **1. Prevention, Preparedness, and Response to Pandemics**, with a focus on local and regional production of medicines, vaccines, and strategic health supplies; **2. Digital Health**, for the expansion of telehealth, integration, and analysis of data from national health systems; **3. Health Equity**; **4. Climate Change and Health**.”

“...**Brazil's main proposal for the G20 Health WG is to establish the creation of an Alliance for Regional Production and Innovation**. This initiative aims to **establish a network** that brings together key actors, including countries, academia, private sector, and international organizations, for research and development and production of vaccines, medicines, diagnostics, and strategic supplies **to combat diseases with strong social determinants and that mainly affect vulnerable populations, such as dengue, malaria, tuberculosis, Chagas disease, and leprosy**. Additionally, parallel events on digital health (telehealth and artificial intelligence) and high-level events on climate change, with a focus on equity and One Health, will be held....”

Brazilian Ministry of Health and Gavi reaffirm partnership to advance equitable immunisation globally

<https://www.gavi.org/news/media-room/brazilian-ministry-health-and-gavi-reaffirm-partnership-advance-equitable-immunisation>

“ **The Brazilian Ministry of Health (MoH) and Gavi, the Vaccine Alliance have signed a landmark Memorandum of Understanding (MoU) to collaborate on vaccine production, innovation and global access**. This strengthened partnership reaffirms both partners’ commitment to ensuring equitable access to life-saving vaccines. **Gavi and Brazil will also promote integrating global health with other critical areas like finance, climate change and digital technology as part of the MoU.**”

“... The signing ceremony occurred **during the 2nd technical meeting of the G20 Health Working Group (HWG) in Brasília**, led by the MoH under Brazil’s G20 Presidency. The meeting is an

opportune time to celebrate this partnership, as **Brazil's Presidency has positioned health equity at the centre of its G20 agenda.....**"

Run-up to IMF/World Bank Spring Meetings (April 15-20)

<https://www.worldbank.org/en/meetings/splash/spring/schedule>

World Bank Group Announces New Approach to Measuring Impact

<https://www.worldbank.org/en/news/press-release/2024/04/09/world-bank-group-announces-new-approach-to-measuring-impact>

"The World Bank Group is radically changing the way it tracks results, putting the focus squarely on lives improved rather than money out the door."

"The World Bank Group is **developing a [new corporate scorecard](#) that will track results across 22 indicators**—a fraction of the previous 150—to provide a streamlined, [clear picture of progress](#) on all aspects of the World Bank Group's mission, from improving access to healthcare to making food systems sustainable to boosting private investment...."

"For the first time, the work of all World Bank Group financing institutions will be tracked through the same set of indicators. The new scorecard will track the Bank's overarching vision of ending poverty on a livable planet....."

PS: via [Pandemic Action playbook](#) : **".... for the first time includes an indicator of the number of people benefitting from strengthened capacity to prevent, detect, and respond to health emergencies....."**

CGD - Spring Meetings 2024: What We're Watching

C Landers et al; <https://www.cgdev.org/blog/spring-meetings-2024-what-were-watching>

"Six of CGD's experts lay out what they expect to see and what they hope to see at the Spring Meetings....."

BWP - Spring Meetings 2024 Preamble: Bretton Woods Institutions continue to sleepwalk through crises as 80th anniversary of Bretton Woods Conference approaches

[BWP](#);

As usual **the Bretton Woods Project** also has a number of analyses ready ahead of the Spring meetings. (very much recommended)

“80 years after Bretton Woods Conference, Bank and Fund fail to evolve antiquated governance structures and policy approaches to meet 21st century challenges. Spring Meetings must offer up transformative change despite this year’s slimmed down agenda. Civil society continues to highlight critical issues on governance, financing, privatisation preference and human rights impacts.”

Bretton Woods Project - Undemocratic gentleman’s agreement will further challenge next IMF managing director

<https://www.brettonwoodsproject.org/2024/04/undemocratic-gentlemans-agreement-will-further-challenge-next-imf-managing-director/>

“EU countries’ backing of Kristalina Georgieva for a second term will likely set in motion the next steps towards **her reappointment**; EU support proves yet again that the 'gentleman’s agreement' is alive and well and represents another lost opportunity to reform the governance of the Fund...”

- On the IMF, see also Devex: [Kristal clear focus](#)

“While it hasn’t always, the International Monetary Fund will focus on low-income countries in the years ahead, its chief Kristalina Georgieva said at an event in Washington, D.C. this week...”

“Average IMF lending to low-income countries was around \$1 billion pre-COVID-19, when the institution quadrupled its lending to them. As those countries struggle to recover from the pandemic — their gross domestic product is on average 10% less than before the pandemic — they need support. **The next few years for the IMF will be a “time in our history when more of our attention and more of our programs will be focused on this group of countries,”** Georgieva said. **“This next cycle, our task would be low-income countries and vulnerable emerging-market economies and we are really gearing up.” To that end, the IMF has grown its Poverty Reduction and Growth Trust,** which provides low- or no-cost loans to low-income countries. But what it needs now, and a **key point of discussion at the upcoming World Bank and IMF Spring Meetings, is more money as a subsidy to make sure loan costs are low,** she said.”

PS: **“And just in: Georgieva is the only nominee for the IMF’s next managing director.** While [the formal process will play out](#), it’s further confirmation that **a second term is hers....”**

BWP - IDA21: Moving beyond a focus on ‘historic’ replenishment

M J Romero (Eurodad) <https://www.brettonwoodsproject.org/2024/04/moving-beyond-a-focus-on-historic-replenishment/>

“The 21st IDA replenishment will take place in 2024; Discussions to date have focused on **calls for a ‘historic’ IDA21 replenishment;** Focus on size must not detract from calls for **urgently needed policy reforms to support ecologically sustainable and just economic transformation.”**

BWP (Briefing) - Beyond the World Bank: The fight for universal social protection in the Global South

M Greenslade; <https://www.brettonwoodsproject.org/2024/04/beyond-the-world-bank-the-fight-for-universal-social-protection-in-the-global-south/>

“The World Bank Group promotes a model of social protection via poverty-targeted programmes that are error-strewn and can cause social unease, and set back progress towards universal social protection. But a global coalition, led by borrowing governments themselves, is fighting back. This briefing is based on Matthew’s book, *Beyond the World Bank: The Fight for Universal Social Protection in the Global South*, which explores the Bank’s approach to social protection.”

- And some more BWP links:

[The World Bank and climate finance: Success story or a new era of green ‘structural adjustment’?](#)

[Civil society raises concerns about Resilience and Sustainability Trust’s green conditionality as Fund conducts interim review](#)

Guardian - World Bank must take ‘quantum leap’ to tackle climate crisis, UN expert says

<https://www.theguardian.com/environment/2024/apr/10/world-bank-must-take-quantum-leap-to-tackle-climate-crisis-un-expert-says>

“Simon Stiell calls for reform at development banks to enable governments to provide more climate finance to developing world.”

“The [World Bank](#) must take a “quantum leap” to provide new finance to tackle the climate crisis or face “climate-driven economic catastrophe” that would bring all the world’s economies to a halt, the **UN climate chief** has said. He called for [reform at the development banks](#) that would enable the governments that fund them to provide much more climate finance to the developing world. This would involve greater pledges of overseas aid and debt relief for those labouring under the heaviest burdens, but most importantly changes to the banks’ lending practices that would give poor countries greater access to finance.....”

HPW - Clean Air Makes Economic Sense, Says Influential Group Ahead of World Bank Meeting

https://healthpolicy-watch.news/_trashed-3/

“What is the impact of air pollution on exam results or future earnings? Can governments agree to a 2050 net-zero-like goal for a key pollutant, PM 2.5? Such questions are part of **an appeal by a new group of political, health, policy, and finance leaders for a policy approach to air pollution that is like that against greenhouse gas (GHG) – including an “intergovernmental” plan and nationally determined targets.** “

“Our Common Air (OCA) has put out a [call to action](#) that seeks to present a new and hopefully, more compelling way for global leaders and financiers to address air pollution, one of the world’s single biggest health crises. Frustrated by the lack of progress in addressing air pollution, **the call presents new targets and suggests a new framework to improve air quality.** “

“The group’s co-chairs, former prime minister of New Zealand, Helen Clark, and former WHO chief scientist, Dr Soumya Swaminathan, say pollution has not received the attention or funding it deserves even though the devastating health costs have been documented....”

PS: **“... OCA was set up last year as an independent commission.** Apart from Clark and Swaminathan, its 16 commissioners include current WHO and World Bank officials participating in their personal capacities, as well as climate, pollution, finance, and policy experts. ... The group is backed by the UK-based Clean Air Fund and **the report – Clean Air: A Call to Action** – has been prepared by the Delhi-based Council on Energy, Environment and Water (CEEW). “

“But OCA is re-phrasing the argument for clean air based on sound economics as well as a change in attitude. It is proposing four planks: value clean air as an asset, finance the transition, set clean air targets for all and collaboratively track progress, and work together to achieve solutions that benefit all. The report has been released ahead of the World Bank’s [Spring Meetings](#) next week.”

Coming up - 7th Annual Health Financing Forum (April 15-17, Washington DC)

<https://web.cvent.com/event/81afc324-27a8-4a65-97f9-f871eee7bf88/regProcessStep1>

Related WB ‘Investing in Health’ blog, looking ahead to the Forum:

- WB ‘Investing in Health’ – [Investing in health: Navigating financing challenges of the post-COVID world](#) (by C Kuroswki)

“Reflecting on the early years of this decade, **the COVID-19 pandemic marked the onset of profound changes to the world as we knew it.** This still evolving reality is characterized by inflation and tight monetary policies, more frequent natural disasters – driven by climate change, large-scale armed conflicts, significant increases in migratory flows, deepening geopolitical divisions, and a rise in nationalist populism. “ “ ... **In this changed world, what are the prospects for health investments? To answer this question, it is important to examine the current economic and developmental shifts.** “.... **there is a marked shift in developmental priorities.** As the world started to emerge from the COVID-19 crisis, the emphasis has increasingly moved towards ensuring security and resilience. In addition to pandemic preparedness, this change includes strengthening border defense, improving food security, bolstering supply chains and essential services, and developing climate-proof infrastructure. **These issues have quickly risen to the top of government agendas worldwide, and the result is a strategic pivot in policy priorities....”**

Run-up to Regional World Health Summit in Melbourne (April 22-24)

<https://www.worldhealthsummit.org/regional-meeting/2024-australia.html>

Booklet Global Governance Project - Health: a political choice – Advancing Indigenous peoples’ rights and well-being

Edited by I Kickbusch & J Kirton; <https://edition.pagesuite-professional.co.uk/html5/reader/production/default.aspx?pubname=&pubid=1ff097a9-bc26-48c6-95cc-33d72dc55870>

This **publication by the Global Governance Project** is supported by WHO and the World Health Summit. Well worth a good look, ahead of the Regional WHS. 40p.

With contributions from some of the “usual suspects” (Tedros, Ilona Kickbusch, ...) but also **showcasing thinking from Indigenous leaders from around the globe.**

With as one of the key messages: **it’s time to listen to them.**

GAVI

GAVI - Sania Nishtar: thoughts and priorities from my first ten days in charge of Gavi

<https://www.gavi.org/vaccineswork/sania-nishtar-thoughts-and-priorities-my-first-ten-days-charge-gavi>

“**Gavi’s new CEO** shares her first impressions and **urgent priorities** (5) after a packed first ten days at the helm of the Vaccine Alliance.”

These priorities are: **Finalising Gavi’s sixth strategy; Ensuring a successful replenishment; Translating learning into a 180-day plan for action; Addressing burning issues within the organisation; Creating an efficient and transparent office of the CEO.**

GAVI - Eight recommendations to shape the future of immunisation

<https://www.gavi.org/vaccineswork/eight-recommendations-shape-future-immunisation>

“**Over 120 representatives of governments, CSOs and health organisations gathered in Lomé, Togo, in late February** to help shape Gavi’s next five-year strategy. We look at their **key recommendations.**”

CGD (blog) - Advancing Global Immunization through Gavi 6.0: Five Areas for Reform

J M Keller et al ; <https://www.cgdev.org/blog/advancing-global-immunization-through-gavi-60-five-areas-reform>

“...we highlight five areas for reform in Gavi 6.0, drawing on a new body of research by CGD colleagues that dives into specific disruptions on the horizon and proposes policy actions for Gavi’s leadership and board to consider.”

They are: “Eligibility and transition; Engagement with middle-income countries; Regional vaccine manufacturing and procurement; New financing approaches; Immunization systems strengthening....”

CGD Notes - Opportunities for a New Compact between Gavi and Partner Countries

A Demeshko & T Drake ; <https://www.cgdev.org/publication/opportunities-new-compact-between-gavi-and-partner-countries>

“...This CGD Note outlines a proposal for a [New Compact](#) between Gavi and partner countries. We outline a package of policy shifts for Gavi to consider, in line with the core approach of prioritising country ownership and financing of the highest priority vaccines while health aid is provided at the margin. The set of related policy shifts centre on reworking health service financing, and are complemented by adapting pooled procurement, strengthening market shaping, ensuring comprehensive coverage, and advancing donor harmonisation. As part of this, we offer next steps for how Gavi can act on transitioning to the New Compact approach....”

CGD (blog) - How Gavi Can Address Growing Undervaccination Challenges in Non-Gavi Middle-Income Countries

R Silverman Bonnifield et al ;

<https://www.cgdev.org/blog/how-gavi-can-address-growing-undervaccination-challenges-non-gavi-middle-income-countries>

“... Today, middle-income countries (MICs)—including former Gavi-eligible *and* never Gavi-eligible countries—are increasingly becoming ground-zero for undervaccination challenges. While Gavi offers modest financial and technical support to select MICs, including through its MICs Approach, this support remains ad-hoc and insufficient to meaningfully address the scale and scope of the challenges they face. As it crafts its next strategy for the 2026–2030 period (known as “Gavi 6.0”), Gavi should reassess its engagement with MICs, which will be critical to continue to advance its core mission and contribute to global vaccination goals....”

“In a [new policy paper](#) released today, we offer recommendations for Gavi to operationalize broader engagement with MICs in its next strategic period—and beyond. Acknowledging the complex challenges that MICs face alongside the reality of budgetary headwinds, we argue that Gavi should focus on opportunities that best leverage its *comparative advantage* in market shaping to *drive maximum impact* for global vaccination efforts within *limited resources*.”

- Related CGD policy paper: [Beyond the “Gavi-Eligible”: High-Leverage Opportunities for Gavi to Enhance Vaccine Access and Uptake in Ineligible Middle-Income Countries](#)

“...Gavi’s next five-year strategic period from 2026 to 2030, known as “Gavi 6.0,” offers a window of opportunity for its board and leadership to consider new and different ways for Gavi to engage with MICs to advance global vaccine access and improve vaccination outcomes. To have the greatest impact in this context, Gavi must lean into its comparative advantage in market shaping and demand consolidation to drive its contributions to global vaccination efforts with finite resources. **We offer recommendations for Gavi to operationalize broader engagement with MICs,** specifically by enabling an expanded cohort of MICs to access more affordable prices for both newer, costlier vaccines and future vaccines via opt-in framework agreements and by supporting a global coordinating hub to shape a forward-looking immunization innovation agenda.”

More on Global Health Governance

SID (report) - Banking on Health: The surging pandemic of health financialization

N Dentico; <https://www.sidint.org/sid-publications/banking-health-surgin-pandemic-health-financialization>

One of the must-reads of the week. Among others, with an overview of 30 years of health financialization.

She concludes: “... **Global organized reaction must be intentionally orchestrated to reverse the course of leveraging private finance and ensure that the benefits of public investment remain in public hands, to safeguard the nature of the public office space.** The global campaign The Future is Public is a first decisive step in the right direction, and must be strengthened, if we are to define what kind of world we want to live in.”

WHO - Agreement between the World Health Organization and the Organisation for Economic Co-operation and Development : report by the DG

https://apps.who.int/gb/ebwha/pdf_files/WHA77/A77_30-en.pdf

“Discussions have taken place between the Secretariats of the World Health Organization (WHO) and the Organisation for Economic Co-operation and Development (OECD) on formalizing and enhancing cooperation between the two organizations....” Read what this will entail.

Among others: “...The discussions between the two organizations have resulted in the drawing up of a **draft agreement that would formalize, better define and strengthen cooperation between WHO and OECD on matters pertaining to the achievement of internationally agreed development goals,** notably: the UN SDGs and the SDG target on UHC, health systems performance, fiscal sustainability, alignment of financing flows, and health workforce issues; emerging issues impacting health systems; global public health; social, economic and environmental determinants of health; and any other relevant matters....”

K Bertram - What is leadership?

<https://katribertram.wordpress.com/2024/04/11/what-is-leadership/>

“I have worked with “leaders” for twenty years. Here is what I have learned about leadership.”

Interesting blog, also applying to (redefined) global health leadership. Katri Bertram argues that “it’s high time to question and also push back against leadership that is wielded through control. More than ever – both in global health and also more broadly in the world – we need visionary, inclusive leaders who inspire and show that new ways of doing things are possible.”

(PS: never been much of a leader, I prefer to see myself as a jester, though 😊.)

Economist - Is China or America the big boss of the global south?

<https://www.economist.com/international/2024/04/08/is-china-or-america-the-big-boss-of-the-global-south>

The Global South is a ‘zone of contest’. “In a dog-eat-dog world, competition is fierce.” Interesting read, even if with Economist bias.

Pandemic Accord negotiations

Later this month, INB9 resumes in Geneva. Member States and relevant stakeholders will normally receive an updated “streamlined” draft text on **April 18**.

IS Global - Why Is it Urgent to Reach an Agreement on Pandemics? A Proposal for a European Position

L Agundez et al ; https://www.isglobal.org/documents/d/guest/58_acuerdo-de-pandemias_en

11-pager. Quite informative discussion note. Including on some of the ‘**key issues**’.

“This **policy brief** offers an analysis of the uncertain prospects for the multilateral accord on pandemic preparedness and response that will be considered for adoption at the upcoming World Health Assembly in May 2024. It also discusses what Spain and the European Union (EU) can do to ensure the Freshen success of the project.”

TWN - WHO: Vice-chair proposes May 2026 deadline to conclude PABS negotiations; ignores developing country proposals

<https://www.twn.my/title2/health.info/2024/hi240402.htm>

“The Vice-Chair of the Bureau of the Intergovernmental Negotiating Body (INB), Dr. Viroj Tangcharoensathien of Thailand, has proposed a new timeline of May 2026 to conclude negotiations on a Pathogen Access and Benefit Sharing (PABS) System.”

“The Vice-Chair made this proposal in his presentation during the informal session on Article 12 held on 8 April at the WHO Headquarters in Geneva, a hybrid mode. The proposal clearly intends to

establish a separate negotiating track for the PABS system, which will continue beyond May 2024, the deadline indicated for the adoption of the pandemic instrument. This could result in imposing obligations on Parties under Articles 4 and 5 on surveillance and one health, to share biological materials and genetic sequence information of pathogens pending development of a PABS system.....”

- See also Politico Pro – via a thread on X by @ThiruinGeneva <https://twitter.com/ThiruGeneva/status/1777948940102504772>

Including:

"Counter-proposal: However, Morning Health spoke to negotiators from two developing countries who said they were unhappy with the vague plan on offer and **would prefer to push for a more detailed agreement in the next round of talks later this month.**"

"Both diplomats confirmed the **Group for Equity, an alliance of low-and-middle income countries, the African Group and Egypt would submit their own joint proposal for a PABS system in the coming days.**"

Civil Society Alliance for Human Rights in the Pandemic Treaty - Securing A Human Rights Based WHO Pandemic Accord – letter to States

<https://pandemiccsa.org/securing-a-human-rights-based-who-pandemic-accord-letter-to-states/>

Letter, ahead of the resumed INB9 session.

“The Civil Society Alliance drafted a letter to Permanent Missions to the United Nations whose interventions in the Pandemic Accord negotiations have supported more concrete human rights commitments and greater harmonisation with international Human Rights frameworks. The Letter calls for these States to remain firm in their support for a Human Rights based pandemic Accord....” “... We write as members of the [Civil Society Alliance \(CSA\) for Human Rights in the Pandemic Treaty](#)”

Geneva Observer - Exclusive: Concerned About an Unrealistic Deadline to Conclude a Pandemic Agreement, Some Countries Now Seek an Alternative Face-Saving Solution

J Chade et al; [Geneva Observer](#)

(gated) **“Our main report today tells the story of an effort by a group of countries, essentially from the emerging economies, to extend the May 24 deadline—which they believe is unrealistic—while not allowing the negotiating momentum to falter.** They fear that if the momentum is not maintained, their demands and interests won’t be taken into consideration, and that power imbalances revealed during the pandemic will be reinforced. **Other negotiators, however, insist that the May date must be respected. Privately, many admit that there is another looming deadline which could leave negotiations hostage to fortune in the event of an extension: the potential return to the White House of Donald Trump—who pulled the US out of WHO during his first term—means that after November, reaching an agreement may become more difficult than ever.”**

And a link:

- [News from the Independent Panel for Pandemic Preparedness and Response](#) (10 April): “Urgently required: A meaningful pandemic agreement...”

IHR Amendments process

Lancet World Report - IHR talks advance ahead of key deadline

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)00741-4/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)00741-4/fulltext)

“However, revisions to the International Health Regulations concerning equitable access and financial assistance are linked to troubled parallel talks on a pandemic accord. By John Zarocostas.”

“Negotiators are keen to finalise a revised version of the the International Health Regulations (IHR), but experts warn that sticking points remain over key clauses. **“The IHR negotiations are going very well compared to the negotiations on a pandemic agreement. There's more cooperation among diplomats, more consensus, and [they are] more likely to come to an agreement”**, Lawrence Gostin, Professor of Global Health Law at Georgetown University (Washington, DC, USA) told *The Lancet*. **But there's also a growing belief in Geneva, he said, “that if the pandemic negotiations don't succeed, both negotiations would fail and that would be a catastrophic disappointment for the global health community.”...**”

“... The 8th meeting of the Working Group on Amendments to the IHR (WGIHR) is set to start on April 22, 2024. ...”

Pandemic Fund

As mentioned in the intro, the **Pandemic Fund Governing Board met in Washington last week.**

- **Related tweet by The Pandemic Fund:**

“The #PandemicFund Governing Board met in Washington this week—a very productive meeting covering many important topics, including implementation progress on projects funded in the first round, medium-term strategic plan, resource mobilization, and links with the Pandemic...”

- **Related tweet by Jean Kaseya (Africa CDC):**

“The Pandemic Fund Board meeting ended on a high note for Africa as **@AfricaCDC had been considered for the first stage to be an Implementing Entity for the @Pandemic_Fund**. Upon completion of the process, **@AfricaCDC will be able to receive funding for the African Union**

Member states to support the Pandemic Prevention, Preparedness and Response #PPPR in Africa. A game changer to achieving the Health Security in Africa in line with the #NewPublicHealthOrder aspirations.”

So some early optimism from the Africa CDC boss that the organization might be granted Pandemic Fund implementing entity status.

Statement by the Pandemic Fund Governing Board* on the Role of the Pandemic Fund in the Context of the Pandemic Agreement

<https://www.thepandemicfund.org/news/brief/statement-pandemic-fund-governing-board-role-pandemic-fund-context-pandemic-agreement-april-5-2024>

(5 April) **“Following its 12th Governing Board meeting, the Pandemic Fund Governing Board reiterates its support to reinforce capacity building and implementation of pandemic prevention, preparedness, and response (PPR) under the International Health Regulations (IHR) (2005), and any amendments/enhancements thereof, as well as the Pandemic Agreement currently being negotiated. This is fully in line with the Pandemic Fund’s mandate and Governance Framework. “**

“The Pandemic Fund Governing Board is following the ongoing negotiations in Geneva and encourages progress towards a successful conclusion by May 2024. The Pandemic Fund stands ready to play a strong role in supporting the implementation of the Pandemic Agreement and the core capacities of the IHR and to explore accountability mechanisms with the eventual governing body/ies of those instruments once decided. “

“The Governing Board is listening carefully to the issues being raised by stakeholders during the negotiations. The Pandemic Fund was established on the principles of equity and inclusivity with equal representation from contributor countries (including contributors from the global south) and co-investor countries from the global south. We are considering options to amplify voice and inclusion, including through enhancing governance to strengthen the participation of co-investor countries, and to bolster transparency and accountability. Building on lessons learned to date, the Pandemic Fund is developing a strategy to guide its medium-term directions. The draft Strategic Plan will go live for public comment in mid-April 2024.”

PS: under the article, you also find an **overview of the current composition of the Pandemic Fund’s Governing Board.**

PS: **#G20Brasil will host the #PandemicFund’s pledging event in Rio on Oct 31.**

More on PPR

CGD Notes - What Is Day Zero Financing? A Global Security Perspective for Pandemic Response

<https://www.cgdev.org/publication/what-day-zero-financing-global-security-perspective-pandemic-response>

“This note presents the concept of **Day Zero Financing**, a proposed solution for how the world should respond to future pandemics. It begins with a **definition of Day Zero Financing**, emphasizing its importance and how it operates. The **discussion then covers 10 essential aspects of the concept**, including its implementation, governance, and strategic management of resources and risks in pandemic response. The goal is to highlight the critical role of proactive financing mechanisms in enhancing global health and economic security and ensuring a timely, efficient, coordinated response to pandemics. **The final section outlines a few recent developments in this space.**”

Stat - Why a leading bird flu expert isn't convinced that the risk H5N1 poses to people has declined

<https://www.statnews.com/2024/04/05/bird-flu-ron-fouchier-h5n1-risk-to-people/>

“... STAT turned to Dutch virologist Ron Fouchier, a leading expert on H5N1, for his assessment of these latest twists in the H5 saga. Fouchier takes little solace from the fact that current versions of H5N1 seem to infect people less frequently, and to cause mostly mild illness when they do. The global range of H5 viruses — the sheer volume of the virus in nature — and the numbers of mammals H5 has shown itself capable of sickening is unprecedented, he said, making anticipating its future path harder than ever to gauge....”

- Related: Telegraph - [Ground-up chicken waste fed to cattle may be behind bird flu outbreak in US cows](#)

SDGs (financing)

UN News - Massive investment and financial reform needed to rescue SDGs

<https://news.un.org/en/story/2024/04/1148411>

“Financing for sustainable development is at a crossroads and without urgent investment, global efforts to achieve a more just and equitable world by 2030 will fail, the UN deputy chief warned on Tuesday. Presenting the latest UN report on the issue, Amina Mohammed called for “a surge in investment” and reform of the international financial system to rescue the [Sustainable Development Goals](#) (SDGs) which are woefully offtrack.”

“... The [2024 Financing for Sustainable Development Report](#) says urgent steps are needed to mobilise financing at scale to close the **development financing gap, now estimated at \$4.2 trillion annually, up from \$ 2.5 trillion before the COVID-19 pandemic**. Meanwhile, rising geopolitical tensions, climate disasters and a global cost-of-living crisis have hit billions of people, battering progress on healthcare, education, and other development targets. ...”

“... **Staggering debt burdens and rising borrowing costs** are large contributors to the sustainable development crisis. Estimates are that in **the least developed countries, debt service will be \$40 billion annually between 2023 and 2025, up more than 50 per cent from \$26 billion in 2022**. Stronger and more frequent climate related disasters account for more than half of the debt upsurge in vulnerable countries.”

“Deputy Secretary-General Mohammed said **roughly 40 per cent of the global population, some 3.3 billion people, live in countries where governments now spend more on interest payments than on education or health.**”

OECD aid

Devex - Rich nations reverse aid cuts to poorest — but debt distress still looms

<https://www.devex.com/news/rich-nations-reverse-aid-cuts-to-poorest-but-debt-distress-still-looms-107443>

“Official development assistance to least developed countries and sub-Saharan Africa rose again last year, OECD figures show — after much-criticized falls in 2022.”

“Aid from wealthy donor nations to the lowest-income countries has bounced back after [a shock fall in 2022](#) — but they have been warned **they are still “falling short” of the help required to combat debt distress and the climate crisis.** A [record \\$223.7 billion](#) of official development assistance was delivered in 2023 by the 31 members of the [Development Assistance Committee](#) hosted by the [Organisation for Economic Co-operation and Development](#) — a 1.8% real-terms rise on \$211 billion in 2022, the annual statistics show. Crucially, bilateral sums flowing to the group of least developed countries and to Sub-Saharan Africa rose by 3% and 5% respectively, after [huge controversy](#) over declines of 6.2% and 7.8% in 2022....” “The partial reversal was helped by a **6.2% fall in the share of ODA that DAC members spent domestically on hosting asylum seekers** — although that sum **still stands at \$31 billion, or 13.8% of ODA**, around double the proportion as recently as 2021....”

PS: “**OECD set out the “increasing risks of debt distress” in low-income countries, saying** the sums due in the next three years, excluding debt to China, soared to \$4.1 trillion at the end of 2023 — while the **annual “financing gap” to meet the Sustainable Development Goals had risen from \$2.5 trillion in 2015 to \$4 trillion in 2023.....**”

Social determinants of health

BMJ GH (Analysis) - The cost of inaction on health equity and its social determinants

Pooja Yerramilli, Mickey Chopra & Kumanan Rasanathan;
https://gh.bmj.com/content/9/Suppl_1/e012690

“Rising levels of inflation, debt and macrofiscal tightening are putting expenditures on the social sectors including health under immense scrutiny. Already, there are worrying signs of reductions in social sector investments. However, even before the pandemic, evidence showed the significant returns on investments in health equity and its social determinants. Emerging data and trends show that these potential returns have increased during the COVID-19 pandemic - investments in social determinants can mitigate widespread reductions in human capital and the increasing likelihood of costly syndemics, while promoting access to healthcare innovations that have thus far been

inequitably distributed. Therefore, **we argue that, despite immediate fiscal pressures, this is exactly the time to invest in health equity and its broader social determinants, as the returns on such investments have never been greater.....”**

Health & financial impact WASH

Cidrap News - Report details health, economic impact of inadequate water, sanitation, and hygiene in hospitals

<https://www.cidrap.umn.edu/antimicrobial-stewardship/report-details-health-economic-impact-inadequate-water-sanitation-and>

“New research conducted in seven sub-Saharan African counties highlights the health and financial impact of inadequate water, sanitation, and hygiene (WASH) in healthcare facilities.”

“In a [report](#) published late last week, non-governmental organization WaterAid estimated that inadequate WASH in healthcare facilities in Ethiopia, Ghana, Malawi, Mali, Nigeria, Uganda, and Zambia contributed to 2.6 billion healthcare-associated infections (HCAIs) and 277,160 excess deaths in 2022. At least 50% of the HCAIs are believed to have been caused by antimicrobial-resistant (AMR) bacteria. The economic costs of these infections is estimated to range from 2.5% to 10.9% of the healthcare budgets in the seven countries, while lost wages and productivity due to infections accounted for 0.4% to 2.9% of the countries' gross domestic product.....”

- See also the Telegraph – [Hospital infections kill hundreds of thousands in sub-Saharan Africa, research shows](#)

“Improved sanitation could prevent at least half of cases, which are costing the region as much as \$8.4 billion each year.”

Access to medicines, vaccines & other health technologies

FT - Moderna puts plans for African vaccine plant on hold

[Moderna puts plans for African vaccine plant on hold \(ft.com\)](#)

“Pledges to invest in pandemic preparedness with facility in Kenya fall short as sales of Covid jobs decline.”

“ US biotech Moderna has put plans to build a vaccine plant in Kenya on hold, in a sign that moves to invest in pandemic preparedness in Africa have dropped down the agenda as sales of Covid-19 jobs decline. The Boston-based company struck a deal with the Kenyan government a year ago to invest about \$200mn in a facility that would produce up to 500mn vaccine shots a year. But it has yet to buy a plot earmarked for it in a special economic zone near Nairobi, said two people familiar with the matter. Senior officials from the US and the east African country, including President William Ruto, joined efforts to get the deal over the line. The Kenyan government gave Moderna

several tax breaks and allowed it to more than halve its original planned investment of \$500mn, the people said. But as sales of its messenger RNA-based vaccine decline, the company has stalled over the purchase of a five to 10-acre plot in Tatu City economic zone. **In a statement to the Financial Times, Moderna confirmed it had “paused its efforts” to build a vaccine plant in Kenya. “The demand in Africa for Covid-19 vaccines has declined since the pandemic and is insufficient to support the viability of the factory,” it said.”**

PS”: **Germany’s BioNTech, which developed its own mRNA-based Covid vaccine with Pfizer, has also scaled back its African ambitions but has broken ground on a vaccine manufacturing site in Rwanda.** The facility is expected to be completed next year. **The Coalition for Epidemic Preparedness Innovations has longer-term plans to build production capacity in Senegal with the Institut Pasteur de Dakar.** The **World Bank-backed Kenya BioVax Institute** is also developing a vaccine plant. **In South Africa, Afrigen Biologics and Vaccines** said it will, once licensed, be able to produce about 50mn mRNA-based doses a year in the event of a new pandemic. **Speaking to the FT this month at an investor event, Moderna chief executive Stéphane Bancel shifted the blame for the troubles with the Kenyan project on to Nairobi and Africa’s public health bodies. “What has changed is the desire of the Africa [Centres for Disease Control and Prevention] to buy products right now,” he said.....”**

WHO - Global deployment of rapid diagnostic tests to boost fight against cholera

<https://www.who.int/news/item/05-04-2024-global-deployment-of-rapid-diagnostic-tests-to-boost-fight-against-cholera>

(5 April) **“ More than 1.2 million cholera rapid diagnostic tests will be shipped to 14 countries in largest-ever global deployment, with the first shipment landing today in Malawi.”**

“This first official deployment of tests through Gavi, the Vaccine Alliance, will improve timely detection and monitoring of outbreaks, effectiveness of vaccination campaigns in response to current outbreaks, and targeting of future preventive vaccination efforts. The global cholera rapid diagnostic test procurement programme is a collaboration between Gavi, WHO, UNICEF, FIND, and other partners.....”

- Related coverage via HPW – [Amid Global Cholera Surge, Gavi Launches New Testing Programme](#)

“A new programme aiming at providing 1.2 million rapid cholera diagnostic tests has been launched in 14 African and Asian countries. “

Devex - Inside the push to make intellectual property work for African pharma

<https://www.devex.com/news/inside-the-push-to-make-intellectual-property-work-for-african-pharma-107356>

Must-read analysis. **“Is it time for African countries to craft a different vision for how innovation, intellectual property, and access to pharmaceutical products will play out on the continent?”**

Africa's leadership aims to significantly scale up the amount of pharma manufacturing happening on the continent. **".... experts gathered in Addis Ababa, Ethiopia, for the first International Conference on Innovation, Intellectual Property and Technology Transfer in Africa's Pharmaceutical Sector — hosted by the new [African Pharmaceutical Technology Foundation](#), launched by the [African Development Bank](#)...."** Some key quotes & excerpts:

"....It's the moment to craft a "different vision" on how innovation, intellectual property, and access to pharmaceutical products will play out on the African continent, said Brook Baker, professor at [Northeastern University](#) School of Law, who specializes in access to medicines. "African countries really need to devise an intellectual property strategy that is fit for their own needs, not necessarily copy the IP strategy that you would find in high-income countries," said Pascale Boulet, intellectual property expert at the [Drugs for Neglected Diseases Initiative](#), or DNDi."

"One option is voluntary licenses — where companies voluntarily grant licenses to companies to manufacture their products. But this comes with limitations...." **"Not everyone agrees that voluntary licenses are effective in broadening access. Too many important products aren't licensed, Northeastern University's Baker said...."**

"....Patent offices have a role to play in changing the narrative on the continent. Patents are handed out to foreign companies too liberally in many African countries...."

"A regional approach to compulsory licenses? The Trade-Related Aspects of Intellectual Property Rights, or TRIPS, is the international agreement that governs intellectual property rights. But within it, there are flexibilities. African nations need to use these flexibilities to the fullest extent and include them in national law, said Erika Dueñas Loayza, a technical officer at the [World Health Organization](#)."Why can't Africa talk about regional approaches to compulsory licenses?" Northeastern University's Baker asked. "It makes total sense."...

PS: **"...Intellectual property isn't everything:** Local manufacturers accessing intellectual property to operate doesn't solve all the problems of Africa's nascent African manufacturing sector. **Many African manufacturers aren't at the required levels of expertise, with the right infrastructure, and skilled staff, nor have they met the needed quality control certifications...."**

"....global companies aren't always interested in doing technology transfers. ... "There's a lot of suggestions that are out there about ways to make more originators interested to incentivize, or to compel them to act more like [AstraZeneca](#) did," Shadlen said. **The new African Pharmaceutical Technology Foundation is working to create the conditions that will build more of these relationships."**

"And often African manufacturers aren't equipped to take on this role. ... "What single thing should Africa concentrate on?" Gore asked. "Education, because you need this workforce. It's absolutely critical." A number of generic manufacturers that set up shop in South Africa needed to bring in teams from elsewhere because there weren't enough skilled people locally, said Pillay of South Africa's National Department of Health. And there are very few African manufacturers that apply for the MPP's expressions of interest to receive licenses, MPP's Gore said. For example, during the pandemic, an African API manufacturer was offered a license for [Pfizer](#)'s drug Paxlovid. "They said: 'This is a bit too complicated for us at the moment to develop, so unfortunately, we're going to have to refuse it,'" Gore said."

“The limited number of applications is also partly due to requirements around quality assurance from what’s known as a stringent regulatory authority, such as pre-qualification by the World Health Organization. But this can be a costly process, Gore said. MPP is considering having Africa-specific calls for expression of interest, he said, which may include offering licenses conditionally — if a manufacturer reaches the required thresholds of quality, the license then becomes theirs. This could help give assurances to investors that their investments will pay off. [Gavi, the Vaccine Alliance’s new African Vaccines Manufacturing Accelerator](#) is also working to ensure there are more local partners available to take on technology transfers.....”

WHO Bulletin - An mRNA technology transfer programme and economic sustainability in health care

Devika Dutt, Mariana Mazzucato & Els Torreale; https://cdn.who.int/media/docs/default-source/bulletin/online-first/blt.24.291388.pdf?sfvrsn=c55ad77e_3

“... This paper outlines the current global vaccine market and summarizes the findings of a case study on the mRNA technology transfer programme conducted from November 2022 to May 2023. The study was guided by the vision of the WHO Council on the Economics of Health for All to build an economy for health using its four work streams of value, finance, innovation and capacity. Based on the findings of the study, we offer a mission-oriented policy framework to support the mRNA technology transfer programme as a pilot for transformative change towards an ecosystem for health innovation for the common good. Parts of this vision have already been incorporated into the governance of the mRNA technology transfer programme, while other aspects, especially the common good approach, still need to be applied to achieve the goals of the programme.”

GHF - Developing Countries Call for a Review of the TRIPS Agreement at the WTO

P Patnaik; https://genevahealthfiles.substack.com/p/colombia-trips-review-wto-geneva-who-pandemic?utm_campaign=email-post&r=97mey&utm_source=substack&utm_medium=email

“The dust has barely settled from the quiet burial of the TRIPS Waiver discussions at the WTO. Some developing countries have now called for a review of the TRIPS Agreement in the context of challenges including from the climate crisis, health emergencies and food insecurity. Colombia, and a few other countries have called for intellectual property matters to be brought front and center of the WTO. This is an important development, also seen from the lens of the ongoing discussions at WHO, where IP matters have spun an impasse in the negotiations towards a new pandemic agreement.... “We bring you this quick and brief update on the recent discussions at the General Council Meeting at the WTO last month. We also present voices of scholars, who have critically examined the limitations and opportunities within the current framework of the TRIPS Agreement.”****

“... Dismayed by the lack of effective response from the WTO during, and in the aftermath of the COVID-19 pandemic, some developing countries are calling for a systematic review of the agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS). This was discussed at a meeting of the General Council at the WTO during March 21-22, following the 13th Ministerial Conference in Abu Dhabi earlier in the year....”

PS: “... It is understood that some developed countries indicated at the meeting last month, that the forum for such discussions was at the TRIPS Council and not the General Council...”

“... In a blistering statement, Colombia, urged WTO members to bring IP Issues front and centre of the organization, and referred to the TRIPS Council as anaemic.”

Quote Colombia: “... In short, intellectual property is at the center of the most important debates of our time: Human Health, climate change, budgetary sustainability, economic development of the developing world, geopolitical tensions in technology....”

“...**And the strictest intellectual property rules belong here, to the WTO.** Not to WIPO, not to the UN, whose treaties or provisions are much less strict. The WTO TRIPS Agreement is the basis of the existing institutional rules scheme regarding intellectual property, and its monitoring and discussion belongs and should happen in this house, in the WTO. **And yet... at the WTO Ministerial we decided not to talk about any of this.....** ... *The TRIPS is not nuclear physics: it is public policy that seeks a balance between innovation and access, and is one of the pillars of the WTO. Therefore these discussions cannot continue to be abandoned in the Ministerials, or limited here to a very narrow niche of experts.....*”

PS: “.... ... Following the Ministerial in June 2022, **South Centre, an inter-governmental organization comprising developing countries, convened a discussion on the future of the TRIPS Agreement. Scholars called for a reform of the TRIPS Agreement** and discussed whether “authoritative interpretations of some its key provisions are needed” “

People’s Dispatch – India’s newly amended patent rules threaten affordable medicines in the Global South

<https://peoplesdispatch.org/2024/04/05/indias-newly-amended-patent-rules-threaten-affordable-medicines-in-the-global-south/?ref=peoples-health-dispatch.ghost.io>

“New amendments to patent rules in India will jeopardize the country’s ability to produce generics, dealing a strong blow to access to medicines in both India and other countries of the Global South.”

And a link:

- Reuters - [Malaria vaccine rollout shines light on value of renewable power](#)

“Millions to be vaccinated in huge public health effort against Malaria, which kills 608,000 a year; New vaccines RTS,S and R21 promising, with RTS,S reducing child mortality by 13% in pilots. **Ice-lined solar fridges, lasting up to 115 hours in high heat, enabling remote deployment.** Investments in **vaccine cold chain** lead to threefold increase in doses given in 2019-2021. **Innovations extend beyond vaccines; SureChill's 'pharma fridges' used for insulin and antibiotics.**”

WomenLift Health conference (April 6-8, Dar es Salaam, Tanzania)

Africa: Gender Equality Takes Center Stage at WomenLift Health Conference

<https://allafrica.com/stories/202404070005.html>

With some coverage.

“In a momentous gathering at the **WomenLift Health Conference**, a powerful synergy emerged as **two prominent figures in global politics came together to champion gender equality**. Former **Tanzanian President Dr. Jakaya Mrisho Kikwete**, whose decade in office significantly impacted his nation, and **New Zealand's trailblazing former Prime Minister Helen Clark**, the first woman elected to the role, ignited a critical dialogue on this pressing issue.....”

For some highlights, see also a **thread on X** by [Anita Zaidi](#).

HRH

The World Health Organization and O’Neill Institute Launch Health and Care Worker Policy Lab

<https://oneill.law.georgetown.edu/press/the-world-health-organization-and-oneill-institute-launch-health-and-care-worker-policy-lab/>

“On April 5, during World Health Worker Week, the World Health Organization (WHO) and the O’Neill Institute for National and Global Health Law at Georgetown Law released the **Health and Care Worker Policy Lab**. The database gathers laws, regulations, and policies on the rights of health and care workers from more than 150 countries, and provides resources to support countries in strengthening their national policies and operations in **support of the “Global Health and Care Worker Compact.”**.....”

“... **The Health and Care Worker Policy Lab** features national laws, policies, tools, and guidelines about the **Compact’s areas of focus across four domains — preventing harm, providing support, ensuring inclusivity, and safeguarding rights...**”

“... In the coming months, **the Health and Care Worker Policy Lab will launch a report** analyzing the legal environment under which health and care workers live and work around the world. **The WHO will also provide an assessment tool for countries to review their progress.**”

- See the resource: <https://www.hcwpolicylab.org/>

Devex - Is brain drain limiting Africa’s genomics potential?

<https://www.devex.com/news/is-brain-drain-limiting-africa-s-genomics-potential-107262>

“A wide human capacity gap threatens Africa's genomics goals but efforts to train more scientists are being hindered by **brain drain as trained scientists migrate abroad in search of better opportunities.**”

More on Gaza

UN News - Gaza: ‘Systematic dismantling of healthcare must end’ says WHO

<https://news.un.org/en/story/2024/04/1148316>

“With the largest hospital in Gaza largely destroyed and out of action, **access to healthcare has now become “totally inadequate” following six months of brutal fighting between Israeli forces and Palestinian militants, said the World Health Organization (WHO) on Saturday.** That’s the assessment following a WHO-led multi-agency mission to **Al-Shifa Hospital in northern Gaza on 5 April** which examined the extent of destruction following a weeks-long Israeli offensive aimed at rooting out militant forces who were allegedly operating inside.....”

BMJ GH - Damage to medical complexes in the Gaza Strip during the Israel– Hamas war: a geospatial analysis

D N Poole et al ; <https://gh.bmj.com/content/9/4/e014768>

Cfr tweet: “**New @YaleSPH study: damage to medical complexes was similar to all other buildings despite their status as protected civilian objects by international law.....**”

Devex - How seven deaths changed aid work in Gaza

<https://www.devex.com/news/how-seven-deaths-changed-aid-work-in-gaza-107415>

“**“The concept of deconfliction, at this point, has become almost a joke,”** said Amber Alayyan, Médecins San Frontières' Palestine medical program manager.”

UN News - Ceasefire the only way to end killing and injuring of children in Gaza: UNICEF

<https://news.un.org/en/interview/2024/04/1148461>

“**Advocating for a ceasefire is the best way to support the people of Gaza, including children in the north who are dying of hunger,** a Spokesperson for the UN Children’s Fund (UNICEF) said on Thursday. ...”

And a link:

- TGH - [Will International Humanitarian Law Survive the Israel-Hamas Conflict?](#) (by R Haar et al)

Planetary Health

Guardian - Human rights violated by Switzerland inaction on climate, ECHR rules in landmark case

<https://www.theguardian.com/environment/2024/apr/09/human-rights-violated-inaction-climate-echr-rules-landmark-case>

“Court finds in favour of group of older Swiss women who claimed weak policies put them at greater risk of death from heatwaves.”

“... Weak government climate policies violate fundamental human rights, the [European court of human rights](#) has ruled. ... **In a landmark decision on one of three major climate cases, the first such rulings by an international court**, the ECHR raised judicial pressure on governments to stop filling the atmosphere with gases that make extreme weather more violent.....”

Economist - Climate change and conflict must be tackled together, argues a foundation head

<https://www.economist.com/by-invitation/2024/04/05/climate-change-and-conflict-must-be-tackled-together-argues-a-foundation-head>

“Climate change and conflict must be tackled together, argues a foundation head.” “**Andrew Gilmour** (Berghof Foundation) **makes the case for environmental peacebuilding.**

“... Initiatives such as these, known as **environmental peacebuilding**, are gathering momentum. They foster co-operation on environmental issues—including renewable energy, nature-reserve management and desalination and irrigation projects—as a way to advance climate action and promote peace simultaneously. **Environmental peacebuilding needs more support from governments and international organisations.** There has been progress in the UN, the European Union and the World Bank, among others, but it is slow and limited. The existing climate-finance system is failing, leaving those most vulnerable behind. According to a UN report, highly fragile countries, such as Sudan and Iraq, receive just over 1% of the funds going to stable countries. This imbalance must be urgently addressed.....”

Carbon Brief - Factcheck: Why the recent ‘acceleration’ in global warming is what scientists expect

[Carbon brief;](#)

“Over the past year, there has been a vigorous debate among scientists – and more broadly – about whether global warming is “accelerating”. This, in turn, has led to **questions about whether the world is warming “faster than scientists expected”**. Here, **Carbon Brief** takes a detailed look at the issue and finds that **there is increasing evidence of an acceleration in the rate of warming over the past 15 years.** “ **However, this acceleration is broadly in line with projections from the latest generation of climate models and the recent sixth assessment report (AR6) from**

the **Intergovernmental Panel on Climate Change (IPCC)**. They all expect the world to warm notably faster in both current and future decades than the rate the world has experienced since 1970.”

“Carbon Brief’s analysis also reveals that **the speed up in warming projected in the latest climate models (known as CMIP6) is similar to the acceleration estimated by prominent climate scientist Dr James Hansen and colleagues** in their much-discussed 2023 paper in Oxford Open Climate Change. “

PS: “... Even with an apparent acceleration in recent warming, **there remain major questions regarding drivers of 2023’s record-breaking heat relative to 2022**, though annual temperatures still remain well within the range of climate-model projections....”

Nature News - The rise of eco-anxiety: scientists wake up to the mental-health toll of climate change

<https://www.nature.com/articles/d41586-024-00998-6>

“Researchers want to unpick how climate change affects mental health around the world — from lives that are disrupted by catastrophic weather to people who are anxious about the future.”

- Related Nature Editorial - [What happens when climate change and the mental-health crisis collide?](#)

“ The warming planet is worsening mental illness and distress. Researchers need to work out the scale of the problem and how those who need assistance can be helped.”

The Lancet ahead of India elections

Lancet Editorial – India's elections: why data and transparency matter

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)00740-2/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)00740-2/fulltext)

A few excerpts:

“... However, **when it comes to health**, there is quite a different story to tell of the Modi Government. **Health care under Modi has fared poorly, as described in this week's World Report.** Overall, government spending on health has fallen and now hovers around an abysmal 1.2% of gross domestic product, out-of-pocket expenditure on health care remains extremely high, and flagship initiatives on primary health care and universal health coverage have so far failed to deliver services to people most in need. Persistent inequity in both access to and quality of health care are well recognised. **But a major obstacle that India also faces, which many Indians might be unaware of, relates to health data and a lack of data transparency.** Accurate and up-to-date data are essential for health policy, planning, and management, but **the collection and publication of such data in India have undergone serious setbacks and impediments...**”

“... The Government's key policy is Viksit Bharat 2047—a plan to make India a developed nation by 2047, 100 years after independence. Success in achieving this vision—should the Government gain a third term—will be driven by people and services, not manufacturing. India must therefore focus attention and investment on health and education. And this can only be done with far more robust and open data.....”

- Related World Report in the Lancet: [Modi's health agenda under scrutiny](#)

“Initiatives taken since 2014 to reduce out-of-pocket health expenditure and improve universal health coverage in the country have underdelivered. Dinesh C Sharma reports.”

With focus on PMJAY & PMBJP schemes/initiatives, among others.

Miscellaneous

Gates Foundation Collaborates with F1000 to Launch Verified Preprint Platform

<https://newsroom.taylorandfrancisgroup.com/gates-foundation-collaborates-with-f1000-to-launch-verified-preprint-platform/>

“VeriXiv Supports Gates-Funded Researchers to Comply with Refreshed Open Access Policy.”

“F1000 and the Bill & Melinda Gates Foundation have announced plans to launch a new verified preprint platform that will enable the rapid availability of new findings and promote research integrity. VeriXiv [pronounced very-kive] will support researchers in complying with the Gates Foundation’s refreshed open access policy that requires all their funded research to be made available as a preprint from January 2025.....”

Guardian - ‘Right to freedom from torture’: UN experts urge the Gambia not to decriminalise FGM

<https://www.theguardian.com/society/2024/apr/11/right-to-freedom-from-torture-un-experts-urge-the-gambia-not-to-decriminalise-fgm>

“...A team of UN experts has urged Gambian lawmakers not to repeal a ban on female genital mutilation, saying such a move would set a dangerous global precedent. In a letter dated 8 April [and made public on Thursday](#), the experts, led by Reem Alsalem, the UN special rapporteur on violence against women and girls, said allowing the unchecked return of “one of the most pernicious forms of violence committed against women and children” would violate their right to freedom from torture....”

Global Fund Concerned by Uganda's Constitutional Court Ruling on the Anti-Homosexuality Act

<https://www.theglobalfund.org/en/updates/2024/2024-04-05-global-fund-concerned-uganda-constitutional-court-ruling-anti-homosexuality-act/>

“ **Following the Constitutional Court’s ruling in Uganda this week**, which struck down several sections of the Anti-Homosexuality Act (AHA), **the Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund) is concerned about the remaining provisions of the law**. The Act, and the risk of human rights violations associated with it, is likely to create obstacles for people in need of HIV prevention and treatment services, and undermine the progress achieved so far in terms of access to health in the country.....”

New to AOSIS’s journal portfolio: ‘Journal of Public Health in Africa’

<https://aosis.co.za/news-an-addition-to-aosiss-journal-portfolio-journal-of-public-health-in-africa/>

“We are excited to announce that **AOSIS is now the publisher of the Journal of Public Health in Africa (JPHIA)**. **This open-access journal is owned by the Africa CDC**, which, together with a publisher situated on African soil, aims to promote African scholarship by publishing and distributing a high-quality JPHIA that will contribute to the strengthening of the continent’s public health....”

France to invest €400 million in Rwanda in effort to renew ties

<https://www.france24.com/en/video/20240407-france-to-invest-%E2%82%AC400-million-in-rwanda-in-effort-to-renew-ties>

“France's top diplomat Stéphane Séjourné on Saturday said that Paris would invest **€400 million in Rwanda's environment, health and education sectors over the next five years as it aims to renew ties with Kigali**. The announcement came after President Emmanuel Macron on Thursday that France and its allies could have stopped the 1994 Rwanda genocide but lacked the will to do so.”

HPW - Ensuring Ethical AI Implementation: HealthAI Launches Global Community of Practice

<https://healthpolicy-watch.news/ensuring-ethical-ai-implementation-healthai-launches-global-community-of-practice/>

“Artificial Intelligence (AI) can save lives – but “we need to get the regulations right,” according to Dr Ricardo Baptista Leite, CEO of **HealthAI, the agency responsible for artificial intelligence in health.**”

“**To address the urgent need for the robust regulation of AI in the healthcare sector, HealthAI has initiated a worldwide community of practice (CoP)**, the organisation said last week. This initiative aims to strengthen each nation’s capacity to create well-informed regulations that promote AI’s ethical and fair utilisation in healthcare....”

Global health governance & Governance of Health

Devex - Scoop: Mike Ryan is WHO's new deputy director-general

<https://www.devex.com/news/scoop-mike-ryan-is-who-s-new-deputy-director-general-107425>

“The post was previously held by Zsuzsanna Jakab whom Director-General Tedros Adhanom Ghebreyesus asked to delay retirement in 2022 amid a leadership scandal at the WHO's regional office in Western Pacific.”

See also WHO leadership: Via Stat ‘Morning rounds’: WHO’s Mike Ryan gets a promotion

“...Mike Ryan, executive director of the World Health Organization’s health emergencies program, was named deputy director-general of the Geneva-based global health agency, starting April 1. The appointment was announced Thursday by WHO Director-General Tedros Adhanom Ghebreyesus...” **“...Ryan, a native of Ireland, will retain the health emergencies post and serve as Tedros’ deputy, standing in for the director-general when needed. “....”**

Plos GPH - The World Health Organization was born as a normative agency: Seventy-five years of global health law under WHO governance

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0002928>

By L Gostin et al. **“...Looking back on WHO’s 75th anniversary, this article examines the central importance of global health law under WHO governance,** reviewing the past successes, missed opportunities, and future hopes for WHO. **For WHO to meet its constitutional authority to become the normative agency it was born to be, we offer five proposals to reestablish a WHO fit for purpose:** normative instruments, equity and human rights mainstreaming, sustainable financing, One Health, and good governance.”

Journal of Global Health - World health order (Viewpoint)

Carlos Javier Regazzoni; <https://jogh.org/2024/jogh-14-03023>

“... We believe that a notion of a ‘world health order’ would offer a thorough framework to examine and comprehend the intricate interplay between geopolitics and the present levels of population health and equality. Establishing and enhancing this ‘shared language’ with geopolitics and international economics is decisive, as it is pivotal for precisely deciphering global dynamics and formulating more efficient health policies. **The concept of a world health order could reduce uncertainty in the channels of communication between powerful international actors and the health priorities proposed by medical science and other health-equality-motivated transnational actors.....”**

PS: **“In parallel with the characterisation of ‘world order’, ‘world health order’ could be defined as the structure and dynamics of the international system as they influence health outcomes.** It encompasses the **balance of power among such health-influencing global actors, the guiding principles and norms governing global health, and the mechanisms fostering cooperation,**

managing health inequalities, and advancing population health. World health order exists only if health issues gain prominence in politics, power, and business. ...”

“The world health order framework introduces a robust geopolitical dimension to global health, integrating aspects traditionally reserved for international affairs and its notion of world order. ...”

Review of International Political Economy - Sweetening the liberalization pill: flanking measures to free trade agreements

Noémie Laurens et al;

<https://www.tandfonline.com/doi/full/10.1080/09692290.2024.2337193?src=exp-la>

“Free trade agreement (FTA) negotiators increasingly face pressure from domestic interest groups, including environmental non-governmental organizations (NGOs), civil activists and labor unions. As a result of the growing scrutiny on the content of FTAs, we are now witnessing a proliferation of instruments accompanying FTAs, which we group under the label of flanking measures. In this article, we argue that flanking measures can serve two main non-exclusive purposes: increasing aggregate social welfare by mitigating the negative spillovers of FTAs on society (the substantive dimension) and helping to build domestic coalitions in support of trade liberalization (the political dimension). Despite the relevance and growing empirical importance of the concept, flanking remains largely overlooked in the International Political Economy (IPE) literature. This essay seeks to fill this gap by discussing the scope, purposes and timing of flanking.”

CGD (blog) - The UK's Poor Track Record on Locally Led Development

S Hughes & I Mitchell; <https://www.cgdev.org/blog/uks-poor-track-record-locally-led-development>

“... Our assessment of the quality of UK aid has long identified its weakness in the level of **ownership** recipients have. In this blog, we highlight three strands of evidence that suggests the UK has a poor and worsening record on empowering and partnering with recipient countries. Despite UK aid being officially “untied”, a very high proportion of contracts are awarded to UK-based organisations....”

Global Policy - Breaking Taboos? The IMF, World Bank, WTO Meet the New State Capitalism

A Alami & J Taggart; <https://www.globalpolicyjournal.com/blog/11/04/2024/breaking-taboos-imf-world-bank-wto-meet-new-state-capitalism>

“Ilias Alami and Jack Taggart argue that major institutions of global economic governance have recently adapted their policies in response to the rise of the ‘new state capitalism’. But these accommodations, while significant, constitute a **limited transformation**: one that seeks to strategically balance out longstanding liberal prescriptions with the realities of state capitalism.”

“... They aim to preserve authority and keep in check the expansion of state capitalism, ensuring that the latter remains embedded within a liberal global economic order. Far from opening more policy space for developing countries, this **defensive move** strives to safeguard existing ‘gains’ in

global economic integration in a fragmented world, by absorbing and simultaneously policing emergent practices of state interventionism and ownership.....”

And a few links:

- CGD notes - [Are MDBs Actually Implementing Reforms?](#) (by N Lee et al)

“.... **This analysis tracks reform progress across seven MDBs on 28 reform agenda items, grouped under five categories of reform:** making more efficient use of capital, adding to capital, expanding mandates to include global challenges, transforming engagement with countries, increasing mobilization of private finance.....”

- Devex - [Opinion: A scorecard for Kristalina Georgieva’s IMF leadership](#)

“ With the IMF chief likely set to serve a second term, here is a **look back at Kristalina Georgieva’s performance in her first five years at the helm.**”

Global health financing

Via [Devex check-up](#):

“**Big spender: USAID has \$25.6 billion to spend.** And it turns out, according to an analysis of the forecasting opportunities the agency has released, **a significant portion of that funding may be targeted at global health programs.** That includes **\$3.5 billion in new opportunities** in the global health sector that have recently been added to the pipeline. Among the highlights:

- The Office of HIV/AIDS has **two contracts worth \$1 billion each** — the first for the Integrating HIV Services into Primary Health Care project and the second to promote health equity, support the [95-95-95 HIV targets](#), and control the HIV epidemic.
- **The Office of Health Systems** is looking to spend **\$500 million on health systems strengthening.** And there is a \$25 million contract for a regional approach to ending tuberculosis in Central Asia.”

BMC Health services - The impact of health insurance on maternal and reproductive health service utilization and financial protection in low- and lower middle-income countries: a systematic review of the evidence

<https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-024-10815-5>

By Joseph Kazibwe, J Sundewall et al.

UHC & PHC

Lancet Letters re Primary Health Care (in response to a previous Offline from Horton on PHC)

Check for example:

[Reaffirming primary health care's vital role](#) (with focus on PHC in Latin America)

[Primary health care has not been prioritised enough](#) (making the link between cancer & prevention/early detection (and thus PHC) Quote: “...At least half the global population cannot access essential health structures. This statistic is not a failure of primary health care; it is the consequence of primary health care not being prioritised enough....”

[Primary health care and the Tanzania Comprehensive Cancer Project](#)

HRW - Global Failures on Healthcare Funding

<https://www.hrw.org/news/2024/04/11/global-failures-healthcare-funding>

Among others, with **the Human Rights Watch analysis** of healthcare spending in more than 190 countries around the world.

Related **tweet Kalypso Chalkidou**: “...Public indebtedness appears to be a major impediment to governments’ investment in health care....”

ILO – Social health protection toolkit

<https://www.social-protection.org/gimi/SHP.action#thm>

“**The Social Health Protection Toolkit was released with our celebration of World Health Day on April 7th**, serving for practitioners and for all who want to learn about Social protection as a redistributive mechanism to protect people against social and economic risks, as such it can make an important contribution to a broader shift towards an economy that promotes human health and well-being within planetary boundaries.”

IDS (blog) - World Health Day: new technologies to accelerate action for global health

G Bloom; <https://www.ids.ac.uk/opinions/world-health-day-new-technologies-to-accelerate-action-for-global-health/>

“**This year, World Health Day marks 76 years since the World Health Organisation (WHO) was founded.** The theme for 2024 is “my health, my right”. The message comes in light of recent health disasters such as famine, conflict and dangers created by climate change to health. it is **important to establish governance arrangements to ensure that the benefits from innovation are**

made available at scale on an equitable basis. IDS is involved in two programmes that illustrate different aspects of this issue.....”

“... The [Mutual Learning for Mixed Health System Platform](#), is a research partnership between the Centre for Sustainable Health Innovations, Public Health Foundation of India, Amref Health Africa and the Institute of Development Studies. It undertook a series of consultations with government officials, private companies, politicians and funding agencies over several years, including during the pandemic. **One issue that was consistently raised was the rapid spread of digital health and the need for strategies to ensure that these innovations contribute to national strategies for making rapid progress towards universal health coverage.** There was broad agreement on what a digitally-transformed health system might look like, but there was much less agreement on the practical steps needed to make this happen.....”

PS: The second program: “ **Building capacity for the discovery and development of new antimicrobial agents** A [new Japan-UK partnership](#) aims to build innovative approaches for strengthening the discovery and development of new antimicrobial agents in this rapidly changing context. The consortium is led by Warwick University in the UK, and the National Centre for Global Health and Medicine, in Japan, with IDS and the National Graduate Institute of Policy Studies (GRIPS) in Japan helping to build mutual understanding of the antimicrobial discovery ecosystems in the two countries and develop partnership strategies based on this understanding. Moving forward, over time the partnership will be extended to low and middle-income countries....”

Pandemic preparedness & response/ Global Health Security

Verfassungsblog - To Bind or Not to Bind: Patterns of (In-)Formality in the New Pandemic Agreement

H P Aust et al ; <https://verfassungsblog.de/to-bind-or-not-to-bind/>

The authors conclude: « Commenting on the legal form of the future Pandemic Agreement is subject to many uncertainties. The future negotiation process may prove us wrong, and states might still settle on a binding document which does away with many of the softly worded provisions. However, this seems to be unrealistic and **the current draft evinces some concerns. While the Agreement may well serve as a starting point for a more constant and systematic engagement with pandemic prevention, preparedness and response on the part of political decision-makers, its impact can be severely compromised by the turn to informality which is written into its provisions.** “To bind or not to bind” – it is not easy to give a straightforward answer to this question so far. Yet, **it seems as if the new Pandemic Agreement will cloak substantive informality in the guise of legal formality. If the eventual Agreement will follow this pattern, the burden on states will be all the greater to bring the substantive ideas embodied in the Agreement to life.** This will apply, in particular, to **considerations of equity and distributive justice** – the implementation of which will depend on future negotiations in which powerful states might have the upper hand....”

GHF - How The EU Prepares For the Next Global Pandemic Domestically: An Examination of the Union Compulsory Licence [Guest Essay]

J Vidal & A Beck; [How The EU Prepares For the Next Global Pandemic Domestically: An Examination of the Union Compulsory Licence \[Guest Essay\] \(substack.com\)](#)

“...In today’s edition, we look at policy discussions within the EU on some of these difficult matters. Our **guest authors from [Health Action International](#) [HAI]**, have **tracked the evolution of the recent processes on IP related matters, particularly the proposal for the use of a region-wide compulsory license, through the institutions in Brussels.....”**

NYT – Is bird flu coming to people next? Are we ready?

<https://www.nytimes.com/2024/04/05/health/bird-flu-vaccines-treatments.html>

“Unlike the coronavirus, the H5N1 virus has been studied for years. **Vaccines and treatments are available should they ever become necessary.”** With focus on the US here.

“... **BARDA has enough building blocks for vaccines** — including adjuvants, substances that can enhance a vaccine’s strength — **to make millions of doses in weeks. Mass production could also ramp up quickly if needed**, federal officials said. **The C.D.C. already has two candidate viruses that can be used to make vaccines.** As the virus changes — gaining mutations that make it resistant to the current vaccines and drugs, for example — federal researchers may create newer candidates. **Three pharmaceutical companies can be called on to make vaccines for bird flu, but those vaccines would be manufactured on the same production lines that are used to make seasonal flu vaccines. ...”**

“... **At least four antiviral medications are available to treat people who may become sick with bird flu, including the widely available generic drug oseltamivir, sometimes marketed as Tamiflu.** Unlike the vaccines, which are stockpiled by the federal government, **the antiviral drugs are available commercially. Generic versions of oseltamivir are made by many manufacturers worldwide.** The federal government has a stockpile of tens of millions of doses of oseltamivir, Dr. Boucher said. The government is in close communication with manufacturers that could quickly ramp up the production of oseltamivir, as it has in the past during some bad flu seasons.....”

Guardian – Nigerians vaccinated in maiden Lassa fever vaccine clinical trials

<https://guardian.ng/news/nigerians-vaccinated-in-maiden-lassa-fever-vaccine-clinical-trial/>

Related **tweet CEPI**: “The promise of a Lassa fever vaccine draws ever closer with the **announcement of a CEPI-funded first-ever Phase 2 vaccine trial launched by @IAVI at @HJFMRI’s** trial site in Abuja, Nigeria The **@GuardianNigeria** reports on this new research milestone.”

Lancet HRH (Comment) - Anticipating a MERS-like coronavirus as a potential pandemic threat

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)00641-X/abstract](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)00641-X/abstract)

By A Zumla et al.

Link:

- Frontiers in veterinary science - [Animal health emergencies: a gender-based analysis for planning and policy](#) (by E Carlin, C Wenham et al.)

Planetary health

Guardian - Scientists confirm record highs for three most important heat-trapping gases

<https://www.theguardian.com/environment/2024/apr/06/record-highs-heat-trapping-gases-climate-crisis>

“Global concentrations of carbon dioxide, methane and nitrous oxide climbed to unseen levels in 2023, underlining climate crisis.”

“... The global concentration of carbon dioxide, the most important and prevalent of the greenhouse gases emitted by human activity, rose to an average of 419 parts per million in the atmosphere in 2023 while methane, a powerful if shorter-lasting greenhouse gas, rose to an average of 1922 parts per billion. Levels of nitrous oxide, the third most significant human-caused warming emission, climbed slightly to 336 parts per billion....”

Science News - Clearer skies may be accelerating global warming

<https://www.science.org/content/article/clearer-skies-may-be-accelerating-global-warming>

“Study suggests declining pollution is one cause behind decades-long drop in Earth’s reflectivity.”

“When 2023 turned out to be [the hottest year in history](#), it underscored the warnings of some prominent climate scientists, including James Hansen, that the pace of global warming was accelerating and had entered a dangerous new phase. **A new study, published Wednesday in *Communications Earth & Environment*, suggests one reason for such an acceleration: Earth’s skies are getting clearer and letting in more sunshine....”**

Yale Environment 360 - Nations Are Undercounting Emissions, Putting UN Goals at Risk

<https://e360.yale.edu/features/undercounted-emissions-un-climate-change>

“Because of lax rules, national inventories reported to the United Nations grossly underestimate many countries’ greenhouse gas emissions. The result, analysts say, is that the world can not verify compliance with agreed emissions targets, jeopardizing global climate agreements.”

“... the **national inventories of emissions supplied to the United Nations climate convention (UNFCCC) by most countries are anything but reliable**, according to a growing body of research. The **data supplied to the UNFCCC, and published on its website, are typically out of date, inconsistent, and incomplete**. For most countries, “I would not put much value, if any, on the submissions,” says Glen Peters of the Centre for International Climate Research in Norway, a longtime analyst of emissions trends...”

“... The proof of these greenhouse-gas bookkeeping failings lies in the real atmosphere. **By one recent count, national emissions inventories total just 70 percent of the actual additions to the air, as calculated using remote sensing and model analysis**. The remaining 30 percent are unaccounted for...” “... **As a result, say analysts, the world is flying blind, unable either to verify national compliance with emissions targets** or figure out how much atmospheric “room” countries have left for emissions before exceeding agreed warming thresholds.”

Guardian - China braced for rise in air pollution deaths

<https://www.theguardian.com/world/2024/apr/05/china-braced-for-rise-in-air-pollution-deaths>

“**Country needs to speed up environmental response to protect its ageing population, multinational study finds.**”

Nation - Carbon markets, the new Band-Aid solution to climate change in Africa

Collins Otieno; <https://nation.africa/kenya/health/carbon-markets-the-new-band-aid-solution-to-climate-change-in-africa--4532214>

“Packaged and sold as an alternative way to mobilising the increasingly diminishing climate finance in a win-win compromise or wooing private sector investment in climate change mitigation, **carbon markets could be the new Band-Aid solution to climate change, rekindling colonialism in the African continent.**”

- Related **tweet by Kalipso Chalkidou: "African countries or entities need to carefully assess the opportunities and challenges of carbon markets and engage in global dialogue and cooperation on this issue before entering into bilateral memoranda of associations to activate such dialogues."**

Guardian - World Bank's funding of 'hog hotel' factory farms under fire over climate effect

<https://www.theguardian.com/business/2024/apr/07/world-banks-funding-of-hog-hotel-factory-farms-under-fire-over-climate-effect>

“The private sector arm of the World Bank is facing claims that it contributes to global heating and the undermining of animal welfare by providing financial support for factory farming, including the building of pig farming tower blocks in China.”

“A coalition of environmental and animal welfare groups is calling on the World Bank to phase out financial support for large-scale “industrial” livestock operations. More than \$1.6bn was provided for industrial farming projects between 2017 and 2023, according to an analysis by campaigners. **The International Finance Corporation (IFC)**, part of the World Bank Group, is owned by 186 member countries including the UK, which has a 4.5% shareholding. Andrew Mitchell, the minister for development, is a governor of the IFC....”

Down to Earth - Extreme heat affects Indian women more than men; analysis finds spike in deaths due to high heat since 2005

<https://www.downtoearth.org.in/news/climate-change/extreme-heat-affects-indian-women-more-than-men-analysis-finds-spike-in-deaths-due-to-high-heat-since-2005-95437>

“For women, the percentage change in mortality rate increased by 4.63% in 2000 to 2010 and 9.84% between 2010 and 2019.”

“A new study has revealed a troubling gender disparity in India when it comes to coping with extreme heat. Women, according to the analysis, are significantly more vulnerable to extreme temperature conditions compared to men. **Since 2005, data shows a concerning rise in heat-related deaths among women in India,** said the analysis published in *Significance Magazine*, a journal by Royal Statistical Society.” Read why there seems to be a difference with men.

Guardian - World’s biggest economies pumping billions into fossil fuels in poor nations

<https://www.theguardian.com/environment/2024/apr/09/worlds-biggest-economies-pumping-billions-into-fossil-fuels-in-poor-nations>

“G20 countries spent \$142bn in three years to expand operations despite a G7 pledge to stop doing so, study finds.”

“.... The G20 group of developed and developing economies, and the multilateral development banks they fund, put \$142bn (£112bn) into fossil fuel developments overseas from 2020 to 2022, according to estimates compiled by the campaigning groups Oil Change International (OCI) and Friends of the Earth US. **Canada, Japan and South Korea** were the biggest sources of such finance in the three years studied, and **gas received more funding than either coal or oil....”**

Independent - India’s top court expands right to life to include ‘adverse effects of climate change’ in landmark ruling

<https://www.independent.co.uk/climate-change/news/india-right-to-life-supreme-court-climate-change-b2525074.html>

“Supreme Court says right to life and equality can’t be fully realised without clean environment.”

Global Health Information Network -Global call for plans that consider the health impacts of extreme heat

<https://ghhin.org/news/global-call-for-plans-that-consider-the-health-impacts-of-extreme-heat/>

“In an effort to better understand evolving governance around heat and health, **the Global Heat Health Information Network, in partnership with the World Health Organization (WHO) and HIGH Horizons Project, is calling for submissions of Heat Health Action Plans, National Health Adaptation Plans and related governance documents containing heat health components from around the world.**”

“The collected plans will inform policy analyses of global and thematic coverage and content of existing plans: where they are, who they protect, and how. This initiative will also help the Network update their global inventory of heat health policy efforts. “We want a better perspective of how governments around the world are responding to the increasing risks of extreme heat on health,” explains Joy Shumake-Guillemot, lead of the WMO-WHO Joint Office for Climate and Health...” . “

Submission deadline for inclusion in the review is 30 April 2024.

Guardian - World’s coal power capacity rises despite climate warnings

<https://www.theguardian.com/environment/2024/apr/11/worlds-coal-power-capacity-rises-despite-climate-warnings>

“Increase of 2% last year driven by plant expansion in China and slowdown in US and Europe closures.” Report by **Global Energy Monitor**.

Climate change tied to over half million stroke deaths globally, study finds

[the Independent](#);

“Climate change could be linked to more than half a million deaths from stroke across the globe, a new study suggests.”

“Over the last three decades, researchers found that non-optimal temperatures across the globe were increasingly linked to death and disability due to stroke. Majority of these strokes were due to lower than optimal temperatures, according to the first-of-its-kind study, published in the journal [Neurology](#) on Wednesday.....”

Covid

Science – Lessons in persistence: New Long Covid trials aim to clear lingering virus—and help patients in dire need

<https://www.science.org/content/article/long-covid-trials-aim-clear-lingering-virus-help-patients-need>

For an overview of what's currently in store, in terms of trials.

- Link: Stat News - [\\$10 billion long Covid 'moonshot' is being floated by Bernie Sanders](#)

"He's asking for a solid \$10 billion over 10 years that would be in addition to funding for continuation of the RECOVER trial."

Infectious diseases & NTDs

Telegraph - A simple policy change could 'eliminate' snakebite deaths in the Amazon

<https://www.telegraph.co.uk/global-health/science-and-disease/policy-change-could-eliminate-amazon-snakebite-deaths/>

"The jungle is a hotspot for deadly serpents, but modelling now proves lives and money could be saved by expanding antivenom stocks."

- Link: HPW - [New Dengue Vaccine Trials Show Promise in Brazil as Cases Continue to Rise](#)

AMR

Cidrap News - Study highlights global rise in drug-resistant priority pathogens

<https://www.cidrap.umn.edu/antimicrobial-stewardship/study-highlights-global-rise-drug-resistant-priority-pathogens>

"Carbapenem-resistant and difficult-to-treat (DTR) gram-negative priority pathogens are increasing in most regions of the world, according to an [analysis](#) of global surveillance data published yesterday in the *Journal of Global Antimicrobial Resistance*...."

NCDs

BMJ GH - The reported impact of non-communicable disease investment cases in 13 countries

G Troisi et al ; <https://gh.bmj.com/content/9/4/e014784>

Interpretation of the findings: « The results suggest that national NCD investment cases can significantly contribute to catalysing the prevention and control of NCDs through strengthening governance, financing, and health service access and delivery...."

The Conversation - Diet and nutrition: how well Tanzanians eat depends largely on where they live

H Ameye; <https://theconversation.com/diet-and-nutrition-how-well-tanzanians-eat-depends-largely-on-where-they-live-224008>

“... As an agricultural economist focusing on nutrition, my latest research looks into the difference in dietary quality between rural areas, secondary towns and the commercial capital Dar es Salaam...”

Health Research Policy & Systems - Gender and non-communicable diseases in Mexico: a political mapping and stakeholder analysis

<https://health-policy-systems.biomedcentral.com/articles/10.1186/s12961-024-01125-7>

by E Orozco-Nunez et al.

Mental health & psycho-social wellbeing

Lancet Comment - Assessing adolescent mental disorders in low-income and middle-income countries

S Onie et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(23\)02711-3/abstract](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)02711-3/abstract)

“Adolescent mental disorders pose a substantial global health challenge, profoundly impacting current and future quality of life. **By intervening at a young age, when most mental disorders emerge, we can prevent a substantial burden on health-care systems and ease long-term suffering for individuals and their families.** However, addressing this issue on a population level **requires reliable prevalence data, often missing in many low-income and middle-income countries (LMICs).** To bridge this gap, in **The Lancet, Holly E Erskine and colleagues accepted the challenge in Kenya, Indonesia, and Viet Nam,** aiming to collect accurate, high-quality epidemiological data.”

- The related **study in the Lancet:** [Prevalence of adolescent mental disorders in Kenya, Indonesia, and Viet Nam measured by the National Adolescent Mental Health Surveys \(NAMHS\): a multi-national cross-sectional study](#)

“This study aimed to generate nationally representative prevalence estimates for mental disorders in adolescents in Kenya, Indonesia, and Viet Nam....”

HPW - Mental Health Traumas in Conflict Zones Persist Long After Bombs Have Stopped Falling

<https://healthpolicy-watch.news/mental-health-traumas-in-conflict-zones-persist-long-after-bombs-have-stopped-falling/>

“Victims of conflict face a double or triple whammy when trying to cope with mental health challenges. Even the most resilient may begin to experience symptoms of anxiety, anger and sleeplessness during wartime that last decades. And those with pre-existing conditions are forced to cope with the acute trauma provoked by experiences of death, destruction and displacement at the same time as any chronic condition – for which they may be unable to get medications or support. **The issue was the focus of a recent online event “[No Peace of Mind](#)” organized by the Global Health Center of Geneva’s Graduate Institute and the UK-based charity [Beyond Conflict](#), in which experts with lived experience dealing with ongoing conflicts in Ukraine, Kashmir and the Palestinian West Bank and Gaza spoke about the myriad of challenges faced.”**

Social & commercial determinants of health

Guardian - The truth about hair relaxers: in the US, lawsuits over cancer. In Africa, soaring sales

<https://www.theguardian.com/global-development/2024/apr/10/black-women-beauty-hair-relaxers>

“Despite criticism for the use of potentially harmful chemicals, companies are still selling the products around the world.”

“... Africa is a lucrative market for the cosmetics industry. ... The companies [at the centre of the US lawsuits](#) produce some of Africa’s most popular brands. Dark & Lovely, owned by L’Oréal, is the best-selling relaxer in Nigeria. Ors Olive Oil No-Lye Relaxer, produced by Namaste Laboratories, is in second place. In Kenya, TCB Naturals is owned by Godrej Consumer Products, which [describes itself](#) as the “largest player globally in hair care for women of African descent”. All the listed brands are named in the lawsuit.....”

Sexual & Reproductive health rights

BMJ GH Analysis - Early and unintended pregnancy in Eastern and Southern Africa: analysis of adolescent sexual and reproductive health and rights policies

<https://gh.bmj.com/content/9/4/e013929>

By Shakira Choonara et al.

Global Health: Science & Practice - National Policy Influences of Contraceptive Prevalence and Method Mix Strategy: A Longitudinal Analysis of 59 Low- and Middle-Income Countries, 2010–2021

M Cohen et al ; <https://www.ghspjournal.org/content/early/2024/04/11/GHSP-D-23-00352>

“Evidence from over a decade of Contraceptive Security Indicators survey data across 59 countries reveals a subset of finance, governance, and logistics policies that boost modern contraceptive prevalence rate and method-mix strategy.”

Access to medicines & health technology

Nature (Comment) - AI can help to tailor drugs for Africa — but Africans should lead the way

G Turon et al; <https://www.nature.com/articles/d41586-024-01001-y>

« Computational models that require very little data could transform biomedical and drug development research in Africa, as long as infrastructure, trained staff and secure databases are available.”

Stat - About half of cancer drugs given accelerated approval don't show improved survival or quality of life

<https://www.statnews.com/2024/04/07/cancer-drugs-accelerated-approval-aacr/>

(gated) “For decades, the Food and Drug Administration’s accelerated approval pathway has helped companies get drugs for serious unmet medical needs to patients — and the market — sooner. But about half of cancer drugs approved via this route fail to improve patient survival or quality of life in subsequent clinical trials after more than five years of follow-up, according to new findings presented Sunday at the American Association for Cancer Research annual meeting.”

“The data come from an analysis of cancer drugs granted accelerated approval over the past decade. In some cases, failure to show clinical benefit didn’t stop the FDA from converting accelerated approvals into full approvals, and the authors note the agency’s conversion decisions have increasingly been based on less stringent evidence of a drug’s benefits.....”

- See also AP - [Many cancer drugs remain unproven 5 years after accelerated approval, a study finds](#)

IJHPM - Comparison of Three Regional Medicines Regulatory Harmonisation Initiatives in Africa: Opportunities for Improvement and Alignment

https://www.ijhpm.com/article_4592.html

by T Sithole et al.

Decolonize Global Health

BMJ GH - Missing in action: a scoping review of gender as the overlooked component in decolonial discourses

T Nassiri-Ansari et al ; <https://gh.bmj.com/content/9/4/e014235>

« true decolonisation is only possible when both are addressed equally; failure to address the colonial root causes of gender-based inequalities will allow for the perpetuation of racialised notions of gender to persist across the global health ecosystem. However, **the authors note with concern the relative sidelining of gender within the decolonising global health discourse, especially as it navigates the critical transition from rhetoric to action.** »

Check out the findings of this scoping review and their conclusion.

BMJ GH (Commentary) The elephant in the room: reflecting on text-to-image generative AI and global health images

Arsenii Alenichev, Koen Peeters et al ; <https://gh.bmj.com/content/9/4/e015601>

“There has been increasing evidence that generative AI produces biased, exaggerated and otherwise problematic images with regard to class, race and gender, among other socially enacted markers. Further extending these concerns to global health and text-to-image generation, **in this commentary article we discuss ‘the elephant in the room’ both as a metaphor for global health, visual culture and stereotypical depictions of ‘Africa’, and in the literal sense, as shown in figure 1.....”**

The authors conclude: “... Images, therefore, are not simply representations but active political agents that help construct relationships of difference and frame political struggle. This simple point leads to a **difficult question: What are we to do with this elephant in the room of global health visual culture, and the relationship between ‘real’ stereotypes and their proliferation via AI?** There is of course a solution offered by AI ethics and safety—that is, to simply fix the imperfect datasets and biases. However, we believe that **the technical fix of moderating datasets and algorithms will only offer a short-term ‘comforting’ solution**, overlooking—or even hiding—the elephant in the room: millions of real images and shared histories marked by abuse and exploitation. **Ultimately, the definitive solution would be the emergence of societies wherein both real and AI-generated global health images will not be needed for the effective functioning of healthcare systems, while investing into genuine bottom-up photojournalism and supporting local representational efforts radically departing from the omnipresent colonial visualisations of Africa and other colonially misrepresented spaces.”**

BMJ GH Editorial - Stuck in ‘the field’: why applied epidemiology needs to go home

F L Jephcott et al ; <https://gh.bmj.com/content/9/4/e015692>

Well worth a read.

Miscellaneous

NEJM - Corporate Medicine 2.0 — Special Purpose Acquisition Companies in the United States

<https://www.nejm.org/doi/full/10.1056/NEJMp2400608>

“So-called special purpose acquisition companies represent a new phase in the corporatization of medicine, and their activities could have implications for providers, patients, and policymakers.”

“... Acquisitions of U.S. health care entities by private equity firms have come under scrutiny. But the back end of corporate acquisitions — the exit strategy — has remained largely ignored, despite arguably being more important in the long run. Private equity firms typically sell acquired entities to another private company within 3 to 7 years. Increasingly, however, a different corporate exit strategy, going public, has emerged in health care. Going public has typically involved listing shares of the acquired entity on a stock exchange. But a new approach — which entails establishing so-called special purpose acquisition companies (SPACs) — is increasingly being used to enable private health care companies to be publicly listed. This strategy could have implications for providers, patients, and policymakers.....”

CGD - A Modified Common Framework for Restructuring Sovereign Debt

D Grigorian; <https://www.cgdev.org/blog/modified-common-framework-restructuring-sovereign-debt>

« ... The proposed approach—a Modified Common Framework—contains methods of coercion, enticement, and coordination that would address the collective action problem embedded in the Common Framework [from the G20]”

Devex - 'World's most comprehensive' health database opens to LMIC researchers

<https://www.devex.com/news/world-s-most-comprehensive-health-database-opens-to-lmic-researchers-107434>

“The UK Biobank, a large-scale biomedical database containing health and lifestyle information from half a million individuals, has created a new fund allowing researchers from low- and middle-income countries to access its data. ... The [Global Researcher Access Fund](#) will cover the cost of accessing the database — £500 (\$635.18) for three years of access to the database....”

“... The fund aims to raise \$100,000. So far, they've raised \$70,000. It has received philanthropic donations from big pharmaceutical companies, including [AstraZeneca](#), [Bristol-Myers Squibb](#), [Johnson & Johnson](#), and [Regeneron](#)....”

Papers & reports

Lancet Global Health – May issue

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

Check out, among others:

- Comment - [Disability and mortality in LMICs: why we need to know more](#) (by N E Groce)

Comment related to a **new study in the Lancet GH by Tracey Smythe and Hanna Kuper** who conduct a systematic review and meta-analysis of mortality rates among people with disabilities in 22 low-income and middle-income countries (LMICs). “.... **Mortality rates of people living with a disability are not well understood.....**”

- Study - [Progress towards universal health coverage and inequalities in infant mortality: an analysis of 4.1 million births from 60 low-income and middle-income countries between 2000 and 2019](#) (by T Hone et al).

“This study examines whether the expansion of UHC between 2000 and 2019 is associated with reduced socioeconomic inequalities in infant mortality in low-income and middle-income countries (LMICs).....”

Interpretation of findings: “....since UHC expansion in LMICs appears to become less beneficial to poorer populations as coverage increases, UHC policies should be explicitly designed to ensure lower income groups continue to benefit as coverage expands....”

- Health Policy study - [Masculinities and sexual and reproductive health and rights: a global research priority setting exercise](#) (by A Brennan-Wilson et al)

“Engaging men and boys in sexual and reproductive health and rights (SRHR) and doing so in a way that challenges harmful masculinities, is both neglected and vital for improving the SRHR of both women and men. **To address this gap, WHO commissioned a global research priority setting exercise on masculinities and SRHR.** The exercise adapted the quantitative child health and nutrition research initiative priority setting method by combining it with qualitative methods. Influenced by feminist and decolonial perspectives, **over 200 diverse stakeholders from 60 countries across all WHO regions participated.** The exercise forges a **collaborative research agenda emphasising four key areas:** gender-transformative approaches to men's and boys’ engagement in SRHR, applied research to deliver services addressing diversity in SRHR among men and women and to generate gender-equality, research designs to support participation of target audiences and reach to policy makers, and research addressing the priorities of those in low-income and middle-income countries.”

IJHPM (Editorial) - Placing Trust at the Heart of Health Policy and Systems

M McKee et al; https://www.ijhpm.com/article_4591.html

PS: This editorial is based on **work undertaken in preparation for a Ministerial Conference organised by the European Regional Office of WHO on Trust and Transformation**, held in Tallinn, Estonia, in December 2023.

Lancet Offline - A mirage of progress for health and democracy

R Horton; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)00739-6/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)00739-6/fulltext)

“**News headlines suggest democracy is under threat. And so it is.** Last month, the **Bertelsmann Stiftung Transformation Index (BTI)** recorded a **further decline** (between February, 2021, and January, 2023) **in the quality of democracy across 137 countries.** Only 63 nations were classified as

democracies. The majority were labelled autocracies—covering 4 billion people. The BTI deploys words such as “gloomy”, “gradual erosion”, and “a new nadir”. Staggeringly, over 100 countries were judged to display “moderate” to “failed” governance. If governance is so compromised, the goal of universal health coverage becomes little more than a beautiful and distant fantasy. ...

Horton then looks at the **new threat of AI in particular for democracies**.

And concludes: “...Governments are already using AI to confuse and divide their peoples. **What remains of democracy is in grave danger. Without a strong civil society, protections for freedom of speech and protest, a politically independent judiciary and the rule of law, and a vibrant and pluralistic media, democracies will continue to wither—and the demand for a society that values human dignity and health will be slowly extinguished.**”

BMC Health Services research - Understanding health system resilience in responding to COVID-19 pandemic: experiences and lessons from an evolving context of federalization in Nepal

[BMC Health Services research;](#)

By S Regmi, S Witter et al.

UCL (Working paper) - Rethinking the global water challenge through a common good lens

Mariana Mazzucato and Mariam Zaqout; <https://www.ucl.ac.uk/bartlett/public-purpose/publications/2024/apr/rethinking-global-water-challenge-through-common-good-lens>

New working paper.

Blogs & op-eds

HSG (blog) – Building Back Better: 10 Key Messages on Health Systems Recovery

<https://healthsystemsglobal.org/news/building-back-better-10-key-messages-on-health-systems-recovery/>

“In this blog hosted by the TWG FCAS, **Ali Ardalan and Clara Affun-Adegbulu highlight ten strategic messages for health systems recovery**”

“**Health systems recovery** refers to the process undertaken to restore and strengthen the health system following a shock.” “.... Given the importance of the topic, particularly in the region, **the World Health Organization’s Eastern Mediterranean Region Office (WHO EMRO) has been working on building understanding and capacity for health systems recovery. In December 2023, WHO EMRO held a meeting in Cairo, Egypt with a diverse group of health system recovery experts, including academics, practitioners, donors, UN agencies, NGOs and national organizations. The goal**

was to share knowledge and experiences, discuss effective, innovative approaches and identify key principles and lessons learned to tackle complex recovery challenges in settings affected by conflicts and crises in the Eastern Mediterranean region and beyond.....”

FP2P blog - The Battle for Tax Justice will be fought country by country: here are five useful tips for activists

<https://frompoverty.oxfam.org.uk/the-battle-for-tax-justice-will-be-fought-country-by-country-here-are-five-useful-tips-for-activists/>

“Guest post from [Paolo de Renzio](#), introducing his new (Open Access) book.”

K Bertram - Why bother? Advocacy and (no) change in our current times.

<https://katribertram.wordpress.com/2024/04/07/why-bother-advocacy-and-no-change-in-our-current-times/>

New blog by **Katri Bertram**. Who has far more impact (on “the global health powers that be”) than she sometimes thinks herself.

Excerpt: “...**Since October 7, and possibly since the COVID-19 pandemic, my advocacy and anger have deflated.** I feel like a balloon that has little left to give – even in my blogs. Advocating for change feels meaningless, when companies and institutions that were part of **the inequity problem during the pandemic continue to be celebrated and reap scarce funds.** Advocating for change feels **pointless, when most decision-makers and large segments of value-based organizations’ staff remain silent when basic human rights are rolled back, and entire population groups are being dehumanized or called “animals”.** I have no anger left. I’m just disillusioned and sad. Yet is silence even an ethical option in these current times?...”

Tweets

Tim Schwab

“**The new Gates-led verification process includes “twenty different ethics and integrity checks” over preprints.** Curious how researchers feel about this...in part b/c there are so many published accts of Gates having ethics/integrity probs in research...”

Kent Buse

“Pleased to be part of process led by @AllianceHPSR @WHO @Sida @WiltonPark on healthy societies. **Pivot to embrace upstream determinants of health equity is agonisingly slow. So many interests aligned against it.** We need more people to join the struggle.”

Kalypso Chalkidou

"AIDS Healthcare Foundation says Moderna's promise to build a state-of-the-art mRNA manufacturing facility in Africa in 2022 was nothing more than a self-serving effort to deflect criticism for price gouging on its COVID-19 vaccine after the pharma company announced today that it's suspending the project."