

IHP news 771 : Kicking off the Replenishment season – in very different times

(19 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,

This newsletter issue will first of all focus on the [IMF/WB Spring Meetings](#) in Washington DC. A Guardian opinion by L Elliott put the stakes rather aptly over the weekend: “[Are the octogenarian IMF and World Bank sprightly enough for the job?](#)” You probably have as many doubts as I have. Among others, **the replenishment of the International Development Association (IDA)** - the World Bank’s concessional lending arm to the world’s poorest countries - is [being discussed](#) this week. While decisions are only expected later this year in this respect, with this [‘Banga Bucks’ discussion](#) [‘the ‘Replenishment Season’ has officially opened](#). The **GAVI Replenishment in June** will be a first milestone.

When it comes to global health fundraising, I have the following humble advice for the ‘Replenishers’. **It is long overdue to link global health replenishments to global tax justice**, and not just leave this fight anymore to Oxfam, the Tax Justice Network and other activists. As they’re bloody right. In fact, I consider this **the necessary HIC (global health) “counterpart” of Africa CDC’s ‘New Public Health Order’ in post-pandemic times**. A necessary ‘pivot’, if you want 😊.

A few reasons why this might be appropriate now (and probably should have started at least a decade ago, in the aftermath of the financial crisis):

First, **Global Health Initiatives like GAVI & Global Fund started when ‘The Third Way’ was still the main “mantra” in most HICs**, and global health was entering its ‘golden decade’. We live in very different times now. Now, against a backdrop of debt in many LMICs, tight public budgets in HICs, and radical-right wing parties bent on cutting funding for aid and global public goods (*often together with centre-right ones, who increasingly focus on the need for more defense funding and “migration deals”, at the expense of GPGs*), my guess is that **linking funding for GPGs with global tax justice – and calling out the billionaire class in the process** – would make it much harder for them to cut billions. And would actually also take away some of the current momentum of the many “would-be Orbans” of this world.

Second: **the current G20 host (Brazil) seems [fairly open to taking some initiative in this respect](#)** (aided also by advisors like **Gabriel Zucman**). There might be a **small [window of opportunity](#)** in fact. So don’t listen to the philanthropist “sirens” (whether Gates, Wellcome, ... or ‘likeminded’ Commissions, ‘friendly thinktanks’ and ‘processes/initiatives’) that are way too powerful in Global Health circles: **in the year 2024 it’s long overdue to go after the billionaire class**. As for every half decent billionaire, there are at least ten others. And even with half decent ones, like Bill, there are major issues, including from a political point of view, as for example an article in The Hindu **on**

[“Gatescrashing democracy”](#) made abundantly clear. By now, we should all have recovered from the [‘Good Billionaire’ syndrome](#) (in the words of Tim Schwab) 😊.

So whether via a [Global Public Investment](#) approach or through other means, **it’s about time global health Replenishments** (*and related advocacy by global health civil society & other ‘Friends of...’*) **make a crystal-clear link with global tax justice.** They could learn a thing or two from the [International Tax Task Force on climate finance](#) which also met [at the Spring meetings](#) for the first time. Heck, even [Global Citizen has seen the light now](#) ! Or to paraphrase a must-read [paper](#) from **Daniel W Krugman** from last weekend: **let’s make Replenishments a bit more about global health.** As in spite of the undeniable (major) global health merits of these GHIs, they’ve been too much about Global Health also (*with perhaps “super-PPP” ACT-A as the saddest case in point*). By the way: the same goes for all of us: **let’s try to become a bit more “global health institutes” in the coming years.** Our world badly needs it.

Over to the rest of the news then. In addition to the Spring meetings, we also pay some attention to the [ongoing pandemic agreement saga](#). In a **Third World Network webinar on Tuesday**, civil society’s mood was extremely gloomy about the latest (leaked) draft. The day after, at a **stocktaking webinar organized by the Geneva Graduate Institute’s Global Health Centre, the, Global Preparedness and Monitoring Board (GPMB) and the Pandemic Action Network (PAN)**, the [mood was a bit better](#), including a fair amount of “positive spin” I’m afraid 😊. Mike Ryan, who gave a short keynote, sort of set the scene, arguing: *“It doesn’t end in May, it begins in May!”* Not quite sure how this all rhymes with **Suerie Moon’s opening**, in which she – rightly – said the [window of opportunity is closing](#) to reach a meaningful PPR deal that is more effective and equitable than the status quo we’ve seen during COVID-19...

Anyway, as the more controversial aspects of a deal in Geneva seem to be postponed (*for better or for worse*), the Biden government [announced](#) its **2024 Global Health Security strategy**, among others comprising **50 formal GHS partnerships with countries**. With rather limited funding, though, it appears. Meanwhile, a [High-Level emergency regional meeting in Kigali](#) last weekend **raised alarm about Mpox**, together with [a widely noted worrying preprint](#).

On the vaccine manufacturing front, **an Africa CDC statement on Moderna’s plan to reassess commitment to African vaccine manufacturing** was equally widely noted, even though the news, to some extent at least, also [highlights difficulties in creating a competitive vaccine sector on the continent](#). We also already want to flag a [Lancet Breast Cancer Commission report](#) and a [UNFPA report](#) from earlier this week.

Finally, **April is Autism and Neurodiversity Acceptance Month**. Let’s all make spaces safer for neurodivergent people, and the world in general a better place for them.

Enjoy your reading.

Kristof Decoster

Featured Article

It's all connected: Gender Justice for Planetary Health – including at national and local level.

Deepika Saluja (*Cofounder & Chair, Women in Global Health India; Program Manager (Ubuntu Initiative), The George Institute for Global Health.*)

During my PhD coursework in 2013, I had my first (academic) exposure to the interconnection between human health, environment, and development. At the time, I had to make a field visit to the site where some of the 10,000 families residing in slums at the banks of Sabarmati River in Ahmedabad were rehabilitated - read violently evicted and relocated nearby a dump yard. The Sabarmati Riverfront Development Project started to curb pollution of the river from municipal and importantly industrial waste, but [was implemented with strong violations of human rights](#) including the right to life, right to shelter, right to work and earn a livelihood. As I reflect on the many more assignments I worked on thereafter, I gradually managed to unpack these interlinkages a bit deeper, ranging from the impact of indoor air pollution on women's health, understanding the biomedical waste management system in India, to occupational health and safety hazards in the construction industry.

The [latest Global Health 50/50 report on Planetary Health](#) (titled 'Gender Justice for Planetary Health') helps to put my reflections further into perspective on: a) how gendered and disproportionate the impact of this development-induced environmental damage has been, further aggravated by the intersection of multiple inequities these population groups are already living with; b) how people from the most impacted population groups have rarely (read never) been consulted, or included in decision making spaces, which are typically dominated by elite and powerful men; c) people's loss of trust in the state for recourse; and d) the need for integrating a gender justice lens in planetary health work, to mitigate the impact and regain people's trust.

While the planetary health discourse has become more prominent over the past decade or so, featuring also numerous declarations and commitments signed at high-level meetings (including the [Gender Action Plan at COP25](#) (2019) to strengthen the mitigation and response mechanism), action on the ground has been lagging far behind, especially by the countries, actors and organizations contributing the most to this climate crisis. You probably know who I'm talking about. At the same time, the climate emergency and other planetary boundary crises have gotten worse year after year, by now making the changes noticeable to even the ignorant ones. This week, for example, the world witnessed massive flooding in Dubai, earlier this month there was [a lethal heatwave in the Sahel](#). Importantly, the [cost of inaction is also shooting up fast](#).

Through its annual reports, Global Health 50/50 has been demanding more accountability from the global health organizations on gender equity. This (complementary) 2024 report does the same in the context of planetary health, by asking three critical questions: 1) do organisations' planetary health activities integrate a gender lens; 2) do organisations sex-disaggregate the data they report on planetary health issues; and 3) who leads organisations active in planetary health?

The report reveals that gender-transformative action is remarkably absent from organizations working on planetary health (114 in total, of which 99 non-profit). Only 24% of the non-profit organizations (NPOs) in the sample have adopted a gender-transformative approach, 37% even failed to mention

gender altogether. Interesting to note here, 38% of organizations had planetary health activities that respond to the specific needs of women and girls alone, with gender-specific programmes focusing on the traditional caregiving roles of women and girls. They thereby perpetuate the [‘feminization of obligations and responsibilities’](#) by placing the mitigation burden back on the shoulders of these women, without engaging men and boys or addressing other structural inequalities. This gender-specific approach also misses out on the specific needs of other genders and vulnerable population groups.

Further, the data collected and reported on planetary health must capture how sex and gender affect the health of men and women differently, by disaggregating data. The report shows that while 65 percent (63 out of 99) of non-profit organizations have published policy committing to data disaggregation, only 18 percent of these organizations have actually published any sex-disaggregated data.

Lastly, but most importantly, the assessment on leadership of these organizations shows a promising equal representation of men and women on boards of NPOs, but **with abysmal (2.2%) representation from women from low-income countries**. Moreover, among 921 board members (from the 60 organizations included in the Board review), 68 % are nationals of high-income countries, with 39 % as nationals of the US alone; only 4.5 % are nationals of low-income countries. And there are more discomfoting stats in the report.

Reflecting on the findings, Prof Kent Buse, co-CEO of Global Health 50/50 stated ‘While we are delighted to see so many of the organisations in our sample engaging in urgent and much needed efforts on planetary health, we are somewhat concerned that they do not reinforce the same inequitable systems and reflect the prevailing structures of power and oppression that are driving our pressing environmental health crises.’

Women in Global Health’s (2023) [She Shapes](#) report highlighted that women leadership in global health has remained stagnant at less than 25 percent over the past five years, as compared with the (2019) [Delivered by Women Led by Men](#) report, while comprising more than 70 percent of the healthcare workforce. The specific needs and challenges of women delivering care and receiving care, as well as their voices are thus more often than not missing in the decision-making spaces. [Within India, these statistics are even more disappointing](#), with women occupying only 18 percent of the healthcare leadership positions, in spite of the fact that 29 percent of doctors, at least 80 percent of nurses and midwives, and nearly 100 percent of ASHA workers are women.

By committing to women’s leadership in global and planetary health, collecting and reporting sex-disaggregated data, and adopting gender-transformative approaches, we will be better able to highlight and respond to the needs and lived experiences of communities deeply impacted by the actions and decisions made by people in power, largely men from the global north - thus challenging the structural inequities and addressing the root-causes of various forms of discriminations and oppressions.

The pandemic has shown the impact of gender equity in leadership. Through more diverse voices and representation, health and social care policies can be designed and implemented in an inclusive and responsive manner, reducing health inequities on the ground. Efforts like Global Health 50/50 ask vital questions in this respect, demanding accountability from organizations and countries on their commitments as well as actions taken towards achieving gender equity. But they also point to the way forward. As Kent Buse explained, ‘there can be significant power in uniting the efforts of the gender

justice, health justice, and environmental justice movements. Together they can work to realise the indivisible rights to gender equality, to health, and to a healthy environment. Working together they will be more effective at dismantling systems that are harmful to planetary health than these movements working alone.'

This is even more important, dare I say, at national and local level. With important elections coming up in India, voters might want to keep this in mind!

Highlights of the week

WB/IMF Spring meetings (15-20 April, NY)

With a number of reads, both pre-analyses and updates from during the Spring meetings (many via **Devex**). Not really in chronological order for once.

Devex Newswire: Ajay Banga's challenge at the Spring Meetings 2024

<https://www.devex.com/news/devex-newswire-ajay-banga-s-challenge-at-the-spring-meetings-2024-107460>

"The IMF-World Bank Spring Meetings are underway. **Once a technical gathering for financial experts, they've evolved into a key forum for discussing global development challenges.** "

"... World Bank President Ajay Banga has pledged that his 80-year-old institution will have greater scale, impact, speed, and simplicity." **"Movements are happening in the multilateral development banks but they need to happen faster. The World Bank is still a very inward-focused institution,"** Rachel Kyte of Oxford University's Blavatnik School of Government said during a media briefing. **"Ajay Banga needs to move from rhetoric to execution."**

"Banga is trying to do just that, **hoping to demonstrate that the bank has made headway in its so-called evolution road map during these slimmed-down Spring Meetings, whose core program this year will span just three days instead of the usual five.** Among the **topics to be discussed** are **fundraising for the lowest-income countries; financial measures to boost lending; a focus on global public goods like climate change; a new score card; and "fixing the plumbing" of internal bank operations,** as Banga likes to say.

Devex - What to expect at the World Bank Spring Meetings 2024

<https://www.devex.com/news/what-to-expect-at-the-world-bank-spring-meetings-2024-107461>

"The International Monetary Fund-World Bank Spring Meetings are set to take over Washington, D.C. Here's everything you need to know." **Excellent primer & thus must-read.**

A few excerpts & chunks:

“The [World Bank](#) Spring Meetings will tackle a slew of thorny topics, among them: progress on the bank’s ambitious reform effort, President Ajay Banga’s emerging vision for the 80-year-old institution, a big push around global public goods, and fundraising for the world’s poorest countries. ... The meetings will look to build on the changes approved by governors at the October annual meetings in Morocco, which included a [new climate-oriented vision statement](#) for the bank — to “create a world free of poverty on a livable planet” — a [host of innovative financial instruments](#) to boost lending, and myriad administrative reforms designed to make the institution faster, simpler, more efficient, and impactful....”

“... There is also the backdrop of tight donor budgets, which are likely to make discussions around financing trickier than ever. With high-income countries being asked to pledge to the [International Development Association](#), or IDA — the bank’s concessional lending arm to the world’s poorest countries — later this year, will they be willing to pony up money for anything else? ... While no major decisions will be made on funding IDA, it will be a key topic of discussion at the meetings....”

PS: “IDA countries are home to a quarter of humanity — 1.9 billion people, and growing. Yet inequality is growing as well: Half of the world’s 75 most vulnerable countries are facing a widening income gap with the wealthiest economies for the first time this century, a new World Bank report found.” “...The IDA20 replenishment raised \$93 billion, of which only [\\$23.5 billion](#) came from donors. Banga has said it is crucial to “turn the tide” on declining donor contributions and increase them by between 20% to 25% for IDA21.”

“... ‘Tantalizingly vague’ on global public goods : Where the bank has been vocal, however, is highlighting the myriad reforms and new initiatives underway — as outlined in its “From Vision to Impact” note — so much so that Clemence Landers, a senior policy fellow at the Center for Global Development, questioned how all the pieces fit together. “The document gives a sense that a lot of different initiatives are underway but a lot of it is still in early days and remains tantalizingly vague,” Landers said. “It was always going to be more of a marathon than a sprint, but we are 18 months into this reform process and it remains unclear if there’s a unified vision shared by all shareholders on where the agenda needs to land,” she said, referring to the 2022 call for reform spearheaded by the United States.... Top of the list when it comes to vagueness is the bank’s plan to tackle global public goods — cross-border challenges such as climate change and pandemics.”

PS: “... The document also offers the first public mention of a Livable Planet Fund, which is an extension of the Global Public Goods Fund set up as part of the 2018 capital increase package to offer concessional financing for global public good programs to countries who receive loans from the institution’s [International Bank for Reconstruction and Development](#) for middle-income countries, or MICs. However, while the GPG Fund is funded by [IBRD income](#), the Livable Planet Fund will be “funded by governments but also by philanthropies,” Banga said during a press conference Thursday.....”

“A new score card: ... One area where the bank has made real progress since Marrakech is reconfiguring the bank’s corporate score card, which measures the results of the bank’s work. The idea is to streamline the scorecard, shift its focus from inputs to outcomes, and operationalize the bank’s new vision to create a world free of poverty on a livable planet.....”

“... Oxfam has been [pressuring](#) the bank to improve the way it measures inequality and is pleased to see the new scorecard include two headline indicators to track shared prosperity. This comes as [new data](#) from Oxfam shows that economic inequality is high or increasing in 60% of countries with loans from the World Bank and the [International Monetary Fund](#). “The new scorecard is a

really big step forward; it's the first time the bank has ever really measured inequality in a meaningful way," Oxfam's Donald told Devex. **"But are they going to actually put it into the support and advice they are giving countries? Because that's what will really make the difference." ..."**

Devex Newswire: Banga aims for \$100 billion in IDA replenishment

<https://www.devex.com/news/devex-newswire-banga-aims-for-100-billion-in-ida-replenishment-107480>

"Banga bucks: As World Bank president, Banga must be good at math and he's hoping **it adds up to \$100 billion** for this year's [International Development Association replenishment](#) — the fundraising round for the bank's critical lending arm for low-income countries. **At an event yesterday, Banga said that if IDA's donors can put together around \$28 billion to \$30 billion, then the bank's ability to leverage those funds on capital markets by up to four times would put the headline replenishment number north of \$100 billion** — a "very helpful" amount, he said...."

PS: **" The IDA's replenishment is critical for funding global health security and addressing health-related issues linked to climate change, according to experts."**

WB (press release) Despite High Potential, 75 Vulnerable Economies Face 'Historic Reversal'

<https://www.worldbank.org/en/news/press-release/2024/04/14/the-great-reversal-prospects-risks-and-policies-in-international-development-association-countries>

"In Half of IDA Countries, Income Gap with Wealthiest Economies is Widening." (see the Devex primer above)

"Half of the world's 75 most vulnerable countries are facing a widening income gap with the wealthiest economies for the first time in this century, a new World Bank report has found. Taking full advantage of their younger populations, their rich natural resources, and their abundant solar-energy potential can help them overcome the setback...." **" The report, [The Great Reversal: Prospects, Risks, and Policies in International Development Association Countries](#), offers the first comprehensive look at the opportunities and risks confronting the 75 countries eligible for grants and zero to low-interest loans from the World Bank's International Development Association (IDA). These countries are home to a quarter of humanity—1.9 billion people...."**

India Today - Income inequality up in 60% of IMF, World Bank recipient nations: Report

<https://www.indiatoday.in/business/story/income-equality-increases-in-60-per-cent-nations-aid-from-imf-world-bank-report-2527351-2024-04-15>

With **coverage of the new Oxfam report** (see above: Devex primer).

"An analysis by Oxfam International found that 60% of countries that receive loans or grants from the International Monetary Fund (IMF) and World Bank are facing high or increasing income inequality..... Oxfam, a non-profit group, explained that out of 106 such nations, 64 are seeing either

high levels of inequality or a rise in inequality.” “ This is determined using a measure called **the Gini coefficient, where a value above 0.4 is seen as a warning sign by the United Nations.....”**

PS: “... **Kate Donald, who leads Oxfam International's Washington DC Office, criticised the IMF and World Bank, saying they claim to prioritise reducing inequality but support policies that widen the gap between the rich and everyone else.** ... "The IMF and World Bank say that tackling inequality is a priority but, in the same breath, back policies that drive up the divide between the rich and the rest," said Donald. **She highlighted the struggles of ordinary people due to cuts in public funding for essentials like healthcare and education.** "Ordinary people **struggle more and more every day to make up for cuts to the public funding of healthcare, education and transportation.** This **high-stakes hypocrisy** has to end," she added.....”

“... "But if **the Bank is serious about tackling inequality, the first test will be making it a headline priority for its lending to the world's poorest countries,** being discussed now at the Spring Meetings," said Donald, describing the World Bank's agreement to prioritise reducing inequality for the first time since its establishment in 1944 as a 'landmark move'..... ... **Oxfam proposed raising funds by increasing taxes on the super-rich, which could generate trillions of dollars to support development and address climate change.**”

Devex - Push to tax polluters, mega-rich to pay for climate action takes off

<https://www.devex.com/news/push-to-tax-polluters-mega-rich-to-pay-for-climate-action-takes-off-107487>

Must-read analysis. “**An international tax task force and G20 nations are discussing proposals for global taxes to raise funding to fight climate change and inequality in low- and middle-income countries.**”

“... Meeting on the sidelines of the [International Monetary Fund-World Bank Spring Meetings](#) on Wednesday, a small group of countries discussed how to design a set of levies on fossil fuel producers, aviation, maritime shipping, and financial transitions to unlock much-needed climate and development cash. [Launched](#) at the 28th United Nations Climate Change Conference in Dubai last year and **co-chaired by Barbados, France, and Kenya, the international tax task force** has committed to assessing the impact of different levies and their political and technical feasibility. The group is due to present its initial findings at COP 29 in Azerbaijan in November and hopes to rally a coalition of the willing around a set of feasible options for climate taxes at the COP 30 talks in Brazil in 2025. ...”

“**The task force is part of a host of initiatives exploring how to finance the \$2.4 trillion in annual investments low-income and emerging economies outside China need by 2030 to decarbonize energy systems, respond to climate shocks, and build resilience.** Although the tax proposals on the table are not new, **international taxation is gaining traction as a way to raise new and additional resources.** “

“... Also meeting on the sidelines of the Washington-based financial institutions on Thursday, **G20 finance ministers of the Group of 20 major economies will discuss a proposal, put forward by the Brazilian presidency, to tax the super-rich to help address inequality and tackle poverty and hunger,** sources told Devex. **The task force is currently considering five levies:** A tax on fossil fuel producers at the point of extraction, a windfall tax on fossil fuel profits, a small tax on financial transactions, an air passenger levy, and a maritime fuel levy. Existing estimates show that

combined with the phaseout of fossil fuel subsidies, the levies could raise \$1.2 trillion a year, a spokesperson for the task force’s secretariat told Devex in an email.....”

“... On Wednesday, Colombia joined the task force which comprises Ireland, Spain, Antigua and Barbuda, and the Marshall Islands. Brazil is considering joining the group while the European Union, Germany, the IMF, and U.N. representatives observed the meeting. The process aims to build on momentum for designing a fairer international taxation system, which could allow low- and middle-income countries to raise more revenues for public services and climate action. But in practice, this requires strong international cooperation and could take years to deliver.....”

“... In parallel, Brazil, under its presidency of the G20, has proposed a 2% minimum wealth tax on the world’s top billionaires to reduce inequality and fight hunger and poverty. The proposal is based on a study co-authored by leading economist Gabriel Zucman, which shows that the measure could unlock \$250 billion in tax revenues annually if applied to fewer than 3,000 billionaires, currently subject to tax rates equivalent to 0%-0.5% of their wealth.... ... So far, only Brazil and France have endorsed the idea of a global minimum tax on the super-rich. The Brazilian presidency has commissioned Zucman to explore the feasibility and implications of implementing the tax and report to ministers in June....”

- Related link: G20 - [In Washington, G20 finance ministers will discuss taxing the super-rich and fighting hunger and poverty](#)

Guardian (Analysis) - At last G20 is showing how to finance an assault on poverty

L Elliott; <https://www.theguardian.com/business/2024/apr/14/at-last-g20-showing-how-finance-assault-poverty-lula>

« Brazilian president Lula’s proposals have the backing of the World Bank. Now we need action.”

“... The good news is that Banga has given the Bank a new sense of urgency. He will find a willing partner in Brazil, which holds the presidency of the G20 group of leading developed and developing nations and is pushing for collective action on poverty and hunger.....”

“A forthcoming report* prepared for Brazil by the ODI, a UK-based development thinktank, supports President Luiz Inácio Lula da Silva’s plans for a global alliance to tackle poverty and hunger, and highlights ways that new sources of finance could be found. One idea is to make better use of the multilateral banks, and to cut down on the high transaction costs that accompany small amounts of aid. A second would link debt relief to anti-poverty programmes. ... A third idea would draw on the experience of the Just Energy Transition Partnerships – intergovernmental partnerships that coordinate financial resources and technical assistance from developed countries to help donor countries phase out fossil fuels – to create similar mechanisms for poverty and hunger. The reallocation of SDRs should be accelerated.....”

Guardian - Billions more in overseas aid needed to avert climate disaster, say economists

https://www.theguardian.com/business/2024/apr/17/billions-more-overseas-aid-climate-world-bank-imf-spring-summit?CMP=Share_iOSApp_Other

“Governments of wealthy countries must pledge hundreds of billions more in overseas aid payments channelled through the [World Bank](#) to avert the worst effects of the climate crisis, civil society experts and economists have said. The International Development Association fund, the arm of the World Bank that disburses loans and grants to poor countries, is worth about \$93bn (£b75n) but that figure must be roughly tripled by 2030, [according to economic experts](#). ...”

PS: “.... [Work by the economists Nicholas Stern and Vera Songwe](#) suggests **[\\$2.4tn a year is needed by 2030](#)** to shift developing countries, excluding China, to a low-carbon economy. About \$1.4tn of that is expected to come through these countries’ investments and the remainder from publicly funded assistance from wealthy countries as well as private sector investment. Given the scale of transformation needed, Simon Stiell, the UN’s top official on the climate crisis, said nothing less than a **[“quantum leap” on climate finance](#)** from the World Bank would be sufficient....”

PS: “... Also meeting this week is the International Tax Taskforce, a group of governments [led by the Barbados prime minister, Mia Mottley, and the Kenyan president, William Ruto](#), which will examine new ways of raising finance for the climate. These ideas include a wealth tax, levied on billionaires in each country, amounting to a tiny proportion of their income but which could raise hundreds of billions for the world; [levies on frequent flyers](#); and a [charge on the emissions from international shipping](#). Gordon Brown, the former UK prime minister, has also suggested a [3% tax on oil and gas export revenues from petrostates](#).”

IPS (Opinion) - Leaders Need to Break the Chokehold of Debt and Austerity. Our Health Depends on it

By Jaime Atienza (UNAIDS director of Equitable Financing);

<https://www.ipsnews.net/2024/04/leaders-need-break-chokehold-debt-austerity-health-depends/>

Concluding: **“...Now is the moment to frontload investment in health, education, and social protection. Economic stability and health security depend on multilateral coordinated action to drop debt, increase aid and concessional financing, and facilitate progressive taxation.** Decisions that leaders take this year will help determine whether the world successfully navigates the challenges of this decade and beyond. **For the health security of everyone, leaders need to break the chokehold of debt and austerity, now.”**

Global Coalition for Social Protection floors – World Bank & IMF Executive Directors: support states to realize the human right to social security

<https://www.socialprotectionfloorscoalition.org/2024/04/world-bank-and-imf-executive-directors-promote-the-human-right-to-social-securityworld-bank-and-imf-executive-directors/>

“Ahead of the 2023 Annual meetings of the World Bank and IMF, 71 civil society organizations supported the release of [a joint statement](#) calling on the Bank and IMF to change their social protection policies and practices. The group of signatory organizations urged the IMF and the World Bank to commit to realizing the right to social security, end poverty-targeted programs in countries without universal coverage, support equitable and sustainable public systems, and to halt austerity measures that threaten rights. We restated our concerns with the start of the 2024 Spring Meetings, in an **[open letter to World Bank and IMF executive directors, proposing four measures to realize the right to social security](#)**....”

Economist - Can the IMF solve the poor world's debt crisis?

<https://www.economist.com/finance-and-economics/2024/04/18/can-the-imf-solve-the-poor-worlds-debt-crisis>

“The fund will freeze out China if that is what it takes to offer relief.”

“...The IMF, which usually cannot lend to countries with unsustainably high debts, has been unable to do much. Yet **on April 16th it made a move. It said it would lend to countries that have defaulted on debts but have not negotiated a deal to restructure all their debts. The policy is known as “lending into arrears””**

“...The question is whether the imf can stomach the costs. Its threat will only bring creditors into line if it chooses to make use of its new powers. But in Washington officials still worry about aggravating the newer creditors, particularly China, with which the fund prizes its relationship. They might turn their back on co-operative restructurings altogether. Some borrowers could walk away from the imf and take bail-outs from elsewhere. **In the end, though, the fund may have little choice. Too many countries are in crisis. A clutch of big developing countries that have avoided default are teetering closer than ever to the edge. To avoid a catastrophe for hundreds of millions of people, international financiers need a way to get governments out of default before a country like Egypt or Pakistan goes under. Lending into arrears is the best available tool.** “

- Related: Project Syndicate - [The Urgency of Sovereign-Debt Restructuring](#) (by J A Ocampo):

“Ever since public-debt levels soared during the pandemic, developing countries have faced mounting liquidity challenges. **Yet the severity of the crisis is not reflected in the agenda for global cooperation, and no meaningful progress has been made toward a comprehensive debt-restructuring mechanism.**

- And via ONE's Aftershocks newsletter: [Net finance flows to developing countries turned negative in 2023](#)

“Who's funding who: New shocking analysis from ONE released today shows that developing countries are now net contributors to the global economy. They are spending more to pay their debts than they receive in foreign aid and new loans. This ratio of “net flows” is at its lowest point since the Global Financial Crisis. In 2022, 26 countries had negative net flows. Unless we see major money moves, that number will rise to 44 countries in 2025, paying US\$102 billion in negative net flows...”

“... Foreign aid: There's another reason why money to developing countries is drying up: many donor countries are redirecting foreign aid to pay expenses at home. Donors can count hosting refugees – and other administrative costs – as aid. Last year, 19% of foreign aid **never left donor countries**. The UK spent nearly one-third of its... ahem, *foreign* aid budget in 2023...”

Related: Devex - [Global south now repays more in debt than it gets in grants and loans](#)

“Analysis of World Bank and OECD figures show that countries in the global south are likely to pay out \$50 billion more in 2024 than they receive in grants and loans.” The ONE data are based on WB & OECD figures.

- And via Devex: [Making the grade](#)

“... the executive board of the International Monetary Fund chose Kristalina Georgieva to be IMF managing director for a second five-year term starting Oct. 1. As the sole candidate for the position — backed by an antiquated “gentleman’s agreement” under which the European Union gets to pick the head of the IMF while the U.S. gets the World Bank pick — it wasn’t exactly a slam-dunk victory. In a statement, the board commended Georgieva’s “strong and agile leadership during her term, navigating a series of major global shocks....”

7th Annual Health Financing Forum: Investing in Health in the post-COVID era (15-17 April, NY)

<https://www.worldbank.org/en/events/2024/04/15/seventh-annual-health-financing-forum-investing-in-health-in-the-post-covid-era#2>

- Concept note (11 p.) – see [World Bank](#) :

“... This year’s AHFF will **explore new pathways to prioritize health in government spending, channel increased government funding into vital health programs, and boost the impact of Development Assistance on government investments in health....”**

“This year, we are also celebrating the 30th anniversary of the World Development Report 1993, **Investing in Health**, which transformed the global health landscape. This is an important occasion to revitalize the debate for investing in health. Again, **this year, the Forum will host the Adam Wagstaff Memorial Lecture....”**

Also with info on the **various plenary sessions**.

PS: check out also some tweets in the ‘Tweets’ section below, **on yesterday’s High-Level event on UHC**.

CGD (blog) - Strategic Disinvestments in Health: Panacea or Mirage?

P Baker et al; <https://www.cgdev.org/blog/strategic-disinvestments-health-panacea-or-mirage>

“... **The [Seventh Annual Health Financing Forum: Investing in Health in the post-COVID Era](#)** kicks off today in Washington DC, **hosted by the World Bank, USAID, and the Global Financing Facility**. It marks the 30th anniversary of the influential World Development Report 1993, [Investing in Health](#). **The organisers are seeking to promote greater government investment in health—an important mission but one that faces adverse fiscal and economic headwinds.”**

“... **One solution** that is often proposed to square this circle is one of the most politically difficult issues in health financing: **disinvesting in low priority and low-impact healthcare services**. This releases money for high priority services and can, in theory, enable countries to make progress on UHC ambitions, even when budgets are tight. **In this blog, and in a [CGD policy paper](#) released today, we summarise examples of healthcare disinvestment in low- and middle-income countries (LMICs) to draw insights on what has and has not worked....”**

“... We found four documented examples of one-off disinvestment initiatives, two documented examples of systematic disinvestment initiatives by health technology assessment (HTA) agencies in LMICs, as well as a range of countries like Thailand, India, and Ghana that carry out systematic disinvestment through routine HTA processes. We conclude that disinvestment is costly, time-consuming, and rarely as successful as policymakers intend. Key considerations to improve the chances of success include whether strong pre-existing health prioritisation systems exist (such as an HTA agency) and whether the design of initiatives are tightly matched to the level of political will, the policy objective, and available resources.....”

Oxfam - Remedy for Sick Development?

H Bignell; <https://medium.com/@OxfamIFIs/remedy-for-sick-development-85b2ae5bfea4>

Update on this story. **“The Spring Meetings are an opportunity to address allegations of abuse and pursue genuine accountability at IFC-funded hospitals.”**

As you know, **“.... the Bank’s private finance lending arm — the International Finance Corporation (IFC) — is facing multiple serious criticisms which are yet to be addressed.** They include troubling evidence and allegations associated with both live and historic IFC investments in health, raised by Oxfam and other actors.....”

Global Health Governance & financing

Journal of Critical Health -Divorcing Global Health from global health: Heuristics for the future of a social organization and an idea

D Krugman; <https://journalhosting.ucalgary.ca/index.php/jcph/article/view/78017/57363>

Already flagged last week as ‘read of the week’, but now also online. And yes, it’s **an absolute must-read (and -act).**

“In the rapid rise of the “decolonizing Global Health” movement, a crucial predicament has emerged. Despite the field becoming increasingly understood as white supremacist at its core and built upon historic and contemporary colonial political ordering, the kind of change being imagined and worked toward dominantly hinges on the continuation of the field—and this world’s—existence. This, I argue, is the result of **over four decades of intertwining the seemingly universal, transcendentally good ideal of ‘global health’ with the particularly constructed global apparatus that calls itself by that phrase to the point where the idea and the field are now understood as inseparable.** By tracing how the field that came to be known as Global Health monopolized the idea and imaginary of a healthier world, **this commentary seeks to clarify what we mean when we say “global health”, and, through this, to rethink what pursuing global health and doing Global Health mean.** The core of my argument rests upon establishing a simple fact, a heuristic tool, and new theoretical basis: **Global Health—a social apparatus—is not global health—an ideal.** By expanding what can be considered as Global Health action and foregrounding the existence and possibilities of global health pursuits beyond Global Health, I argue that what we are trying to change, how we conduct that change, and toward which horizons we move, begin to be reimagined when the myth that Global Health is global health is rejected.”

And an excerpt to give you a flavour: “... .. ***I argue that the future of changing Global Health lies in aligning with those already working toward global health on anti-colonial, anti-imperialist, and anti-capitalist fronts—which, in the end, would necessarily lead to the dissipation of Global Health.*** In destabilizing the foundational, false, and perhaps arrogant belief that Global Health is the transcendently “good” social apparatus in pursuit of a healthier world, I not only seek to open new grammars of creating a healthier world, but also broaden the horizon for what it means to do Global Health work and action....”

FT – Development funds dash for donor cash at World Bank and IMF meetings

[FT](#)

Helicopter view on the upcoming ‘replenishment season’. **“Money to assist with debt repayment, climate resilience and poverty reduction strained amid wars and elections.”**

“... Policymakers at the World Bank and IMF spring meetings this week will grapple over more funds for debt-strapped nations and development goals as global crises stretch aid budgets. **this year a record number of other developmental organisations and programmes, including the World Health Organization and Gavi, the alliance rolling out the first anti-malaria vaccine, are also aiming to top up their contributions from western governments distracted by elections at home and wars in Europe and the Middle East.** “There is a record amount of need and a record number of funds coming forward, **meanwhile, the international community’s focus is elsewhere,**” said Clemence Landers, senior policy fellow at the Center for Global Development, a think-tank. “The fact is that these funds need to be replenished to avoid poverty, health and other crises, and it is unclear if there is full-throttled political support to get to the numbers needed.” “

“... **the plethora of conflicts in Ukraine, the Middle East and Africa is draining budgets, even though multilateral sources are one of the few ways that developing countries can access fresh money “**

“... **Elections in the US and UK, and competing budget demands in other critical donor nations, such as economically stagnant Germany, are prompting funds to rethink how they could use debt leverage or other new methods to raise money. The US, UK, Japan and Germany are the largest funders of multilaterals up for replenishment....”**

PS: “... **While their share of donor budgets has shrunk, multilateral funds have also proliferated in recent years, particularly those with single-issue remits, such as health or agriculture.** “There is an issue of duplication, where too many funds seem to be chasing similar prospects . . . without co-ordinating their investments,” said Bright Simons, vice-president of research at Ghanaian think-tank Imani. “This results in an **‘overheads overhang’**,” he added, where multiple bureaucracies are “all marketing a bewildered array of poorly differentiated financing solutions to overwhelmed developing countries””

The Hindu - The art of Gatescrashing democracy

[The Hindu:](#)

“Journalist Tim Schwab says his book probing the Gates Foundation is a case study for the larger problem of extreme wealth and how it threatens democracy.”

“... My reporting examines the Gates Foundation as an unregulated political organisation. I’m showing how Bill Gates meets with elected leaders around the world, shaping government priorities and spending on everything from public health to public education. This isn’t charity but rather **undemocratic political influence**. Most mainstream news outlets, by contrast, have tended to report on the good deeds of the Gates Foundation, profiling its big donations and ambitious goals. So, it has not been easy to get critical reporting on Gates published....”

Asian Development Bank and Global Fund Join Forces to Strengthen Health Systems and Advance Universal Health Coverage

<https://www.theglobalfund.org/en/updates/2024/2024-04-17-asian-development-bank-global-fund-join-forces/>

“The Asian Development Bank (ADB) and the Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund) have signed a memorandum of understanding to form transformative partnerships that strengthen health systems and promote universal health coverage (UHC). The cooperation arrangement will develop various financing modalities to boost on-budget domestic resources and crowd in additional financing for increased concessionality, additional technical assistance, and robust monitoring of health programs delivery.”

BMJ GH - From polycrisis to metacrisis: harnessing windows of opportunity for renewed political leadership in global health diplomacy

Brian Li Wong, A Nordström, P Piot, H Clark (Global Health Diplomacy Partners);
<https://gh.bmj.com/content/9/4/e015340>

“Effective global health diplomacy necessitates multidisciplinary leaders skilled in navigating today’s complex health political landscape through innovative strategies and collaboration. The future of global and regional health advancement hinges on the investment in a new generation of leaders based on dynamic mentoring and learning methodologies. To address global health challenges, leaders must engage across sectors, combining public health evidence and private sector perspectives with insights into various disciplines to effectively communicate and negotiate within the political sphere.”

“... Following a recent conference on **‘International Politics, Leadership and Diplomacy for Health’** (held in Stockholm, Sweden, from 20 to 22 November 2023), a network of partners seeking to advance global health diplomacy was established. Coauthored by members of this network, this commentary emphasises crucial insights gained from the event and underscore the importance of identifying windows of opportunity as well as the urgency of reshaping global health and the leadership which underpins it. Moreover, it calls for a reinvigorated approach to health diplomacy infused with strong political leadership and innovative strategies to navigate the intricate, ever-evolving landscape of global health....”

GAVI Board retreat (17-18 April)

MSF Access - With routine vaccination efforts failing to reach people in fragile and emergency settings, MSF is seeing low vaccination coverage and more outbreaks of vaccine-preventable diseases, like diphtheria and measles

<https://msfaccess.org/gavi-plans-next-five-year-strategy-it-must-do-more-get-vaccines-people-excluded-vaccination>

“Ahead of Gavi, the Vaccine Alliance’s Board Retreat on April 17-18, where the Board will shape Gavi’s strategic framework for the next five years, **Doctors Without Borders/Médecins Sans Frontières (MSF) stressed that Gavi and its Board need to do more to get Gavi-supplied vaccines to people in humanitarian settings**, including by incorporating MSF’s [lessons learned](#) from decades of vaccinating people in hard-to-reach places.”

With a number of concrete recommendations.

Coming up: Global Fund Board retreat (April 22-24)

A few preparatory reads.

GFO - Declarations and Governance Mechanisms: Misplaced Ambitions and Too Many Promises to Keep?

<https://aidspan.org/declarations-and-governance-mechanisms-misplaced-ambitions-and-too-many-promises-to-keep/>

“**What is the Global Fund Board meeting [typically] about?** You’ll get some of the answers [here: Global Fund sets the agenda](#). “What is on the agenda of the Global Fund Board? **As it sets to meet in April 22-24, 2024, what is on the table for discussion is set forth. Here’s a sneak peek.**””

In the run-up to the Global Fund Board meeting towards the end of this month, we analyse some of the voluminous documents that form the dossier for it. These include strategic performance and the working of the Country Coordinating Mechanism (CCM).” “Some of the reports we examine include [Strategic Performance Report for 2017-2022 including Key Performance Indicators at end 2023](#). This is followed-up by the Country Coordinating Mechanism (CCM), divided into articles on [CCM positioning](#) and [CCM engagement](#) with civil society, communities and key populations.....”

HPW - To End AIDS, We Must Reclaim Our Unyielding Pursuit of Equity

B Gawanas; <https://healthpolicy-watch.news/to-end-aids-we-must-reclaim-our-unyielding-pursuit-of-equity/>

“As HIV practitioners gather this week in Yaoundé for [AFRAVIH](#), the largest international Francophone conference on HIV/AIDS, and a few months before the 25th International AIDS

Conference in Munich, the Vice-Chair of the Global Fund Board urges renewed focus on promoting equity in the fight against HIV particularly for groups that continue to suffer a disproportionate proportion of HIV infections. “

“...In Francophone African countries (24 countries – 373.3 million people), the HIV burden is lower than in the rest of the continent. However, they accounted for 16% of all new HIV infections in sub-Saharan Africa in 2022....”

UHC

GFO - Advancing health financing and Universal Health Coverage in Africa: The role of civil society

<https://aidspan.org/advancing-health-financing-and-universal-health-coverage-in-africa-the-role-of-civil-society/>

“A crucial gathering in Nairobi brought together African civil society groups and global health initiatives to promote health financing and Universal Health Coverage. It served as a platform to discuss the progress of the Joint Learning Agenda, a program promoting collaboration to enhance civil society's role in advocating for fair health financing in Sub-Saharan Africa. The meeting enabled assessment of progress, sharing of knowledge, and problem-solving, emphasizing the vital role of civil society in advancing health financing and Universal Health Coverage across Africa.....”

“... A crucial meeting occurred in Nairobi, Kenya, on 26 – 27 March 2024, bringing together civil society organizations (CSOs) from across Africa for the Joint Learning Agenda (JLA) on Health Financing and Universal Health Coverage (UHC). The JLA program is led by two regional organizations, WACI Health and Impact Santé Afrique (ISA), with support from global health initiatives (GHIs) such as Gavi, Global Financing Facility (GFF), Global Fund, The Partnership for Maternal, Newborn & Child Health and UHC 2030. This event marked a significant milestone in the two-year program aimed at bolstering CSOs' capacity to advocate for and ensure accountability in health financing for UHC throughout the region.... The program, involving 20 participating countries (Figure 1), emphasizes supporting CSO engagement in health financing, cultivating a cadre of trainers capable of delivering capacity-building initiatives on health financing, UHC, and budget advocacy at the grassroots level.....”

Pandemic Accord negotiations

Below you find a number of analyses – by Geneva Health Files, HPW & others.

PS: For the latest draft, as of 16 April, see HPW: https://healthpolicy-watch.news/wp-content/uploads/2024/04/DRAFT_WHO-Pandemic-Agreement_16-April-2024.pdf

“...The streamlined 23-page draft was sent to World Health Organization (WHO) member states on Tuesday night ahead of the final meeting of the intergovernmental negotiations body (INB) on 29 April.....”

GHF - Next Draft of The Pandemic Agreement Will Likely Have No Fund and No Binding Obligations On Pathogen Access & Benefits Sharing, Defers Modalities to Conference of Parties

[EXCLUSIVE: Next Draft of The Pandemic Agreement Will Likely Have No Fund and No Binding Obligations On Pathogen Access & Benefits Sharing, Defers Modalities to Conference of Parties \(substack.com\)](#)

P Patnaik had the 'scoop' on Tuesday. Very informative read. Some chunks:

“... On March 29, we reported that the INB may come up with a streamlined text. The current draft version is about 20 pages in its latest form. Whether countries will endorse this version to begin text-based negotiations later this month, is not clear yet. ... A draft version of the proposed negotiating text for a Pandemic Agreement, currently being discussed internally, has no reference to a dedicated fund that would help implementation of new obligations on pandemic prevention, preparedness and response. Such a pooled fund previously articulated in a prior text was also meant to help finance existing obligations under the International Health Regulations. ... The draft version of a proposed new text from the Bureau of the Intergovernmental Negotiating Body, also merges the provision on technology transfer with the article on sustainable production; and it merges parts of the language on compensation and liability management with the provision on supply chain and procurement. And importantly, it presents a streamlined version on the Pathogens Access and Benefits Sharing provision with effectively no binding provisions on benefits, and kicks the can down the road, with modalities to be finalised two years in May 2026....”

“Both on the matters of financing, PABS, Supply Chain Network among other areas, the modalities have been proposed to be left for a future date to be addressed by a Conference of Parties. In other key changes, the word “waiver” has disappeared but has been replaced with “time-bound suspensions of relevant intellectual property rights” to encourage manufacturing....”

PS: The objective of the agreement is limited to govern pandemics, although there were efforts to broaden the scope....

“... No Pooled in Financing Provision: There is no mention of a pooled fund in this provision on financing. Developed countries have argued against the creation of another fund, in addition to existing mechanisms. The text also does not envision an additional fund to be created in the future by the Conference of Parties. Without having a pathway for financing of new and existing PPPR obligations, this will likely make this agreement a difficult sell....

“... WHAT NEXT? In the coming days, a final version, likely based on this text, will be discussed in capitals, and delegations in Geneva are expected to seek more clarity on the process of treating this text in the resumed session of the INB starting April 29th. This will be preceded by what is scheduled to be the final meeting of the working group to amend the IHR during April 22-26. If countries assess that the latest draft fails to operationalize equity, there will be pressure on countries to strengthen the content of the agreement in the remaining days ahead of the World Health Assembly. At the time when the ninth meeting of the INB was suspended, countries had agreed to stocktake deliberations by May 3rd, with a view to concluding discussions by May 10th....”

PS: “... We reported earlier that one way of adopting this agreement, was by way of a vote, sources had indicated to us. But adopting an international treaty not by consensus, but by calling a vote would be unusual, it would also leave WHO deeply polarised, diplomats say. Failing to arrive at an agreement, would be “catastrophic” not only for global health, but also for multilateralism, many believe. ... Much will depend on the process of conducting negotiations at the resumed meeting of the INB, and the ability of the Bureau and member states to negotiate interests in order to arrive at a consensus in a matter of days.”

HPW - World Health Assembly is Likely to See Basic ‘Consensus’ Pandemic Agreement as Hard Decisions are Deferred

<https://healthpolicy-watch.news/world-health-assembly-is-likely-to-see-basic-consensus-pandemic-agreement/>

Must-read analysis on the state of affairs – as of Tuesday evening.

“... **Country obligations in, international obligations out.**” “Likely to be in the latest draft are many of the countries’ obligations to prevent and prepare for pandemics (for example, Articles 4,5 and 6). But many of the articles that deal with international co-operation will be delayed....”

“**While the next draft of the World Health Organization’s (WHO) pandemic agreement is due to be sent to member states by Thursday (18 April), it is likely to be stripped of contentious clauses. Instead, the draft – and indeed, the pandemic agreement to be put to the World Health Assembly (WHA) at the end of May – will be an “instrument of essentials”; a basic text that will be fleshed out by further talks in the next couple of years, as reported [recently by Health Policy Watch](#)....**”

“**After the WHA has adopted the framework, more details will be fleshed out over the next 12 to 24 months. Thereafter, a Conference of Parties has been proposed, but sources close to the discussions say this is only likely to convene in the latter half of 2026 – so fingers crossed that there’s no pandemic before that!...**”

“The ninth intergovernmental negotiating body (INB) meeting, from 18-28 March, was due to be the last before the WHA. But **there was little agreement between the key power blocs: the European Union, UK, Japan and US; the 34-strong Group of Equity (headlined by Bangladesh, India, Brazil and Indonesia) and the Africa Group.** After days of circular negotiations and countries’ loss of patience with one another and the INB Bureau, **parties resolved that the agreement to be put to the WHA would focus on areas of convergence.** This has seen the text slim from a completely unwieldy [100-page draft on 26 March](#), with multiple opposing clauses contained in brackets, to the **current 20-pager**, according to insiders....”

Do read the rest of the analysis.

PS: “....**even the section on research and development (Article 9) has been pared down, with no obligations placed on public-funded research** although there seemed to be broad consensus on that, according to a draft published by Politico Europe....”

HPW – Latest Pandemic Agreement Draft Keeps Equity Hopes Alive – But Defers Key Operational Decisions

<https://healthpolicy-watch.news/breaking-latest-pandemic-agreement-draft-keeps-equity-hopes-alive/>

Another take: **“The latest draft of the pandemic agreement, while deferring many operational issues, keeps equity hopes alive in many aspects** – including by cementing in-principle agreements on a pathogen access and benefit-sharing (PABS) system, a global supply chain and logistics network and geographically diverse “capacities and institutions” for research and development.....”

PS: **“...The “minimum” components of the envisaged PABS system** – one of the most contentious aspects of the negotiations – **include the reservation of 20% of pandemic-related health products for the WHO for distribution to those most in need, and “annual monetary contributions from PABS System users”.....”**

PS: **“... What next?** Once the draft has been agreed on, hopefully by the end of the INB’s ninth meeting on 10 May, it goes to the WHO’s World Health Assembly (WHA) which convenes from 27 May to 1 June. ... Once the draft and its accompanying resolution are passed by the WHA, some of the outstanding issues will need to be finalised. **The WHA draft resolution proposes creating working groups on the key outstanding issues – namely the PABS system, One Health and financing** – particularly to help low-and middle-income countries to implement all the provisions....”

“The draft’s Article 21 makes provision for a Conference of the Parties (COP) to be convened by the WHO “not later than one year after the entry into force of the WHO Pandemic Agreement”. The COP will determine the venue and timing of subsequent regular sessions at its first session, and shall “regularly” take stock of the implementation of the agreement, and **review its functioning every five years.....”**

HPW - Pandemic Negotiations: ‘Hopeful and Scary Times’

<https://healthpolicy-watch.news/pandemic-negotiations-hopeful-and-scary-times/>

Coverage of the stocktaking event on Wednesday in Geneva (see intro).

““This is probably the most hopeful time in my professional life and the scariest time,” Dr Mike Ryan, the World Health Organization (WHO) Deputy Director General and head of Health Emergencies, told a high-level Geneva audience on Wednesday. “Hopeful” because there is the possibility of reaching a global agreement on how to tackle future pandemics and “scary” because the world “is tearing itself apart”, Ryan explained at an event on pandemic agreement negotiations, convened by the Geneva Graduate Institute’s Global Health Centre, the Global Preparedness and Monitoring Board (GPMB) and Pandemic Action Network (PAN).”

Ryan also **[issued a plea to negotiators and leaders: “Get it done.”](#)** Rather than viewing the agreement as a finish line, **he urged negotiators to see it as a starting point for work that may take years to complete,** and implored Member States to “give us the foundation for a better future — for our health workforce and for the community.”

“... **Ambassador Amanda Gorely, Australia’s representative to the UN in Geneva**, told the meeting: “It was always our expectation that these intensive negotiations would result in a high level agreement on which we could build and that its adoption would not be the end of the process, but the beginning.” ... **Ethiopia’s Ambassador to Geneva**, Tsegab Kebebew Daka told the same event that **“the differences in the text are not huge”**. “They are mainly differences of ideas and they’re not that many. So we can come to an agreement,” said Daka, a key negotiator for the Africa group. Like Gorely, **he appealed for high-level political engagement to give negotiators “the power and flexibility they need to make compromises and find consensus”**. “We are at a stage where we need to make decisions. We need to open direct lines of communication and **provide political backing to negotiators”**...”

PS: “ ... **IHR amendments make progress**: The Working Group on Amendments to the IHR had to shift through 300 proposed amendments to the global rules that govern public health emergencies of international concern, said co-chair Dr Ashley Bloomfield. ... **Ryan described some of the proposed amendments as “significant improvements” that would have an immediate effect on surveillance and response....”**

Devex Pro - Experts warn about deferring hard parts of pandemic treaty for later

<https://www.devex.com/news/experts-warn-about-deferring-hard-parts-of-pandemic-treaty-for-later-107495>

(gated) “The proposed resolution for the pandemic agreement will create further negotiations after May for some of the most contentious issues. **But experts say deferring some of the decisions comes with significant risks.**”

- See also Devex checkup - [Here’s what the pandemic treaty could achieve in May](#)

“... as [the latest draft text of the pandemic agreement](#) and a proposed resolution for its adoption at the WHA went public. **The text reflects [some of the disappointments insiders expressed](#) after the session of the Intergovernmental Negotiating Body last month, and some say this draft is actually worse than the last one.** There is no new fund to help countries implement the agreement, and it’s unclear where the money will come from. “

“Instead, the **proposed resolution asks member states to establish another set of intergovernmental working groups to define and operationalize some of the most contested issues in the pandemic negotiations**, including One Health and the WHO Pathogen Access and Benefit-Sharing System. Many of the decisions are also being left to the Conference of the Parties.”

“Some think that may be the right direction to take. But **postponing key decisions comes with its own risks. Political attention for dealing with pandemics is waning, and some states already had limited capacities to negotiate the treaty over the last two years. Some worry that deferred decisions may lead to nothing at all**, as was the case with the TRIPS waiver for COVID-19 tests and treatments. **But the biggest risk is that the world is still unprepared to manage new pandemic threats.** “The world is facing a dangerous type of mpox in the [Democratic Republic of Congo], H5N1 in cattle herds in the US, record levels of dengue, multi-country surges of cholera, and large outbreaks of measles all at once,” **Helen Clark, who was co-chair of The Independent Panel for Pandemic Preparedness and Response**, told me via email. “We’ve lost time. **A new pathogen could appear anytime, anywhere. And we’re just not ready for it.**””

- And a link via **Third World Network** - [WHO: Draft negotiating text of pandemic instrument devoid of deliverables on equity \(17 April\) \(by K M Gopakumar\)](#)

“The draft negotiating text of the pandemic instrument is devoid of any concrete deliverables on equity and does not create any legal obligations to facilitate predictable and sustainable access to finance, pandemic-related products and technology.”

KEI - The WHO pandemic treaty: The Peace Clause and its discontents

<https://www.keionline.org/39585>

From last week. “On Tuesday, 2 April 2024, Politico published the onscreen text WHO pandemic treaty text of Wednesday, 27 March 2024; the time stamp of this 110 page text is 12:44 CET. **Article 11 of the proposed agreement contains provisions on transfer of technology and know-how.** Nestled within article 11 is paragraph 4bis, the peace clause.....”

“... **Article 11.4bis (the peace clause) states:** [4bis. **The Parties shall not challenge, or otherwise exercise any direct or indirect pressure on the Parties that undermine the right of WTO Members to use TRIPS flexibilities** at any multilateral, regional, bilateral, judicial or diplomatic forum....”

A pandemic accord armed with such a peace clause would set an important norm buttressing countries’ sovereign right to use TRIPS flexibilities “at any multilateral, regional, bilateral, judicial or diplomatic forum” without the specter of “direct or indirect pressure”. At the WHO pandemic treaty negotiations, **the proponents of the peace clause include:** Brazil, Colombia, Guatemala, El Salvador, Nicaragua, Tunisia, Argentina, the African Group + Egypt, Bangladesh, Fiji, Philippines, Pakistan, and Indonesia. **The opponents of a peace clause in the WHO Pandemic Accord are:** the European Union, Japan, the United States of America, the United Kingdom of Great Britain and Northern Ireland, Canada, and Switzerland. On Tuesday, 2 April 2024, an informal was convened to resolve the profound differences remaining in Article 11; KEI was informed that **Article 11.4bis remained a divisive issue.....”**

Biden’s 2024 GHS strategy

Cidrap News - White House releases new global health security strategy

<https://www.cidrap.umn.edu/pandemic-influenza/white-house-releases-new-global-health-security-strategy>

“... The Biden administration yesterday unveiled a new Global Health Security Strategy, which spells out the steps the United States will take over the next 5 years to prevent, detect, and effectively respond to biological threats.....”

“**Three overarching goals** include strengthening global health security capacities through bilateral partnerships, mobilizing political commitment, financing and leadership to achieve health security, and leveraging health security linkages between health security and complementary programs.....”

- See also AP - [Biden administration announces new partnership with 50 countries to stifle future pandemics](#)

“President Joe Biden’s administration will help 50 countries identify and respond to infectious diseases, with the goal of preventing pandemics like [the COVID-19 outbreak](#) that suddenly [halted normal life](#) around the globe in 2020. U.S. government officials will work with the countries to develop better testing, surveillance, communication and preparedness for [such outbreaks](#) in those countries, according to a senior Biden administration official who briefed reporters Monday about the program on the condition of anonymity. ...”

“... The U.S. program will rely on several government agencies — including the U.S. State Department, the Centers for Disease Control and Prevention, Health and Human Services and the U.S. Agency for International Development, or USAID — to help countries refine their infectious disease response.....”

White House - FACT SHEET: Biden-Harris Administration Releases Strategy to Strengthen Global Health Security

[Whitehouse statement](#)

And this has all the info. **“Today, the White House launched the [U.S. Global Health Security Strategy \(GHSS\)](#) to protect the health, lives, and economic well-being of the American people and people throughout the world..... We are announcing today that **the United States has expanded our formal global health security partnerships from 19 countries to 50 countries.”****

- And some more coverage via Stat: [Biden administration announces new partnership with 50 countries to stifle future pandemics](#)

PS: **“.... The Biden administration plans to move forward with its new strategy to prepare the world for the next pandemic, regardless of whether a treaty is hammered out or not, a senior administration official told reporters on Monday.”**

“... The White House on Tuesday released a [website](#) with the names of the countries that are participating in the program. Biden officials are **seeking to get 100 countries signed onto the program by the end of the year.”**

NPR - The U.S. has come up with its own global strategy to thwart the next pandemic

<https://www.npr.org/sections/goatsandsoda/2024/04/16/1245142431/the-u-s-has-come-up-with-its-own-global-strategy-to-thwart-the-next-pandemic>

With **L Gostin’s view** among others:

“... Even though Lawrence Gostin thinks it's a praiseworthy moment, he isn't sure that will be enough. Gostin, a professor of global health law at Georgetown University, sees major gaps in the new strategy. "Some of the very, very key issues – like investment in research and development for vaccines, like financing, like accountability and compliance – all of these things are absent as

well as any strategy for really the gorilla in the room, if you will, which is all the disinformation and misinformation about vaccines and science and public health," he says. He points out that the federal money earmarked for global health security in the fiscal year 2024 was slashed by \$200 million. "How I see this is: The White House doing the very best it can in a highly constrained political and economic environment," says Gostin....."

PS: "... The senior administration official who spoke on background says the hope is that as Americans see how important this work is Congress will approve more money for next year's budget. The global effort at pandemic preparedness is estimated to cost \$30 billion annually. The senior administration official says the U.S.'s new global health security strategy is not meant to undermine WHO efforts but instead demonstrate that the U.S. is committed to preventing the next pandemic irrespective of what happens on the global stage."

- And via Politico Future Pulse - [New pandemic plan's a lot like the old one](#)

"The global health security strategy includes a plan to encourage other G-7 countries — Canada, France, Germany, Italy, Japan, and the U.K. — to help 50 additional countries prepare for the next pandemic, bringing the total to 100 by the end of this year."

"The U.S. International Development Finance Corp., an arm of the federal government that helps fund development efforts overseas, is working with financial institutions in the other G-7 countries to make money available at the start of an outbreak so that low- and middle-income countries can get vaccines, tests and treatments quicker. As it has in the past, the U.S. also plans to help raise money this year for the Pandemic Fund, which is hosted by the World Bank and provides money to developing countries to improve their pandemic prevention and preparedness."

Mpox

Telegraph - Mutated strain of mpox with 'pandemic potential' found in DRC mining town

<https://www.telegraph.co.uk/global-health/science-and-disease/mpox-outbreak-kamituga-democratic-republic-of-congo-africa/>

"A concerning new strain of mpox with "pandemic potential" has been found in a mining town in the Democratic Republic of Congo, according to new research. The paper – a [pre-print](#) which is being pored over by global experts – calls for "swift action" from the international community if another international mpox outbreak is to be averted."

- Related read (in French – Le Monde: [Mpox : la RDC va homologuer en urgence deux vaccins et un traitement pour endiguer l'épidémie](#))
- And via Cidrap News – [New mpox clade 1 lineage identified in DR Congo outbreak](#)

More on PPR

Draft Strategic plan Pandemic Fund

The Pandemic Fund published the [Draft Medium-term Strategic Plan \(2024-2029\)](#) outlining its ambitions and funding priorities.

With among others: “...**Focus areas:** Over the next five years, the Fund will invest in strengthening pandemic PPR-specific capacities across **three programmatic priorities** – surveillance, laboratory systems, and workforce – supported by **two cross-cutting enablers**, National Public Health Institutes (or relevant public institutions) and regional/global networks, organizations, or hubs aimed at bolstering the institutional foundations that support information sharing, coordination across public health and One Health systems, and rapid action. To ensure these investments are truly inclusive, **the Fund will integrate four underlying themes across all its work: One Health, community engagement, gender equality, and health equity.**”

WHO - Leading health agencies outline updated terminology for pathogens that transmit through the air

<https://www.who.int/news/item/18-04-2024-leading-health-agencies-outline-updated-terminology-for-pathogens-that-transmit-through-the-air>

“Following consultation with public health agencies and experts, the World Health Organization (WHO) publishes a global technical consultation report introducing updated terminology for pathogens that transmit through the air. The pathogens covered include those that cause respiratory infections, e.g. COVID-19, influenza, measles, Middle East respiratory syndrome (MERS), severe acute respiratory syndrome (SARS), and tuberculosis, among others.”

“The publication, entitled “[Global technical consultation report on proposed terminology for pathogens that transmit through the air](#)”, is the result of an extensive, multi-year, collaborative effort and reflects shared agreement on terminology between WHO, experts and four major public health agencies: Africa Centres for Disease Control and Prevention; Chinese Center for Disease Control and Prevention; European Centre for Disease Prevention and Control; and United States Centers for Disease Control and Prevention. This agreement underlines the collective commitment of public health agencies to move forward together on this matter.”

PS: “.... A number of agreed new terms include “infectious respiratory particles” or “IRPs”, which should be used instead of “aerosols” and “droplets”, to avoid any confusion about the size of the particles involved....”

- See also Stat - [Covid ignited a global controversy over what is an airborne disease. The WHO just expanded its definition](#)

With some great **analysis**. “The changes could have costly consequences for how countries set infection control standards and prevention measures for airborne pathogens.”

- And Cidrap - [Global health groups propose new terminology for pathogens that spread through the air](#)

UN News - Pandemic experts express concern over avian influenza spread to humans

<https://news.un.org/en/story/2024/04/1148696>

“The ongoing global spread of “bird flu” infections to mammals including humans is a significant public health concern, senior UN medics said on Thursday, as they announced new measures to tackle airborne diseases.”

“Dr Jeremy Farrar, Chief Scientist at the World Health Organization (WHO), said that the avian influenza virus - which is also known as H5N1 - has had an “extremely high” mortality rate among the several hundred people known to have been infected with it to date. “H5M1 is (an) influenza infection, predominantly started in poultry and ducks and has spread effectively over the course of the last one or two years to become a global zoonotic – animal – pandemic,” he said. “The great concern, of course, is that in doing so and infecting ducks and chickens - but now increasingly mammals - that that virus now evolves and develops the ability to infect humans. And then critically, the ability to go from human-to-human transmission.””

Dengue

NYT - The Push for a Better Dengue Vaccine Grows More Urgent

[NYT :](#)

“A public research institute in Brazil has proved a new shot protects against the disease, but can’t make it fast enough to stop the huge outbreak sweeping Latin America.” A few quotes:

« **The outbreak of dengue fever that has unfolded in Latin America over the past three months is staggering in its scale** — a million cases in Brazil in a matter of weeks, a huge spike in Argentina, a state of emergency declared in Peru and now another in Puerto Rico. **It forewarns of a changing landscape for the disease. The mosquitoes that spread dengue thrive in densely populated cities with weak infrastructure, and in warmer and wetter environments — the type of habitat that is expanding quickly with climate change. ... More than 3.5 million cases of dengue have been confirmed by governments in Latin America in the first three months of 2024,** compared with 4.5 million in all of 2023. There have been more than 1,000 deaths so far this year. The Pan-American Health Organization is warning that this may be the worst year for dengue ever recorded.z

« **The new one-shot vaccine uses live, weakened forms of all four strains of the dengue virus.** It was created by scientists at the National Institutes of Health in the United States and **licensed for development by the Instituto Butantan, a huge public research institute in São Paulo. Butantan will make the vaccine.** It already produces most of the immunizations used in Brazil, and has the capacity to make tens of millions of doses of this new one. **The institute plans to submit the dengue vaccine to Brazil’s regulatory agency for approval in the next few months and could begin producing it next year. »**

« **it won’t necessarily be of help to the rest of Latin America: Butantan will only make the vaccine for Brazil.** The multinational drug company **Merck & Co., which also licensed the NIH**

technology, is developing a related vaccine which will be sold in the rest of the world; the efficacy of that vaccine has not yet been tested in a clinical trial.....”

« And **there is, of course, demand for a dengue vaccine beyond the Americas:** Mosquitoes are spreading the disease to Croatia, Italy, California and other regions that haven’t seen it before. Places used to handling mild outbreaks now face record-breaking ones: Bangladesh had 300,000 cases last year.....”

Access to vaccines, medicines & other health technologies

Devex - Africa CDC calls out Moderna for 'abandoning' vaccine equity commitment

<https://www.devex.com/news/africa-cdc-calls-out-moderna-for-abandoning-vaccine-equity-commitment-107476>

“Moderna had planned to build an mRNA vaccine manufacturing facility in Kenya. **Its decision to put these plans on hold demonstrates the company isn't committed to "vaccine equity,"** Africa CDC said.”

“...**The company is working on the development of other mRNA vaccines, such as for malaria and HIV, but these vaccines are early in development.** At this point in time, **the company said it needs to determine the “future demand for mRNA vaccines on the African continent.”....”**

“... But these **justifications didn't land well with Africa CDC** — a pan-African public health agency that has made increasing the amount of pharmaceutical production on the continent a leading priority. **“To blame Africa and Africa CDC for lack of demand for covid-19 vaccines and therefore the reason to put on hold plans to manufacture vaccines in Africa, only serves to perpetuate the inequity that characterized the response to the Covid–19 pandemic,”** the statement read.”

PS: “... **Africa CDC also said other companies have followed through on their commitments to Africa.** For example, last December German biotechnology company BioNTech [unveiled](#) its new \$150 million modular mRNA vaccine manufacturing facility in Kigali — the company’s first in Africa — even though it has reportedly [scaled back](#) its manufacturing plans for the continent....”

- But do read the **full Africa CDC statement** - [Africa CDC’s Statement on Moderna’s plan to reassess commitment to African vaccine manufacturing](#)
- See also **HPW coverage/analysis** - [Moderna’s ‘Disappointing’ Pull Back from Kenya Highlights Complexity of Expanding Vaccine Manufacturing in Africa](#)

Science (News) - Plans to expand African vaccine production face steep hurdles

<https://www.science.org/content/article/plans-expand-african-vaccine-production-face-steep-hurdles>

“Moderna’s pause on Kenya project highlights difficulties in creating a competitive vaccine sector on the continent.” **Must-read analysis with the broader picture !!!**

WHO - In world first, Nigeria introduces new 5-in-1 vaccine against meningitis

<https://www.who.int/news/item/12-04-2024-in-world-first--nigeria-introduces-new-5-in-1-vaccine-against-meningitis>

From late last week. **“In a historic move, Nigeria has become the first country in the world to roll out a new vaccine (called Men5CV) recommended by the World Health Organization (WHO), which protects people against five strains of the meningococcus bacteria.** The vaccine and emergency vaccination activities are **funded by Gavi, the Vaccine Alliance**, which funds the global meningitis vaccine stockpile, and supports lower-income countries with routine vaccination against meningitis. ...”

“Nigeria is one of the 26 meningitis hyper-endemic countries of Africa, situated in the area known as the African Meningitis Belt. Last year, there was a 50% jump in annual meningitis cases reported across Africa...”

NYT - Global Stockpile of Cholera Vaccine Is Gone as Outbreaks Spread

<https://www.nytimes.com/2024/04/11/health/cholera-vaccine-shortage.html>

“One company is going to great lengths to build it up, but it will be years before it returns to the minimum level.” A few excerpts:

“The surprise — the good news, which is in itself surprising since ‘cholera’ and ‘good news’ are rarely used together — is that **three new vaccine makers are setting up production lines and joining the effort to replenish the stockpile.** And a **fourth company, the only one that currently makes the vaccine, which is given orally, has been working at a pace that experts describe as “heroic” to expand its production.....**” **“Yet even with all this, the total global supply of the vaccine that will become available this year will be, at best, a quarter of what is needed.”**

PS: **“The South Korean company EuBiologics is currently the sole company worldwide that makes the cholera vaccine.** The company had been aware for some time that there would be pressure on the supply of the vaccine because the only other firm that made it, an Indian subsidiary of the drug company Sanofi, had announced in 2018 that it would end production of the vaccine, which it did in 2023. To cover the gap in vaccine production, Rachel Park, the director of international business at EuBiologics, said the company decided to try to simplify its vaccine formula, streamlining steps and ingredients so it could make more doses faster. EuBiologics also invested in construction of a second manufacturing site that would double the amount of the vaccine the company could make. The company has taken the lengthy and expensive steps of having both the simplified vaccine and its new facility approved by the World Health Organization in a process called prequalification, which means that countries will not have to administer their own regulatory assessments. When the new plant starts producing the company will be able to make up to 46 million doses a year..... **... Together, these steps should increase production to a total of about 46 million doses this year, and to about 90 million doses in 2025 and onward,** Ms. Park said. But that will still most likely be significantly less than what the world requires....”

PS: “To spur companies to invest in producing cholera vaccines, Gavi, the international organization that supplies immunizations to low- and middle-income countries, has indicated the possibility of advance market commitments — the promise of future orders that would encourage drugmakers to invest in producing the cholera vaccine. Gavi pays EuBiologics \$1.53 per dose for the vaccine.”

- Related: Cidrap News - [WHO prequalifies simplified version of oral cholera vaccine](#)

“... Amid **a severe shortage** of oral cholera vaccine and outbreaks in many countries, **EuBiologics and the International Vaccine Institute (IVI) announced** this week that the **World Health Organization (WHO) has prequalified Euvichol-S, a new oral cholera vaccine (OCV) produced with a simplified method** that can streamline formulation and manufacturing by 40% compared to its existing vaccine.”

Telegraph - At least four African nations withdraw child cough syrup over toxicity fears

<https://www.telegraph.co.uk/global-health/science-and-disease/rwanda-nigeria-kenya-south-africa-toxic-benylin-cough-syrup/>

“Medicines watchdog finds high levels of a poisonous solvent, linked to scores of deaths, in a batch of Benylin.”

“At least four African countries have now withdrawn a batch of the well-known Benylin children’s cough syrup, after a medicines watchdog found high levels of a toxic solvent linked to scores of poisoning deaths. **Rwanda at the weekend joined Nigeria, Kenya and South Africa** in recalling a batch of the syrup made by drugs giant Johnson and Johnson, which had been exported to a total of six African countries.”

“**Laboratory tests by Nigeria’s health regulator** last week reported high levels of diethylene glycol, which has been linked to the deaths of dozens of children in Gambia, Uzbekistan and Cameroon since 2022. Those deaths were traced back to different cough syrups manufactured in India and Indonesia. **The recalled Benylin batch was made in May 2021. J&J last year spun off its consumer health division, including the Cape Town factory that produces Benylin, to a separate company known as Kenvue Inc.....**”

BMJ Analysis - Refocusing the World Health Organization’s Model List of Essential Medicines on the needs of low and middle income countries

Veronika J Wirtz et al; <https://www.bmj.com/content/385/bmj-2023-077776>

“In the wake of escalating medicine prices worldwide, **Veronika Wirtz and colleagues argue for refocusing the WHO Model List of Essential Medicines on the needs of low and middle income countries, while retaining its global relevance as a model process**”

Key messages: “... The World Health Organization’s Model List of Essential Medicines promotes equitable access to medicines for the priority health needs of the population. But **an increasing**

number of applications for very expensive and highly specialised medicines is challenging its global reputation; WHO should reconfirm the original goals of the model list as a globally relevant model process with, as a practical example, a **model list specifically geared to the needs of low and middle income countries**; WHO should enhance the functionality of the publicly accessible searchable electronic database of all decision data, including rejections, to aid national formulary committees and maintain the model list's future relevance."

PS: not all of my colleagues are convinced.

KEI - Colombia's birthday present to the World Trade Organization: a proposal to review the implementation of the TRIPS Agreement: Article 71.1

<https://www.keionline.org/39658>

"On 15 April 2024, the World Trade Organization (WTO) published a [document, IP/C/W/712](#), entitled, **Review of the implementation of the TRIPS Agreement: Article 71.1**; this date marks 30 years after the establishment of the WTO. Colombia's proposal can be found here: [W712](#) **Colombia submitted a proposal for a comprehensive Article 71 review of the WTO TRIPS Agreement.**" Read what it entails.

- And related thread on X – by [@ThiruinGeneva](#) (based on a Politico Pro article):

"**HAPPY BIRTHDAY, WTO: Colombia wants to mark the 30th anniversary of the World Trade Organization with a thorough review of its intellectual property rules**, which were at the center of a protracted and ill-tempered debate during the Covid pandemic."

"The long 90s: **According to Colombia, the TRIPS Agreement is flecked with policy choices that reflect the dominant ideas of the early 1990s and should be revisited.**"

"How we got here: **Colombia says it wants to overcome the "impasse" at the TRIPS Council over discussions on a so-called 'waiver' of IP rights for Covid-related products.**"

Global Public Health - Pandemics, intellectual property and 'our economy': A worldview analysis of Canada's role in compromising global access to COVID-19 vaccines

Ben Brisbois, R Labonté et al;

<https://www.tandfonline.com/doi/full/10.1080/17441692.2024.2335360>

".... To learn from Canada's vaccine nationalism **we explore the worldview** – a coherent textual picture of the world – **in a sample of Government of Canada communications regarding global COVID-19 vaccine sharing. Rather than a puzzling lapse by a good faith 'middle power', Canada's obstruction of global COVID-19 vaccine equity is a logical and deliberate extension of dominant neoliberal economic policy models.....**"

Global Fund - New Nets Prevent 13 Million Malaria Cases in Sub-Saharan Africa

<https://www.theglobalfund.org/en/news/2024/2024-04-17-new-nets-prevent-13-million-malaria-cases-sub-saharan-africa/>

“Compared to standard nets, the introduction of 56 million state-of-the-art mosquito nets in 17 countries across sub-Saharan Africa averted an estimated 13 million malaria cases and 24,600 deaths.”

“... The New Nets Project, an initiative funded by Unitaid and the Global Fund and led by the Innovative Vector Control Consortium (IVCC), piloted the use of dual-insecticide nets in malaria-endemic countries between 2019 and 2022 to address the growing threat of insecticide resistance..... “ “... **Two clinical trials and five pilot studies**, delivered through the New Nets Project as well as through partner funding, **found the new ITNs to improve malaria control by approximately 20-50% in countries reporting insecticide resistance in sub-Saharan Africa, compared to standard nets.”**

- Coverage via Stat News – [Second-generation mosquito nets prevented 13 million malaria cases in large pilot programs](#) and the Guardian - [New types of mosquito bed nets could cut malaria risk by up to half, trial finds](#).

NYT – Millions of girls in Africa will miss HPV shots after Merck production problem

<https://www.nytimes.com/2024/04/18/health/hpv-vaccine-africa-merck.html>

“The company told countries that it can supply only 18.8 million doses of the 29.6 million doses it was contracted to deliver this year.”

Commercial determinants of health

HPW - Why Investing in Public Health is a Win-Win Strategy That Can Protect Nestlé’s Profits

T Abrams et al ; <https://healthpolicy-watch.news/why-investing-in-public-health-is-a-win-win-strategy-that-can-protect-nestles-profits/>

“Nestlé’s shareholders have a golden opportunity to call on the food giant to promote healthier lives in almost two hundred countries by backing a bold resolution at the multinational’s Annual General Meeting this week. Doing so can protect their profits in the long-haul.”

“Backed by a coalition of **five institutional investors** with \$ 1.68 trillion in assets under management, the **resolution** calls on the world’s largest food and drinks company to transparently disclose the sales of its products by drawing on government-approved nutrient profiling methods. In addition, the resolution urges the company to **strategically boost the proportion of sales from healthier products**. The resolution is supported by **ShareAction**, a UK charity that champions

responsible investment. It coordinates the [Healthy Markets Initiative](#) (HMI), a coalition of 40 institutional investors that engages with the world's largest food and beverage companies to ramp up access to affordable and healthy food.....”

PS: “ ... The **draft resolution going before Nestlé shareholders is the first of its kind to escalate to a vote at an Annual General Meeting (AGM) of a major food and drinks company.** In the past, similar resolutions urging companies to enhance the proportion of sales from healthier products have been [proposed](#). However, they **never progressed to the voting stage** because companies responded with [concrete commitments](#) to enhance access to healthier products, prompting the resolutions to be withdrawn.....”

PS: “... **Stronger leadership in global nutrition is financially prudent for Nestlé** : A potential shift in Nestlé’s business decisions is in the interest of the public and policy-makers [struggling](#) to reach the Sustainable Development Goals by 2030. **Investing in public health is also a financially prudent decision** that has potential to reap tangible benefits for shareholders in the long-run. ... **This is what forward-thinking investors like Legal General Investment Management (LGIM), the UK’s largest asset manager, have stressed. LGIM has emphasized** that rising rates of obesity represent a **“systemic” risk to diversified investors**, since their returns rely on the broader health of the economy. This perspective is backed by [studies](#) indicating that broader economic factors account for 75 to 94 per cent of average portfolio returns for diversified investors.... **Nestlé’s existing business decisions also carry [reputational](#), [legal](#), and [regulatory](#) risks – with potential to hamper its profits in the long-haul.”**

Guardian- Nestlé adds sugar to infant milk sold in poorer countries, report finds

<https://www.theguardian.com/global-development/2024/apr/17/nestle-adds-sugar-to-infant-milk-sold-in-poorer-countries-report-finds>

“Swiss food firm’s infant formula and cereal sold in global south ignore WHO anti-obesity guidelines for Europe, says Public Eye.”

“Nestlé, the world’s largest consumer goods company, adds sugar and honey to infant milk and cereal products sold in many poorer countries, contrary to international guidelines aimed at preventing obesity and chronic diseases, a report has found. Campaigners from Public Eye, a Swiss investigative organisation, sent samples of the Swiss multinational’s baby-food products sold in Asia, Africa and Latin America to a Belgian laboratory for testing.... The results, and examination of product packaging, revealed added sugar in the form of sucrose or honey in samples of Nido, a follow-up milk formula brand intended for use for infants aged one and above, and Cerelac, a cereal aimed at children aged between six months and two years.”

“In Nestlé’s main European markets, including the UK, there is no added sugar in formulas for young children.”

“... [In its report](#), written in collaboration with the International Baby Food Action Network, Public Eye said data from Euromonitor International, a market-research company, revealed global retail sales of above \$1.2bn (£960m) for Cerelac. The highest figures are in low- and middle-income countries, with 40% of sales just in Brazil and India. **Dr Nigel Rollins, a medical officer at the WHO, said the findings represented “a double standard [...] that can’t be justified”.....”**

Planetary health

BMJ Opinion - Planetary health: challenging power and privilege is key to a fairer and healthier future

S Gepp, K Buse et al; <https://www.bmj.com/content/385/bmj.q853>

“As the 6th Planetary Health Annual Meeting begins in Kuala Lumpur, Sophie Gepp and colleagues commend progress in the field of planetary health but call for greater accountability of organisations to ensure planetary health justice.”

“... As the 6th Planetary Health Annual Meeting kicks off in Kuala Lumpur this week, a **newly published report reveals that organisations active in planetary health have some way to go if they are to contribute in more equitable ways.** The report looked at the organisations in the annual Global Health 50/50 survey, and found of the 197 sampled, 114 have planetary health related activities **Of the 99 non-profit organisations in the sample, only 24% showed evidence of tackling the root causes of gender inequity with gender transformative action in their planetary health activities.** The report finds that only a fifth of the non-profit organisations reported gender disaggregated data. It also finds that some progress has been made with regards to gender parity in governance among the non-profit organisations, where 38% of chief executive officers or executive directors were women, but it **found a strikingly low representation of people from low and middle income countries—less than 5% of board members were nationals of low income countries.** Also absent is representation of people from geographies that are particularly affected by climate change, such as Small Island Developing States.....”

“In light of these findings, we call for greater commitment and action for justice in planetary health work on three fronts.....”

- For the new report, see Global Health 50/50 - [Gender justice for planetary health](#).

“Assessing the gender-responsiveness of 114 global organisations’ work to address the planetary health crisis.”

BMJ GH - The global health community at international climate change negotiations

Kim Robin van Daalen et al; <https://gh.bmj.com/content/9/4/e015292>

“... In this **first-ever quantitative analysis of the health community’s attendance at UN climate conferences between 1995 and 2023, we show a steady increase in absolute attendance of health actors,** with the highest attendance of health actors at COP28 (n=1612) compared with the lowest attendance at COP1 (n=17). Yet, the percentage of health delegates remained largely constant over time in relation to the overall number of attendees.”

“Although a small number of **Ministers of Health** attended individual COPs between 1995 and 2022, COP28 was attended by approximately the same number of Health Ministers (n=52) as in all previous COPs combined (n=53). **While parties and representatives of the UN and its Specialised**

Bodies increasingly embrace the health narrative, crucial climate change commitments continue to lag. Without fundamental social change, without phasing out fossil fuels, and without climate justice, the health narrative for climate change cannot bring what it promises: health for all.”

Guardian - Strasbourg court’s Swiss climate ruling could have global impact, say experts

<https://www.theguardian.com/law/2024/apr/13/swiss-climate-ruling-global-impact-european-court-human-rights>

“Decision by European court of human rights around vulnerability of older women to heatwaves marks significant shift.” **Analysis from an international law perspective.**

Chapter (book) - Living with climate change (2023); Chapter 11 - Climate change and human health: Primary, secondary, and tertiary effects

Colin D. Butler;

https://www.sciencedirect.com/science/article/pii/B9780443185151000071?ref=pdf_download&fr=RR-2&rr=8731826cca89b9bf

“This chapter describes the most important consequences to human health from climate change, using a three-tiered conceptual framework, including events that are “primary” (e.g., from heatwaves and other extreme weather events), “secondary” (e.g., from vector-borne diseases and climate change-associated impacts on air pollution), and “tertiary” (e.g., via large-scale violence). The mental health effects of some of these impacts are also briefly discussed. The focus of the chapter is global... ..”

PS: the book is **open access**.

- Link: NEJM (Perspective) – [Advocating for a Healthy Response to Climate Change — COP28 and the Health Community](#) (by J Miller et al.)

SRHR

UN News - Violations of women’s reproductive health rights trigger rise in preventable deaths

<https://news.un.org/en/story/2024/04/1148621>

“African women are 130 times more likely to die due to pregnancy or childbirth complications than women in Europe and Northern America, the UN sexual and reproductive health agency (UNFPA) said in a new report published on Wednesday.”

“Interwoven Lives, Threads of Hope: Ending inequalities in sexual and reproductive health and rights, reveals that more than half of all preventable maternal deaths occur in countries which are

in a state of crisis or distress. It highlights the role that racism, sexism and other forms of discrimination play in blocking progress on sexual and reproductive health issues. Women and girls trapped in poverty are more likely to die prematurely due to lack of sufficient healthcare if they belong to minority groups or are trapped in a conflict setting, according to the findings. “

“Overall, there have been significant advances in sexual and reproductive health it became a global sustainable development priority three decades ago. “In the space of a generation, we have reduced the unintended pregnancy rate by nearly one fifth, lowered the maternal death rate by one third, and secured laws against domestic violence in more than 160 countries,” UNFPA Executive Director Natalia Kanem said, launching the report. **But progress is slowing down or stalled in several key areas.** In a world where a quarter of women cannot say no to sex with their partner and nearly one in 10 have no say over contraception, **800 women die every day giving birth – a disturbing figure that has remained unchanged since 2016.** Nearly 500 of those preventable deaths per day are happening in countries living through humanitarian crises and conflicts.”

- Related: Geneva Solutions - [UNFPA chief: We see ‘orchestrated efforts’ to reverse gains in sexual and reproductive rights](#)
- Lancet World Report: [UNFPA warns of threats to sexual and reproductive health](#)

“A well organised pushback against human rights and gender equality is exacerbating marginalisation. John Zarocostas reports from Geneva.” With quotes from **Natalia Kanem, Flavia Bustreo, Winnie Byanyima, ...**

ITM - Innovative navigation tool reveals inequalities in travel time to emergency obstetric care in African cities

<https://www.itg.be/en/health-stories/press-releases/innovative-navigation-tool-reveals-inequalities-in-travel-time-to-emergency-obstetric-care-in-african-cities>

“No time to lose: Maternal health experts and tech join forces to better reflect harsh reality of long travel times to emergency care.”

“Travel time to hospitals is a matter of life and death for pregnant women in emergency situations. **Until now, models that calculate travel time have not accurately reflected the reality in African cities.** In a newly published article in [The Lancet Global Health](#), researchers from the Institute of Tropical Medicine (ITM) in Antwerp, as part of the [OnTIME Consortium](#), led by the London School of Hygiene & Tropical Medicine (LSHTM), and Google, overcome this challenge by using Google Maps to map potential journeys to emergency obstetric care for the first time.”

Lancet Breast cancer commission

<https://www.thelancet.com/commissions/breast-cancer>

“Despite tremendous advances in breast cancer research and treatment over the past three decades—leading to a reduction in breast cancer mortality of over 40% in some high-income countries—**gross inequities remain, with many groups being systematically left behind, ignored, and even forgotten.** The work of the *Lancet* Breast Cancer Commission highlights crucial groups, such as those living with metastatic breast cancer, and identifies how the hidden costs of breast cancer and associated suffering are considerable, varied, and have far-reaching effects. The Commission offers a forward-looking and optimistic road map for how the health community can course correct to address these urgent challenges in breast cancer.”

New Lancet GBD study

Lancet - [Global incidence, prevalence, years lived with disability \(YLDs\), disability-adjusted life-years \(DALYs\), and healthy life expectancy \(HALE\) for 371 diseases and injuries in 204 countries and territories and 811 subnational locations, 1990–2021: a systematic analysis for the Global Burden of Disease Study 2021](#)

Among **the findings**: “...A global epidemiological transition remains underway. Our findings suggest that prioritising non-communicable disease prevention and treatment policies, as well as strengthening health systems, continues to be crucially important....”

“Age-standardized rates of DALYs have increased for the first time in three decades: 4.1% ↑ in 2020 and 7.2% ↑ in 2021.”

- Related Lancet comment: [Global Burden of Disease Study 2021 estimates: implications for health policy and research](#) (by Z J Ward et al).

Miscellaneous

Telegraph - Vaccination programmes save health systems billions, says new modelling

<https://www.telegraph.co.uk/global-health/science-and-disease/adult-vaccination-programmes-save-health-systems-billions/>

“Report from the Office of Health Economics reveals adult immunisation returns up to 19 times the initial investment.”

“Adult vaccination programmes can return up to 19 times their initial investment, saving health systems billions, according to new modelling. **The report by the Office of Health Economics (OHE) comes ahead of World Immunisation Week which starts on Wednesday.** Its key recommendations include adopting a “prevention-first” mindset in order to keep people out of hospital where possible....”

“The **‘first-of-its-kind’** study showed that such adult vaccine programmes can save health systems like the NHS up to \$4,637 per individual vaccinated. The savings are made because many fewer people end up in hospitals needing expensive treatments.... “

“**The research, which was funded by the International Federation of Pharmaceutical Manufacturers and Associations**, focused on vaccines that protected against flu, shingles, pneumococcal disease and respiratory syncytial virus (RSV). It looked at a wide **range of vaccine programmes in ten countries**, covering a range of healthcare systems, demographics and vaccine schedules, including Australia, Brazil, Germany, Japan, South Africa and the United States. ...”

- See also HPW coverage of this study - [Study Finds Adult Vaccination Programs Deliver 19x Returns](#)

Nature News - What toilets can reveal about COVID, cancer and other health threats

<https://www.nature.com/articles/d41586-024-01092-7>

“Wastewater testing grew tremendously during the pandemic. But is it ready to tackle the opioid crisis, air pollution and antibiotic resistance?”

Bloomberg - WHO’s New AI-Powered Chatbot Is Giving Wrong Medical Answers

<https://www.bloomberg.com/news/articles/2024-04-18/who-s-new-ai-health-chatbot-sarah-gets-many-medical-questions-wrong>

“SARAH doesn’t have up-to-date medical data, can ‘hallucinate’; Tends to fall back on ‘consult with your health-care provider’.”

Global health governance & Governance of Health

Project Syndicate - The World Is Still on Fire

L Summers et al; <https://www.project-syndicate.org/commentary/imf-world-bank-spring-meetings-need-to-get-four-things-right-by-lawrence-h-summers-and-n-k-singh-2024-04?barrier=accesspay>

Op-ed linked to the IMF/WB Spring meetings. **“Policymakers need to get four things right to shore up the credibility of the international system. “**

“... **First, reverse the capital flows, so that the lowest-income countries are receiving more support than they are paying out to private creditors.** In the short term, that means expanding the multilateral development banks’ use of innovative financial tools such as guarantees, risk-mitigation instruments, and hybrid capital. In the slightly longer term, it means stepping up with new money from shareholders – a capital increase for the World Bank and regional development banks, which will require legislative approval in shareholding countries. **Second, transform MDBs into big, risk-taking, climate-focused institutions.** Development banks have tinkered around the edges with

bolder approaches to lending, but it is time for them to scale up those efforts. The wealthy countries that are the biggest shareholders in the multilateral system need to provide the political support for that risk-taking. **Third, fully fund the International Development Association, a highly effective institution that provides much-needed resources to the lowest-income countries.** The World Bank's president has called for the largest-ever IDA replenishment from donors; given the challenges ahead, the world cannot afford to deliver anything less. **Fourth, tackle food security.** Last year, the United Nations was able to raise from international donors only about one-third of what it sought for humanitarian relief, and it had to slash its goals for 2024. Stepping up with funding for the several hundred million people without enough food to eat would alleviate a humanitarian disaster and provide evidence to skeptical countries that the international system still can work....”

Development Initiatives - Japan and the US offset EU aid squeeze in 2023, but the outlook on aid is poor

<https://devinit.org/blog/japan-and-the-us-offset-eu-aid-squeeze-in-2023-but-the-outlook-on-aid-is-poor/>

“New data shows an overall increase in aid in 2023, notably from Japan and the US, but **forthcoming cuts from Germany and France may be a sign of worse to come.**”

“**Preliminary data from the Organisation for Economic Co-operation and Development's (OECD) Development Assistance Committee (DAC)** shows that Official Development Assistance (ODA) remained broadly flat overall in 2023, as increases in aid to Ukraine offset a slight fall in in-donor refugee costs. However, individual donors made some significant changes. Some, notably the US and Japan, saw large increases, while **others – particularly in the EU – appear to be stepping away from global leadership on aid.** With cuts on the horizon, the outlook is likely to worsen for 2024.”

- See also Eurodad - [Poorest countries continue to lose out as wealthy donors pocket their own aid, according to latest OECD data.](#)

“... figures published today by the OECD show that **hosting refugees in donor countries accounts for more than US\$31 billion (equivalent to 13.8 per cent of total ODA).** Despite a small rise in ODA across all wealthy countries in 2023, **in the EU aid fell by a shocking 7.7 per cent, with only a few members reporting increases.**”

Global Policy - Behind closed doors: Informal influence on United Nations staffing and pathologies of international bureaucracies

Tianhan Gui; <https://onlinelibrary.wiley.com/doi/10.1111/1758-5899.13370>

“... **This research explores the mechanisms through which member states informally shape staffing decisions in the United Nations, extending the traditional view of influence beyond mere structural power within international organizations.** Interviews with UN officials uncover **three primary informal governance tactics:** leveraging financial contributions, nurturing social networks, and fostering educational and institutional pathways for grooming candidates. These strategies subtly impact UN staffing, policy development, and access to sensitive information. **The study points to the UN's structural challenges, such as reliance on voluntary funding and decentralized administration, which, coupled with the intertwined interests across organizational levels and the**

lack of effective oversight mechanisms, enable member states' informal influence. This environment not only restricts the involvement of developing countries but also undermines the UN's legitimacy and effectiveness.”

- And via Devex: [Back to Skoll](#)

“Why is it that The Global Fund to Fight AIDS, Tuberculosis and Malaria enjoys passionate support from nonprofits? The agency's executive director, Peter Sands, was asked that during the closing plenaries of the Skoll World Forum, the international gathering for social innovators that concluded Friday in Oxford..... The question came amid a conference filled with anger at the U.N., big INGOs, and major donors. Many of Skoll's delegates are smaller nonprofits that are deeply dispirited that kind words around localization haven't turned into action.”

“Sands had a clear message: The Global Fund involves civil society organizations in its governance structures, offering them three times the seats on the board that the U.S. gets. “People say ‘How do you get [civil society] to be advocates on your behalf,’” he told the conference. “And I say it's simple. How many seats do civil society organizations have on your board?” “

UHC & PHC

BMJ Feature - Health under the spotlight in India's 2024 election

<https://www.bmj.com/content/385/bmj.g844>

“India's marathon 2024 election process sees several health matters coming to the fore, including universal healthcare, the health workforce, and infrastructure. Kamala Thiagarajan reports.”

International Health - Key lessons from Liberia for successful partnerships toward universal health coverage in low-resource settings

Tiawanlyn G Godwin-Akpan, S Theobald et al; <https://academic.oup.com/inthealth/advance-article/doi/10.1093/inthealth/ihae028/7644690?searchresult=1>

“...This article distils practical lessons and frontline experiences from ongoing implementation research, discusses the potential partnerships toward achieving UHC and provides recommendations for health system strengthening to guide policymakers and national governments....”

Among others, on the **REDRESS** theory of change.

Pandemic preparedness & response/ Global Health Security

GHF - Guest essay : Four Principles to Guide a Pathogen Access-and-Benefit Sharing System for Pandemic Preparedness and Response

By Lawrence O. Gostin, Sam F. Halabi & Jayashree Watal;

https://genevahealthfiles.substack.com/p/guest-essay-principles-to-guide-the?utm_campaign=email-post&r=97mey&utm_source=substack&utm_medium=email

The four principles are:

“1) **Full and transparent scientific exchange**:....

2) **Real-time, needs-based sharing of medical countermeasures**: All those using pathogens or their GSD in the development of MCMs should agree to share a substantial percentage of any MCM production, **say, no less than 20%, in real time and at a no-profit (at cost) price, for allocation to low- and middle-income countries (LMICs) as needed** to protect the most vulnerable wherever they live. **This 20% could be further modified based on risk, need, and resource distribution**. For example, it may be comprised of 10% donation and 10% at cost, a so-called “10+10.” **Parties should also avoid pre-purchasing agreements for quantities of MCMs that far exceed their needs**, which can create worldwide supply shortages. **Allocation by an evidence-based and independent agency like WHO that is guided by public health risk and need in its allocation operations** reduces the impact of vaccine supply shortages and potential hoarding.

3) **Financial contributions**: “....upfront, meaningful financial contributions are necessary to make MCMs available in a timely and affordable way for LMICs.

4) **The PABS system should be multilateral, not transactional**: PABS should not be thought of as a *tit for tat* arrangement. That is, “I give you a pathogen sample or its GSD and in return you give me resources.””

“In summary, every country, whatever their income level, would benefit from a robust PABS system that has four key elements: scientific exchange; real-time, needs-based sharing of pandemic products; and financial obligations—all within a legally binding multilateral system”

Thread on X by @ThiruinGeneva (based on a few Politico Pro article from end of last week)

<https://twitter.com/ThiruGeneva/status/1778667638568231057>

This was a thread from end of last week – optional read.

“4 ways the pandemic treaty talks could go - Countries are grasping for alternatives as international negotiations show no sign of progress.”

"But after minimal progress was made at the most recent round of talks, **top WHO official Jaouad Mahjour said countries may need to “reflect on issues that need further work” after the WHA, in the clearest hint yet that the May deadline is not as firm as previously thought.**" #INB9

""**The plan B getting the most buzz among Geneva insiders is a high-level deal, or framework in diplomacy jargon, that would spell out some basic principles to govern the world’s response to the next pandemic, without going into detail.**"

"**Such a deal would go hand-in-hand with an extension of the May deadline to work out solutions to more difficult problems,** such as whether pharmaceutical companies should enjoy normal intellectual property rights over new drugs and vaccines developed during a pandemic."

"**One...official, Viroj Tangcharoensathien, suggested in informal talks that a proposal for a high-level deal on access to pathogen data could become operational by 2026,** giving negotiators a bit more time."

" **Helen Clark thinks a provisional high-level deal could be the way to go** — in fact, she said, it’s what countries perhaps should have done all along."

"**One official involved in the talks on behalf of a developing country told POLITICO they were open to a high-level framework, but not if it was just a “face-saving attempt” while leaving the status quo intact.**" "I think that would be a no-go for developing countries. A framework has to deliver something, it can’t just be resolution language," the official said." "In **other words, it has to give developing countries at least some of what they want on access to drugs and vaccines or it might simply be rejected.**"

Politico: "We spoke to the Global Fund’s executive director about the new pandemic agreement and why an extension in negotiations is “inevitable”."

"**It’s“inevitable” countries will need more time to agree a pandemic deal “that actually works”, according to Peter Sands, executive director of the Global Fund** a major financing body that is jostling for a role in the new system." #INB9"

"In an interview with Morning Health, **the former banker said it would “be a shame to create something that doesn’t actually say what happens when we next get hit [with a pandemic].”**

"**Show me the money: Sands also explained** where the funding for post-Covid pandemic response should come from. **Unsurprisingly, he thinks the Global Fund should be involved, although he said there’s plenty of room for other organizations too.**"

Link:

- Reuters - [High risk of animal-to-human diseases developing in some China fur farms, animal protection group says](#)

The animal protection group **Humane Society International** conducted the study at the end of 2023.

Planetary health

Devex - Opinion: This new 30x30 tool democratizes data to protect biodiversity

<https://www.devex.com/news/opinion-this-new-30x30-tool-democratizes-data-to-protect-biodiversity-107441>

“The 30x30 Progress Tracker allows anyone to monitor the commitment made by world leaders in 2022 to protect and conserve at least 30% of the planet by 2030.”

“... SkyTruth, a nonprofit conservation technology organization, is introducing a new tool on April 15 at the Our Ocean Conference in Greece. With support from the Bloomberg Ocean Initiative, the first phase of the 30x30 Progress Tracker will be dedicated to marine protection, while SkyTruth plans to launch the terrestrial component at the United Nations Biodiversity Conference in Colombia in October 2024.....”

Potsdam institute for climate research - 38 trillion dollars in damages each year: World economy already committed to income reduction of 19 % due to climate change

<https://www.pik-potsdam.de/en/news/latest-news/38-trillion-dollars-in-damages-each-year-world-economy-already-committed-to-income-reduction-of-19-due-to-climate-change>

“... Even if CO2 emissions were to be drastically cut down starting today, the world economy is already committed to an income reduction of 19 % until 2050 due to climate change, a new study published in “Nature” finds. These damages are six times larger than the mitigation costs needed to limit global warming to two degrees. Based on empirical data from more than 1,600 regions worldwide over the past 40 years, scientists at the Potsdam Institute for Climate Impact Research (PIK) assessed future impacts of changing climatic conditions on economic growth and their persistence....”

PS: **“The countries least responsible for climate change, are predicted to suffer income loss that is 60% greater than the higher-income countries and 40% greater than higher-emission countries.....”**

- Coverage via **the Guardian** – [Climate crisis: average world incomes to drop by nearly a fifth by 2050](#)

“Cost of environmental damage will be six times higher than price of limiting global heating to 2C, study finds.”

Recourse - New report analysing initial experience with IMF’s Resilience and Sustainability Trust shows evidence of concern: austerity, privatisation, and fossil fuel expansion

<https://re-course.org/newsupdates/new-report-analysing-initial-experience-with-imfs-resilience-and-sustainability-trust-shows-evidence-of-concern-austerity-privatisation-and-fossil-fuel-expansion/>

“The report analyses the policy conditionalities included in the first 17 arrangements and does a deep dive in those in Kenya and Senegal; Kenya’s arrangement under the RST aims at increasing space for climate action, however the government is paying 55% of its revenues on debt servicing and is expected to reduce its fiscal spending by 5.7% of GDP by 2025; In the case of Senegal, one of the objectives of the arrangement under the RST is mitigation. However, the concurrent IMF program promotes fossil fuel expansion for export in wetlands (Sangomar field) and areas that are home to some of the largest fishing communities in West Africa (Greater Tortue Ahmeyim field) .”

“The report concludes that through the RST the IMF is extending to climate policy its approach to structural adjustment, and calls for a wholesome review of the instrument and the institution’s Climate Change Strategy.”

Climate Change News - As donors dither, Indigenous funds seek to decolonise green finance

<https://www.climatechangenews.com/2024/04/17/as-donors-dither-indigenous-funds-seek-to-decolonise-green-finance/>

“Tired of waiting for donor dollars for climate and nature protection to trickle down, Indigenous rights groups are creating new funds to do things differently.”

Lancet Global Health (Comment) - Saving the Amazon in South America by a regional approach on climate change: the need to consider the health perspective

R Chowdhury et al; [https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(24\)00125-6/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(24)00125-6/fulltext)

“... the Amazon faces a state of existential crisis. Deforestation, wildfires, and environmental degradation pose grave threats to its biodiversity, with the surface and groundwater experiencing rising pollution. To address this threat, a regional perspective to better conceive integrated solutions for saving the Amazon has been proposed. ... While this is a much needed and comprehensive approach, we argue that the safeguarding of human health should also become a key component of this solution, especially given that the wellbeing of Amazonian communities is essential for the preservation of the Amazon and that health promotion and disease protection could serve as an effective nudge to implement the integrated solutions.....”

Nature (News) - Do climate lawsuits lead to action? Researchers assess their impact

https://www.nature.com/articles/d41586-024-01081-w?utm_medium=Social&utm_campaign=nature&utm_source=Twitter#Echobox=1713342433

“Litigation can lead governments to strengthen their climate policies and curb companies’ greenwashing, say scientists.”

Covid

Lancet – Offline: America's reckoning

R Horton; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)00804-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)00804-3/fulltext)

Donald McNeil Jr, a former New York Times reporter who covered global health for a quarter of a century, has ... written a book—**The Wisdom of Plagues**. Arguing that ‘**no one was in command**’ during the pandemic in the US.

“The answer? A Pentagon for disease: “We need to replace the Department of Health and Human Services with an agency whose sole mission is to defeat disease.” The CDC, NIH, and FDA must be reorganised to become rapid responders to crises.”

SS&M - Schematising COVID-19 pandemic responses: An ideal typical analysis

Lee F. Monaghan; <https://www.sciencedirect.com/science/article/abs/pii/S0277953624003162>

“Pandemic responses do not occur in a social vacuum. **Sociological heuristics provide a handle on the polarising COVID-19 debacle. Left-Right and Authoritarian-Libertarian tendencies patterned pandemic responses.** Societal responses to COVID-19 ranged **from hierarchical to egalitarian**. A case is made for an anti-authoritarian and egalitarian stance.”

Infectious diseases & NTDs

Lancet Infectious Diseases - Global burden associated with 85 pathogens in 2019: a systematic analysis for the Global Burden of Disease Study 2019

[https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(24\)00158-0/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(24)00158-0/fulltext)

- Related Lancet Infectious Diseases Comment - [The continuing challenge of infectious diseases](#)

“... **In 2019**, 2540 million (95% uncertainty interval [UI] 2290–2810) disability-adjusted life years (DALYs) were attributed to non-communicable and communicable diseases and injuries globally. In **The Lancet Infectious Diseases**, the IHME Pathogen Core Group have now estimated a burden of **704 million (610–820) DALYs to be associated with 85 pathogens** (encompassing causative agents, pathogen groups, infectious diseases, and aggregate categories), **or more than a quarter (27·7%) of all DALYs attributable to disease and injury, in 2019**. Although the primary disease burdens in high-income and upper-middle-income countries included cardiovascular diseases and cancer, **low-income and lower-middle-income countries were disproportionately affected by infectious diseases**. According to super-region, **the greatest fraction of pathogen-associated DALYs among the all-cause DALY burden was estimated in sub-Saharan Africa**, irrespective of age, and the region's proportions were greater than the global DALY proportions for infectious diseases....” .

Read about the rest of the findings and how to interpret them.

See also Cidrap News - [Study highlights heavy global burden of infectious diseases](#)

“85 pathogens accounted for 704 million disability-adjusted life years (DALYs)—the number of years lost from ill health, disability, or early deaths—globally in 2019. That figure accounts for 28% of 2.54 billion DALYs attributed to all causes in the 2019 Global Burden of Disease (GBD) study. The impact of these pathogens was disproportionately seen in children...”

Science - Bacteria found in mosquito guts could help scientists fight dengue, Zika

<https://www.science.org/content/article/bacteria-found-mosquito-guts-could-help-scientists-fight-dengue-zika>

“Newly identified microbe disables the viruses before they can infect the insects, potentially reducing disease transmission in people.”

Telegraph - Vietnam’s ‘dramatic’ rabies surge kills 29 people in four months

[Telegraph](#)

“Experts have blamed a lack of animal vaccination as well as the country’s prominent dog and cat meat trade.”

AMR

SS&M - The urban political ecology of antimicrobial resistance: A critical lens on integrative governance

R Aguiar a et al; <https://www.sciencedirect.com/science/article/pii/S0277953624001333>

« The objective of this paper is to integrate Urban Political Ecology (UPE) as a theory for identifying under-exposed urban dimensions of Antimicrobial Resistance (AMR).....”

NCDs

WHO - Knowledge Action Portal on NCDs

<https://knowledge-action-portal.com/en>

Resource. “Discover selected guidelines, reports and other knowledge resources curated by **WHO's Global NCD Platform....**”

Nature News - Smoking bans are coming: what does the evidence say?

<https://www.nature.com/articles/d41586-024-00472-3>

“**Countries are cracking down on tobacco use and vaping** — the laws could save thousands of lives and billions of dollars, say scientists..”

Devex - Opinion: An item is missing on the Japan-US collaboration agenda

G Vradenburg; <https://www.devex.com/news/opinion-an-item-is-missing-on-the-japan-us-collaboration-agenda-107442>

“Here’s why **Japan-U.S. collaboration on aging, Alzheimer’s disease, and brain health** represents a leadership opportunity on the global health stage.”

“...Together, Japan and the U.S. can collaborate on a global funding mechanism to scale a growing set of new Alzheimer’s solutions in every country worldwide. **Our organization, [the Davos Alzheimer’s Collaborative](#)**, has been working to lay the foundation, building toward a discovery research ecosystem, a clinical trial support mechanism, and better prepared health systems across every continent. Accelerating these efforts would create an important new platform for Japan, the U.S., and other global leaders. Here’s how:.....”

Link:

- HPW - [India’s Efforts to Address Hypertension Show Progress – Highlight Global Challenges](#)

Social & commercial determinants of health

Plos Med (Editorial) - Mixed progress in global tobacco control

Coral Gartner et al;

<https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1004392>

“... WHO’s assessment indicates that tobacco smoking remains the leading preventable cause of premature mortality globally despite progress in reducing its global prevalence by implementing MPOWER measures. **More countries urgently need to increase their use of the most cost-effective measures, such as increased tobacco taxation. ...**”

Sexual & Reproductive health rights

Global Health Action - Embedding research capacity strengthening in multi-country studies in low-and middle-income countries: learnings from sexual and reproductive health research

<https://www.tandfonline.com/doi/full/10.1080/16549716.2024.2338634?src=exp-la>

By Anne M. Khisa et al.

Science News - People with complicated pregnancies may suffer health problems, die early

<https://www.science.org/content/article/people-with-complicated-pregnancies-may-suffer-health-problems-die-early>

“Massive study finds long-term risks for those who experience preeclampsia, preterm delivery, and other complications.”

“... Preterm births are a well-known hazard for babies—who can require months and sometimes years of extra care—but far less attention is paid to the people who deliver them. **Now, a new analysis of more than 2 million pregnancies over 4 decades finds those parents need consideration, too: Even years later, people who experienced some common pregnancy complications had a higher risk of death.**”

“We are starting to understand that **pregnancy complications ... are windows into longer term complications,**” says Cynthia Gyamfi-Bannerman, a maternal fetal medicine specialist at the University of California San Diego who was not involved in the **work, published today in *JAMA Internal Medicine*.**”

Guardian - ‘Pregnancy is not a disease’: why do so many women die giving birth in one of Africa’s richest countries?

[Guardian](#)

“More than 80,000 Nigerian women died from pregnancy-related complications in 2020, a statistic activists say reflects a lack of political will to fix a broken medical system.”

Access to medicines & health technology

Lancet GH (Health Policy) - Facilitating the development of urgently required combination vaccines

William P Hausdorff, PhD et al; [https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(24\)00092-5/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(24)00092-5/fulltext)

“The essence of a vaccine lies in its ability to elicit a set of immune responses specifically directed at a particular pathogen. Accordingly, **vaccines were historically designed, developed, registered, recommended, procured, and administered as monopathogen formulations.** Nonetheless, the control and elimination of an astonishing number of diseases was realised only after several once-separate vaccines were provided as **combinations.** **Unfortunately, the current superabundance of recommended and pipeline vaccines is now at odds with the number of acceptable vaccine administrations and feasible health-care visits for vaccine recipients and health-care providers.** **Yet, few new combinations are in development** because, in addition to the scientific and manufacturing hurdles intrinsic to coformulation, developers face a **gauntlet of regulatory, policy, and commercialisation obstacles in a milieu still largely designed for monopathogen vaccines.** We argue here that **national policy makers and public health agencies should prospectively identify and advocate for the development of new multipathogen combination vaccines,** and suggest ways to accelerate the regulatory pathways to licensure of combinations and other concrete, innovative steps to mitigate current obstacles.”

Reuters – EU to start China probe on medical device procurement, Bloomberg News reports

[Reuters;](#)

“The European Union is set to launch an investigation into China's procurement of medical devices to address concerns that Beijing's policies are unfairly favouring domestic suppliers, Bloomberg News reported on Monday. ... The probe may be announced as early as mid-April and could result in the bloc curtailing Chinese access to its tenders, the report added, citing people familiar with the matter. ... **The probe will collect information from companies and member states and its primary aim is to enter into a dialogue with China to ensure that markets are fair and open,** the report said....”

NYT - Chinese Company Under Congressional Scrutiny Makes Key U.S. Drugs

<https://www.nytimes.com/2024/04/15/health/wuxi-us-drugs-congress.html>

“Lawmakers raising national security concerns and seeking to disconnect a major Chinese firm from U.S. pharmaceutical interests have rattled the biotech industry. The firm is deeply involved in development and manufacturing of **crucial therapies** for cancer, cystic fibrosis, H.I.V. and other illnesses”.

“... **WuXi AppTec** is one of several companies that lawmakers have identified as potential threats to the security of individual Americans' genetic information and U.S. intellectual property....”

FT - Hedge fund urges board shake-up at Novavax over struggling Covid vaccine

<https://www.ft.com/content/7d731522-26c6-4c60-a528-d52f4d89cd5a>

“Shah Capital wants change in US biotech's strategy as its shares have tumbled since their pandemic peak.”

“A top-five shareholder in struggling Covid-19 vaccine maker Novavax is calling for an “urgent shake-up” of the board and an overhaul of its sales strategy, as the stock is down 99 per cent from its pandemic peak. US-based hedge fund Shah Capital wrote to the Novavax board on Monday to push for the instalment of two new independent board directors. It also wants a pivot in the biotech’s sales strategy for its Covid-19 shot, which is based on traditional vaccine technology, to target older people unnerved by rare side effects associated with mRNA jabs from Pfizer and Moderna.....”

PS: **“... Novavax is this year rolling out its second product: a malaria vaccine approved by the World Health Organization, which will help to grow its revenues from \$531.4mn last year to a projected \$854.2mn this year.....”**

NYT – Long-acting drugs may revolutionize HIV prevention & treatment

<https://www.nytimes.com/2024/04/17/health/hiv-long-acting-shots-pills.html>

“New regimens in development, including once-weekly pills and semiannual shots, could help control the virus in hard-to-reach populations.”

Links:

- WHO Bulletin - [A health economic and industrial complex that facilitates production and innovation for universal health access, Brazil.](#)
- SS&M - [Substandard and falsified medicines in African pharmaceutical markets: a case study from Ethiopia](#)

Human resources for health

BMJ GH (Editorial) – The rural surgeon: a practice to strive for

V Raguveer et al ; <https://gh.bmj.com/content/9/4/e013449>

« **The milestone publication of the Lancet Commission on Global Surgery in 2015 carved a niche for the field of academic global surgery, creating space for partnerships between surgeons from high-income countries (HICs) and low-income and middle-income countries (LMICs). However, academic authors from HICs dominate the story of global surgery, frequently blocking out experienced voices from the front line LMIC rural surgeons - at the forefront of providing access to surgery for the world’s poorest- work mostly in silence, and their contributions to global health remain largely undocumented. ...”** “... How can we ensure high-quality surgical care in rural communities? What lessons can we learn from current rural surgeons, about their motivations and the path to ensuring a reliable workforce in rural areas? **In this essay, we explore the motivations that drive surgeons to practise in rural settings and the barriers they face in this journey. To better understand the draw of rural surgery, we look specifically at the Gudalur Adivasi Hospital (GAH), located in a small township in South India.....”**

Decolonize Global Health

Cell - Ending “domestic helicopter research”

Marcus Lambert et al;

<https://www.sciencedirect.com/science/article/pii/S0092867424002307?dgcid=author>

Cfr tweet by the first author: **“My colleagues and I are shedding light on a concerning trend we've termed 'domestic helicopter research.'** This involves researchers dropping in marginalized communities, conducting studies, and leaving w/o any true community or local researcher engagement.”

“... **“Helicopter research”** refers to a practice where researchers from wealthier countries conduct studies in lower-income countries with little involvement of local researchers or community members. This practice also occurs domestically. **In this Commentary, we outline strategies to curb domestic helicopter research and to foster equity-centered collaborations.**

Domestic helicopter research mirrors helicopter research but is distinct in its setting. Rather than engagement across countries, domestic helicopter research occurs within a single country. It is a practice where researchers from more privileged institutions or companies conduct studies in or collect data about marginalized communities with little to no involvement of local researchers or community members. **This practice often exploits communities, such as those of Indigenous Peoples, Black, or Latine groups, as well as resource-limited institutions (RLIs) that serve these communities, including many minority-serving institutions.**”

PS: “... **Although this Commentary centers the experiences and voices of U.S. researchers and institutions, the term “domestic helicopter research” extends well beyond the U.S.** Similar institutional inequities and research dynamics are present in various countries around the world.”

Development & Change - When Victors Claim Victimhood: Majoritarian Resentment and the Inversion of Reparations Claims

N Sundar;

<https://onlinelibrary.wiley.com/doi/epdf/10.1111/dech.12822?domain=author&token=PFVGIKTUGECD4KHX9KCK>

“...In the current global climate of right-wing resurgence, both the recognition of victimhood and demands for justice are in danger of being subverted and hijacked. These developments create additional obstacles to addressing genuine reparations demands. **This manifests in at least three ways.** First, there is a selective application of victimhood status and recognition, often along old fault lines of race or religion. In this way, the oppression of some groups is no longer recognized as a legitimate object of reparations; indeed, their claims to justice are seen as unfair demands against dominant groups. Second, we see the blatant continuation of the very practices that the reparations movement has sought to establish as wrongs. Third, not content with negating existing demands for reparations from below, powerful groups are going a step further and, as part of supremacist projects, asserting their own right to reparations. In doing this, they use the language and moral claims of reparations and decolonization that have emerged through the global reparations movement. **This article seeks to illustrate these developments through the examples of India and Israel, including the demand for ‘restoration’ of sacred sites to Hindus and Jews.**”

Global Health Essentials - Rethinking Knowledge in Global Health

E K Besson et al ; https://link.springer.com/chapter/10.1007/978-3-031-33851-9_79

« The COVID-19 pandemic highlighted both the limitations of the current knowledge ecosystem in global health and the positive impact of nationally and locally informed public health interventions. From this perspective, **this chapter aims to increase readers' understanding of these limitations and guide them in efforts to improve interactions between and within diverse knowledge systems.** » “ This chapter is divided into three main sections. Firstly, we briefly illuminate the roots of decolonial science in global health and the importance of social sciences in public health practice. Secondly, we describe common biases that act as barriers to change in the global health knowledge ecosystem and introduce a change management approach to rethink the way different forms of knowledge are currently generated, understood, used, disseminated, and legitimized. Thirdly, we define **the concept of Emancipatory Health Interventions (EHIs)**, the role of global actors in their design, and present a case study to guide actors in efforts to identify existing EHIs and normalize practices in the future...”

BMJ GH - Shapeshifters: Global South scholars and their tensions in border-crossing to Global North journals

Thirusha Naidu et al; <https://gh.bmj.com/content/9/4/e014420>

« Global South researchers struggle to publish in Global North journals, including journals dedicated to research on health professions education (HPE). As a consequence, Western perspectives and values dominate the international academic landscape of HPE. **This study sought to understand Global South researchers' motivations and experiences of publishing in Global North journals.** »

« The **tensions and negotiations encountered by Global South authors who publish in HPE journals reflect a 'border consciousness' whereby authors must shift consciousness, or become 'shapeshifters', inhabiting two or more worlds as they cross borders between the Global South and Global North conventions.** There is an added burden and risk in performing this shapeshifting, as Global South authors stand astride the borders of two worlds without belonging fully to either. »

Devex - Localization 'lagging' on bulk procurement, says USAID chief

<https://www.devex.com/news/localization-lagging-on-bulk-procurement-says-usaid-chief-107466>

“Samantha Power told lawmakers last week that **USAID won't hit its 25% local funding target — and big contracts are one place it's falling short.**”

Nature - Citizenship privilege harms science

<https://www.nature.com/articles/d41586-024-01080-x>

“Researchers from the global south face often-distressing immigration bureaucracy that most from the global north do not. Six steps can begin to counteract this inequity.”

Miscellaneous

BMJ Opinion - Sudan is facing a devastating humanitarian crisis—the world must do more to protect the population’s health

<https://www.bmj.com/content/385/bmj.q864>

by Dr Tedros.

HPW - Empowering Global Health Reporting: Perspectives from Leading Journalists

<https://healthpolicy-watch.news/empowering-global-health-reporting-perspectives-from-leading-journalists/>

Coverage of one of the recent **Global Health Matters** podcasts.

“Health stories are not just about medical facts; they are intricate tapestries woven with economic, political, and social threads, according to two international health journalists.”

“Stephanie Nolen, a global health reporter for The New York Times, and Paul Adepoju, a Nigeria-based freelance health journalist and scientist who writes for Health Policy Watch, were guests on Dr. Garry Aslanyan’s **most recent Global Health Matters podcast**. They discussed blending local insights with global perspectives when covering health narratives.”

PS: “... Nolen : **“I think it would be really useful to move past this idea of the health page or that once a week we cover these subjects. To go back to the idea ... about health stories being also political, economic, social stories, we just need to take it out of that ... silo.”**

Independent - Could South Korea’s 4B movement destroy heterosexual relationships?

<https://www.independent.co.uk/life-style/south-korea-4b-movement-women-celibate-sex-b2527832.html>

“As the trend of women swearing off men garners viral social media attention, the country’s birth rate has hit a record low. Helen Coffey investigates whether shunning straight sex and marriage could become a global phenomenon.”

The New Humanitarian - The problem with emergency aid’s growing reliance on corporations

T Smith et al ; <https://www.thenewhumanitarian.org/opinion/2024/04/15/problem-emergency-aids-growing-reliance-corporations>

“Private companies are already fulfilling critical tech needs for aid at the highest levels.”
“...Humanitarians are growing dependent on corporate giants to power emergency response....”

Devex - How can we close the \$160 trillion women’s wealth gap?

<https://www.devex.com/news/how-can-we-close-the-160-trillion-women-s-wealth-gap-107497>

“We are leaving trillions on the table by not investing in women, said **Melinda French Gates**, who urged for more dollars toward female entrepreneurs at the **Global Inclusive Growth Summit** on Thursday.”

“Across the world, countries are losing \$160 trillion due to the [lifetime earnings differences](#) between women and men. ...”

Papers & reports

Conflict & Health (Supplement) - Integration of Refugees into National Health Systems: Enhancing Equity and Strengthening Sustainable Health Services for All

<https://conflictandhealth.biomedcentral.com/articles/supplements/volume-18-supplement-1>

Some background info: Publication of this supplement has been jointly supported by the Foreign, Commonwealth & Development Office (FCDO), the Medical Research Council (MRC), and Wellcome and Economic and Social Research Council (ESRC) Edited by **Fadi El-Jardali** (American University of Beirut, Lebanon), **Sara Bennett** (Johns Hopkins Bloomberg School of Public Health, USA), and **Paul Spiegel** (Johns Hopkins Bloomberg School of Public Health, USA).

A few papers from this supplement are already online, among others:

- [How integration of refugees into national health systems became a global priority: a qualitative policy analysis](#) (by Shatha Elnakib, S Bennett et al).

UNAIDS (report) - Expand HIV services to power gains across health, urges new report

https://www.unaids.org/en/resources/presscentre/pressreleaseandstatementarchive/2024/april/20240415_hiv-investments

“A new report released today by UNAIDS and Friends of the Global Fight Against AIDS, Tuberculosis and Malaria shows how countries are leveraging their HIV responses to both ensure impact on the HIV response and also to improve broader national health and well-being. The report finds that investing now to end AIDS as a public health threat by 2030 will not only follow through on the commitment to end the pandemic but also magnify the broader health benefits of HIV specific investments.... The report, **Expanding the HIV response to drive broad-based health gains, profiles country examples from Colombia, Côte D’Ivoire, Jamaica, South Africa, Thailand and Uganda**. Experiences in these six countries indicate that **strengthened HIV responses have**

contributed to broader health benefits. Far from being in isolation, HIV treatment, prevention and care programmes are also helping to build more robust health systems that enhance access to people-centred care and bolster pandemic preparedness.....”

SS&M - Public health intervention amidst conflict: Violence, politics, and knowledge frames in the 2018-20 Ebola epidemic in Democratic Republic of the Congo

<https://www.sciencedirect.com/science/article/pii/S0277953624002983>

By R Sweet et al.

Journal of Health Politics, Policy & Law - The Political Determinants of Health and the European Union

Eleanor Brooks et al; <https://read.dukeupress.edu/jhppl/article/doi/10.1215/03616878-11257064/386655/The-Political-Determinants-of-Health-and-the>

Introduction to a special issue.

Lancet GH - Cybersecurity in the age of digital pandemics: protecting patient data in low-income and middle-income countries

C Sabet et al; [https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(24\)00124-4/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(24)00124-4/fulltext)

“... The risks associated with cyberattacks are particularly acute in low-income and middle-income countries (LMICs), where the necessary infrastructure, resources, and regulatory frameworks to protect health data can be insufficient. As a result, underfunded and understaffed systems have become soft targets for cybercriminals. ...”

“.... International agencies and non-governmental organisations (NGOs) have primarily responded by raising awareness about the need for stronger health-care cybersecurity in LMICs. WHO has published reports and organised high-level meetings with the World Health Assembly to warn global leaders about cybersecurity threats....”

“... To improve cybersecurity in health care, WHO should actively collaborate with NGOs such as Switzerland's CyberPeace Institute, which provides complimentary cybersecurity support, to fortify defences in at-risk areas. Furthermore, **we urge national governments to partner with leading technology firms, including Microsoft and Google,** to improve security of current infrastructure and cloud services.....”

Tweets (via X & Bluesky)

M Kavanagh

"@PeterASands is right. if the next pandemic hit tomorrow, there is still no mechanism for funding RESPONSE. Pandemic Fund doesn't cover that, WB structures aren't fit for that purpose, we need a legally binding agreement to fund, at least, as much as countries put into ACT-A"

Larry Summers (via ONE's Aftershocks newsletter)

"'Billions to trillions,' the catchphrase for the World Bank's plan to mobilise private-sector money for development, has become 'millions in, billions out.'"

Eric Reinhart

"The wealthiest "humanitarian" foundation in the world, the Gates Foundation, has been silent on Gaza. Bill and Melinda Gates fund an enormous proportion of the 'global health' organizations. Almost all these orgs have also been dead silent during a genocide. Surely a coincidence."

Katri Bertram

"President Banga: The Bank's focus has to date primarily been on MNCH - it's now trying to widen our approach and broaden services (incl. e.g. NCDs), so that everyone (+1.5bn people) is reached by 2030."

"Recap (& my take): Step 1: Get UHC back on the agenda (FOCUS needed on 3 dimensions of UHC, UHC is not everything!) Step 2: Action, which requires financing (& the Bank) too. (Banga's commitment: +1.5bn more people covered by 2030. We need to see & follow the money to make this happen.)"

World Bank Health

"The @WorldBank will help countries reach 1.5 billion people with more and better health services by 2030 with @WHO and other partners. - Ajay Banga, World Bank President."

L Gostin

"Governance of #PandemicAccord & IHR needs clarity & cohesion Consider the spaghetti governance: ★Subdivision of WHA (INB) negotiates PABS/One Health ★Cte E of Exec Bd ★A COP ★Civil society frozen out ★WHO Secretariat ★ Who governs Accord, IHR, PABS? ★ Coordination absent."