IHP news 787: Even with time running out, one week can still make a major difference

(26 July 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,

It’s weird what difference one week can make. Just as we were about to put on an ear bandage (borrowing a leaf from gullible Americans), in order to physically and mentally prepare for another term of ‘The One Saved by a Divine Intervention for Reasons Unknown to us’, with Kamala Harris now in the US presidential race it’s suddenly a different story. Being a catless dude, I’ll naturally refrain from making any predictions for November, but at the very least Democrats can now put up a real fight, with also obvious implications for Congress. And they’re getting better and better at razor-sharp memes on social media😊. And so, while unfortunately there are many setbacks and horrific events happening in too many countries around the world (including in Bangladesh lately), it could still be that this global election year ends on an overall positive note. As arguably, we didn’t see the worst case scenarios materializing in many polities (EU, India, …), while in others there were also signs of hope (South-Africa, UK (true, against a low benchmark), and let’s not forget about the increasing influence of Generation Z in sub-Saharan African countries. Authoritarian & dystopian governance, which seemed nearly unstoppable at the start of the year, is still not carved in stone for the coming decade(s). Let’s hope so, as this would mean that mankind gets another (perhaps last?) chance to try mitigate some of the worst aspects of the polycrisis.

As let’s face it, there’s no shortage of huge (and in some cases, existential) risks and crises now for decision makers, institutions and organisations to deal with. They, in turn, risk getting ‘overstretched’ as well. Or more accurately, they already are.

This week, covering the AIDS conference in Munich first of all, we zoom in on the ongoing battle to end AIDS as a public health threat by 2030, against a more and more difficult political & funding backdrop. Only sticking to the global health are(n)a, plenty of other enormous 21st century challenges are also lurking in the background (or already in the limelight). The risk of pandemics is surely one of them. On Wednesday, the launch of the 2025-2027 Pandemic Fund’s investment case took place; stay also tuned for the Global Pandemic Preparedness Summit in Rio next week. But there’s also the NCDs (with the Olympics about to start in Paris, we also focus on the Kick Big Soda out of Sport campaign in this issue; on a side note, I hope I don’t catch yet another NCD, having to endure the sight of a beaming “host Macron” for two entire weeks). Add AMR; social and commercial determinants of health, universal health care, …. And we forget many other global health causes that need urgent attention.

Then there’s the – in our opinion still most frightening - challenge of all, the planetary emergency (with this week for example some of the world’s hottest days on record). Yes, all self-respecting global health organisations now work on ‘climate & health strategies and plans’, but in terms of really tackling the root causes of the planetary health crisis, I’m afraid most are still largely missing in
action. The same goes for wars and conflicts – at least the ones where “we” are to some extent involved, via our war criminal/rogue “allies”: for every global health organization that took a brave stance on Gaza (eg WHO), there were many others that failed to do so, too often resigning to trying to mitigate some of the worst humanitarian impacts of the endless horror – though you might hear some of them a bit more now that ‘polio’ suddenly is a major threat again in the area and beyond...

Nuclear risks are also increasing, as you know, and quite a few also reckon it’s time to start panicking about AI. Finally, as the annual State of Food Security and Nutrition report emphasized on Wednesday, an old foe seems back from never really having gone in the first place - hunger - hinting also at an increasingly vulnerable global food system in the process.

So here’s to hoping that mankind, after hopefully a positive outcome in November, grabs this perhaps last chance to try ‘transition’ in a more or less planned, multilateral way, to a fairer and more sustainable global economic system. A BMJ Collection on Latin America’s global leadership in health focusing among others on Brazil’s G20 presidency provides some interesting food for thought in this respect. Speaking of Brazil, G20’s finance ministers already discussed some “fairly important’ issues earlier this week. With some results too, it appears.

PS: this week’s featured article is new story in our collaboration with the WHO & UNFPA SRHR-UHC Learning by Sharing Portal. The stories showcase experiences of implementing policies and programmes relating to sexual and reproductive health and rights and UHC in a range of countries and the lessons learned.

Enjoy your reading.

Kristof Decoster

Featured Article

The rural ambulance service: a transport solution for pregnant women in Punjab, Pakistan

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Approximately 30% of maternal deaths in Pakistan are attributable to the second delay in the ‘Three Delays Model’ (i.e. delay in the decision to seek care; delay in arriving at a health facility; delay in receiving adequate care at the facility). Many women who cannot reach primary care facilities have to deliver at home. In complicated cases, lack of access to emergency obstetric and neonatal care can have catastrophic consequences.

In Punjab, the most populous province of Pakistan, the government had scaled up around 1000 basic health units equipped with 24-hour basic obstetric care services by 2017. However, access to these units was challenging for rural communities. The ambulance service provided by the Government of
Pakistan, through its routine service delivery model, was hampered by misuse of vehicles, lack of timely maintenance and lethargy in public sector service delivery. Punjab province adapted the national universal health coverage benefits package and essential package of health services to include provision for a rural ambulance service for obstetric and neonatal care. Quality of care in rural ambulance service is being ensured as a part of the package.

The rural ambulance service, launched in May 2017, is designed to collect all normal and high-risk pregnant women from their homes at the time of delivery, and throughout pregnancy for identified antenatal complications. The service can be reached by calling a toll-free number (1034). The ambulance takes the woman to a primary care facility and waits for an initial screening. If the primary care staff need to refer the woman to a higher-level hospital, the same ambulance transports her there. If staff are comfortable conducting a normal vaginal delivery at primary care level, the ambulance goes back to its resting point and awaits the next client.

The government out-sourced operation of the ambulance service through a unique tripartite arrangement: the central call centre is run and managed by a telecoms operator, the day-to-day vehicle operations are run by a private car rental company, and the technical and financial aspects are managed by the government’s Integrated Reproductive, Maternal and Child Health & Nutrition (IRMNCHN) programme.

The call centre is manned by a team of call agents who handle an average of 5000 incoming calls per day. A real-time dashboard reflects the ambulance locations through GPS trackers, health facility locations, and other relevant details using Google maps. The call agent’s screen shows the ambulances available in a particular area, and the agent can assign the one nearest to a woman’s home. Once the ambulance is assigned, the agent identifies the nearest health facility from the same map. A text message is then sent to the driver as well as the client as a confirmation. The text message sent to the client contains the name and contact number of the assigned driver and the vehicle’s registration number. The text message sent to the driver contains the name and contact information of the client.

Locating addresses in rural areas is challenging as streets and house numbers are often unmapped, and so most clients and their caretakers are unable to provide exact addresses. The exchange of mobile phone numbers of ambulance drivers and clients/caretakers through automated text messages sent to both parties once a case is assigned, enables them to call and find out the exact location.

Vehicle operations are overseen by provincial and district level managers hired by the private rental company. The company is also responsible for providing fuel, drivers, and repair/maintenance of the ambulance. The agreement with the rental company enables the government to track the performance of each vehicle continuously through the dashboard. The key condition of the contract was that “the ambulance engine would turn on within two minutes of a case being assigned to the vehicle, and no excuse for driver or fuel unavailability would be acceptable.”

Since its launch, the ambulance service has transferred over three million women from their homes to health facilities, around three and a half million women from primary to secondary/tertiary hospitals, and around 10000 children, aged under five years, for urgent referrals. On average, 2800 women are transferred each day across the province, including public holidays. It has been estimated that at least half of the 500 000 emergency referrals to secondary and tertiary care hospitals have
prevented severe morbidity and maternal mortality. The cost per transfer for an average case is approximately US$ 10–15.

The success of the rural ambulance service in Punjab, implemented through an outsourced model, is evident from the reduction in maternal mortality in Punjab (from 178/100,000 in 2015 to 157/100,000 in 2019), increase in skilled birth attendance (from 65% in 2014 to 76% in 2018), and improvement in timely access to maternal care services in rural areas.

Based on this experience, the Government has further expanded the fleet of ambulances to 600, and increased the scope of public-private partnerships to other services.

**Highlights of the week**

**AIDS conference in Munich (22-26 July)**

With some of the key reports, news, advocacy.... from this week. Hefty chunk. More or less chronologically.

Economist - Clues to a possible cure for AIDS


“Doctors, scientists and activists meet to discuss how to pummel HIV.” Background piece as the AIDS conference was starting on Monday (and the UNAIDS report was published, see below).

“In a report published on July 22nd, UNAIDS, the United Nations agency tasked with dealing with the disease, says that 40m people around the world are now infected. There were 1.3m new hiv infections in 2023, and 630,000 hiv-related deaths. But those two numbers are down from 2.1m (a 39% fall) and 1.3m (a 52% fall) respectively in 2010. That year is the baseline for calculating the drop of 90% in annual new infections and hiv-related deaths which experts reckon would end aids as a public-health threat. The aspiration is to reach this target by 2030. On current trends that seems unlikely. But the numbers are, mostly, heading in the right direction.....”

“This snapshot of the epidemic is the background against which the 25th International aids Conference opens in Munich.....”

Devex - UNAIDS spells out the costs of missing global AIDS goals


“The global goals for getting people living with HIV tested and on treatment are ambitious, but the agency warns that not meeting them could cost 17.7 million lives.”
“Amid evidence that funding for the HIV response is on the decline both globally — including reports that the U.S. President’s Emergency Plan for AIDS Relief, or PEPFAR, will have its funding cut — and within domestic budgets, the Joint United Nations Programme on HIV/AIDS, or UNAIDS, has figured out what it would cost in terms of lives and livelihoods if HIV services stagnated at 2020 levels. The price would be 17.7 million AIDS-related deaths and 34.9 million new infections between 2021 and 2050 if services are simply maintained during that period, compared to making the investments UNAIDS has called for to achieve ambitious targets for testing, treating, and keeping people’s infection suppressed.” “... The new findings from UNAIDS were released ahead of the 25th International AIDS Conference, scheduled to launch next week in Munich, Germany, where one of the key themes will be how to sustain a global HIV response that appears to be flagging.....”

New UNAIDS report shows AIDS pandemic can be ended by 2030, but only if leaders boost resources and protect human rights now


(press release) “A new report released today by UNAIDS shows that the world is at a critical moment that will determine whether world leaders meet their commitment to end AIDS as a public health threat by 2030. The report, The Urgency of Now: AIDS at a Crossroads, brings together new data and case studies which demonstrate that the decisions and policy choices taken by world leaders this year will decide the fate of millions of lives and whether the world’s deadliest pandemic is overcome.”

“Whilst the end of AIDS is within our grasp, this decade, currently the world is off track. Globally, of the 39.9 million people living with HIV, 9.3 million, nearly a quarter, are not receiving life-saving treatment. As a consequence, a person dies from AIDS-related causes every minute.....”

“Leaders pledged to reduce annual new infections to below 370 000 by 2025, but new HIV infections are still more than three times higher than that, at 1.3 million in 2023. And now cuts in resourcing and a rising anti-rights push are endangering the progress that has been made.....”

“The report shows continued (although slower) progress in rolling out medicines to people living with HIV with 30.7 million people now on treatment, more than 3 in 4 people living with HIV. As recently as 2010 treatment coverage stood at just 47%. The expansion of people accessing treatment is a landmark public health achievement that has seen AIDS-related deaths halved since 2010—from 1.3 million to 630 000 in 2023....” “However, the world is off track to meet the 2025 target of reducing AIDS-related deaths to below 250 000.....”

“.... UNAIDS calculations show that whilst 20% of HIV resources should be dedicated towards HIV prevention for populations most affected by HIV, just 2.6% of total HIV spending went towards interventions for key populations in 2023....”

“Around the world funding is shrinking, holding back progress and even leading to rising epidemics in certain regions. In 2023, total resources available for HIV (US$ 19.8 billion) dropped by 5% from 2022 and were US$ 9.5 billion short of the amount needed by 2025 (US$ 29.3 billion). Domestic funding in low- and middle-income countries—which make up 59% of total resources for HIV—is being constrained by the debt crisis and fell for the fourth consecutive year, with a 6% decline from 2022 to 2023.....”
• Coverage via the Guardian – **Most new HIV infections occurred outside sub-Saharan Africa for first time – UN report**

“African countries hailed for achievements, but UNAids says cases on the rise in other areas of the world.”

“The majority of new HIV infections last year occurred in countries outside sub-Saharan Africa for the first time. African countries have made swift progress in tackling the virus, with the number of infections in sub-Saharan Africa 56% lower than in 2010, a new report from UNAids said. Globally, infections have fallen by 39% over the same period.”

“.... UNAids said the world is “at a crossroads” in efforts to tackle the virus, with action this year key to success. A backlash against human rights in many countries is making it harder for marginalised groups to access care, said Winnie Byanyima, executive director of UNAids. At the same time, services face funding shortfalls after cuts in aid, and with many low-income countries “choking on debt”, that reduces domestic health spending, she said.”

“There is also a risk that gamechanging new drugs that need only to be taken every few months to treat or prevent HIV will only be available in richer countries.”

• And via HPW - **UNAIDS Blames Punitive Laws and Stigma for HIV Surge in Eastern Europe and Central Asia**

• And Devex - **The AIDS epidemic is changing. Here's what it means** (by A Green)

Dire quote: “.... Ganna Dovbakh of the Eurasian Harm Reduction Association warned of “coordinated efforts to make civil society not exist in many of these countries. It’s not shrinking, it’s disappearing. ... That means that all the peer work, community work, health support to key populations, will disappear.”....”

And some more reaction to the UNAIDS report:

• Global Fund - **UNAIDS Report: Global Fund Applauds Progress, Stresses Need for Continued Vigilance** (Statement by Peter Sands, Executive Director of the Global Fund to Fight Aids, Tuberculosis and Malaria )

• **Thread on X via M Kavanagh** with some of his key messages & concerns re the latest UNAIDS report [https://x.com/MMKavanagh/status/1815329571941605488](https://x.com/MMKavanagh/status/1815329571941605488)

HPW - Germany Commits to Global AIDS Support Amid Fiscal and Political Pressures


Coverage of the opening plenary in Munich. A few excerpts:
“German Chancellor Olaf Scholz reaffirmed his government’s commitment to the global campaign against AIDS, including the Global Fund, at the opening of the international AIDS Conference – and appealed to other global powers to do the same.”

“.... The Ukraine war is draining Germany’s resources, and the substantial and growing influence of the rightwing anti-immigrant, anti-global Alternative for Germany (AfD) party is also influencing German spending and policies. The budget of the government’s development ministry (BMZ), largely responsible for overseas development aid, was cut by 7% earlier this year sparking fears that Germany may retreat from its leading role in global health.”

““As one of the largest donors, Germany contributes €1.3 billion to the Global Fund to Fight AIDS, Tuberculosis and Malaria,” Scholz told the packed conference, which is being attended by over 10,000 delegates.....”

PS: “UNAIDS Executive Director Winnie Byanyima called for debt relief for low-income countries that are unable to meet their citizens’ needs – including HIV prevention and treatment – and service their debt. “In Angola, Kenya, Malawi, Rwanda, Uganda and Zambia, debt servicing is more than 60% of all the government revenue that is collected. Sierra Leone spends 15 times more on public debt servicing than on the health of its people,” said Byanyima. “The choking debate must be restructured and restricted now.”” “She also called on Gilead, the manufacturer of the “miracle drug” lenacapavir – the twice-yearly injection that protected 100% of women from HIV infection in a recent trial – to cut the cost of the medicine and license generic manufacturers to make it.”

PS: “AIDS 2024 includes a special focus on eastern Europe and central Asia, a region with one of the fastest-growing HIV epidemics in the world. ...”

PS: “.... Trans man Jay Mulucha, head of Fem Alliance Uganda, gave a moving address about the impact of Uganda’s 2023 Anti-Homosexuality Act, which introduces harsh penalties for a range of same-sex activities.....”

UN urges Gilead to 'make history' with game-changing HIV drug


“Gilead could bring the AIDS pandemic towards an end if the US pharmaceutical giant opens up access to its game-changing new HIV drug, the head of UNAIDS told AFP.”

“Winnie Byanyima urged Gilead to "make history" by allowing generic manufacturing of Lenacapavir, a twice-yearly injectable antiretroviral medication used to treat HIV patients. She urged Gilead to open up Lenacapavir to the UN-backed Medicines Patent Pool international organisation, whereby cheaper generic versions could be sold under licence in low- and middle-income nations.....”

• See also Health Gap - Activists at AIDS2024 Demand: Break Gilead’s Lenacapavir Monopoly
  Gilead’s Price 10,000% Higher than Target Generic Price for 100% Effective Prevention Shot
“Today at AIDS 2024, a coalition of activists called for immediate global action to break Gilead’s monopoly on lenacapavir, in response to new data showing that generic lenacapavir can be produced at a price one thousand times less than Gilead’s price of $42,250 per year. With mass production, costs for generic lenacapavir are estimated to be initially $100 per year, with further reductions to $40 per year as demand increases. … Gilead has released no details about their plans for global access—beyond one statement. …”

- And Devex - Activists demand access to groundbreaking HIV prevention tool
  “Activists demanded that Gilead immediately begin the process of issuing voluntary licenses that would allow for affordable, generic production of the twice-yearly injectable, lenacapavir.”

Guardian - HIV ‘vaccine’ could be made for just $40 a year for every patient

See above — re the new study. “Generic version of a drug already on the market, which can suppress and prevent HIV, would still yield 30% profit if the current price was slashed, researchers say.”

“A new drug described as “the closest we have ever been to an HIV vaccine” could cost $40 (£31) a year for every patient, a thousand times less than its current price, new research suggests. Lenacapavir, sold as Sunlenca by US pharmaceutical giant Gilead, currently costs $42,250 for the first year. The company is being urged to make it available at a thousand times less than that price worldwide.”

“… In a study presented at the 25th international Aids conference in Munich on Tuesday, experts calculated that the minimum price for mass production of a generic version, based on the costs of lenacapavir’s ingredients and manufacturing, and allowing for 30% profit, was $40 a year, assuming 10 million people used it annually. In the long-term, 60 million people would probably need to take the drug preventatively to lower HIV levels significantly, they said…..”

“… Campaigners want Gilead to allow generic licensing through the UN-backed Medicines Patent Pool in all low- and middle-income countries (LMICs), which account for 95% of HIV infections. Similar mechanisms have been in place in the HIV treatment market for decades, where wealthy countries pay higher prices than poorer ones. If that did not happen, Hill said, countries should consider issuing compulsory licences allowing generic manufacture in the face of a public health emergency.”

- PS: for the study: Mass generic production of lenacapavir could cost under $100 per person-year:

HPW - AIDS Conference Delights in HIV Prevention Trial Results – And Presses Gilead to Lower Price of ‘Miracle Drug’
Coverage of Wednesday at the AIDS conference.

“Delegates at the International AIDS conference leapt to their feet in delight after results from one of the most promising HIV prevention trial in the history of the epidemic – a twice-yearly injection of lenacapavir that prevented 100% of new HIV infections – were presented on Wednesday. Principal investigator Professor Linda-Gail Bekker from South Africa told the conference that none of the 2,134 women aged 16 to 25 who had received lenacapavir on the PURPOSE 1 trial contracted HIV. The results, also published in the New England Journal of Medicine, compared the injectable lenacapavir with two regimens involving daily pills that have previously proven to be effective as HIV pre-exposure prophylaxis (PrEP).....”

- For the NEJM study, see Twice-Yearly Lenacapavir or Daily F/TAF for HIV Prevention in Cisgender Women “In this randomized, controlled trial involving women in South Africa and Uganda, twice-yearly subcutaneous lenacapavir was superior to daily oral emtricitabine–tenofovir disoproxil fumarate in preventing HIV infection.”

PS: Re Gilead’s response to the activism at the AIDS conference: “Gilead promises ‘access price’”

“.... Addressing a media briefing on Wednesday, Gilead Vice President Jared Baeten said that lenacapavir will be available for generic production and promised that in the interim, his company would make high-volume orders for an “access price”.”

“The company noted in a press release on Wednesday that “lenacapavir for HIV prevention remains an investigational drug until approved by regulatory authorities”, and it is “too early to state the price of lenacapavir for HIV prevention”. It is currently only licensed in the US for drug-resistant HIV. “Gilead is committed to access pricing for high-incidence, resource-limited countries. The current price for the approved indication in the heavily treated HIV population will not be our reference,” it added. “Gilead will ensure dedicated supply of lenacapavir for HIV prevention in the countries where the need is greatest until voluntary licensing partners are able to supply high-quality, low-cost versions of lenacapavir,” the company noted, adding that it is “developing a robust direct voluntary licensing program to expedite access to those versions of lenacapavir in high-incidence, resource-limited countries”. However, Baeten did not comment on whether his company would work through the Medicines Patent Pool to licence generics.”

WHO (report) - Unfinished business: only the urgent and accelerated delivery of HIV services will keep the promise of ending AIDS in children by 2030


“Despite progress made in reducing HIV infections and AIDS-related deaths among children, a new report released today by the Global Alliance for Ending AIDS in Children by 2030 shows that an urgent scale up of HIV services in countries worst affected by the pandemic is required to end AIDS by 2030. The report, Transforming Vision Into Reality, shows that programmes targeting vertical transmission of HIV have averted 4 million infections among children aged 0-14 years old since 2000. Globally, new HIV infections among children aged 0-14 years old have declined by 38% since 2015 and AIDS-related deaths have fallen by 43%. ....”
“Among the twelve Global Alliance countries, several have achieved strong coverage of lifelong antiretroviral therapy among pregnant and breastfeeding women living with HIV. However, despite advances neither the world nor Global Alliance countries are currently on track to reach HIV-related commitments for children and adolescents and the pace of progress in preventing new HIV infections and AIDS-related deaths among children has slowed in recent years. Around 120,000 children aged 0-14 years old became infected with HIV in 2023, with around 77,000 of these new infections occurring in the Global Alliance countries. AIDS-related deaths among children aged 0-14 years old numbered 76,000 globally with Global Alliance countries accounting for 49,000 of these unnecessary deaths. Vertical transmission rates remain extremely high in some locations, particularly in Western and Central Africa, with rates exceeding 20% in countries including Nigeria and the Democratic Republic of the Congo.”

Devex Newswire: Pro Week kicks off with PEPFAR chief

“John Nkengasong defends the embattled U.S. HIV/AIDS initiative amid political fire.”

“John Nkengasong, the U.S. global AIDS coordinator, is worried that if the world fails to eliminate HIV as a public health threat by 2030, political leaders will lose interest in fighting the disease and pave the way for its resurgence.”

Re PEPFAR’s prognosis: “…. After saving an estimated 25 million lives over the past two decades, PEPFAR now finds itself in political peril, with some Republicans slamming it — without evidence — for funding abortions, while even an ostensible ally, President Joe Biden, seems to be getting stingy about funding the program. It all dovetails with waning global interest in fighting a disease that many have placed in the rearview mirror, threatening to unravel decades’ worth of progress.”

“‘We cannot relent,’ John Nkengasong, the U.S. global AIDS coordinator, tells my colleague Michael Igoe ahead of the 25th International AIDS Conference in Munich, Germany, which starts today. But the U.S. Congress and the White House aren’t as relentless as they once were in trying to rid the world of HIV/AIDS. On the latter, though, Nkengasong insists the administration is not cutting funding, despite reporting by POLITICO that PEPFAR’s 2025 budget includes a 6% reduction. The Biden administration is not requesting any less funding from Congress for PEPFAR, Nkengasong explains; rather, the pot of available money has gradually declined as PEPFAR draws down funds carried over from previous years. “The Biden administration has not asked for a budget cut for PEPFAR at all. I really want that to go on the record,” he says.”

“Still, U.S. funding for PEPFAR has plateaued at roughly $4.8 billion, despite calls to accelerate HIV response efforts in the face of stubborn infection numbers and looming deadlines.”

KFF - Donor Government Funding for HIV in Low- and Middle-Income Countries in 2023
KFF;
This report, Donor Government Funding for HIV in Low- and Middle-Income Countries in 2023, tracks funding levels of the donor governments that collectively provide the bulk of international assistance for AIDS through bilateral programs and contributions to multilateral organizations. The new report, produced as a partnership between KFF and UNAIDS, provides the latest data available on donor funding disbursements based on data provided by governments. It includes their bilateral assistance to low- and middle-income countries and contributions to the Global Fund to Fight AIDS, Tuberculosis and Malaria as well as UNITAID.

Among the Key findings: “Specifically, donor government funding for HIV care and treatment, prevention, and other services in low- and middle-income countries decreased in 2023 compared to the prior year, even after accounting for exchange rate fluctuations. While most of this was due to timing, the longer trend shows a shift away from bilateral funding by most donors, one that has not been fully offset by multilateral support.”

NCD Alliance - A collection of the lived experiences of people living with NCDs and HIV

NCD Alliance;

“10 powerful stories from all over the world providing examples of the need for NCD - #HIV integration.”

HPW - NCD Alliance Appeals to HIV Organisations to Press Governments for Action


“Despite a global commitment to cut deaths from non-communicable diseases (NCDs) by a third by 2030, virtually all countries are off-track – and the NCD Alliance is appealing to allied organisations to help pressurise governments to take action.”

…. Aside from the global goal to cut NCD deaths, which is one of the SDGs, global leaders made another commitment, NCD Alliance CEO Katie Dain told the meeting. They committed at the 2021 United Nations High-Level Meeting on HIV and AIDS to ensure that “90% of people living with, and affected by, HIV have access to people-centred and context-specific, integrated services for HIV and other diseases, including NCDs and mental health by 2025”, said Dain. “This, in many ways, is one of the real frontiers of the global HIV response, recognising that people living with HIV are living longer thanks to advancements in antiretroviral antiretroviral therapy,” she added.

“But slow progress to achieve this 90% goal has prompted the NCD Alliance to issue a call for action to world leaders – and they have appealed to HIV organisations to sign the open letter. The letter calls on all governments to “fulfil their commitments to tackle the NCD burden” by the time they attend the UN High-level Meeting on NCDs in September next year. They are calling for three key actions: mobilising more investment; accelerating the implementation of policies to reduce NCDs and monitoring the progress made.”
Devex - Opinion: HIV 'morning after drug' can help end this pandemic

By Patricia Atieno Ong'wen & Elizabeth Irungu; https://www.devex.com/news/opinion-hiv-morning-after-drug-can-help-end-this-pandemic-107963

“New research reveals a surprising demand for post-exposure prophylaxis, or PEP, the “morning after” option for HIV.”

“... If we are really committed to finishing off something so complex as a 40-plus-year-old pandemic, we should expand our well-intentioned push for PrEP, or pre-exposure prophylaxis, to also highlight PEP — post-exposure prophylaxis, an intervention that’s largely ignored to the detriment of many who need it and want it. Why is PEP glaringly nonexistent in HIV prevention programs — not only in Kenya, where we live and work, but also across the World Health Organization African region, with 25.6 million people living with HIV in 2022, and accounting for 50% of new HIV infections globally? ...”

“... The push by clinicians and policymakers is for PrEP. And yet, preliminary analysis from an ongoing pilot study funded by the Gates Foundation reveals that for every person whose circumstances indicated initiation of PrEP through an online pharmacy, eight actually needed PEP, because of a recent possible exposure to HIV. For every person needing PrEP from a storefront pharmacy, two needed PEP. ... The fact that many need PEP compels us to argue that it’s time to stop downplaying PEP as PrEP’s poor relation and reassign it a prominent place among a number of HIV prevention strategies that need to be readily accessible and affordable.”

PS: “... As clinicians, we are excited about the freshest version of PEP delivery known as PEP-in-Pocket, or PIP, which involves prescribing PEP proactively to people, prior to any exposure, just in case.....”

Harm Reduction International – The cost of complacency: a harm reduction funding crisis
https://hri.global/flagship-research/funding-for-harm-reduction/cost-of-complacency/

“....in the 15 years that Harm Reduction International (HRI) has monitored harm reduction funding, our findings have been consistently bleak. Inadequate financial support for services and for the advocacy efforts needed to drive political commitment within countries continues to prevent harm reduction initiatives being implemented at scale. The number of international donors investing in harm reduction remains small, there is increasing dependence on the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund), and harm reduction funding is vulnerable to donors’ shifting priorities. Domestic funding for harm reduction is even more fragile, while a lack of data prevents civil society from monitoring funding levels and holding governments to account. This report explores the state of harm reduction funding in low- and middle-income countries, using information collected from harm reduction donors and a desk review of literature and data on domestic funding. The findings show that, despite many high-level political commitments, we are no closer to achieving a sustainable harm reduction response.”

Check out some of the key stats in the exec summary.
Among others: “Identified harm reduction funding amounted to USD 151 million in 2022. This is just 6% of the USD 2.7 billion needed annually by 2025. This leaves a funding gap of 94%, which compares to a funding gap of 29% for the overall HIV response.”

“Bilateral funding has reduced substantially and harm reduction is more reliant on multilateral funding than ever before. In 2022, the Global Fund accounted for 73% of all donor funding for harm reduction, compared to just 31% in 2007.”

Devex CheckUp: AIDS 2024 dominated by questions of cost and sustainability


Final overview by Devex of the week in Munich. “Coverage from the 25th International AIDS Conference in Munich, and the future of the global AIDS response.”

“This year’s gathering has been dominated by two conversations, starting with the future of the global AIDS response. Session after session has focused on whether and how to maintain HIV programs, and U.S. Global AIDS Coordinator John Nkengasong and members of his team from the President’s Emergency Plan for AIDS Relief have been at the center of many of those conversations. .... .... The discussions about sustainability followed the release of a worrying new report from UNAIDS about the current state of the global HIV epidemic...”

“.... The other conversation dominating this year’s AIDS conference is about cost. .... The cost people are most worried about here is for lenacapavir — the emerging tool for preventing HIV.”

And some final links:

- Global Fund - CIFF To Propel PrEP Revolution with up to US$2 Million for Immediate Access to PrEP Rings

“The Children’s Investment Fund Foundation (CIFF), in partnership with the Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund), announced on 21 July at the 25th International AIDS Conference an initiative of up to US$2 million over the 2024-2025 period for the purchase of approximately 150,000 dapivirine vaginal rings in countries that implement Global Fund grants to fight HIV and AIDS. The PrEP ring is a long-acting HIV pre-exposure prophylaxis (PrEP) option for women.....”

- UNAIDS - Women living with HIV continue to face violations of their sexual and reproductive rights—including coercion into sterilization (cfr a new report)

- HHR - AIDS 2024: Hitting Targets (by J J Amon)
G20 Finance ministers’ meeting (Brazil)

Euractiv - Lula rallies G20 nations against world hunger ahead of meeting

“Brazil’s President Luiz Inácio Lula da Silva on Wednesday (24 July) urged world leaders to work together and find solutions to hunger as he launched an initiative to tackle “the most degrading of human deprivations.””

“Lula has made hunger a key priority of Brazil’s presidency of the G20, along with taxing the super-rich, which will top the agenda when finance ministers meet Thursday and Friday.”

“No subject is more relevant and poses a greater challenge to humanity. Hunger is the most degrading of human deprivations, an attack on life, an assault on freedom,” Lula said in a speech launching his Global Alliance Against Hunger....”

- Related: G20 Finance Track aims to reach a consensus on documents concerning taxation, the global economy, and geopolitics (from earlier this week)

AFP - World’s richest 1% gained $40 tn in a decade: Oxfam

“The world’s richest one percent increased their fortunes by a total of $42 trillion over the past decade, Oxfam said Thursday, ahead of a G20 summit in Brazil where taxing the super-rich tops the agenda. Despite this windfall, taxes on the rich had plummeted to "historic lows", the NGO added, warning of "obscene levels" of inequality with the rest of the world "left to scrap for crumbs".”

“Brazil has made international cooperation on taxing the super-rich a priority of its presidency of the G20, a group of countries representing 80 percent of the world's GDP. At this week's summit in Rio de Janeiro, the group's finance ministers are expected to make progress on ways to raise levies on the ultra-wealthy and prevent billionaires from dodging tax systems. The initiative involves determining methodologies to tax billionaires and other high-income earners. The proposal is due to be fiercely debated at the summit on Thursday and Friday, with France, Spain, South Africa, Colombia and the African Union in favour, but the United States firmly against....”

Cfr the Oxfam press release - Top 1 percent bags over $40 trillion in new wealth during past decade as taxes on the rich reach historic lows

- Related: (19 July) a Civil society Call for Action re 5 priorities (on reforming the global financial system) (by ONE, Global Citizen & many others)
Oxfam reaction to the Rio de Janeiro G20 Ministerial Declaration on International Tax Cooperation: “this is serious global progress”


“Responding to the Rio de Janeiro G20 Ministerial Declaration on International Tax Cooperation published today, Oxfam International's Tax Policy Lead Susana Ruiz, said: "This is serious global progress — for the first time in history, the world's largest economies have agreed to cooperate to tax the ultra-rich. Finally, the richest people are being told they can't game the tax system or avoid paying their fair share. .... "Now to the next step: at the G20 Summit in November this year, leaders need to go further than their finance ministers and back concrete coordination: agreeing on a new global standard that taxes the ultra-rich at a rate high enough to close the gap between them and the rest of us. “

- See also Reuters - Brazil cheers G20 statement on tax cooperation citing taxation of the super-rich

More on Global Health Governance

Lancet Comment - Many crises, one call to action: advancing gender equality in health in response to polycrises
R Khosla, G Sen, dr. Tedros, ... et al; https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)01450-8/fulltext

A number of ‘High-powered’ global health people issue a call to action on advancing gender equality in health in response to polycrises.

Ben Phillips (via X) has a neat summary of what they suggest: 1. Fix the funding gap for civil society with serious cash for frontline feminist movements. 2. Fix fragmentation with feminist policy coherence. 3. Fix financial crises with feminist economics.

The Africa Report - Abidjan Declaration: The future of sustainable immunisation in Africa

As already flagged in last week’s IHP issue.

“A seminal moment in the future of immunisation in Africa occurred in Abidjan, Côte d’Ivoire, this week. A new era of immunisation began this week with the agreement of the Abidjan Declaration – a commitment to self-sufficiency and vaccine sovereignty that sits at the heart of the Gavi model.”
“In a meeting of the health ministers of nine African nations in Abidjan, Côte d'Ivoire, this week, a declaration was signed that will see these nations commit to a future where the costs of immunisation will be borne entirely out of their own budgets. ... The nine signatory countries – Côte d’Ivoire, Djibouti, Ghana, Mauritania, Benin, Congo, Nigeria, Sao Tome and Principe and Senegal – all at separate stages on the Gavi transition pathway, have effectively formed a club to support and guide each other through the transition pathway.”

“... In the spirit of the Lusaka Agenda, global health initiatives like Gavi are in turn committed to help countries achieve their long-term vision of nationally-funded healthcare systems in Africa.....”

BMJ - Latin America’s global leadership in health
https://www.bmj.com/health-in-latin-america

Great collection of articles (ongoing). “Showcasing Brazil and regional health leadership and opportunities in a G20 presidency year.”

“In 2024, Latin America’s largest country, Brazil, holds the G20 presidency for the first time and has an unmatched opportunity to put health and the region at the centre of the global political, economic, and sustainability agendas. Why is Latin America so vital? The vibrancy and volatility of the region are a microcosm of the public health issues that dominate the globe today. From epidemics to obesity, the presence of food insecurity and poverty alongside extreme wealth, the shortage of health workers amid political and economic turmoil, and the increasing pressures of climate and environmental change - all these threats exacerbate efforts to advance health and health equity in the region and beyond. Latin America is also strengthening its global leadership in health: it is a source of growing medical and scientific expertise, drawing on the region’s rich cultures, political histories, and models of social medicine. During the covid-19 crisis, while experiencing some of the world’s worst impacts, Latin American countries developed local capacities, health cooperation, and vaccination policy that will help confront future and endemic health challenges. And the struggle to provide equitable and universal health coverage and rights across growing economic and political divides offers models and solutions that countries the world over could learn from. 2024 is a landmark year for Brazil and for the region – and an opportunity to spotlight health being at the heart of building a just world and a sustainable planet. To advance these aims, The BMJ has collected some of our recent articles in key areas, including the politics and decolonisation of health, local innovations and global lessons, and the fight for gender equality and reproductive rights in Latin America.”

Check out among others:

- BMJ Analysis - Brazil should use its G20 leadership to support public health systems and promote decolonisation of global health

“Deisy Ventura and colleagues argue that Brazil’s presidency could be used to encourage countries to move away from a market driven approach and create true universal health provision.

- BMJ Opinion - Unmatched opportunity: Brazil must use its G20 presidency to focus on transformative global pacts

“Paolo Buss and colleagues lay out three health priorities for Brazil to advance on the G20's stated agenda to build a just world and a sustainable planet.”
• **BMJ - From speech to action: using Brazil’s 2024 presidency of G20 to embed equity in global health**

“Brazil’s 2024 presidency of G20 should lead to a global health architecture based on equity and public values, argue Vitor Henrique Pinto Ido and colleagues.”

But there’s much more in this collection!

**Devex (Opinion): Why we cannot celebrate the World Bank’s 80-year anniversary**


“The mothers and daughters of the global south cannot celebrate the World Bank’s 80-year legacy of harm.”

• Related: **Global Development Policy Center - The Bretton Woods Institutions at 80: Towards A Bigger, Better and More Inclusive Global Economic Governance Architecture**

“July 2024 marks the 80th anniversary of the Bretton Woods Agreement that established the post-World War II multilateral economic order, including the International Monetary Fund (IMF), the precursor to the World Bank, and early global trade governance systems that provided the structure and form of the World Trade Organization (WTO), established in 1995. A [new flagship report](https://www.gdpcenter.org/reports/the-bretton-woods-institutions-at-80-towards-a-bigger-better-and-more-inclusive-global-economic-governance-architecture) by William N. Kring, Rishikesh Ram Bhandary, Rachel Thrasher, Marina Zucker-Marques and Tim Hirschel-Burns synthesizes the work of the Boston University Global Development Policy Center (GDP Center) on global economic governance focused on the Bretton Woods institutions across three key pillars of financial stability, development finance and trade. .....

**WTO members back chief Okonjo-Iweala in proposal for second term bid**


“More than a third of states at the world trade body have supported a proposal by the African group calling for the director general to run for a second term and to start the process early, as the prospect of a second Trump presidency looms.”

“.... At a meeting of the WTO’s highest decision-making body on Monday, 58 countries took to the floor to back the proposal put forward by Chad on behalf of the African Group, requesting the director-general “to make herself available” to serve a second term. Members and regional groups that voiced their support included the European Union, the Orga Organization of Eastern Caribbean States, China and Australia...”

**TGH - The PEPFAR Files: How Critics Put the HIV Program at Risk**

Second instalment in a series of three articles on PEPFAR. “Over the program's 21-year history, its lifesaving components were often critiqued or glossed over, hurting its survival.”

“This second instalment (in a series of 3 articles) explains .... how long-standing critiques of the program's structure and modus operandi have made PEPFAR so vulnerable.

“As described in this series' first article, a small group of Republicans took actions and made accusations that helped botch the latest reauthorization process, which ultimately resulted in a one-year extension. By the time the abortion accusations surfaced in June 2023, the Biden administration had clearly staked out a position of praising PEPFAR's accomplishments on HIV without substantially leveraging its potential for fighting other pandemics. ...”

PS: “... The Biden administration's embrace of PEPFAR solely as an HIV program and an example of American compassion has dismayed some public health and foreign policy experts. In October 2023, a multistakeholder working group convened by the Center for Strategic and International Studies released a report imploring the president to "communicate clearly regarding how PEPFAR both stands at the center of a unified and aligned U.S. approach to global health security and pandemic preparedness and reinforces U.S. national security through supporting countries' responses to the HIV pandemic as well as new and emerging pandemics."

Had Biden delivered such clear messages as he unfurled his COVID-19 and pandemic preparedness strategies, PEPFAR might have been in a stronger position when the right-wing attacks began. ....”

PS: “In the final article in this series, we'll consider whether PEPFAR is likely to fare better in 2024, and whether the U.S. government will attempt anything like it ever again.”

Globalization & Health - Health and equity impacts of global consultancy firms


“Concern is growing over the power, influence, and threats to health and equity from the operations of large global consultancy firms. Collectively, these firms support a neoliberal policy environment promoting business interests ahead of public health. Global consultancy firms act as commercial determinants of health, an evolving area of research over recent years. However, this research mainly focuses on specific corporations or industry sectors, especially those which produce harmful products, including ultra-processed food, alcohol, and fossil fuels. It is therefore important to expand the focus to include large global consultancy firms and place a public health and equity lens over their operations.”

Among others, they argue: “... While private consultancies cannot be blamed for all the negative consequences for health and equity caused by the problems associated with globalisation and advanced capitalism, they have played a role in amplifying them.” Read why.

PS: make sure you also check out the section on consultancy firms & global health institutions.
Devex - Malawi is considering a local funding law. Will it help or harm INGOs?

(gated) “Proponents argue the regulations will enhance effectiveness and responsiveness to local needs. However, critics warn that the law may be too restrictive and could interfere excessively with NGO operations.”

“In Malawi, recent legislative efforts aimed at promoting localization have sparked both optimism and skepticism among stakeholders. Proposed amendments to the Malawi NGO Bill aim to regulate international NGOs working in the country by requiring them to partner with and allocate at least 30% of the funding they spend on programs in Malawi to local NGOs as part of a global trend toward more equitable development partnerships. Failure to comply could result in hefty fines or a jail term of two years…..”

Devex Newswire: Psst, what does localization actually mean?

“Development experts weigh in on whether the localization agenda is meeting the transformational change that many expected, or at least hoped for.”

“A massive buzzword that’s actually a bit of a fig leaf.” That’s how one expert sums up localization in the aid sector — the term that everyone uses, but to what ends?

“We told you recently how USAID went backward last year on its goal to direct a quarter of its funding to local organizations by 2025 — it’s currently at 9.6%, down from 10.2% in 2022. But, as Devex contributor Andrew Green writes in this compelling long read today, the localization agenda is falling short in other ways too. “Under the guise of localization, international NGOs have shifted their headquarters to cities in the global south and filled more jobs with people from the countries in which they work,” Andrew writes. “But they have stopped short of the transformational change that many expected, or at least hoped for.”

“Chilande Kuloba-Warria, managing director of Warande Advisory Centre in Nairobi, Kenya, tells Andrew that she has the impression donors and international nongovernmental organizations still retain control over the ideas and funds.”

“For Allison Kelley, a health economist whose résumé includes running Results for Development’s African Collaborative for Health Financing Solutions, localization is both a “buzzword” and a “fig leaf,” capable of meaning “everything and nothing.” …”

Pandemic Agreement

Including some more analysis after last week’s INB10 meeting, and some more advocacy.
Euractiv - Pandemic agreement negotiations receive ‘a solid zero’ for transparency from stakeholders


“Stakeholders attending the negotiations on a future pandemic agreement say that new engagement modalities lack transparency and damage trust in the process.”

“... Nina Schwalbe, Founder and CEO of Spark Street Advisors, which works on health and global development issues, told Euractiv, “The final decision was that [stakeholders] can attend in the mornings, for around 30 minutes, when they’ll tell us what happened the day before and what will be discussed that day, then we will leave.” In a tweet, Schwalbe wrote, “Sorry, IMB. Transparency score zero remains a solid zero.” “I think people are frustrated. Transparency is important in the process, because the World Health Assembly adoption is only the first step,” explained Schwalbe. “Any agreement will then have to go back to member states for approval, which in some cases will require ratification. Transparency in the process is important for the ultimate passage of the agreement.””

PS: “Concerns about transparency were also raised by the International Federation of Pharmaceutical Manufacturers and Associations (IFPMA), who say that INB meetings should include formal consultation with industry experts... “Improved modalities for stakeholder inclusion, emphasizing transparency and engagement, will enhance the breadth of expertise contributing to the agreement. This will facilitate the creation of a practical and equitable framework for pandemic preparedness and response.” ( #hahahahahahaha )

Speaking of Medicine - A Pandemic Agreement that Works for Africa

By guest contributors Fifa A Rahman and Benjamin Djoudalbaye; https://speakingofmedicine.plos.org/2024/07/19/a-pandemic-agreement-that-works-for-africa/

Among others they focus on Respectful Partnerships in One Health and A Fairer Bargain on Pathogen Sharing and Multilateral Benefits.

On the latter: “...A fairer bargain means that Africa must receive an equal share of pandemic products during the next pandemic. While regional and local manufacturing is a part of that, PABS is a crucial additional element Africa needs.”

And they conclude: “African interests are rooted in more equitable access to pandemic products while ensuring that African resources are not being committed towards burdensome obligations that are not in line with the pace of development in some Member States and that may divert resources from other more pressing priorities. The INB must go towards pandemic norms that enshrine the interests of all, not a few. It is only with this sentiment that we can truly achieve a ‘grand global social bargain’ that we deserve for future pandemics.”

PS: INB11 is scheduled for Sept 9-20.
Lancet GH - Final clauses to ensure better compliance with the Pandemic Agreement


“Many scholars are concerned about compliance with a Pandemic Agreement and suggest remedies such as creating a monitoring committee, mandating the sharing of compliance information, and including dispute resolution clauses and sanctions. As a legal scholar and former public official in South Korea who negotiated free trade agreements (FTAs) and handled disputes, I question the effectiveness of these proposals. I believe the Agreement needs more robust provisions. As negotiations near completion, considering stronger measures would be beneficial....”

Read what he suggests.

More on PPPR

Pandemic Fund Kickstarts Resource Mobilization with $667 million from the United States

“The United States pledged up to $667 million, and Germany pledged $54 million to the Pandemic Fund as it works towards raising at least $2 billion to meet strong demand from low- and middle-income countries.....”

“The pledges came as the Pandemic Fund launched its Investment Case resource mobilization campaign on the sidelines of the G20 Finance Ministers and Central Bank Governors meeting.....”

PS: “Partners will come together again at a pledging event on October 31, 2024, hosted by Brazil under its G20 Presidency.”

- For the Pandemic Fund (2025-2027) investment case, see https://www.thepandemicfund.org/investment-case

- Also with an Exec Summary (2 p)

“..... To sustain the momentum and ensure that the most pressing needs for preparedness are met, the Pandemic Fund requires an estimated US$2 billion in additional resources for the period between July 2025 to June 2027. These resources are required to support implementation of the Pandemic Fund’s recently launched Strategic Plan (2024-2029) and assist LICs and MICs – and the world – in meeting our collective global health security ambitions...”

- As a reminder (via Politico): “The Pandemic Fund has raised $2 billion since 2021 and has already provided more than $330 million to projects improving disease surveillance, laboratories and the health care workforce across 37 countries.”
• And coverage of the launch of the investment case also via Devex - **US pledges $667M to the Pandemic Fund**

PS: “**The U.S. pledge** covers a third of the fund’s target of $2 billion but it is “subject to Congressional appropriations and the availability of funds,” according to a news release……”

**Telegraph - We can stop the next pandemic, but only if we act now**

**Dr Richard Hatchett** is CEO of CEPI; **Professor Mario Moreira** is President of Fundação Oswaldo Cruz (Fiocruz), Brazil; [https://www.telegraph.co.uk/global-health/science-and-disease/we-can-stop-the-next-pandemic-but-to-do-so-we-must-act-now/#comment](https://www.telegraph.co.uk/global-health/science-and-disease/we-can-stop-the-next-pandemic-but-to-do-so-we-must-act-now/#comment)


“….. This year, Brazil’s Ministry of Health, Fundação Oswaldo Cruz (Fiocruz) and CEPI are co-hosting the Global Pandemic Preparedness Summit in Rio de Janeiro on July 29-30. It is a unique opportunity to advance global pandemic readiness by bringing together preparedness and response expertise from governments, academia, global health and civil society organizations and the private sector to harness scientific progress and drive forward solutions to outstanding challenges. **The meeting represents an important coming together of the Global North and South, with the event being co-hosted by the Brazilian Government during its G20 presidency, ensuring that science and equity are at the heart of high-level international political planning….**”

“….. **Three key elements are required to achieve this – and these will be the central focus of the Summit in Rio de Janeiro:** … First, we must **bolster regional manufacturing capacity** for vaccines and other health technologies in underserved parts of the world to tackle epidemic and pandemic threats more equitably so that poorer countries are not left at the back of the queue when an outbreak strikes. Second, **the world needs an improved disease surveillance system**. Effective surveillance is our first line of defense and is essential for detecting disease outbreaks quickly before they spread and cost lives. **Third, we must deliver on the 100 Days Mission, not just for vaccines but also for diagnostics and therapeutics. …**”

**Mpxox**

**Medical Xpress - Huge rise in Mpxox cases in DR Congo: govt**


“The Democratic Republic of Congo is suffering an "exponential rise" in the number of monkeypox cases, the government said Saturday.”

“Government spokesperson Patrick Muyaya said the cumulative number of suspected cases had hit 11,166, including 450 deaths, for a **fatality rate of four percent.** He said a report by the country’s health ministry revealed "an exponential increase in the number of cases". Muyaya added that the western province of Equateur was worst affected….”
And a link:

- Reuters - Children at risk as mpox variant hits Congo displacement camps

Nature Africa - New push for mpox research funding, as cases surge

*Nature Africa;*

“Africa-led consortium points to urgent need for data collection and collaboration.”

“A new research network set up to help counter Africa’s surge in mpox cases is urgently seeking funding, as outbreaks emerge in previously unaffected parts of the continent. ... A consortium, called MpoxReC, was announced in The Lancet in May this year. Jean Nachega, coordinating committee chair, says the immediate priority is to secure funding for research activities across mpox-endemic countries. The focus is in response to burgeoning outbreaks, not only in endemic countries, but also in previously unaffected parts of Africa, especially through sexual contact. Nachega and co-authors of The Lancet announcement say the continent's leading mpox scientists continue to struggle to secure critical research funding to help contain the persistent threat.”

“... The initial focus will be on Cameroon, the Central African Republic, Congo, the Democratic Republic of the Congo (DRC), Ghana and Nigeria, where mpox is endemic. But he invites other countries, including South Africa, which has recorded 22 mpox cases and three deaths since May, to join.....”

Bird flu

NEJM - Déjà Vu All Over Again — Refusing to Learn the Lessons of Covid-19


Perspective by M S Sinha, G Gonsalves et al.

NYT - Halting the Bird Flu Outbreak in Cows May Require Thinking Beyond Milk


“A new study paints a complex picture of the outbreak, suggesting that the virus could be spreading in multiple ways and that it is not always mild in cows.”

“.... A new study, published in Nature on Tuesday, presents a more complex picture. Some farms have reported a significant spike in cow deaths, according to the paper, which investigated outbreaks on nine farms in four states. The virus, known as H5N1, was also present in more than 20 percent of nasal swabs collected from cows. And it spread widely to other species, infecting cats, raccoons and wild birds, which may have transported the virus to new locations. “There’s probably
multiple pathways of spread and dissemination of this virus,” said Diego Diel, a virologist at Cornell University and an author of the study. “I think it will be really difficult to control it at this point.” …

- Related: NPR - With the U.S. bird flu outbreak uncontained, scientists see growing risks

AMR

GHF - The Wrong Remedy: What Proposed Pull Incentives for Antimicrobial Research & Development Ignore About Antimicrobial Resistance (AMR) [Guest Essay]

Ava Alkon, Global Health Advocacy and Policy Advisor, MSF USA; Dušan Jasovský, Antimicrobial Resistance Pharmacist, MSF Access Campaign; Shailly Gupta, Senior Communications Advisor, MSF Access Campaign; https://genevahealthfiles.substack.com/p/amr-wrong-remedy-proposed-pull-incentives-msf-op

Guest essay by MSF Access campaigners. “The authors suggest ways to make investments into research and development to address Antimicrobial Resistance (AMR) in a way that improves equitable access to these crucial and urgent medical products, without further contributing to monopolies.”

“… governments are now trying to lure major companies back into antimicrobial R&D with what are known as “pull incentives” – rewards that drug developers earn by bringing new drugs to market. What concerns us is that the pull incentives that are being launched or considered tend to preserve and/or bolster the standard model for incentivizing R&D, in which the private sector’s pursuit of profit – secured through patent monopolies, high-volume sales, and/or high prices – is the primary driver of innovation. This model is especially ill-suited to antimicrobials because these drugs must be introduced in a responsible way and used judiciously to preserve their efficacy and at the same time are needed right away in low-resource contexts that struggle to access costly new tools. …”

“…. As an alternative, public health research authorities and non-profits like GARDP are well-placed to play a much more active role in antimicrobial R&D and make responsible, public health-centered decisions regarding the pricing, production, and distribution of resulting products – with no conflict between their mandate and the goals of stewardship and access. Indeed, public and non-profit drug developers by their nature most fully enact the “delinkage” of R&D incentives from sales volumes and prices called for in the declaration agreed to by member states at the last High-Level Meeting on AMR in 2016. …”

Dengue

Lancet Editorial - Dengue: the threat to health now and in the future
https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)01542-3/fulltext
“2024 is the worst year for dengue cases on record. ... Rightly so, WHO has classified dengue as a grade 3 emergency (ie, requiring a major to maximal WHO response).”

“... An emerging concern is Africa, where active transmission of dengue virus has been reported in 15 countries in the past year. The continent has little clinical experience with the disease, many primary infections go undetected, and funding constraints hinder preparedness and response. Already, 50% of the population lives in unplanned urban settings, a proportion due to rise to 62% by 2050. Mitigation measures to tackle dengue upfront as part of urban development will be crucial. Following a severe outbreak in Burkina Faso in 2023, and the declines in malaria cases, which would have masked dengue in the past, there is far more awareness of dengue and of the need to address response and reporting....”

“But generally, dengue does not receive anywhere near the attention and resources it merits. Outbreaks can overwhelm health systems and inflict a huge economic burden, yet limited WHO funds for dengue control come from the Director General’s Emergency Fund, and further funding from countries has not been forthcoming. The seasonality of dengue and the periodic nature of outbreaks means that control measures are often implemented reactively, during the peak in cases—too little, too late. A WHO resolution on dengue to get the much-needed commitment of countries to address this growing problem would be one positive step. Countries should be encouraged to propose such a draft ahead of the 2025 WHO Executive Board Meeting.”

“If the spread of dengue virus is to be halted, there needs to be a shift from ad-hoc responses to isolated outbreaks towards long-term, integrated programming between relevant sectors. ...”

The Editorial concludes: “... How exactly can we best address the immediate threat of current outbreaks while tackling the longer-term headwinds of climate change, urbanisation, and increased mobility that will continue to drive dengue? What co-benefits might be gleaned? A Lancet Commission on dengue and other Aedes-transmitted viral diseases will attempt to answer these questions. But what is clear is the need for a multipronged and multidisciplinary approach; there is no easy solution to dengue.”

Debt crisis in LMICs

Guardian - Developing countries face worst debt crisis in history, study shows

“Spending on health and education being cut as nearly half of budgets are used to pay creditors, campaigners say.”

“Developing countries are facing the worst debt crisis in history with almost half their budgets being spent on paying back their creditors, a study has found. The report, by the campaign group Debt Relief International for Norwegian Church Aid, says more than 100 countries are struggling to service their debts, resulting in them cutting back on investment in health, education, social protection and climate change measures.... Debt service is absorbing 41.5% of budget revenues,”
41.6% of spending, and 8.4% of GDP on average across 144 developing countries, according to the study.

“It said that without urgent action problems would persist into the 2030s, and that pressures were greater than during both the Latin American debt crisis of 1982 and the debt crisis of the 1990s. The latter prompted relief under the Heavily Indebted Poor Country Initiative (HIPC)…..”

“…. Among the suggestions made by the report are that debt relief should be: available to countries of all income levels and regions, and tailored to their needs; provided in ways that reduces service to less than 15% of budget revenue; provided rapidly and with immediate standstills of payments when a country applies for relief; include all creditors; provide legal protections for debtors against holdouts and lawsuits in all major financial centres….”

UHC

Montreux Collaborative Blog - Greater together: taking joint action to accelerate PFM reform for health


This blog delves into the strengthened collaboration among WHO, World Bank, UNICEF, the Global Fund, and GAVI in the realm of Public Financial Management (PFM) for Health. Titled “Greater together: taking joint action to accelerate PFM reform for health,” the blog reflects on a decade of collective efforts and outlines directions for the Montreux initiative. Notably, it connects PFM to both Universal Health Coverage (UHC) and aid alignment agendas.

Cfr: “…. … The launch of the Lusaka Agenda in December 2023 renewed interest in PFM systems as a conduit for channeling external resources into health systems. Recognizing the costs associated with misaligned financial management and reporting systems, major health-sector development partners, such as the Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund) and Gavi, the Vaccine Alliance – are reinforcing already existing initiatives to align their grant-operating modalities with countries’ domestic PFM rules and processes. For example, Gavi aims to channel at least 55% of their non-vaccine funding through countries’ financial systems by 2025. The Global Fund and Gavi are taking a progressive and adaptable approach, considering the varying maturity levels of country systems. To achieve this, they explore collaborations with professional accountancy organizations and supreme audit institutions (such as the International Federation of Accountants and the African Association of Supreme Audit Institutions) to foster accountability and good governance of public funds in health….”

“…. As the PFM for Health agenda gains political momentum and evolves, the Montreux Collaborative is undergoing reshaping and expansion. At the November 2023 Montreux Collaborative meeting, the World Health Organization (WHO), the World Bank, and UNICEF announced a deeper collaboration. Their joint efforts aim to strengthen coordination in analysis, capacity building, and technical support related to this critical agenda. Opportunities exist to extend this collaboration to other health-sector development partners, including the Global Fund and Gavi. Harmonizing messaging and enhancing efficiency across global, regional, and country activities
are priorities. For the first time, the five organizations—WHO, World Bank, UNICEF, the Global Fund, and Gavi—will collaboratively set the agenda for the next Montreux event on Fiscal Space, PFM, and Health Financing. This event, scheduled for November 2025, will bring together global efforts to advance the knowledge agenda and drive impact on country-level reforms.”

Paris Olympics

GHN - Coca-Cola’s Ongoing Olympic Sponsorship Is Bad for Everyone’s Health

Members of the kick Big Soda out of Sport campaign https://globalhealthnow.org/2024-07/coca-colas-ongoing-olympic-sponsorship-bad-everyones-health

“….In continuing its sponsorship agreement with Coca-Cola, the IOC stands in direct opposition to its stated values. …” …. Yet, until IOC leadership hears loud and clear from the global community that Coca-Cola is no more welcome as part of its programming than Big Tobacco or McDonald’s, their 96-year union will carry forward indefinitely, regardless of its downstream consequences. …”

“We encourage sports fans—along with concerned young people, parents, public health and environmental advocates, members of the media, and athletes themselves—to demonstrate the global opposition to this longstanding sponsorship. A newly launched campaign, “Kick Big Soda Out of Sport,” organized by leading global health organizations, sheds light on the health and environmental harms of Big Soda. Alongside the campaign, a petition urging the IOC to terminate its sponsorship with Coca-Cola is currently gathering signatures…..”

For more on this, see https://www.kickbigsodaout.org/

WHO teams up with IOC and France to support healthy Paris Olympics


“The World Health Organization is taking part in the Paris Olympics in multiple fields, supporting the International Olympic Committee (IOC) and France to help make the world’s leading sport spectacle, which officially starts this Friday, healthy and safe for spectators and athletes alike…..”

Lancet Comment - Realigning the physical activity research agenda for population health, equity, and wellbeing

Ding Ding et al; https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)01540-X/fulltext

“….. Ahead of the 2024 Paris Summer Olympic and Paralympic Games, WHO released new data showing that the global age-standardised prevalence of physical inactivity increased from 23.4% in 2000 and 26.4% in 2010 to 31.3% in 2022. If this trend continues, most countries will not meet the WHO target of a 15% relative reduction of physical inactivity by 2030. This rise in physical inactivity is unsurprising because global implementation of policies to promote physical activity has been
suboptimal. Yet, there has been an increase in physical activity related public health research. Given that public health research is meant to inform practice and decision making, it is instructive to consider why published research has made relatively little impact on increasing population levels of physical activity and how research can be improved. Much of this research proliferation is dominated by studies that seek to define and understand physical inactivity as a problem.....”

“Although problem-oriented research has value in certain contexts, there have been calls for a shift towards more solution-oriented research at the population level to shorten the path from knowledge generation to population impact. Mission-oriented research has gained prominence as a solution-oriented, time-bound, and outcome-focused approach that encourages collaboration among diverse stakeholders across sectors to develop comprehensive solutions to major societal issues.....” “As researchers working across different areas of physical activity, we share a common mission: equitable improvement in population health and wellbeing through active living. Here we propose ways to realign the research agenda for this mission.....”

“... Physical activity research needs to be reframed as a population-level challenge, focusing on strategies that yield moderate improvements for the majority rather than major changes for a select few...... ... Crucially, greater engagement is needed with the relevant actors who can help address physical inactivity and deliver real-world impacts. The disconnect between academic research and policy and practice has long been documented. Researchers and practitioners have often worked in silos, which results in a shortage of evidence-based practice and practice-based evidence. Mission-oriented research emphasises cross-actor collaborations through a co-creation process. “

“.... To progress strategies to increase population-level physical activity, researchers need to reflect on what questions need answering, how they aim to answer them, who will benefit from the research, which groups need to be engaged in co-creation, and within what context (figure). ... ... We call on policy makers and funders to support and encourage a realignment towards mission-oriented physical activity research, and for academic reward systems to be restructured accordingly.”

STI

Lancet Global Health – WHO global research priorities for sexually transmitted infections


“In 2022, WHO initiated a research prioritisation process to identify the most important STI research areas to address the global public health need. Using an adapted Child Health and Nutrition Research Initiative methodology including two global stakeholder surveys, the process identified 40 priority STI research needs. The top priorities centred on developing and implementing affordable, feasible, rapid point-of-care STI diagnostic tests and new treatments, especially for gonorrhoea, chlamydia, and syphilis; designing new multipurpose prevention technologies and vaccines for STIs; and collecting improved STI epidemiologic data on both infection
and disease outcomes. The priorities also included innovative programmatic approaches, such as new STI communication and partner management strategies. An additional six research areas related to mpox (formerly known as monkeypox) reflect the need for STI-related research during disease outbreaks where sexual transmission can have a key role.

Mental Health

IFL Science - Young People Are Now So Unhappy That They’ve Changed A Fundamental Pattern Of Life


“So long mid-life crisis; hello youth in despair.”

“There is a literature of at least 600 published papers suggesting that happiness is U-shaped in age and, conversely, that unhappiness is hump-shaped in age,” Blanchflower wrote last month in an article regarding the findings. “Across a variety of datasets and measures, the finding of a midlife low has been consistently replicated.” “But not anymore,” he continued. “Now, young adults (on average) are the least happy people. Unhappiness now declines with age, and happiness now rises with age – and this change seems to have started around 2017. The prime-age are happier than the young.”

Access to medicines, vaccines & other health technologies

WHO calls for better access to medicines to reduce vast treatment gap for neurological disorders

https://www.who.int/news/item/22-07-2024-who-calls-for-better-access-to-medicines-to-reduce-vast-treatment-gap-for-neurological-disorders

“…. Despite the significant progress made in developing effective, safe, and cost-effective medicines that enhance the quality of life of individuals with neurological disorders, these medicines remain largely inaccessible. A new WHO report, Improving Access to Medicines for Neurological Disorders, sets out the barriers that prevent access to these essential medicines, and presents a framework for action to address these challenges.”

“…. Neurological disorders are the leading cause of disability and over 80% of neurological deaths and health loss occur in low- and middle-income countries. The treatment gap (the difference between the number of people with a condition and those receiving appropriate treatment) for neurological disorders is extremely high, exceeding 75% in most low-income countries and 50% in most middle-income countries.”
“... Using epilepsy and Parkinson disease as tracer conditions, WHO published a report that sets out the complex and inter-linking challenges that prevent access to treatment for neurological disorders...

PS: “This report is an important tool in the implementation of the **Intersectoral global action plan on epilepsy and other neurological disorders (IGAP) 2022–2031**, which is supporting countries to scale up access to the essential medicines and technologies needed to manage neurological disorders by 2031…”

- Coverage via HPW – [More than Three-Quarters of People with Neurological Diseases in Low Income Countries Can’t Access Treatment](https://www.brookings.edu/articles/acelerating-discovery-development-new-health-technologies/)

**Brookings (Commentary) - Accelerating the discovery and development of new health technologies**


Authors examine how innovations in the global health R&D ecosystem, such as AI, modular manufacturing, mRNA, & new trial designs, could affect the costs, success rate, & impact of future R&D efforts.

**Lancet Comment - Global disparities in activity limitations and use of assistive devices**


Comment linked to a new study in the Lancet - [Activity limitations, use of assistive devices, and mortality and clinical events in 25 high-income, middle-income, and low-income countries: an analysis of the PURE study](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)01179-6/abstract)

Among the conclusions: “The global prevalence of activity limitations is substantially higher in women than men and in low-income countries and middle-income countries compared with high-income countries, coupled with a much lower use of gait, visual, and hearing aids. Strategies are needed to prevent and mitigate activity limitations globally, with particular emphasis on low-income countries and women.”

**Gaza**

**FT - WHO warns Gaza at ‘high risk’ of polio outbreak**

[https://www.ft.com/content/1924033c-6c64-47cd-aab0-de2559116c23](https://www.ft.com/content/1924033c-6c64-47cd-aab0-de2559116c23)

(as of Wednesday morning) “Health organisation says the risk of transmission is high because of ‘the very dire situation with water sanitation’.”
“Speaking at a briefing on Tuesday, Ayadil Saparbekov, head of the WHO’s health emergencies team, said the organisation had been notified last week that traces of vaccine-derived poliovirus type 2 had been identified in the Deir al-Balah and Khan Younis areas of central and southern Gaza. “We consider that there is a high risk of the spreading of ‘circulating vaccine-derived polio virus 2’ (cVDPV) in Gaza, and this is not only because of the detection, but also because of the very dire situation with water sanitation,” he said. … … The WHO and its partners were carrying out an investigation to identify the source of the virus, and hoped to provide recommendations by Sunday on how to ward off the threat of an outbreak, he said, adding that this could involve a mass vaccination programme. However, he acknowledged the challenges of such a campaign, given the massive damage that Israel’s offensive in the enclave — which it launched in response to Hamas’s October 7 attack on Israel — has done to Gaza’s health system. “Primary healthcare services that provide vaccination and other maternal health services … [are] basically not functioning. That also brings the risk of spreading the disease across the Gaza Strip and also it may spill over internationally,” he said. Only 16 of the 36 hospitals that existed in Gaza before the war are functioning even partially, according to the WHO, and only 45 primary healthcare centres — fewer than half the prewar number — were still working…..”

WHO Raises Alarm Over Polio Virus Detected in Gaza Sewage Water Samples


From end of last week. “Variant type 2 poliovirus (VDPV) has been isolated from six environmental (sewage) samples in the Gaza Strip – collected from two different collection sites in the southern city of Khan Younis as well as Deir al Balah, further north, WHO confirmed Friday. The variant poliovirus strains detected in all six wastewater samples, collected in late June, are genetically linked to each other, said the WHO-hosted Global Polio Eradication Initiative (GPEI), in a news release. “It is important to note that virus has been isolated from the environment only at this time; no associated paralytic cases have been detected,” the GPEI statement noted. …”

Telegraph – Polio detected in Gaza ‘could have been spread by aid workers’


“Poliovirus has been detected in Gaza, likely brought in from abroad by aid workers, officials have said. …. Six waste water samples tested by the Palestinian health ministry and UNICEF have come back positive for vaccine-derived polio in Khan Younis and Deir al Balah, suggesting hundreds of people may be carrying the virus across the battered enclave. “

“.. The vaccine responsible has not been used in Gaza or surrounding regions since 2016, causing experts to conclude it must have been brought in by someone who had been in Africa where the vaccine has not yet been phased out. … Dr Hamid Jafari, Director of the Global Polio Eradication Programme for the Eastern Mediterranean region, told The Telegraph, the vaccine derived strain identified in Gaza had been used “quite extensively” to tackle outbreaks in recent years in Africa. “This strain must have been brought in by someone from a country where this vaccine is used – perhaps a foreign aid worker. …”
Science News - The virus that causes polio has been found in Gaza. Here's why that is grim news
https://www.science.org/content/article/virus-causes-polio-has-been-found-gaza-here-s-why-grim-news

“Fighting and health system’s collapse will complicate emergency vaccination campaign.”

UN Global Food Security report

Devex - More than 700 million people went hungry last year, says UN report

“The U.N.’s flagship global food security report calls for more financing to make progress toward achieving the goal of eliminating hunger by 2030.”

“This year’s report’s theme “Financing to end hunger, food insecurity and all forms of malnutrition”, emphasizes that achieving SDG 2 Zero Hunger requires a multi-faceted approach, including transforming and strengthening agrifood systems, addressing inequalities, and ensuring affordable and accessible healthy diets for all. It calls for increased and more cost-effective financing, with a clear and standardized definition of financing for food security and nutrition....”

(ps: the report also argues for more innovative financial solutions. The latter is the theme of this year’s SOFI, which provided a number of options for different countries and also came up with a new definition for measuring how much funding is dedicated to food security and nutrition....)

“The number of hungry people in the world rose sharply during the COVID-19 pandemic and has remained at nearly the same level ever since, according to the flagship U.N. global food security report. This means the United Nations’ goal of eliminating hunger by 2030 is becoming further and further out of reach.”

“.... The 2024 State of Food Security and Nutrition in the World report, released Wednesday, is produced annually by five organizations: the Food and Agriculture Organization, the International Fund for Agricultural Development, UNICEF, the World Food Programme, and the World Health Organization. ....”

“733 million is a very high level, and it basically means that we are at the levels of 15 years ago,” FAO Chief Economist Máximo Torero told Devex. “And so we have lost 15 years in terms of the reduction of hunger, and it’s about 9.1% of the global population.” “.... The major drivers of hunger — conflict, climate change, and economic shocks — are occurring more often and at higher intensity, the report said, while climate change was the most prevalent reason for food insecurity and malnutrition last year....”

“This year’s findings are even more stark when broken down by region: 1 out of 11 people on the planet faced hunger in 2023, but that figure is 1 out of every 5 in Africa, where hunger levels are
still on the rise. Hunger has stayed relatively unchanged in Asia, but although Africa is home to the largest proportion of undernourished people, Asia is home to the highest number — 384.5 million, compared to 298.4 million in Africa.”

PS: “…. The 282-page report was timed with this week’s Group of 20 ministerial meetings in Rio de Janeiro, Brazil, where Brazilian President President Luiz Inácio Lula da Silva has made reducing poverty at home and abroad a major focus of his leadership as well as Brazil’s G20 presidency this year. At least 100 countries are expected to join a Brazil-led alliance to fight hunger and poverty. It will officially launch at the G20 summit in November.”

- See also UN News - Fight against global hunger set back 15 years, warns UN report
- And the Guardian - Africa to overtake Asia with highest number of hungry people by 2030, says UN

“Annual report says climate crisis, conflict and economic shocks leave the global food system ‘disastrously vulnerable.’” Among others with the view of Olivier De Schutter, UN special rapporteur on extreme poverty and human rights.

WHO (joint press release) - Hunger numbers stubbornly high for three consecutive years as global crises deepen: UN report

Including: “…. Similarly, new estimates of adult obesity show a steady increase over the last decade, from 12.1 percent (2012) to 15.8 percent (2022). Projections indicate that by 2030, the world will have more than 1.2 billion obese adults. The double burden of malnutrition – the co-existence of undernutrition together with overweight and obesity – has also surged globally across all age groups.” “…. Over 2.8 billion people were unable to afford a healthy diet.”

NCDs & Commercial determinants of health

Lancet - Mexico’s bold new law on adequate and sustainable nutrition

E Pineda et al; https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)01493-4/abstract

“…. Mexico’s new General Law on Adequate and Sustainable Nutrition (Ley general de Alimentación Adecuada y Sostenible) is a substantial step towards transforming food systems to address NCDs and promote environmental sustainability. Effective from April 18, 2024, this law translates the Mexican constitutional right to nutritious, sufficient, and quality food in Article 4 into a practical legislative framework. It enshrines the human right to food, elevating it to include healthy and sustainable nutrition and positioning Mexico as a global leader in food policy, with the most progressive approach in this area to date.”
Social determinants of health

Lancet Letter - Trade unions as public health actors
J Wels; https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)02808-8/fulltext

“.... One crucial aspect often omitted in public health discussions is collective negotiation, specifically the role of trade unions in safeguarding workforce wellbeing. This omission is surprising considering the historical significance of trade unions in labour relations. Several factors contribute to this oversight. ...

“... In summary, the impact of work dynamics and employment practices on population health is substantial. Trade unions, often overlooked in public health discussions, have direct, latent, and political roles in shaping health outcomes. Understanding these roles and collecting data on union presence and influence are crucial to advancing our knowledge of the relationship between work and health.”

Planetary Health

UN - Secretary-General’s Call to Action on Extreme Heat
https://www.un.org/climatechange/extreme-heat

“In response to the rapid rise in the scale, intensity, frequency and duration of extreme heat, UN Secretary-General António Guterres on 25 July 2024 called for an urgent and concerted effort to enhance international cooperation to address extreme heat in four critical areas: Caring for the vulnerable - Protecting workers - Boosting resilience of economies and societies using data and science - Limiting temperature rise to 1.5°C by phasing out fossil fuels and scaling up investment in renewable energy....”

• Related: UN News - The heat is on: We must rise to the challenge of rising temperatures, urges UN chief

“The UN chief on Thursday issued an urgent call to action to better protect billions around the world exposed to crippling effects of extreme heat, as global temperature rise continues unabated.”

“The UN chief highlighted that while “crippling heat is everywhere”, it does not affect everyone equally. Those most at risk include the urban poor, pregnant women, children, older persons, those with disabilities, the sick, and the displaced, who often live in substandard housing without access to cooling.....”

PS: “....Over 70 per cent of the global workforce, or 2.4 billion people, are at substantial risk of extreme heat, according to new report from the UN International Labour Organization (ILO). The situation is particularly dire in the Africa and Arab regions, where more than 90 per cent and 80 per cent of workers are exposed, respectively. In Asia and the Pacific – the world’s most populous region – that figure is three in four workers (75 per cent).....”
World Hepatitis Day (28 July)

Speaking of Medicine (blog) - World Hepatitis Day 2024 - a hidden emergency

By Diyani Dewasurendra (who worked with MSF).

Miscellaneous

IISD - After Two Votes, HLPF Ministerial Declaration Recommits to 2030 Agenda

“One of the two paragraphs put to a vote recognized that sustainable development cannot be realized without peace and security....” Yep.

“Deep and formative tensions associated with the geopolitical and economic challenges confronting the multilateral system were a recurring theme at the 2024 session of the High-level Political Forum on Sustainable Development (HLPF).” This is the opening sentence of the Earth Negotiations Bulletin (ENB) summary report of the meeting, which notes that two contested paragraphs of the Ministerial Declaration – the HLPF’s outcome document – were put to a vote as a result. One paragraph recognized that sustainable development cannot be realized without peace and security. The other, newly proposed paragraph drew attention to the impact of unilateral coercive measures (economic sanctions) on poverty and food security, among other SDGs.....”

CGD (blog) - An Anticipatory Cash Transfer ‘Superfund’ Should Be a Key Part of the Global Humanitarian System
R Dissanayake; https://www.cgdev.org/blog/anticipatory-cash-transfer-superfund-should-be-key-part-global-humanitarian-and-climate

“In the CGD blog today, Ashley Pople and Stefan Dercon summarise the enormous benefits of a cash transfer paid to vulnerable Bangladeshis in anticipation of a flood that was predicted to occur based on modelling. Households that received the transfer were far less likely to go a day without eating, reported higher child food consumption and wellbeing after the floods hit, lost fewer assets, and had better earnings potential post-flooding. And these benefits accrued well before conventional humanitarian aid would have been delivered. These results aren’t outliers. In Northern Nigeria, anticipatory transfers supported better adaptation and resilience investments. Famine early warning systems have long been used to fundraise for remedial work, and in Ethiopia and Kenya, existing cash transfer programmes were used to avert its worst effects on the basis of expected famine conditions. In a world where climate change causes more frequent and more extreme natural disasters, anticipatory cash can and should be an important part of the global humanitarian system.....”
“.... A single, much larger anticipatory cash transfers scheme, covering multiple geographies and multiple kinds of forecastable disasters, and implemented through existing, nationally-administered cash transfer schemes, would be a dramatic improvement over the disparate and atomized schemes, run through a plethora of implementing partners and individually funded, that are currently used. \textbf{Such a scheme would have four big benefits:}....”

Nature Medicine (Editorial) - What will it take to make precision health a global reality

https://www.nature.com/articles/s41591-024-03163-8

Editorial linked to a special issue. “As healthcare becomes more data-driven and precise, promising greater accuracy, targeted use of resources and healthier populations, we ask what it will take to realize these benefits in local and global contexts.”

“In this \textbf{special issue}, we ask what it means to deliver precision health — that is, tailoring preventive or treatment approaches to groups of people or individual people on the basis of certain characteristics — in \textbf{different geographical and clinical contexts}. ....”. With an \textbf{overview of the issue}.

PS: “.... \textbf{Precision health is becoming big business}, particularly in high-income countries in which tech companies seek to harness artificial intelligence for a range of applications for the prediction, prevention or treatment of disease. But \textbf{to ensure that current health inequalities are not exacerbated}, the precision health agenda must not be driven by big tech alone. Organizations such as UNICEF, WHO Africa and the Bill & Melinda Gates Foundation have recently acknowledged the potential of precision health approaches to address priority global health issues. But it is crucial that governments engage in these discussions to define priorities and supportive policies, armed with robust evidence from research....”

They conclude: “\textbf{There is no doubt that the next generation of clinical medicine and public health will be more precise}. The \textbf{shift to precision approaches is well underway, and not just in healthcare}; for example, precision agriculture involves the use of data, artificial intelligence, sensors and other techniques for targeted and efficient use of water, pesticides, and fertilizers. \textbf{In an age in which the interdependencies of climate, food security and health are glaringly obvious, data-driven precision approaches, if undertaken responsibly and equitably, could make health systems more resilient and sustainable, and help advance progress toward many of the SDGs}.”

Related link:

- Nature Medicine – \textbf{A life-course multisectoral approach to precision health in LMICs} (by Stefan Swartling Peterson, P Waiswa et al)

“\textbf{Precision health in low- and middle-income countries should focus on disease prevention and implementation in order to be cost-effective and impactful}.”
Global health governance & Governance of Health

IISD - Ahead of Summit of the Future, Leaders Call for Robust Follow-up Mechanisms


“The open letter cites civil society’s demonstrated commitment to work for a successful SoF outcome, including through the introduction of a “bold and far-reaching” People’s Pact for the Future. The leaders argue in favor of robust follow-up to the SoF with the active, sustained engagement of civil society who share the aspiration for more effective multilateralism. The letter calls for “a clear, well-designed and dynamic roadmap to implement the Pact for the Future”.”

“A group of 58 “international leaders who have served as heads of state, ministers of government and leaders of intergovernmental and civil society organizations” (CSOs) have published an open letter on the most recent draft of the Pact for the Future – the main outcome under negotiation for the Summit of the Future (SoF) in September. They call on Member States to ensure that the Pact’s actions and commitments “are supported directly by concurrent implementation efforts [and] backed-up by clear benchmarks and monitoring mechanisms.” The open letter cites civil society’s demonstrated commitment to work for a successful SoF outcome, including through the introduction of a “bold and far-reaching” People’s Pact for the Future.”

Devex - How David Lammy could bring real change to UK aid


“Lammy intends to take a firm grip on the United Kingdom development policy — and carry with him the legacy of being “descended from the slave trade.””

“…. Lammy pointed out that he is “the first foreign secretary descended from the slave trade,” a responsibility he takes “incredibly seriously.” …. …. … In a 2022 lecture, the future secretary of state for foreign, commonwealth and development affairs — his full title — launched an outspoken attack on forms of aid that are “patronizing or paternalistic” instead of “two-way partnerships based on respect and mutual trust.” He’s also blasted NGOs that depict people in low-income nations with “a swollen belly and flies around them” — accusing them of “old-fashioned colonial models” that undermine the fight against poverty.”

PS: “…. Lammy already made foreign policy waves by announcing that the U.K. has restored funding to UNRWA, the beleaguered main U.N. agency in Gaza, leaving the United States globally isolated. Of the 16 countries that froze funding after Israeli claims of UNRWA staff involvement in last October’s Hamas massacre, only the U.S. is now maintaining that block…. with the European Union, Canada, Australia, Germany, France, and Japan among those that have already reversed their stances…..”
Devex Newswire: An insider’s view on what Trump vs. Harris means for aid


“Ben Rhodes, a top official in the Obama administration, reflects on Joe Biden’s exit and the differences between a potential Kamala Harris presidency versus a return of Donald Trump.”

“Trump 1.0 would be very different from Trump 2.0,” warned Ben Rhodes, former U.S. President Barack Obama’s deputy national security adviser for strategic communications and senior speechwriter, a New York Times-bestselling author, and host of the popular “Pod Save the World” podcast. Speaking at a Devex Pro Live event yesterday, Rhodes said that if Trump wins a second term, “he’ll be surrounded by much more ideological people who have more experience being in agencies, which means not that they want to effectively govern those agencies, but they want to essentially engage in a hostile takeover of those agencies.” Moreover, he theorized that Trump’s “law of the jungle” multilateralism would lead to a “pre-World War One nation-state system, where it’s all transactional,” which would be “the worst kind of environment for international development.”

“As for a potential Kamala Harris presidency, Rhodes said there would be a “good deal of continuity from President Biden, but at the same time, I think she’ll have particular areas of interest where she wants to make a mark.” …”

Devvex - USAID unveils its new democracy, human rights, and governance policy


“The policy was unveiled halfway through a record election year, with more than 60 national elections taking place across the globe.”

“The U.S. Agency for International Development has launched its new democracy, human rights, and governance policy, providing guidance for those working on the agency’s multibillion-dollar democracy portfolio…..” “Last year, USAID obligated $1.8 billion toward democracy, human rights, and governance work, funding 830 activities across more than 100 countries…..”

PHM urges Asian Infrastructure Investment Bank (AIIB) to rethink its health strategy


“In a strong, tightly argued submission, PHM has urged the Asian Infrastructure Investment Bank: to refrain from supporting private sector healthcare and marketised health insurance; to refrain from exacerbating the debt burden on many low- and middle-income countries through their lending policies; to address the drivers of public sector austerity, including uniform and fair corporate taxation, action on tax avoidance, and pro-market anti-public ideologies promoted through international financial institutions; to recognise, analyse and address the structural drivers of economic inequality as a contribution to achieving ‘Health for All’; to avoid treating people’s
health as a ‘factor of production’, rather than a fundamental human right; to ensure that loans to support healthcare infrastructure are fully integrated within more holistic development planning; to ensure a balanced allocation of resources across: - healthcare delivery and public health, - the social determinants of health (including housing, transport, WASH infrastructure, access to education, etc), - protection and restoration of biodiversity, - support for small farmers and agroecology, - infrastructure which improves the lives of women (including support for WASH capacity, home insulation, electricity for cooking and heating, and road transport) - infrastructure which addresses inequality.....”

Devex – Von der Leyen 2.0

“The European Parliament elected Ursula von der Leyen for a second five-year term as president of the European Commission Thursday, as the German signaled she would keep pushing an investment-focused approach to development policy that endeavors to serve EU interests as well as those of recipient countries.”

“The EU institutions are the third-biggest donor among OECD members, with $26.93 billion in official development assistance in 2023. Von der Leyen’s first term saw the commission try to use its development budget (rhetorically at least) as part of a geopolitical offer to global south countries, focused (the commission claimed) on green and digital infrastructure projects. That shift, dubbed the Global Gateway, will now be souped up, with von der Leyen flagging that the commission will be “proposing an integrated offer to our partners — with infrastructure investment, trade, macro-economic support part of the package.”

“NGOs decry what they see as a shift to “competition over cooperation,” and an excessive focus on the EU’s own interests. While the new direction is in line with the recently leaked ideas of von der Leyen’s own development department about the need to “[engage] our strategic partners with a policy mix driven by economic interest, and less so by more traditional and narrow development and foreign policy approaches.”

G20 Social: Brasil’s Global Legacy

“The G20 Social Summit, a groundbreaking initiative introduced by Brasil’s G20 presidency, was unveiled by Brazilian Minister Márcio Macêdo from the General Secretariat of the Presidency at the UN High-Level Political Forum on Sustainable Development.”

“The G20 Social Summit, a pioneering initiative from Brasil’s G20 presidency, is set to engage thousands of social organizations from over 60 countries. ... The agenda includes critical policies from the Brazilian G20 presidency and the social participation initiative introduced by President Lula. “We are creating this platform to ensure that civil society from around the world has a voice and can engage in G20 discussions,” stated the minister. He elaborated on how this unprecedented involvement of civil society will be integrated into the debates at the Heads of State meeting.
“We will host a Social Summit from November 14 to 16 in Rio de Janeiro, preceding the Heads of State Summit.”

Project Syndicate – How the G20 Could Help Eliminate Hunger and Extreme Poverty


“In November, the G20 plans to launch the Global Alliance against Hunger and Poverty. Partly modeled on Brazilian President Luiz Inácio Lula da Silva’s “zero-hunger” campaign, this initiative has the potential to revitalize the G20 and put the world back on track to achieve the UN Sustainable Development Goals by 2030.”

CGD (blog) - France’s Future as a Global Development Player: What the Results of the Legislative Elections Might Mean


“…. Several structural factors provide insight into France’s future commitment to global development. Institutional continuity and broad public support suggest this political gearshift will have a limited short-term impact on development policy. But budgetary constraints and the risk of political deadlock could limit France’s capacity to play an active role in global development, consistent with its previous engagements…..”

The Review of International Organisations - Are authoritative international organizations challenged more? A recurrent event analysis of member state criticisms and withdrawals


“Member states’ challenges to international organizations (IOs) are at the heart of the supposed crisis of our multilateral order – from the “African bias” debate surrounding the International Criminal Court, to the United Kingdom’s “Brexit” from the European Union, to Trump’s attacks on the World Health Organization during the COVID-19 pandemic. IOs are regularly challenged by their member states in different ways, ranging from verbal criticisms to withdrawals. But why are some IOs challenged more than others? An important – but so far largely theoretical – academic debate relates to the authority of IOs as an explanatory factor for why some face more challenges: Authoritative IOs may invite more challenges (for example, due to domestic contestation) or fewer challenges (due, in part, to the investment of member states and their greater capacity to resolve conflicts internally). Our article assesses these explanations using the Andersen-Gill approach for analyzing recurrent events of member states’ public criticisms and withdrawals. We do not find strong and consistent evidence that more authoritative IOs are more regularly challenged by their own member states. There is some evidence that authoritative IOs experience fewer withdrawals, but we find stronger evidence for alternative factors such as preference heterogeneity between members, the existence of alternative IOs, and the democratic composition of an IO’s membership.
Our study is significant for scholarly debates and real-world politics, as it implies that granting IOs more authority does not make them more prone to member state challenges.”

Conflict & Health - Global health diplomacy in humanitarian action

“This commentary explores the intersection of Global Health Diplomacy (GHD) and humanitarian action within Fragility, Conflict, and Violence (FCV) contexts. It aims at addressing the multifaceted challenges faced by communities living in these environments, where a convergence of multiple factors, including over 110 active armed conflicts, creates complex emergencies impact on large populations globally. This commentary holds three primary significances: 1) it scrutinizes the profound and enduring health consequences of major humanitarian crises on last-mile populations, highlighting the pivotal role of health diplomacy for better navigating humanitarian challenges; 2) it advocates for a paradigm shift in humanitarian approaches, recognizing GHD’s potential in shaping international cooperation, building consensus on inclusive global health policies, and enabling more effective interventions; 3) it underscores the operational impact of health diplomacy, both at diplomatic tables and on the frontlines of humanitarian efforts. Through real-world cases such as the cholera outbreak in Yemen and the response to Ebola outbreaks in DRC, the paper illustrates how diplomatic dialogue can impact health outcomes in fragile settings.”

UHC & PHC

BMJ Feature - South Africa’s new national health insurance scheme is controversial
https://www.bmj.com/content/386/bmj.q1506

“South Africa’s new National Health Insurance mechanism has been signed into law. Proponents say it will fix an unequal, strained health system, but critics fear the system is not ready—and the change may alienate doctors. Elna Schütz reports.”

Policy Sciences - Health system reform and path-dependency: how ideas constrained change in South Africa’s national health insurance policy process
https://link.springer.com/article/10.1007/s11077-024-09541-w

By E Whyle & J Olivier.

SS&M - Does health aid matter to financial risk protection? A regression analysis across 159 household surveys, 2000-2016
“The association between health aid and financial risk protection is unexplored. **On average, health aid is not associated with financial risk protection (FRP). Health aid is negatively associated with FRP outcomes when it is largely on-budget.** We find the same negative association for low income households. These findings might be useful to health aid policymakers and stakeholders.”

SS&M - "Persistency of Catastrophic Out-of-Pocket Health Expenditures: measurement with evidence from three African Countries - Malawi, Tanzania, and Uganda


“We propose to assess persistent catastrophic health expenses via risk exposure, average changes and recurrence. At least 27% facing catastrophic health expenses in Malawi, Uganda, and Tanzania will face it again. Elderly, female heads, and health shocks increase catastrophic health expense persistence. Longitudinal insights identify enduring financial vulnerabilities due to out-of-pocket health spending.”

Health Systems & Reform - An Assessment of Provider Payment Mechanisms (PPMs) in Ethiopia: Implications for Redesign of PPMs and Progress Toward Universal Health Coverage


By Mideksa Koricho et al.

**Pandemic preparedness & response/ Global Health Security**

UN Foundation launches outbreak prevention & preparedness fund


“As countries worldwide grapple with the challenges of ensuring universal immunization coverage, the **UN Foundation is launching an Outbreak Prevention and Preparedness Fund.** This Fund, which will pool contributions from multiple donors, is set to make a significant impact on global health by supporting efforts that reinforce national immunization systems and allow countries to better prevent, detect, and respond to vaccine-preventable diseases (VPDs).”

“...... the UN Foundation has set an ambitious goal of raising $15 million over the next two years. The Foundation is actively seeking new donors to join the Fund. This initiative will support WHO and UNICEF to implement a range of activities under two key categories:....”
Adam Kucharski (blog) - What is the best way to stop a pandemic?

“The four steps to a disaster, and what we can do about them.”

- Link: Telegraph – Nipah virus kills one teenager as health experts race to track 350 others

Planetary health

Guardian - Sunday was world’s hottest ever recorded day, data suggests

“Preliminary data from Copernicus suggests temperature records were shattered, taking world into ‘uncharted territory’.”

“.... the average surface air temperature hit 17.09C (62.76F) on Sunday, according to preliminary data from the Copernicus Climate Change Service, which holds data that stretches back to 1940. The reading inched above the previous record of 17.08C (62.74F) set on 6 July last year....”

PS: the record was beaten already on Monday...

Devex - New climate fund makes progress on a leader, but not on scale

“The loss and damage fund’s second board meeting saw consensus on the executive director’s role description, but not on ambitious the scale of the fund to address the impact of climate change should be. .... A meeting in Songdo, South Korea, last week was a crucial step in the process, as the board of the newly named Fund for Responding to Loss and Damage hammered out key technical details to bring the fund to fruition, including the specifications for its director’s position....”

Guardian - Cop29 host Azerbaijan seeks $1bn from fossil fuel producers for climate fund

“Countries and companies involved in oil and gas extraction to be asked to join scheme aimed at tackling global heating.”
“Fossil-fuel producing countries and companies are being asked to pay into a new international fund to help poor countries cope with the effects of the climate crisis. The climate investment fund is being set up by the Azerbaijan government, host country of the Cop29 UN climate summit in November…. The Climate Finance Action Fund will take financial contributions from fossil-fuel-producing countries and companies and use the money to invest in projects in the developing world that reduce greenhouse gas emissions and help build resilience to the impacts of extreme weather.”

“… But contributions to the fund will be voluntary and no mechanism is proposed to force the countries and companies most responsible for greenhouse gas emissions to pay into it…. ….

Azerbaijan is seeking at least $1bn from at least 10 countries and big companies to capitalise the fund. The fund will be headquartered in Baku, the Azerbaijan capital, and its overseeing board will be made up of representatives from the contributors, and will be independent of existing multilateral development banks, including the World Bank…..”

Guardian - Wealthy countries lead in new oil and gas expansion, threatening 12bn tonnes of emissions

“The US and the UK among countries with low dependence on fossil fuels criticized for ‘hypocrisy’ on climate pledges.”

“A surge in new oil and gas production in 2024 threatens to unleash nearly 12bn tonnes of planet-heating emissions, with the world’s wealthiest countries – such as the US and the UK – leading a stampede of fossil fuel expansion in spite of their climate commitments, new data shared exclusively with the Guardian reveals…..” “The new oil and gas field licences forecast to be awarded across the world this year are on track to generate the highest level of emissions since those issued in 2018, as heatwaves, wildfires, drought and floods cause death and destruction globally, according to analysis of industry data by the International Institute for Sustainable Development (IISD).”

“Meanwhile, fossil fuel firms are ploughing more money into developing new oil and gas sites than at any time since the 2015 Paris climate deal….”

- Related Guardian Analysis - ‘Inexcusable’: should climate hypocrites get the petrostates label? “Suggestions definition of petrostate is too narrow as many rich countries that could phase out fossil fuels double down.”

Guardian - Scientists call for greater study of glacier geoengineering options

“Report says serious research needed into risks and benefits as melting could cause devastating sea level rise.”
Our World in Data – series of articles on extreme heat
By H Ritchie.

- **How many people die from extreme temperatures, and how this could change in the future: Part one**

  “Cold deaths vastly outnumber heat-related ones, but mostly due to “moderate” rather than extremely cold conditions.”

- **How many people die from extreme temperatures, and how this could change in the future: Part two**

  “Climate change will drive very unequal impacts, with fewer deaths at higher latitudes but increased heatwave deaths across the tropics.”

- **How can the world reduce deaths from extreme heat? The world will need to adapt to increased temperatures. What can societies do to save lives?** (22 July)

Concluding: “…Air conditioning is slowly moving from a luxury product to a necessity. When combined with the intelligent design of cities — trees, vegetation, narrow streets, reflective roofs, and smart materials — and society-level responses to extreme events, countries can save many lives from heat and make conditions more comfortable in the hottest parts of the world at the same time.”

WHO - Compendium of WHO and other UN guidance in health and environment, 2024 update
[https://www.who.int/publications/i/item/9789240095380](https://www.who.int/publications/i/item/9789240095380)

“This is the 2024 update of the Compendium of WHO and other UN guidance on health and environment. The Compendium is a comprehensive collection of available WHO and other UN guidance for improving health by creating healthier environments. It provides an overview and easy access of more than 500 actions, and a framework for thinking about health and environment interventions....”

Royal Society - Climate change and health in the Sahel: a systematic review

By Daniel Acosta et al.

Nature (News) - Google AI predicts long-term climate trends and weather — in minutes
[https://www.nature.com/articles/d41586-024-02391-9](https://www.nature.com/articles/d41586-024-02391-9)
“Models that are more reliable and less energy-intensive could help us to better prepare for extreme weather.”

“... A computer model that combines conventional weather-forecasting technology with machine learning has outperformed other artificial intelligence (AI)-based tools at predicting weather scenarios and long-term climate trends. The tool, described in Nature on 22 July, is the first machine-learning model to generate accurate ensemble weather forecasts — ones which present a range of scenarios. ...”

TGH - In India, Climate Change Drives Pesticide Use, Harming Farmers’ Health

“As temperatures rise, farmworkers turn to using more potent pesticides, putting themselves at further risk.”

UNICEF report - A Threat to Progress Confronting the effects of climate change on child health and well-being

In case you missed this. “This report aims to provide a comprehensive ‘stocktake’ of the impacts of climate change on children across six major hazards that impact their health and well-being: extreme heat, droughts, wildfires, floods and storms, air pollution and ecosystem changes.”

World Development Perspectives - How much growth is required to achieve good lives for all? Insights from needs-based analysis
by J Hickel et al.

“.... Strategies for development should not pursue capitalist growth and increased aggregate production as such, but should rather increase the specific forms of production that are necessary to improve capabilities and meet human needs at a high standard, while ensuring universal access to key goods and services through public provisioning and decommodification. At the same time, in high-income countries, less-necessary production should be scaled down to enable faster decarbonization and to help bring resource use back within planetary boundaries. With this approach, good lives can be achieved for all without requiring large increases in total global throughput and output. Provisioning decent living standards (DLS) for 8.5 billion people would require only 30% of current global resource and energy use, leaving a substantial surplus for additional consumption, public luxury, scientific advancement, and other social investments.....”

Science (Policy Forum) - Harnessing science, policy, and law to deliver clean air
https://www.science.org/doi/10.1126/science.adq4721
“Despite increasing evidence and awareness, many countries continue to have weak air quality regimes.”

**Covid**

**BBC - What Covid revealed about gender inequality in India**

[https://www.bbc.com/news/articles/c87r0pey80po](https://www.bbc.com/news/articles/c87r0pey80po)

“... A team of 10 researchers from the UK, the US and Europe have studied the mortality impacts of the pandemic in India by sex, social group and age. Their peer-reviewed paper has been published in Science Advances, a US journal. .... “

Among others: “... The researchers also found something which was more worrying. For one, **females experienced a life expectancy decline of one year greater than males. This contrasts with patterns in most other countries and may be due to gender inequality**, say the researchers from University of Oxford, University of California, Berkeley and Paris School of Economics, among others....”

“**Also, marginalised social groups - Muslims, Dalits, and tribespeople - in India saw larger declines in life expectancy compared to privileged upper caste people, exacerbating existing disparities.....**”

- Related: Cidrap News – [Data: COVID shaved 2.6 years from life expectancy—much more in some groups—in India](https://www.cidrap.umn.edu/covid-19/study-pandemic-widened-global-economic-disparities)

**Cidrap News - Study: Pandemic widened global economic disparities**


“**The COVID-19 pandemic hit low-income countries harder than wealthier nations, according to a new study in PLOS One, further slowing progress toward health-related Sustainable Development Goals (SDGs). “**

“On average, the pandemic caused low-income countries to experience an average progress loss of 16.5% across all health indicators, whereas high-income countries have seen losses as low as 3%, the authors said. ......... Interestingly, though high-income countries saw the biggest number of COVID-related deaths and illnesses, low- and middle-income countries have seen more downstream poor health outcomes in the wake of the pandemic, including decreased childhood immunization coverage and impoverishing out-of-pocket healthcare expenses. In middle-income countries, the authors found the most losses in SDG indicators of other infectious diseases. In lower-income countries, losses of 10% or more were seen with maternal-fetal health and environmental risks.

High-income countries saw the most post-pandemic losses in noncommunicable diseases, injuries, and violence. ...”

"**The most significant losses are concentrated in Africa, the Middle East, Southern Asia, and Latin America......**"
BMJ - The polarised discourse around face masks is hindering constructive debate
A Fretheim et al; https://www.bmj.com/content/386/bmj.q1661

“We need open and nuanced discussions about research findings on public health and social interventions.” A view from Norwegian researchers.

Infectious diseases & NTDs

Lancet Infectious Diseases - Alarming Plasmodium falciparum resistance to artemisinin-based combination therapy in Africa: the critical role of the partner drug

« .... A review suggests that the emergence and rapid spread of K13 mutations in east African countries has been facilitated in areas with low transmission and thus, low herd immunity, as in southeast Asia. The use of artemisinin monotherapies is also mentioned as a risk factor. Patients with partial immunity might indeed clear partially drug resistant P falciparum infections, but the K13 mutations are also spreading in high-transmission areas with high herd immunity. We therefore want to highlight the importance of an efficacious partner drug for the prevention of artemisinin resistance .... «

Authors conclude: « The occurrence and rapid spread of partial artemisinin resistance is a major threat to the management and control of malaria, and the health of millions of children, until new alternative treatments to the ACTs are available. The Mitigating Antimalarial Resistance Consortium in South-East Africa initiative including 18 African countries is currently developing optimal treatment strategies to mitigate antimalarial resistance, but this problem also needs broader international recognition, not least within the global antimicrobial resistance initiative.....”

Cidrap News - Global measles cases spiked 140% in 2019 amid falling vaccinations in many nations, study estimates

“A new study from Columbia University shows that measles cases around the world surged 140% from 2010 to 2019, with declining vaccination rates in 59 of 194 nations fueled by socioeconomic factors in some low-resourced countries and vaccine reluctance in wealthier nations. ..... .... The results were published yesterday in the International Journal of Infectious Diseases......”

"Measles cases and deaths increased globally following the disruptions to health services caused by the COVID-19 pandemic," the researchers noted. "Even before the pandemic, measles cases were on the rise, including in countries that had previously eliminated the disease...."
NPR - Dengue fever is — unfortunately — having a banner year. Can it be quelled?

“…. Now, authorities and experts are searching for new solutions to quell the disease. And they agree that the best place to start is in countries that have already been dealing with dengue for decades. While some of those countries are currently struggling to contain their own epidemics, their experience with the disease has helped them cap the number of severe cases and deaths this year. These lessons can provide valuable insights for countries that are newly encountering dengue outbreaks. Countries across Asia — including Malaysia, Singapore, Sri Lanka and Thailand — have all learned the importance of spreading awareness about how to prevent the spread of dengue....” The same goes for Brazil.

Read what they suggest in terms of community engagement programs, health worker education, mosquito management, ...

And a link:

- The Conversation - Leishmaniasis: this neglected tropical disease is spreading fast, and Europe is nowhere near prepared (by F J M Nuncio et al)

**NCDs**

Plos Med (Editorial) - Breaking our daily “ultra-processed” bread
G S H Yeo: https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1004437

“UPFs are the new bad kid on the block when it comes to diet and health. But what are they and is it possible that the UPF concept could be doing more harm than good?....”

BMJ Opinion - Fit for work? The relationship between health and employment will become an increasingly pressing problem
https://www.bmj.com/content/386/bmj.q1612

“The question of fitness for work is most visible in positions of power, but it has widespread relevance, say Lara Shemtob and Rabeea F Khan.”

“... The relationship between health and work will become increasingly relevant across global economies. Our populations are getting sicker, with more people living with long term health conditions and disabilities. Demographic shifts are also pushing up the upper bounds of working age, and many people work well beyond state retirement age—including both US presidential candidates. Employers should invest in a proactive approach to health at work, which will help to contain risk to all stakeholders, including the organisation. ....”
Mental health & psycho-social wellbeing

Lancet (Perspective) - Rochelle Burgess: disrupting the status quo in global mental health

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)01501-0/fulltext

“.... Her vision for the future of global mental health prioritises interventions that “make community-owned responses the norm”. For Burgess “there is much work to be done to move the needle...the conversations around mental health that we need to be having are more structural...and connected to things like the law, colonialism, and indigeneity. A luta continua”.

Data & Society (report) – Medicalizing inequity:
https://datasociety.net/library/medicalizing-inequity/

“The Risks of Financial Wellness for Workers.”

“Financial wellness is a trend that redefines financial status as a form of health that can be improved by healthier habits, choices, and psychology. The popularity of financial wellness reflects the medicalization of inequity, which conceptualizes disparities in power, capital, and status as individual or community health issues to be addressed by insights and practices appropriated from public health and medicine.....”

“Building on a broader push for employers to play an increasing role in public health, workplaces have become targets of financial wellness initiatives. While these programs are touted as supporting employee well-being and addressing economic inequality, treating financial status as a health issue can pose significant risks to workers and society. Drawing from 50 interviews with individuals working in financial reform, labor organizing, law, and public health, Tamara K. Nopper’s report Medicalizing Inequity: The Risks of Financial Wellness for Workers focuses on how such programs encourage workers to monitor their financial wellness while subjecting them to vast amounts of data collection.....”

Social & commercial determinants of health

SS&M - The role of metaphor in the Corporate Political Strategies of Health Harming Industries: Comparing the Concept of Balance in the Gambling and Opioid Industry Discourses

May Cl. van Schalkwyk, Adam Koon et al;

“Many health-harming industries employ similar political strategies and framings. The function of metaphor in industry political discourses is under-researched. Opioid and gambling industry discourses draw extensively on metaphors of balance. Such discourses depoliticize the policy
process and legitimize industry engagement. More research is needed on the functions of metaphors in (health) policy discourse.”

TGH - Alcohol Industry Panics as Healthier Habits Cut Sales
Ted Alcorn; https://www.thinkglobalhealth.org/article/alcohol-industry-panics-healthier-habits-cut-sales

“Industry reps cite a "war on alcohol," but consumer attitudes suggest a cultural shift toward less drinking.” Focus on the US here.

Guardian - Moderate drinking not better for health than abstaining, analysis suggests
https://www.theguardian.com/society/article/2024/jul/25/moderate-drinking-not-better-for-health-than-abstaining-analysis-suggests

“Scientists say flaws in previous research mean health benefits from alcohol were exaggerated.”

And a link:

- UN News - Europe tops the charts for alcohol consumption. WHO calls for urgent action to curb the trend

**Sexual & Reproductive health rights**

KFF - Impact of the Mexico City Policy: Literature Review

Literature review by Jennifer Kates and Kellie Moss.

Guardian Oped - The Republican party remains the party of denying women human rights
https://www.theguardian.com/commentisfree/article/2024/jul/25/republicans-against-womens-rights

By R Solnit. “The GOP ticket of JD Vance and Donald Trump, from “menstrual surveillance” to sexual assault, has made itself clear.”
Science (News) - Virus spreading in Latin America may cause stillbirths and birth defects


“Brazilian health ministry tells doctors to closely monitor pregnant women infected with the little-known Oropouche virus.”

Neonatal and child health

BMJ Editorial - Climate change has serious implications for children’s brain health

https://www.bmj.com/content/386/bmj.q1588

“Child specific adaptation measures should be a global priority.”

“A landmark session at the UN Framework Convention on Climate Change on 4 June 2024 focused exclusively on the disproportionate effects of climate change on children. Although this was a promising first step, it must now be followed by concerted, system-wide actions to protect them.”

“The developing brains of children are particularly susceptible to the effects of climate change, including rising global temperatures, extreme weather events, and air pollution. This is because of their rapid physical and brain development, vulnerable blood-brain barrier and placenta, immature immune systems, and limited ability to regulate body temperature. Brain health, encompassing both neurological and mental health, is crucial during these formative years, as it sets the foundation for future cognitive function and overall wellbeing....”


https://www.propublica.org/article/baby-formula-regulation-biden-administration-europe-taiwan

“U.S. officials have challenged baby formula regulations in more than half a dozen countries, sometimes after manufacturers complained. Critics say the efforts are undermining public health.”

Lancet Viewpoint - Differentiating mortality risk of individual infants and children to improve survival: opportunity for impact

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)00750-5/abstract

by J A Berkley et al.

“Children are not born equal in their likelihood of survival. The risk of mortality is highest during and shortly after birth. In the immediate postnatal period and beyond, perinatal events, nutrition,
infections, family and environmental exposures, and health services largely determine the risk of death. We argue that current public health programmes do not fully acknowledge this spectrum of risk or respond accordingly. As a result, opportunities to improve the care, survival, and development of children in resource-poor settings are overlooked.

**Access to medicines & health technology**

**Lancet GH - Access to highly effective long-acting RSV-monoclonal antibodies for children in LMICs—reducing global inequity**

Heather J Zar et al; (with among the authors, some members of the Medicines Patent Pool); [https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(24)00258-4/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(24)00258-4/fulltext)

“More than 95% of RSV-associated deaths occur in LMICs, with more than two-thirds occurring outside a health facility. A strategy for preventing severe RSV-LRTI in infants in LMICs would have a major impact on child health given the high burden of disease, associated mortality, and limited access to health care. **Two new strategies to prevent RSV-LRTI in infants and young children are now available:** a maternal prefusion RSV vaccine, RSVpreF, and a long-acting RSV monoclonal antibody (mAb), nirsevimab, given intramuscularly as a single dose to a child before or during the RSV season.”

“... Population-based effectiveness studies of nirsevimab given to all infants born in the RSV season, with a catch-up campaign for infants born before the RSV season or to children at high-risk aged up to 2 years, confirm that this intervention is highly effective. ... Nirsevimab has been approved in at least 35 high-income countries; however, no LMIC has introduced this intervention except for China, an upper-middle income country. This situation exposes glaring disparities in early access and emphasises the importance of access strategies for RSV prevention for all infants including mAbs in LMICs.”

“Affordable access to RSV preventive mAbs might be challenging in LMICs. However, public-health-oriented access-to-medicine mechanisms, such as voluntary licensing and technology transfer to multiple manufacturers, have been successful in ensuring at-scale access to affordable therapy in LMICs (eg, for WHO-recommended first-line HIV antiretrovirals the price dropped from several thousand US$ per year to less than $45 per year). **Long-acting RSV-mAbs might provide a unique opportunity for adoption in LMICs and an ideal proof of concept of a high-volume model such as the one that enabled broad access to HIV treatment.**”

“... Administration of single-dose RSV preventive mAb to infants could leverage existing national immunisation programmes, many of which already administer a birth BCG vaccine or other vaccines in early infancy. A recommendation by WHO for the use of mAbs for RSV prevention in children is key to promote local and regional approvals and procurement in LMICs. A WHO recommendation would also facilitate the development of a regulatory pathway through WHO prequalification, which might be necessary for biosimilar manufacturers. Supporting regulatory coordination might speed up approval procedures, especially if accompanied by technology transfer maximising similarity with the originator product. Public sector finance and procurement mechanisms, such as Gavi, the Vaccine Alliance, could play a crucial role in facilitating access and encouraging the adoption of biosimilar products in LMICs that benefit from Gavi funding.”
Reuters - Drug giants eye China for deals despite growing Sino-US tensions

Reuter;

“Bristol Myers Squibb, Sanofi looking at China M&A -employees; AstraZeneca, Novartis have done China deals this year; Political risks are a consideration -analysts.”

“Some of the biggest global drugmakers, undeterred by mounting Sino-U.S. tensions, are scouring for deals in China to replenish drug pipelines and boost their presence in the world’s second-biggest pharmaceutical market, industry executives and investment bankers said. Several major deals have already been completed this year, including AstraZeneca’s $1.2 billion purchase of China-based cell therapy developer Gracell Biotechnologies and Novartis’ acquisition of remaining shares of kidney disease therapy developer SanReno Therapeutics for an undisclosed amount.”

Nature - A roadmap for affordable genetic medicines

Kliegman M et al; Nature;

“Nineteen genetic therapies have been approved in the United States, including the breakthrough CRISPR genome-editing therapy for sickle cell disease, Casgevy. But most people will never be able to afford them — Casgevy, for example, costs US$2.2 million per patient. A task force of genomic-therapy luminaries shares its suggestions to increase affordability and access, including a pricing structure that could reduce per-patient cost tenfold. …”

FT - Diabetes device maker Embecta explores sale amid slowing profits

Diabetes device maker Embecta explores sale amid slowing profits (ft.com)

“Shares are down 70% for the world’s largest maker of insulin pen needles and syringes since it was spun off.”

“Diabetes device maker Embecta has hired advisers to explore a possible sale, following two years of lacklustre share price performance after the medical technology business was spun out of health tech giant Becton Dickinson. Embecta, which is the world’s largest maker of disposable insulin pen needles and syringes for diabetics, tapped advisers from Centerview Partners in recent months to guide a possible sale of the business, according to two people familiar with the matter. The medtech business, which sells about 8bn syringes and needle pens annually to more than 100 countries worldwide, could be an attractive takeover target for private equity because of its low market value and similar profile to other companies that have attracted recent buyout interest, two people added.”

Journal of Pharmaceutical Policy & Practice - Availability and pricing of insulin and related diagnostics in South Africa


By Samirah Bayat et al.
Axios - Experimental Lyme disease vax passes milestone

“A Pfizer-led effort to develop the first new Lyme disease vaccine in more than two decades passed a key milestone last week, putting the drug on a timeline to potentially hit the market in 2026 if trial results are favorable.....”

FT – GSK, Pfizer and Moderna face RSV vaccine sales slump
https://www.ft.com/content/8c21c662-b5c7-401a-b880-17905e15e2a5

“Pharma groups could see almost threefold drop in demand due to US health official decision, says Airfinity.”

“GSK, Pfizer and Moderna together face an almost threefold reduction in adult respiratory syncytial virus vaccine sales in the US, according to new forecasts, after a health committee narrowed its recommendation for the drug’s use.....”

CFR - American Pharmaceutical Companies Aren’t Paying Any Tax in the United States

“The Tax Cuts and Jobs Act (TCJA) has substantially reduced the domestic tax paid by American pharmaceutical giants.”

Human resources for health

Human Resources for Health - Increasing the number of midwives is necessary but not sufficient: using global data to support the case for investment in both midwife availability and the enabling work environment in low- and middle-income countries

By a Nove et al.
Decolonize Global Health

World Medical & Health Policy - Problematizing empowerment in global health: Disrupting universalisms and challenging power inequities

“This commentary is a call for problematizing the concept of “empowerment” as it is often used in global health. The authors urge that scholars and policymakers use the concept as it is defined in specific contexts, particularly within communities in low to middle-income countries. The authors also interrogate universalized assumptions about the use of “empowerment” as a political concept, as well as the use of social categories such as “women”. Finally, the authors challenge and complicate the notion that empowerment is a concept which can be delivered from donors in high-income countries to so-called disempowered recipients in low-income contexts.”

Science News - Study on braiding Indigenous and Western knowledge collapses amid acrimony
https://www.science.org/content/article/study-braiding-indigenous-and-western-knowledge-collapses-amid-acrimony

“After dispute over “coproduction,” U. S. National Academies takes unprecedented step of stopping $2 million study.”

Miscellaneous

Stat - Kamala Harris, endorsed by Biden to replace him, is left of the president on health care

“President Biden endorsed Kamala Harris to replace him atop the Democratic ticket. She’s taken more liberal positions on health care.”

- And via the NYT - Here’s Where Kamala Harris Stands on Climate

“....If she ends up as her party’s nominee, she will run on a strong record on climate change and the environment. As a senator, Harris co-sponsored a clean-energy measure known as the Green New Deal and as vice president, she helped to pass the suite of climate investments bundled as the Inflation Reduction Act. “....”
Global Policy - New estimates of the cost of ending poverty


“Andy Sumner and Arief Anshory Yusuf explore what it means and how much would it cost?”

“In a new UNU-WIDER paper, which provides background for this year’s OECD Development Cooperation Report, we take a closer look at the end of poverty, what it really means, what it would cost, and how a new approach can improve the tailoring of development cooperation to different contexts…..”

Project Syndicate - As Disinformation Thrives, Democracy Dies


“A new report from the OECD Development Assistance Committee shows how foreign-aid spending on public-interest journalism remains shockingly low, even though policymakers have been lamenting the crisis jeopardizing independent media for well over a decade. A shift in donor strategy is long overdue.”

“Last year, OECD countries collectively allocated more than $220 billion in official development assistance (ODA). But a rising tide of disinformation is undermining the effectiveness of these investments……”

Project Syndicate - Rebooting the Sustainable Development Goals


“…. As co-chairs of 17 Rooms, a partnership between the Brookings Institution and The Rockefeller Foundation, we have worked with several dozen groups of extraordinary professionals around the world on initiatives related to all 17 goals. Having watched them experiment with various approaches, we have learned a few lessons about how to drive positive change…..”

PS: This commentary draws on insights generated through the 17 Rooms Initiative, convened by the Center for Sustainable Development at Brookings and The Rockefeller Foundation.

Lancet Infectious Diseases (Letter) - Artificial intelligence to transform public health in Africa


“…. Here we outline four areas where AI can complement and modernise infectious disease detection and surveillance in Africa…….”
Devex - 4 practical applications of AI in global development

(gated) “For Devex Pro week, experts from organizations including the Gates Foundation, UN Women, and OpenAI did live demos of practical applications of AI in global health and international development.”

Papers & reports

Handbook of Health System Resilience

Check it out.

BMJ Opinion - We should care about our caring economies
https://www.bmj.com/content/386/bmj.q1662

“Building caring economies is a necessary means to achieve economic and gender justice globally, says Helen Pankhurst.”

“... This year is set to be the “biggest election year in history,” with national and regional elections spanning over 50 countries and 4.2 billion people. In this context, it is imperative that incoming governments worldwide and in the United Kingdom prioritise building caring economies by ensuring policy commitments and investments toward quality, affordable, and accessible care services for all. More specifically, governments, including our own in the UK, can promote gender and economic justice by investing in improving and building caring economies that uphold the 5Rs of care to meet all our caring needs as a population. The 5Rs state that we must recognise and reward the major societal contributions of all care work, redistribute and reduce the amount of unpaid care work, and promote the representation of carers and organisations supporting their needs. A new report by CARE International and the Cherie Blair Foundation for Women proposes how these economies could be established by governments, decisionmakers, and the private sector.....”

“... The Generation Equality Action Coalition on Economic Justice and Rights recommends that governments must commit 10% of the public budget—sourced from progressive taxation and official development assistance—to care, social services, and social protection. They must also protect these sectors from cuts during times of crisis, to prevent further rollbacks on gender equality.....”
IJHPM - Factors of Power and Equity: Enhancing Our Health System Resilience Research Frameworks; Comment on “Re-evaluating Our Knowledge of Health System Resilience During COVID-19: Lessons From the First Two Years of the Pandemic”

Steph Topp; https://www.ijhpm.com/article_4622.html

“The concept of health system resilience has gained prominence in global health discourse, especially in response to the Ebola and COVID-19 pandemics. This commentary responds to Saulnier et al.’s 2022 review, which used the Dimensions of Resilience Governance framework to synthesize of COVID-19 related health system resilience research and explore possible conceptual gaps. The review’s findings reveal elements missing from the original framework which underscore the social nature of health systems. This commentary links the review’s empirical findings to nascent theorization of health systems resilience to develop an adapted Framework for Exploratory Research on Health Systems Resilience. A key contribution of the adapted framework is to make explicit the role of actor power and highlight more clearly the distinctions between: i) research focused on identifying the capacities needed to enable adaptation; ii) research focused on the actors whose interests and choices determine which adaptive strategies are used, and iii) research that assess the outcomes of such strategies.”

BMC Health Services Research - Learning health systems on the front lines to strengthen care against future pandemics and climate change: a rapid review


by Samantha Spanos.

Tweets  (via X & Bluesky)

Shaily Gupta

“While most of new ARVs needed for HIV treatment are now affordable, the battle is on for calling on corporations to make new PrEP drugs affordable, available and accessible for all. CAB-LA and Lencapavir are expected to be talk of the town at Munich this week. #AIDS2024”

Seye Abimbola

“There’s been remarkable silence from academic journals about this year’s Impact Factor numbers released weeks ago. This year’s numbers are, especially for big journals, significantly down from previous years’ Covid-19-induced inflation.....”

Kai Kupferschmidt

““The political commitment is really getting weaker and weaker”, @WHO  director general @DrTedros warns at @AIDS_conference #aids2024 when asked why it looks like the world won’t meet 2025 and 2030 targets on HIV/AIDS.”
Ben Verboom (at PHM webinar)

“I guess the INB is kind of like a (dysfunctional) family”