

# IHP news 828 : One World for Health?

( 9 May 2025)

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,

As this was yet another crazy week in the world (*and on the personal 'work/commute' front 😊*), and we have 2 Featured articles this week, I'll keep it short in this week's intro.

With many eyes already on the now fast approaching [78th World Health Assembly](#) (themed this year "**One World for Health**"), we also pay attention to a pivotal **Global Fund Board meeting** (7-9 May) in this week's issue, there's increasing coverage, advocacy and analysis on the **Fourth International Conference on Financing for Development (FfD4)** taking place in Seville (Spain) end of next month, and much more.

In a world of cascading crises feeding upon each other (and often eating up what's left of 'fiscal space'), I doubt there'll be a '**new normal**' any time soon. Nevertheless, it's clear that various stakeholders and actors are already frantically trying to think through (and preparing for) such a 'new world', whether it's [western development actors](#) (*this week, the UK suggested a global conference in autumn as part of "a long overdue conversation about the future architecture of aid"*), [stakeholders in the SRHR community](#), the [Global Fund](#), UNAIDS, [the Gates Foundation](#) (*at the 25<sup>th</sup> anniversary of the Foundation on Thursday, a trademark optimistic Bill came with rather remarkable sunseting news (by 2045), while intending to turbo-charge his global health drive till then*), Africa CDC, and [many others](#). Some, like Paul Kagame, seem to be almost effortlessly "[adapting](#)" to the new, even nastier world.

Against that backdrop, the [World report on social determinants of health equity](#), launched on Monday, came as a rather timely reminder, even if the recommendations (*like investing in universal public services, tackling structural discrimination and determinants and impacts of conflict, emergencies and migration, while also steering megatrends such as climate change and digitalization towards equity*) feel like a really tall order these days, even more so than in 2008 when the WHO Commission on Social Determinants of Health released its report, laying out targets for 2040.

Earlier this week, **Madhukar Pai** and **Katri Bertram** reminded us all of a few vital building blocks if we want to reach one day the 'One World for Health' nirvana: respectively the need to ['Make Compassion Great Again'](#) and the equally urgent need to ["denormalize dehumanization"](#). As Pai put it, "*our ability to survive the polycrisis hinges upon our ability to rediscover compassion for our fellow humans, and reaffirm human rights.*"

That's exactly right, even if it's easier said than done. But at the very least, we know what fighting for in the coming time. As – *I'm sure you guessed 😊* – I really don't share Bill's optimism for the next 20 years.

Enjoy your reading.

Kristof Decoster

## Featured Articles

### Maternal Mental Health in India Through the Three Delay Framework

Manya Sachdeva

*Maternal health is [defined](#) as the health of women during pregnancy, childbirth, and post-pregnancy. Although some progress has been made in recent decades, it remains a significant public health problem [in India](#). **Maternal mental health** is obviously also part of maternal health, though it gets far less attention in my country. This article will examine maternal mental health in India and the many barriers to adequate mental healthcare for (expecting) mothers through the lens of the [Three Delay Framework](#).*

#### Maternal health in India – a few stats

While maternal health [remains a key public health issue in India](#), within the country there are major inter-state disparities. States like Uttar Pradesh, Assam and Jharkhand record high [maternal mortality rates](#) (MMR 197;215; 71 respectively) compared to southern states such as Kerala (43) and Tamil Nadu (60). Health service utilisation also remains extremely poor for many women, mainly due to lack of decision making abilities. In LMICs, the social status of the women impacts their health - usually measured by indicators such as weight during pregnancy, burden of anemia, and health status of the child. Sadly, India is no exception.

#### Maternal Mental Health

While the physical health of far too many Indian women remains neglected, a “new” challenge that arises is their mental health.

Worldwide, with 140 million births a year, [about 10% of pregnant women and 13% of women suffer from some mental health disorder](#), primarily depression. [Perinatal mental illness](#) is a profound complication of pregnancy and the postpartum period but still goes unnoticed in many resource-scarce countries, including India. The most common disorders experienced by pregnant women include [anxiety](#), [depression](#), [mood disorders](#), [postpartum depression](#), and feelings of isolation along with Premenstrual Dysphoric Disorder that is also a rising concern.

In India, pregnant women often prioritize their families' well-being over their own, paying little heed to their mental well-being. They are often subject to family related and/or marital stress while navigating through life-altering phases such as pregnancy, childbirth, lactation, and (first) menstruation with minimal institutional or emotional support. Also, psychological vulnerability is

exacerbated by the persistent prevalence of child marriage and early pregnancy, especially in South Asia.

### Applying the Three Delay Framework

Thaddeus & Maine's [Three Delay Framework](#) (1994) delineates the impediments to receiving healthcare from a women-centric lens. They are: (1) delay the decision to seek care; (2) delay arrival at a health facility; and (3) delay the provision of adequate care.

Below we apply the framework on maternal mental health in the Indian context.

**Delay of Seeking Care:** How many of our mothers, house helps, or even female relatives will accept that they have a mental health concern? Most women ignore their mental health from pregnancy through early motherhood, afraid to show anxiety, irritability, or a need to withdraw, even from their newborn. Other issues revolve around the cultural beliefs around seeking mental health support, being seen as an “[unfit](#)” mother, or the general lack of awareness after being told that it is all normal to feel such things.

**Delay of Reaching a Service Provider:** Then there's the distance to the facilities, cost of taking a session and transportation. Moreover, in rural India, women still ask for permission from their in-laws and husband before seeking medical care. Last but not least, the responsibility of taking care of the house falls upon the women – which also doesn't help when one needs care.

**Delay in Receiving Care:** As per India's [National Mental Health Survey 2015-16](#), there is less than 1 psychologist per 100000 people. In such conditions, even if there is awareness, how will a person then access care? A brief visit to any of the rural area's Health and Wellness centers in India would show us the “help” pregnant women receive during and post their pregnancy. Without training to cope with women's emotional and mental well-being, physicians and nurses concentrate on mere checkups, and overworked Auxiliary Nurse Midwives (ANMs) and Medical Officers quite frequently work out their frustrations on patients—disregarding, trivializing, and neglecting their care, and in general not going beyond providing [superficial level care](#).

### It takes a village to raise a child!

Maternal and child health are considered vital building blocks for the rest of life. Inadequate care and support during these important first months (sometimes years), leads to further physical and mental health problems for new mothers, and cognitive impairment amongst children. In India there are no schemes or policies that provide mental healthcare to women. India's 2014 [National Mental Health Policy](#) displays a very superficial understanding of mental health issues.

While there has been much progress on improving the maternal health of women through various schemes, frontline health workers, and a more targeted approach, maternal mental health still remains largely unspoken of. Though overburdened, ANMs and ASHAs are the most trusted supporters of women in their communities, but not as medical diagnosticians, rather as readily available confidants in times of urgent need.

To offer private emotional surveillance over time, maternal and child care policies need to extend beyond anemia and low birth weight. They need to extend mental health screening via ANMs and ASHAs by educating them to document distress indicators in their government apps. They can also

help normalize the emotional challenges of pregnancy as well as bring out its beauty by sharing their own maternal experience. In addition to seamless referral procedures for more severe cases, policies should include unobtrusive counseling at ANC visits or ultrasounds—to make them feel that they are not alone!

Therefore, the beautiful and honoring phase of pregnancy and childbirth requires more than just routine checkups, it also requires emotional checkups of the mother, something that the developing countries fail to take into account.

On the author:

**Manya Sachdeva** is a public health professional passionate about bridging the gap between health (especially mental health) and public policy and driven to create lasting change through community-focused initiatives and integrating mental healthcare into primary care.

## How the Gates Foundation works to influence European countries

*Antoine de Bengy Puyvallée & Katerini Storeng (University of Oslo), based on an article co-authored with Simon Rushton (University of Sheffield).*

Global health is currently facing a significant crisis. Substantial and abrupt funding cuts from both US and European donors threaten essential programs and organizations, including the World Health Organization. While private foundations like the [Gates Foundation](#) and the [Wellcome Trust](#) have signaled their inability to fully bridge these financial gaps, cuts from sovereign donors allow these foundations to increase their share of global health funding – and their influence. This shift demands scrutiny.

Our [recent research article](#) examines the Gates Foundation’s strategic efforts to extend its political presence in Europe. We found that the Foundation has forged strong ties with government entities, public administrations and many organizations involved in global health and development. This results in a concentration of power in the hands of a private foundation, raising pressing normative questions about foundations’ influence on public policy. This blog summarizes our findings and considers their broader implications.

### Building an international bureaucratic infrastructure

The Gates Foundation, headquartered in Seattle, has established a substantial bureaucracy with over 2000 staff globally, including offices in London and in Berlin. Much like embassies, the Foundation’s regional offices aim to build relationships with governments, local partners, and provide policy intelligence “from the ground,” reporting to the Foundation’s global policy and advocacy division in Seattle.

## Engaging with government officials

A key aspect of the Foundation's strategy is fostering consistent interactions with elected officials and state bureaucracies. Over the past decade, this has involved an average of ten meetings annually with UK ministers and secretaries of state, and nearly 100 meetings with the European Commission. Bill Gates has met with every sitting French president over the past 25 years. Beyond these high-level meetings, Foundation staff frequently engage with bureaucrats on a regular basis, sometimes establishing Memoranda of Understanding to collaborate on shared interests.

## Funding advocacy and influencing policy

The Gates Foundation extends its impact beyond direct government engagement by funding an extensive network of stakeholders involved in global health and development. From 2007 to 2024, it allocated over \$400 million in “policy and advocacy grants” to a wide range of NGOs, media outlets, think tanks, and universities. These funds are aimed at developing policy proposals, shaping public opinion, and advocating for policies and initiatives aligned with the Gates Foundation’s priorities.

Several NGOs, like Save the Children (UK), DSW (Germany), and Focus 2030 (France), have emerged as preferred advocacy partners, working closely with other Gates-funded global advocacy organizations such as the One Campaign and Global Citizen.

## The implications of network diplomacy

Our research shows that the Gates Foundation’s engagement in Europe represents a form of [“network diplomacy”](#), whereby powerful actors utilize various nodes of their networks to achieve policy goals. By funding entire policy ecosystems, the Foundation wields unprecedented influence over the policy landscape.

This concentration of power in the hands of a private actor raises important normative questions. Should a private foreign actor cultivate close diplomatic ties with governments in other jurisdictions while concurrently working with other stakeholders to steer policy? Are existing regulations adequate for ensuring transparency and accountability in these interactions? Is there still space for alternative policy proposals if entire ecosystems are aligned with the “Gates approach” to solving the world’s problems? Moreover, if everyone becomes a partner of the Foundation, who’s left to hold the Gates Foundation accountable?

## Towards philanthropy-led global health?

European countries slashing their ODA budgets is bad news for the Gates Foundation, which relies on leveraging these funds to advance its objectives. Ironically, these cuts may solidify alignment between the Foundation and European countries, potentially ensuring continued funding for the Foundation’s key initiatives like Gavi and the Global Fund, while sidelining support for programs aimed at structural and health systems interventions.

Philanthropic foundations, particularly the Gates Foundation, will likely play an increasingly crucial role in future global health efforts. The Gates Foundation just announced the opening of a new regional office in Singapore [“to access the science and to partner with the philanthropic community”](#). Last week, a consortium of philanthropic organizations launched [a new fund](#) to combat

maternal and newborn mortality in sub-Saharan countries, independent of sovereign donors. After the era of public-private partnerships dominating global health governance, we may be heading towards philanthropy-led global health, which raises important issues regarding the role of private power over global public health.

[Read the full paper in Globalization and Health.](#)

## Highlights of the week

### The Changing Mindsets initiative

#### Lancet – The Changing Mindsets Initiative

A Ghaffar, S Abimbola et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)00578-1/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)00578-1/fulltext)

“The past 50 years have seen remarkable improvements in health globally. But people in lower-income majority world countries still have poorer health and health care than those in much higher-income minority world countries. This **disparity is sustained in part by the disproportionately influential mindsets of academics and practitioners from minority world countries.....**”

“**There are also the mindsets of leaders in majority world countries who follow minority world country agendas without pushback or fail to serve their populations.** But **change is possible:** these leaders can create opportunities even amid uncertain global circumstances. **We propose a collective initiative, the Changing Mindsets Initiative, with three strategic priorities.** First, assisting and enabling emerging leaders, especially from majority world countries, to chart paths that serve their populations’ best interests. Second, evidence-based critical analysis that constructively challenges the global health community, including WHO, to reorient health knowledge creation, application, and dissemination globally. Third, catalysing collective action by developing and institutionalising new approaches to health research that are responsive to the needs of majority world countries....”

### Global Fund Board Meeting (7-9 May)

Stay tuned for the press release from the Global Fund later today or else tomorrow.

**GFO (special issue) - Upcoming 53rd Global Fund Board meeting: what to watch out for?**

<https://aidspan.org/Blog/view/32500>

Excellent **curtain raiser by the Global Fund Observer**, published before the Board Meeting. Excerpts from the introduction:

**“This special issue dedicated to the 53rd Board Meeting, to be held from May 7 to 9, 2025, explores the growing tension between strategic ambitions and budgetary constraints within the Global Fund. Balancing hope, warnings, and ethical dilemmas, it highlights the critical issues that will shape the decisions ahead.”**

**“From May 7 to 9, 2025, Geneva will host the 53rd Board Meeting of the Global Fund to Fight AIDS, Tuberculosis, and Malaria. Judging by the draft agenda, the event promises to be pivotal. And the heart of the matter is hard to miss: the future of the Global Fund now hangs in the balance -caught between bold ambitions and tightening financial constraints.”**

**“The Eighth Replenishment campaign, launched in February 2025, aims to raise a formidable \$18 billion for the 2026–2028 cycle. Yet behind this bold target, a more sobering narrative is unfolding: that of an institution increasingly expected to perform miracles with diminishing resources. Structural expenditures are being deferred. Investments in research and infrastructure are on hold. What might seem like prudent fiscal stewardship under normal conditions reveals itself, under scrutiny, as a form of silent erosion. Programs implemented by frontline NGOs are already feeling the tremors of this austerity....”**

**“... In response to this looming crisis, civil society has begun to stir. On March 11, 2025, the Global Fund Advocates Network Africa launched the "One World, One Fight" campaign, a clarion call for the full replenishment of the Global Fund. More than a fundraising effort, the campaign repositions African leadership at the center of the global health narrative. It champions domestic health investment not as a contingency plan, but as a foundational pillar. .... The questions of equity and responsibility are nowhere more glaring than in the ongoing struggle to deploy malaria vaccines in Africa. While wealthy nations swiftly adopt and fund cutting-edge vaccines, African countries are still asked to weigh their cost-effectiveness—an insidious euphemism that belies the deeper inequity of the global health economy. Proven, effective tools are withheld by fiscal hesitations dressed as rational governance.....”**

But do read the GFO newsletter issue in full. Among others:

- [Global Fund Board: Presentation of the provisional agenda for the meeting from 07 to 9 May 2025](#)

**“... outlines the agenda by day, highlighting key sessions categorized as informational, input-seeking, or decision-making. The article emphasizes discussions on strategic risk, health system strengthening, governance, and the upcoming 8th replenishment campaign. It concludes by underscoring the likely impact of the suspended U.S. aid and the critical importance of securing future funding - a looming challenge that may overshadow formal proceedings.”**

- [Is the Global Fund shifting to austerity mode? The shock measures worry frontline implementers](#)
- [One World, One Fight campaign: Civil society mobilizes for Global Fund Replenishment](#)

# World report on social determinants of health equity

## WHO (report) - Health inequities are shortening lives by decades

<https://www.who.int/news/item/06-05-2025-health-inequities-are-shortening-lives-by-decades>

WHO Press statement on the new World Report on social determinants of health equity.

**“A global report published by the World Health Organization (WHO) highlights that the underlying causes of ill health often stem from factors beyond the health sector, such as lack of quality housing, education and job opportunities. The new World report on social determinants of health equity shows that such determinants can be responsible for a dramatic reduction of healthy life expectancy – sometimes by decades – in high- and low-income countries alike. For example, people in the country with the lowest life expectancy will, on average, live 33 years shorter than those born in the country with the highest life expectancy. The social determinants of health equity can influence people’s health outcomes more than genetic influences or access to health care.....”**

**“.... The *World report on social determinants of health equity* is the first of its kind published since 2008 when the WHO Commission on Social Determinants of Health released its final report laying out targets for 2040 for reducing gaps between and within countries in life expectancy, childhood and maternal mortality. The 2025 world report, shows that these targets are likely to be missed.”**

**“Although data is scarce, there is sufficient evidence to show that health inequities within countries are often widening. WHO data cites that children born in poorer countries are 13 times more likely to die before the age of 5 than in wealthier countries. Modelling shows that the lives of 1.8 million children annually could be saved by closing the gap and enhancing equity between the poorest and wealthiest sectors of the population within low- and middle-income countries. The report shows that while there was a 40% decline in maternal mortality globally between 2000 and 2023, low- and lower-middle-income countries still account for 94% of maternal deaths.....”**

**“.... Currently, 3.8 billion people worldwide are deprived of adequate social protection coverage, such as child/paid sick leave benefits, with direct and lasting impact on their health outcomes. High debt burdens have been crippling the capacity of governments to invest in these services, with the total value of interest payments made by the world’s 75 poorest countries increasing fourfold over the past decade.....”**

**With 4 action areas:** (1) address economic inequality and invest in social infrastructure and universal public services; (2) overcome structural discrimination and the determinants and impacts of conflicts, emergencies and forced migration; (3) manage the challenges and opportunities of climate action and the digital transformation to promote health equity co-benefits; and (4) promote governance arrangements that prioritize action on the social determinants of health equity, including maintaining cross-government policy platforms and strategies, allocating money, power and resources to the most local level where it can have greatest impact, and empowering community engagement and civil society.

- Coverage via [HPW – Range of Social Issues Are More Important Than Genes for Citizens’ Health](#)



“... **Dr Etienne Krug, director of the WHO’s Social Determinants of Health department**, said that **“broad societal factors” are more important than our genes for health** – including people’s level of education and employment , structural discrimination like racism and gender inequality, weak public services, social isolation and loneliness, climate change, access to digital systems and conflicts and displacement..... **Where a person lives in a country** also affects their health. Over half the world’s population currently resides in cities, and approximately a quarter of the global urban population lives in slums..... **Air quality** is also an important determinant of health, with the combined effects of ambient air pollution and household air pollution associated with almost seven million premature ....”

PS: “..... **The report also points to four health-harming commercial actors – junk food and drinks, fossil fuels, alcohol and tobacco** – pointing out that these **account for at least a third of global preventable deaths**, collectively in 2021 causing 19 million deaths annually.....”

“... **“Countries are facing serious challenges when it comes to fiscal space, meaning there’s inadequate resources for universal public services such as social protection, housing, education and health,”** said **Dr Sudhvir Singh, unit head for equity and health in WHO’s Department of Social Determinants of Health**. “We have a current spike of inflation and reduced development assistance for health and development, but we also have **an incredible challenge with debt distress**. Over the last decade, the total value of debt in the world’s 75 poorest countries and interest payments has quadrupled,” said Singh.....”

- Related [Opinion in BMJ – Call to action on social determinants of health](#) (by **M Marmot** et al)

**Putting the new report in the perspective of the 2008 report.**

**“Social injustice is killing people on a grand scale”** was the rallying cry of the **WHO Commission on Social Determinants of Health (CSDH), published in 2008**. It remains appropriate to the World Health Organization’s (WHO) new World Report on Social Determinants of Health Equity, published on 6 May 2025. .... **The CSDH laid out ambitious health targets for reductions in health inequalities by 2040, underpinning its title, Closing the Gap in a Generation**. The new report shows **welcome progress, but with much still left to do. ....”**

“..... **The CSDH had three principles of action:** improve the conditions of daily life; tackle inequities in power, money, and resources; measure the problem, evaluate action, expand the knowledge base, develop a workforce, and increase public awareness. **There has been definite progress on the third of these; a mixed picture on the first two. ....”**

Marmot et al conclude: “... **This new report is a timely and much needed reminder to the global community that to improve health equity we must improve society. Health equity is not just for Ministries of Health**. The WHO is calling for collective action from national and local governments and leaders within health, academic, research, civil society, alongside the private sector. **It is time to make equity of health and wellbeing a central goal of society.”**

## Run-up to the 78<sup>th</sup> World Health Assembly (19-27 May)

<https://www.who.int/about/governance/world-health-assembly/78th-world-health-assembly>

- Some of the **main documents** are already available here:  
[https://apps.who.int/gb/e/e\\_wha78.html](https://apps.who.int/gb/e/e_wha78.html)

Among others: [Sustainable financing: WHO investment round Report by the Director-General](#)

- The WHO webpage also has **info on side events** (both [official ones](#) and others).

## WHO - The Seventy-eighth World Health Assembly convenes 19-27 May, 2025

[https://hq\\_who\\_departmentofcommunications.cmail19.com/t/d-e-sduikdk-ikudkhluul-yd/](https://hq_who_departmentofcommunications.cmail19.com/t/d-e-sduikdk-ikudkhluul-yd/)

This year's theme: **One World for Health.**

**“Member States will review the progress achieved during the past two years, including the results report, the last under the Triple Billion General Programme of Work 13. “**

**“Discussions will be forward looking, to focus on prioritization of activities as well as looking at the future** with the approval of the first full Programme Budget 2026-2027 under WHO's Fourteenth General Programme of Work (GPW14), WHO's strategy for global health for 2025 - 2028. The Health Assembly will be invited to confirm the scheduled increase in the Assessed Contribution as part of WHO's journey towards sustainable financing.”

**“The Assembly will also consider the proposal by the [Intergovernmental Negotiating Body](#) to adopt the WHO Pandemic Agreement. In addition, the Agenda of this year Assembly contains **over 70 other Items.....****

## G2H2 Policy debates: People, Power & Politics in Global Health (12-16 May)

<http://g2h2.org/posts/may-2025/>

**Online platform** for civil society to exchange views, share advocacy agenda and catalyze attention on critical issues. Check out the **webinar sessions**.

## 25th anniversary of launch Gates Foundation: sunsetting by 2045

**Stat - Bill Gates to accelerate spending at his foundation — then wind it down**

<https://www.statnews.com/2025/05/08/bill-gates-foundation-accelerates-donations-plans-to-give-200-billion-by-2045/>

“Philanthropist’s plan, which calls for charity to shutter in 2045, comes as global aid sphere reels from U.S. disruptions.”

**“Philanthropist Bill Gates announced Thursday that he will wind down his massive charity in 20 years, doubling spending over that time to accelerate the work it hopes to achieve.** Gates made the announcement **on the 25th anniversary of the launch of the Gates Foundation**, the third largest player in international philanthropy. **He said the foundation would spend \$200 billion between now and 2045, when its operations will wind down.** The charity has spent more than \$100 billion since its inception — on issues including global health, development, gender equity, and other work..... “

Both the current very dire situation in the world (including in global health financing) and the confidence that the next 20 years will be years to fully capitalize on some of the health tech breakthroughs of the past years (or in the pipeline) and ‘harvest’, seem to have played a role in Bill’s decision – who is remarkably optimistic about the next twenty years, I have to say...

- More detail via **Gates’ blog – The last Chapter: [My new deadline: 20 years to give away virtually all my wealth](#)**

“..... **Over the next twenty years, the foundation’s funding will be guided by three key aspirations:** 1. No mom, child, or baby dies of a preventable cause. 2. The next generation grows up in a world without deadly infectious diseases. 3. Hundreds of millions of people break free from poverty, putting more countries on a path to prosperity.....”

- Devex - [Bill Gates commits most of his fortune to Gates Foundation, closing 2045](#)

More coverage & analysis – and some quotes from Mark Suzman (CEO). See also Suzman on [LinkedIn](#) on the announcement.

- Via FT – [Bill Gates is giving away \\$200bn. Can his plans survive in the Trump era?](#)

**“Beyond the cuts to aid spending, there is another potential Trump-related threat looming over Gates’ plans. His foundation, like others, risks being stripped of its tax-free status.....”**

“ Last month, the Gates Foundation, along with several others, was braced for a potential executive order removing its charitable status. “There were rumours to that effect,” Gates says, though he adds that Trump’s legal basis for doing so might be on shaky ground. “Congress created rules under which foundations exist, including the definition of charitable purpose. It’s not at all clear that an executive order could override that.”....”

PS: in interviews like in FT or in the NYT (see below), it’s also clear that Gates singles out Musk far more on the global health damage done, than Trump.

- And via the NYT - [The \\$200 Billion Gamble: Bill Gates’s Plan to Wind Down his Foundation \(interview with Gates\)](#).
- Comment by **Tim Schwab**: [Bill Gates says he won't die a rich man. Don't believe him](#)

## More on Global Health Governance & Financing

### HPW - WHO's Samira Asma Reportedly Leaving Tedros' Leadership Team – UNAIDS Scraps Merger Plan

<https://healthpolicy-watch.news/whos-samira-asma-reportedly-leaving-tedros-leadership-team-unaids-nixes-merger-with-who/>

**“Samira Asma, assistant director of Data, Analytics and Delivery since 2020, is reportedly leaving WHO in the first of an expected departure of five senior leadership team members as the Organisation sets out to dramatically shrink its Geneva footprint and staffing. ....”**

PS: **“the recent collapse of USAID and probable dissolution of the USAID supported Demographic and Health Surveys series, which financed bread and butter data collection in low- and middle-income countries for decades, may force WHO to go refocus on a much more fundamental task that involves helping the world's poorest nations report accurate baseline data on key health indicators – also critical to WHO's mandate tracking the health-related Sustainable Development Goals. ....”**

**“... According to other still-unconfirmed reports, the pending leadership reshuffle is also likely to see the departure of Yukiko Nakatani, ADG of WHO's Division of Access to Medicines and Acting ADG for the Division of Antimicrobial Resistance (AMR). Both divisions are to be folded into a consolidated “Health Systems” Division, which will also address a wide range of functions with respect to WHO product standards, health workforce, primary health care, finance and governance; as well as digital health. Finally, there are question marks over the continued tenure of the ADG for Universal Health Coverage and Life Course, Dr Bruce Aylward, a Canadian physician who played a major role in the early days of WHO's COVID response, as Tedros' special advisor at the time. .... Now, the 10 departments of the UHC and Life Course division that he now heads are set to be parcelled out to two other WHO divisions, as well as being merged with other departments. But Aylward is reportedly pushing back against leaving – and no formal announcements have been made yet, even internally....”**

**“.... The new WHO austerity plan would also eliminate the role of WHO Deputy Director, now held by Mike Ryan in tandem with his role as Executive Director of WHO's Health Emergencies Division. Ryan, however, is likely to continue on in his old role as Health Emergencies Executive Director during this tumultuous phase in WHO's history, other WHO observers predicted. This, despite reports a year ago that Ryan, age 60, was considering early retirement. ....”**

**“Asked by Health Policy Watch for a response to the early reports of the leadership reshuffle, WHO did not comment. As for an official announcement by the Director General of his new team, a WHO spokesperson said: “We don't know ourselves, but we expect it before the WHA” – referring to the 78th World Health Assembly meeting of WHO member states, which begins on Monday, 19 May. ....”**

## Guardian - 'Conversation on future of aid long overdue': UK looks to lead response to swingeing US cuts

<https://www.theguardian.com/global-development/2025/may/07/conversation-on-future-of-aid-long-overdue-uk-looks-to-lead-response-to-swingeing-us-cuts>

**"Huge cuts by Trump administration to international aid budgets has left a vacuum and Britain is looking to lead efforts to find a path forward."**

**"... The huge US-led cuts to international aid programmes and to the UN budget has prompted the UK foreign secretary, David Lammy, to propose a global conference as part of what he described as "a long overdue conversation about the future architecture of aid". UK Foreign Office officials said the conference was likely to be in the early autumn, and reflected a UK view that since aid cuts were not reversible in the foreseeable future, a discussion about priorities was required....."**

**"... In a preview of the issues likely to be aired at Lammy's proposed conference, Miliband, in a speech to Chatham House, said: "The focus of the aid budgets have been diluted across multiple priorities, while their overall size has been reduced." ... Meanwhile, the hope that public-private partnerships would turn "billions of dollars into trillions of dollars" for the poorer parts of the world has not been fulfilled. The macroeconomic environment had turned sour even before the trade war induced by Trump's tariffs because of rising interest rates. That backdrop made the need for fundamental change even more urgent and ad hoc reactive cuts were a mistake, Miliband argued. .... Miliband said aid had lost its focus on the extreme poor. "When you look at what aid is spent on, humanitarian aid, the most extreme forms of life saving relief is only about 14% of the total aid budget, and health spending is only around 10%," he said. "OECD analysis shows that the largest share – around 60% of bilateral aid in 2017 to 2021 – went on global challenges like climate mitigation. Meanwhile, richer donor countries are spending more or less as much of the aid budget on supporting refugees and asylum seekers inside rich countries as they're spending on humanitarian aid globally." ..."**

**"... Miliband was pretty clear that in any coming re-evaluation, those in extreme poverty needed to be the priority.... .... Conflict is increasingly identified the common denominator in explaining extreme poverty. In 1990, less than 10% of the extreme poor lived in conflict states, but today the World Bank says it is more than 50%, and by 2030 it will be two-thirds. .... Yet the aid system often relies on government structures to deliver, even though these structures are often compromised in war zones. The share of aid that goes to fragile and conflict states has declined from around a third in 2019 to 22% in 2023....."**

**"Miliband also argued that in any new aid compact, states outside the G7 group of industrialised countries needed to be better included. If the world had entered an era of multi-polar power, in which the US was no longer the global anchor, the base of aid donors logically should be broadening, he said. .... At present, the G7 group constitutes 30% of global GDP and 75% of global foreign aid funding. "It's legitimate to point out that the combined income of the Brics countries is equivalent to US GDP, but with nothing like the US aid contribution, and it's perfectly legitimate as well to call on newly wealthy countries, notably in the Gulf, to play their full part in helping those left behind by globalisation," Miliband said....."**

## HPW - Full Text of UN80 Task Force Pitch for Streamlined UN; UNAIDs Merger with WHO

<https://healthpolicy-watch.news/exclusive-full-text-of-un80-task-force-pitch-for-streamlined-un-including-who-and-unaid-merger/>

**“Merging WHO and UNAIDs, and combining the “operational” component of WHO’s Emergencies response with that of other agencies are just two among the several dozen ideas pitched by the UN80 Initiative Task Force – in the full text of options for interagency budget cuts and efficiencies, obtained by Health Policy Watch. ....” “The list of over 50 bullet points, dubbed a “compilation of non-attributable suggestions by the Task Force,” that was commissioned by UN Secretary António Guterres in March, cites options for wide-ranging operational reforms and mergers amongst the patchwork of UN agencies active in four key areas: peace and security; humanitarian affairs; sustainable development; and human rights. “**

**“The listing, marked “strictly confidential” also proposes to “reduce number of high-level posts (D1 and above),” systems wide – echoing plans for cutbacks in senior staff, now reportedly planned by the World Health Organization, the Geneva-based specialized UN agency, as it faces a \$2.5 billion budget deficit. .... A companion memo, issued by UN Deputy Secretary General Guy Bernard Ryder on 25 April, also obtained by Health Policy Watch, requests all UN Secretariat operations in New York City and Geneva – the highest-cost UN duty stations – to undertake internal reviews “to identify as many functions as possible that could be relocated to existing lower-cost locations, brought closer to mandate implementation or clients/stakeholders in the field, or otherwise reduced or abolished if they are duplicative or no longer viable.”.....”**

**PS: Under Humanitarian Response: “Merge operational responsibilities and capabilities of major operational agencies (WFP, UNHCR, UNICEF, WHO) in humanitarian and conflict affected contexts.”..... Although WHO made no comment, the agency’s Emergencies Department is one of the Organization’s largest, and some outside observers have long advocated for consolidating its on-the-ground operations with those of other humanitarian relief agencies. The WHO Emergency response to the COVID pandemic, followed by mpox and a series of humanitarian crises was also the main reason for WHO’s massive surge in consultants – whose ranks doubled between 2017 and 2024, WHO’s Director General Tedros Adhanom Ghebreyesus told media on Thursday.**

**PS: “The Task Force 80 document also proposes a wide range of cross-cutting UN reforms, including: “structural reform proposals around our four basic pillars, each with a geographic focus (Nairobi/ Africa should be the center of development agencies, including UNDP/ UNICEF/ UNFPA).”.....”**

- See also Reuters – [Exclusive: UN eyes major overhaul amid funding crisis, internal memo shows](#)

**“.... The memo contains a range of suggestions, some large, some small, some speculative, which, if all adopted, would represent the most sweeping reforms in decades. It suggests merging the U.N. AIDS agency into the WHO, and reducing the need for up to six translators at meetings. Another suggestion proposes merging the World Trade Organization - which is not a U.N. entity - with U.N. development agencies.....”**

“... But the **language of the internal self-assessment appears to confirm what both supporters and critics of the global body have long said: that the U.N. needs streamlining.** In a series of observations, the memo refers to "overlapping mandates", "inefficient use of resources", "fragmentation and duplication" and notes a bloating of senior positions. It describes "systemic challenges" the U.N. faces, problems exacerbated as the General Assembly continues to add missions and programs. "Increased mandates, often without clear exit strategies, and complexities have led to significant overlaps, inefficiencies and increased costs," the document said. **The memo was prepared by a task force appointed in March by Secretary General António Guterres, who said at the time the body needed to make itself more cost-effective.....”**

## **Business Day - SA rolls out diplomatic privileges for vital Global Fund**

[Business Day](#);

(gated) “As aid from the US dries up, **SA turns to one of the world’s largest HIV/Aids, TB and malaria “**

“**SA is rolling out the red carpet for one of the world’s largest HIV/Aids, tuberculosis (TB) and malaria funders, the Global Fund,** as it looks to raise more than \$18bn (R330bn) to combat the scourges. That includes granting diplomatic privileges to the entity’s delegation when it visits SA later this year...”

## **Devex – Exclusive: UNAIDS will lose more than 50% of staff in restructuring**

[https://www.devex.com/news/exclusive-unaid-will-lose-more-than-50-of-staff-in-restructuring-110000?utm\\_source=twitter&utm\\_medium=social&utm\\_campaign=devex\\_social\\_icons](https://www.devex.com/news/exclusive-unaid-will-lose-more-than-50-of-staff-in-restructuring-110000?utm_source=twitter&utm_medium=social&utm_campaign=devex_social_icons)

“**UNAIDS will need to reduce the current number of staff from 608 to approximately 280 over time,** according to a communique from the UNAIDS cabinet, seen by Devex.”

## **HPW - UNAIDS and HIV Sector Struggle Amid Funding Cuts**

<https://healthpolicy-watch.news/unaid-will-lose-more-than-50-of-staff-in-restructuring-110000>

“As countries dependent on United States aid for their HIV response report looming shortages of antiretroviral medicine, the Joint UN Programme on HIV/AIDS (UNAIDS) is also fighting for survival. Meanwhile, more shocks may be ahead for the HIV sector as the US Health and Human Services plans to [curtail research collaboration](#) between US scientists and foreign researchers, a common occurrence in the HIV sector.....”

“.... **While UNAIDS faces an internal crisis, so too do the countries and communities worst affected by HIV that it serves.....”** With an overview of this in the article.

Including for example: “....**Focus on ‘key populations’ is lost** : The HIV sector’s focus on the “[key populations](#)” most vulnerable to HIV is likely to be lost – possibly forever – due to a lack of funds. ...”

**Tim Schwab – He built a brand criticizing billionaires. Are billionaires now bankrolling his work?**

<https://timschwab.substack.com/p/he-built-a-brand-criticizing-billionaires>

“Rutger Bregman's new non-profit, the School for Moral Ambition, makes it hard to follow the money, but I found donations from the Gates Foundation and other philanthropies associated with billionaires.”

**Gates Foundation to set up Singapore office with EDB support**

<https://www.theedgesingapore.com/news/philanthropy/gates-foundation-set-spore-office-edb-support>

“The Gates Foundation has announced plans to establish a presence in Singapore to strengthen its partnerships with government, philanthropies and institutions across Southeast Asia and support progress toward global health and development goals.....”

Supported by the Singapore Economic Development Board (EDB).

**Bill Gates meets Indonesian leader to discuss development initiatives**

<https://www.arabnews.com/node/2599918/world>

“Gates’ foundation is developing a tuberculosis vaccine that’s planned to be tested in Indonesia.”

“Bill Gates was in Indonesia on Wednesday to discuss health and sustainable development initiatives with the leader of the world’s fourth most populous country.....”

**Kenya launches KNPHI in major boost to public health security**

<https://www.kbc.co.ke/kenya-launches-knphi-in-major-boost-to-public-health-security/>

On the official launch of the Kenya National Public Health Institute (KNPHI) at the Kenyatta International Conference Centre (KICC). With support from WHO.

**Charting a Pathway for Sustainable Financing of Africa’s Resilience — Statement**

<https://www.ranafrica.org/news/charting-a-pathway-for-sustainable-financing-of-africas-resilience-statement/>

“On Wednesday, April 30, 2025, Resilience Action Network Africa (RANA), AIDS Healthcare Foundation (AHF) Kenya, and Pandemic Action Network (PAN) convened more than 50 leaders from across sectors and communities in Kenya to reimagine a new future toward sustainable financing for Africa’s resilience amid shifting global aid dynamics. The convening sparked bold, African-led priorities — from increasing domestic health investment to centering equity and community leadership — laying the groundwork for long-term, resilient systems driven by local



ownership and shared action. The following **outcome statement**, signed by 30 civil society partners, was delivered to the press at the close of the convening. “

### Health hosts 3rd G20 Health Working Group Meeting, 8 to 9 May

<https://www.gov.za/news/media-advisories/government-activities/health-hosts-3rd-g20-health-working-group-meeting-8-9>

News from South-Africa, currently G20 host: “The Department of Health this week (08-09 May) **host the 3rd G20 Health Working Group (HWG) meeting** as part of a series of G20 events taking place across the country this year. This virtual meeting will **focus on the health and care workforce** which are the foundation for health systems and fundamental for the achievement of universal health coverage (UHC), health security, equity, and inclusive growth....”

### Run-up to FfD4 in Seville (end of June, early July)

Some news reports & other pieces. Still almost two months till the 4<sup>th</sup> Financing for Development conference.

### Reuters – Exclusive: US seeks to weaken global development finance efforts, UN document shows

<https://www.reuters.com/sustainability/cop/us-seeks-weaken-global-development-finance-efforts-un-document-shows-2025-05-05/>

“UN brokers sustainable development plan before June meeting; **US wants to weaken commitments on financial system reform; Also seeks to cut climate, gender, sustainability mentions from deal.**”

“**The United States is seeking to weaken a global deal aimed at helping developing countries struggling with the impacts of climate change and other issues, an internal United Nations document seen by Reuters showed. ....** The Trump administration opposes draft reforms of the world's financial system intended to help developing countries, **including around taxation, credit ratings and fossil fuel subsidies.** It also wants mentions of "climate," "gender equality" and "sustainability" stripped out. .... The previously unreported document **sheds light on how the Trump administration is seeking to imprint an "America First" agenda, including opposition to efforts to slow climate change and promote diversity, on the institutions at the heart of fixing global systemic crises.....**”

“ **The once-a-decade, 4th International Conference on Financing for Development (FFD4) in Seville, Spain, in June aims to influence the strategic direction of the world's development finance institutions.** Countries agreed at FFD3, for example, to broaden tax cooperation efforts so that developing countries could help set the rules and as of last May more than 140 countries were involved.....”

## EU Observer - NGOs push for UN to take control of aid policy after huge EU and US cuts

[https://euobserver.com/\\*/ar53e853f4](https://euobserver.com/*/ar53e853f4)

(gated) “Amid deep cuts to development aid budgets in Europe and the United States, **NGOs are pushing for the United Nations to take over responsibility for aid policy from the Paris-based Organisation for Economic Co-operation and Development (OECD)** ahead of a major summit in Sevilla.....”

## Climate Change News - Without debt relief, climate action will fail

L Van der Burg; <https://www.climatechangenews.com/2025/05/07/without-debt-relief-climate-action-will-fail/>

“**Many Global South countries spend five times more on repaying debt than tackling climate change** – governments meeting in Seville next month can stop this downward spiral.”

## IDS - With aid declining, FfD4 must include concrete commitment to scale up investment in tax systems

G Mascagni; <https://www.ids.ac.uk/opinions/with-aid-declining-ffd4-must-include-concrete-commitment-to-scale-up-investment-in-tax-systems/>

“...I recently took part in the third high-level symposium of the UNDP’s Finance, Integrity and Governance Initiative with experts and negotiators involved in the Financing for Development (FfD4) process. **The symposium focused on domestic resource mobilisation (DRM), the primary source of development financing.** ....” With three personal reflections, ahead of the FfD4 meeting in Seville.

Among others: “ **Doubling aid for DRM is a credible commitment – and can help restore trust**”

“...**the commitment to double support for DRM and public financial management (PFM) by 2030**— requested by lower-income countries and included in the draft outcome—**offers a real opportunity to show commitment to equitable partnerships, invest in resilience, and demonstrate goodwill. Crucially, this is a commitment that can be delivered on.** Currently, a minuscule 0.2% of all ODA is allocated to assistance on DRM. In 2021, the amount was \$574.4 million. **Even with declining aid budgets, doubling support to DRM in real terms to reach a billion by 2030 is entirely doable.** It also presents a powerful opportunity to start restoring trust in the international aid system.....”

## Eurodad - Jubilee 2025: A year to act on debt justice

[https://www.eurodad.org/jubilee\\_2025\\_toolkit?utm\\_campaign=new\\_toolkit\\_out&utm\\_medium=mail&utm\\_source=eurodad](https://www.eurodad.org/jubilee_2025_toolkit?utm_campaign=new_toolkit_out&utm_medium=mail&utm_source=eurodad)

18 p. “**A new toolkit to support action on debt justice over the course of 2025**, linking to the Jubilee 2025 campaign and the Fourth International Conference on Financing for Development.”

## Trump 2.0

### Devex - Trump budget proposes unprecedented, 'reckless' cuts to foreign aid

<https://www.devex.com/news/trump-budget-proposes-unprecedented-reckless-cuts-to-foreign-aid-109988>

(3 May) “The budget request would make massive cuts to global health, humanitarian aid, and core economic and development work.”

“The Trump administration’s proposed budget for fiscal year 2026 would make unprecedented cuts to foreign aid, which some called “reckless” and “self-defeating.” .... a 47.7% cut in funding for state and international programs from 2025 levels, down to \$31.2 billion, and signaling its intention to rescind about \$20 billion in funds previously approved by Congress. If successful, the total would amount to a roughly 84% cut to the foreign affairs budget, leaving just \$9.6 billion in new spending.....”

“...If enacted, nearly every piece of the United States’ development and humanitarian assistance will be hit — with the deepest cuts slated for United Nations funding, economic assistance, development aid, humanitarian support, and global health programs. United Nations funding, for example, would drop by 87%, while humanitarian funding would be halved, according to an analysis from the U.S. Global Leadership Coalition.....”

“...Winners of this proposal appear to be the U.S. International Development Finance Corporation, which will get nearly \$3 billion more in funding, and the World Bank’s International Development Association, which is slated to receive \$3.2 billion over three years. Although that’s \$800 million less than former President Joe Biden committed to IDA in December of 2024, some worried the U.S. might not have contributed at all.....”

PS: “There are still a lot of unknowns. The “skinny” budget released on Friday offers limited detail. There’s no mention of agencies such as the Peace Corps and the Millennium Challenge Corporation, nor of the Global Fund to Fight AIDS, Tuberculosis and Malaria, or Gavi, the Vaccine Alliance. ....”

PS: “The budget creates a new \$2.9 billion America First Opportunity Fund — referred to as the A1OF Fund — to “focus on strategic investments that make America safer, stronger, and more prosperous.” It would support partners, including India and Jordan, counter China, and fund new activities to support national security priorities.....”

- See also a related CGD blog – [Redefining America’s Interests? Trump’s FY2026 Budget Proposes Sweeping Cuts to US Foreign Aid](#) (by E Collinson et al)
- [KFF – White House Releases FY26 Budget Request](#) (2 May)

## **KFF - The Trump Administration's Foreign Aid Review: Proposed Reorganization of U.S. Global Health Programs**

<https://www.kff.org/global-health-policy/fact-sheet/the-trump-administrations-foreign-aid-review-proposed-reorganization-of-u-s-global-health-programs/>

As of 1 May.

## **Science – ‘This is insane:’ New NIH policy on funding foreign scientists stirs outrage**

<https://www.science.org/content/article/insane-new-nih-policy-funding-foreign-scientists-stirs-outrage>

“Agency will make researchers outside United States seek grants of their own rather than “subawards” from U.S. scientists.”

## **NYT – Trump Administration Slashes Research Into L.G.B.T.Q. Health**

<https://www.nytimes.com/2025/05/04/health/trump-administration-slashes-research-into-lgbtq-health.html>

“Nearly half of the N.I.H. grants canceled through early May — together worth more than \$800 million — addressed the health of sexual and gender minority groups, The Times found.”

## **NYT - Trump Signs Executive Order Seeking to End Federal Funding for NPR and PBS**

<https://www.nytimes.com/2025/05/02/us/politics/trump-funding-npr-pbs.html>

“The Trump administration has accused the two broadcasters of using public funds to produce biased coverage and “left-wing propaganda.””

## **NYT – Kennedy Orders Search for New Measles Treatments Instead of Urging Vaccination**

<https://www.nytimes.com/2025/05/02/health/measles-treatments-vaccines-kennedy.html>

“Decades of research have turned up no miracle treatment for measles, but studies show the M.M.R. shot is 97 percent effective in preventing the disease.” ....**With the United States facing its largest single measles outbreak in 25 years, Health and Human Services Secretary Robert F. Kennedy Jr. will direct federal health agencies to explore potential new treatments for the disease, including vitamins, according to an H.H.S. spokesman. The decision is the latest in a series of actions by the nation’s top health official that experts fear will undermine public confidence in vaccines as an essential public health tool.....”**

## NYT - Trump Administration Asks Court to Dismiss Abortion Pill Case

<https://www.nytimes.com/2025/05/05/health/trump-abortion-pill-case.html>

“The request echoes the position the Biden administration took in the case in January, surprising some observers.”

PS: “Ms. Ziegler ( law professor and abortion law expert at the University of California, Davis) said Monday’s court filing might reflect a desire to be politically cautious on abortion, possibly until the 2026 midterm elections. “I think he thinks that doing anything bold on mifepristone could backfire politically,” she said. “But he has a lot of anti-abortion voters who are not only hoping that he will do something on mifepristone but are still expecting that he will.”....”

## Science - Trump moves to tighten rules on risky research on viruses, bacteria, and toxins

<https://www.science.org/content/article/trump-moves-tighten-rules-risky-research-viruses-bacteria-and-toxins>

“Executive order on gain-of-function experiments could chill research on infectious diseases, scientists say.”

## Lancet (Health Policy) –Protecting Africa's children from extreme risk: a runway of sustainability for PEPFAR programmes

L Cluver et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)00401-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)00401-5/fulltext)

(8 April) “**In this Health Policy, we review data** from UNAIDS, UNICEF, World Bank, Violence Against Children Surveys, SPECTRUM model data, and Population-based HIV Impact Assessments; synthesise PEPFAR reports; conduct in-depth interviews; search PubMed for programme effectiveness evidence; and review economic reports..... .... **There is now an opportunity for a transformational partnership between the USA and Africa, to accelerate domestic government co-financing, private-sector investments, and charitable foundations. A 5-year progressive runway of transition** can occur **through continued authorisation of PEPFAR programmes**, which can lead to the end of AIDS for children and families, an historic achievement.”

## PPPR

## TWN - WHO: Developing countries concerned over expert committee proposal to draft PABS text

<https://www.twn.my/title2/health.info/2025/hi250501.htm>

“Developing countries raised concerns on the proposed expert committee to prepare proposals on the Pathogen Access and Benefit Sharing (PABS) Instrument for the consideration of the

Intergovernmental Working Group during the negotiation of the draft resolution for the adoption of the WHO Pandemic Agreement. **While developing countries squarely rejected the proposal to establish such an expert committee, citing several reasons, including conflicts of interest, demands from developed countries confirmed the apprehensions of the developing countries regarding conflicts of interest.** Developed countries **sought to include stakeholders** in access and benefit sharing, **such as industry experts**, in the proposed committee.....”

## Telegraph – EU boosts pandemic defences with vaccine deal

[Telegraph](#)

“The European Union has snapped up advanced manufacturing capacity for at least 478 million doses of pandemic flu vaccine, surging ahead in the race to prepare for a possible bird flu outbreak in humans.”

“According to data from the health analytics firm Airfinity, the EU now has signed agreements with seven manufacturers to reserve vaccines – including a new deal unveiled last week with CSL Seqirus for a further 27m doses. Although governments including Canada and the UK have reserved more doses per person, the EU has the largest and most diverse supply chain for a possible influenza pandemic.....”

## Mpox

### Reuters - Sierra Leone's mpox cases fuel African outbreak, health body says

[Reuters](#):

“ **Sierra Leone accounted for half of Africa's confirmed mpox cases this week, the continent's main health body said on Thursday, adding that the West African country was fuelling the outbreak. ...** Sierra Leone, which declared mpox a public health emergency in January, has seen a 63% jump in confirmed cases in just one week, **Africa CDC official Ngashi Ngongo said in an online briefing.** Ngongo said that funding was the main issue, but added that contact tracing and laboratory capacity also needed to be improved. .... **Mpox cases in high-burden countries Uganda and Burundi are on a steady decline, while cases in Democratic Republic of Congo are showing signs of flattening,** said Ngongo.”

## Cholera

### Cidrap News – African officials eye coordinated response to curb cholera outbreaks

<https://www.cidrap.umn.edu/cholera/african-officials-eye-coordinated-response-curb-cholera-outbreaks>

**“Cholera cases are still on the rise in Africa, with four high-burden countries—especially South Sudan and Angola—accounting for about 90% of cases in the most recent reporting week, a top official from the Africa Centre for Disease Control and Prevention (Africa CDC) said today at a weekly briefing..... The outbreaks in Angola, South Sudan, and the DRC signify a severe crisis, and Ngongo said the cholera situation needs an African regional coordinated response, similar to that for mpox, to curb the spread.”**

## Measles

**Guardian - World may be ‘post-herd immunity’ to measles, top US scientist says**

<https://www.theguardian.com/us-news/2025/may/03/measles-post-herd-immunity>

**“As infections pummel communities in the US, Mexico and Canada, fear of ‘the most contagious human disease’ grows.”**

**““We’re living in a post-herd-immunity world. I think the measles outbreak proves that,” said Dr Paul Offit, an expert on infectious disease and immunology and director of the Vaccine Education Center at Children’s Hospital of Philadelphia. “Measles – because it is the most contagious of the vaccine-preventable diseases, the most contagious human disease really – it is the first to come back.” ....”**

## NCDs (& mental health)

**HPW -NCD Advocates Call for More Resources, Higher Taxes and Decriminalising Suicide at UN Hearing**

<https://healthpolicy-watch.news/ncd-advocates-call-for-more-resources/>

**“Calls for more resources to address non-communicable diseases (NCDs), higher taxes on unhealthy products and the decriminalisation of suicide were made at a multi-stakeholder hearing at the United Nations (UN) on Friday. The hearing was convened by UN General Assembly President Philemon Yang to enable stakeholders to identify priorities to address NCDs ahead of the UN High-Level Meeting (HLM) on these diseases set for 25 September.”**

PS: “After months of intense civil society mobilisation, the NCD Alliance issued a [Call to Lead on NCDs](#) this week, signed by over 500 civil society organisations and backed by 2.5 million people. .... **“This High-Level Meeting must address the glaring mismatch between the scale of the burden of NCDs and the level of funding,” said [Katie] Dain. “We urge governments to increase sustainable financing for NCDs by adopting specific and measurable financing targets for NCDs and improving financing data and tracking, as well as committing to health taxes that have a triple win of raising revenue, improving health outcomes and reducing long-term healthcare costs.” ....”**

PS: cfr this **NCD Alliance** call: “ ... **Three actions governments must take: Mobilise investment; Accelerate implementation; Deliver accountability.....**”

PS: “**Undue influence on political declaration? A “zero-draft” of the political declaration to be adopted by the HLM is expected to be released this month, with member state negotiations due to end in July.** However, NCD advocates have told Health Policy Watch that they are **concerned about how harmful industries – including the big food, alcohol and fossil fuel industries – are attempting to influence content of the declaration.....**”

## **Lancet Editorial – 50 years of SSRIs: weighing benefits and harms**

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)00981-X/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)00981-X/fulltext)

This week’s editorial does exactly that.

## **International Midwives day**

### **HPW - Midwives: The Missing Link in Crisis Response**

D Drandic & A Gutierrez; <https://healthpolicy-watch.news/midwives-the-missing-link-in-crisis-response/>

« ***On International Midwives’ Day (5 May), the crucial role of midwives – particularly in humanitarian crises – needs recognition, and their voices need to be included in planning and policies.***”

« .... **This year’s theme for the International Day of the Midwife — Midwives: Critical in Every Crisis — is a call to action.** If we are serious about reducing maternal deaths and building health systems that can respond to conflict, disaster, and displacement, we must invest in midwives. That means **educating them, protecting them, and including them at every level of decision-making, everywhere.....**”

With also some background on a **global event for the International Day of the Midwife, highlighting the work of midwives in humanitarian settings** — from Morocco’s earthquake response and Pakistan’s floods, to the refugee camps of Bangladesh and the overwhelmed maternity wards of the West Bank conflict zones. »

« .... Even though they are among the first to respond in a crisis, midwives are rarely included in official crisis response planning. .... In **fragile and crisis-affected settings, midwives are not an optional add-on to the health system — they are the only health providers solely dedicated to sexual and reproductive health,** often stepping in when other services are unavailable or disrupted. .... **Despite the evidence and best practice, midwives are too often excluded from national and international crisis planning efforts. Their voices are missing from policy and funding decisions.** Their expertise is overlooked in disaster preparedness. And their personal safety and rights are not prioritised in crisis response. »



## More on SRHR

### Telegraph - Trump spurs global rollback on the rights of women and girls

Heather Barr (HRW) ; [Telegraph](#);

**“US President leads the way to a cruel new world order in which women and girls are among the first victims. Governments must push back.”**

**“A global rollback of women’s rights was already underway before US President Donald Trump took office. But now it’s in hyper speed. Trump’s actions, including his broad slashing of international aid, both cause direct harm and encourage other world leaders to walk away from women’s rights.....”**

### HPW – Women’s Groups Sound Alarm as Prominent US Conservatives Headline ‘African Family’ Conferences

<https://healthpolicy-watch.news/womens-groups-sound-alarm-as-prominent-us-conservatives-headline-african-family-conferences/>

**“Women’s groups have raised the alarm about two impending African anti-rights conferences, featuring prominent US conservatives, that have previously been used to mobilise for anti-LGBTQ laws and restrictions on sexual and reproductive rights on the continent. Similar ‘African family’ conferences have tried to “strip women of their basic human rights and dignity and reinforce the dominance of men within our society using ‘family values’ as a vehicle”, notes Women’s ProBono Initiative (WPI), a Ugandan women’s rights group.....”**

**“The [Entebbe Inter-Parliamentary Forum](#) opens on Friday (9 May). Since its inception three years ago, it has served as a conservative organising and misinformation platform for ultra-conservative African Members of Parliament. Hosted by Uganda’s president and parliament, the forum has mobilised for copycat anti-LGBTQ laws in Uganda and Ghana with prison terms for those who identify as lesbian, gay, transgender, and bisexual. Conservative Kenyan MPs are working on a similar law.....”**

**“... A day after the Entebbe forum ends, the [Pan-African Conference on Family Values](#) convenes in Nairobi, Kenya, on 12 May. Co-hosted by anti-vaxx Ngare’s KCPF, this is a much bigger gathering than Entebbe, aimed at “promoting and protecting the sanctity of life, family values and religious freedom”, as well as equipping delegates “with tools to strengthen advocacy efforts at national, regional, and global levels”. .... Ironically, its keynote speakers are predominantly white conservative men from the United States and Europe. ....”**

### TGH - Reimagining Sexual and Reproductive Health Without U.S. Involvement

Anu Kumar et al ; <https://www.thinkglobalhealth.org/article/reimagining-sexual-and-reproductive-health-without-us-involvement>

**“The Helms Amendment and the Mexico City Policy, also known as the Global Gag Rule, are moot without U.S. aid funding”**

“... **The lack of U.S. support is a real opportunity to reimagine support for sexual and reproductive health and rights.** The Helms Amendment and the Mexico City Policy, also known as the Global Gag Rule, are moot without U.S. funding. Together, these policies have massively harmed millions of women for decades. **Now, health systems, donors, and organizations of all sizes do not have to adhere to U.S. policies and can provide safe, legal, and lifesaving abortion care. .... Health systems can think about sexual and reproductive health services that don't marginalize essential services, such as abortion care, and integrate them into broader reproductive health services,** including postpartum care, contraceptive counseling, comprehensive sexuality education, and much more. ...”

“... **The decolonizing health movement offers ideas on how to reimagine global health in three main areas—knowledge, funding, and practice—where power is often consolidated. ....”**

## World Hand Hygiene Day

### Gloves do not replace hand hygiene – reminder from WHO

<https://www.who.int/news/item/05-05-2025-gloves-do-not-replace-hand-hygiene---reminder-from-who>

“... While medical gloves serve a vital role in preventing transmission of infection, for example when there is risk of exposure to blood and body fluids, they are not a substitute for cleaning hands at the right time. On this **World Hand Hygiene Day**, the **World Health Organization (WHO) urges governments, health-care facilities, and frontline workers around the world to reinforce hand hygiene practices** – a proven, cost-effective intervention to protect both patients and health-care workers.....”

A few stats: “... Every US\$ 1 invested in hand hygiene can yield up to US\$ 24.6 in economic returns. Yet, 2 in 5 health care facilities still lack basic hand hygiene services where care is provided – putting 3.4 billion people at risk.....”

## World Asthma day (6 Day)

### WHO - Working together to make asthma a global health priority

<https://www.who.int/news/item/06-05-2025-working-together-to-make-asthma-a-global-health-priority>

“To mark World Asthma Day 2025, the **Global Asthma Network (GAN) launches the *Global Asthma Report 2025: Patient Stories*, a compelling collection of stories from people living with asthma around the world.** The report shines a spotlight on the daily challenges individuals face – from delayed diagnoses to unaffordable or unavailable inhaled medicines – as well as the life-changing benefits of timely and effective treatment. “

“**More than 250 million people worldwide are living with asthma – a significant global health burden.** This year’s **World Asthma Day** theme, “**Make inhaled treatments accessible for all,**”

**reinforces the urgency of ensuring universal access to affordable, quality-assured asthma medicines.** Despite decades of evidence showing that inhaled treatments — including bronchodilators and inhaled corticosteroids — reduce symptoms, improve quality of life, and prevent deaths, access remains inadequate in many low- and middle-income countries.....”

“**Asthma inhalers are included in the WHO Model List of Essential Medicines, are core medicines in the WHO package of essential noncommunicable disease (NCD) interventions for primary health care, and are included in the WHO “Best Buys” for NCDs.....”**

## **Access to medicines, vaccines & other health technologies**

### **Global Fund - In Historic First, the Global Fund Procures African-Made First-Line HIV Treatment**

<https://www.theglobalfund.org/en/news/2025/2025-05-06-historic-first-global-fund-procures-african-made-first-line-hiv-treatment/>

“**The Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund) has reached a historic milestone by procuring – for the first time – a first-line HIV treatment manufactured in Africa.** The treatment – **lifesaving, quality-assured antiretroviral medicines (ARVs) called TLD (tenofovir, lamivudine and dolutegravir), prequalified by the World Health Organization – was sourced from a leading Kenyan pharmaceutical company** and delivered to Mozambique. The volume supplied can treat over 72,000 people per year in the country. “

### **Lancet World Report – Trump works towards US tariffs on drug imports**

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)00982-1/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)00982-1/fulltext)

“**Observers warn of the negative health consequences if US President Donald Trump follows through on his promise to impose tariffs on pharmaceuticals.** Susan Jaffe reports.”

### **Guardian – Americans would suffer most if Trump imposes pharma tariffs, sector warns**

<https://www.theguardian.com/business/2025/may/05/americans-would-suffer-most-if-trump-imposes-pharma-tariffs-drugmakers-warns>

“**Industry says levies would hit supply chains,** making medicines potentially unaffordable for some US patients.”

PS: “..... Sandoz said that **while pharmaceutical companies – which command higher prices for their products – could shift production to the US, it was much harder for generic drugmakers to do so.** The drugs they make are cheap – a small pack of paracetamol costs from 37p at UK supermarkets – and the companies operate on tighter profit margins. ....”

## Stat - Trump signs order in bid to boost pharma manufacturing in the U.S.

<https://www.statnews.com/pharmalot/2025/05/05/trump-tariffs-fda-pharma-biotech-medicines-manufacturing-ingredients/>

“The order asks the FDA to reduce the time it takes to approve domestic manufacturing plants.”

## Devex - Opinion: Ensuring oxygen access is essential to achieving health for all

P Duneton (UNITAID) et al ; <https://www.devex.com/news/opinion-ensuring-oxygen-access-is-essential-to-achieving-health-for-all-109065>

“Less than 1 in 3 people who need medical oxygen receive it. This access gap causes millions of avoidable deaths yearly. Here’s why oxygen is a “best buy” for global health outcomes.”

PS: Unitaid currently co-coordinates and co-chairs the Global Oxygen Alliance.

“... In 2023, at the World Health Assembly, all 194 member states unanimously adopted a resolution to increase access to oxygen. Last year, the first [investment case](#) for oxygen financing commissioned by the Global Oxygen Alliance, or GO<sub>2</sub>AL, [launched in Berlin](#) during the World Health Summit. And earlier this year, a [landmark report](#) released by The Lancet Global Health Commission on medical oxygen security revealed the first-ever estimates of oxygen coverage gaps globally and the total cost of closing them. Yet despite this momentum, less than 1 in 3 people who need oxygen for acute medical or surgical conditions receive it due to gaps in service contact, readiness, provision, and quality in low- and middle-income countries. As a result, **hypoxemia (low blood oxygen) directly contributes to the deaths of [nearly 9 million people every year](#)** — more than the global number of deaths from [stroke](#) — **including 1.6 million children under the age of 5....”**

“... While some of the work funded through COVID-19 investments is still underway in 2025, **a cliff in oxygen financing is well within sight**. Without financial backing, the continued functionality of oxygen infrastructures established during the pandemic — including plants, equipment, and trained personnel — is at risk. Meaning, **hundreds of millions of dollars already invested will be jeopardized**, and millions of patients needing oxygen will continue to be denied treatment..... **\$34 billion is needed between 2025 and 2030 to close oxygen coverage gaps in LMICs, according to the Lancet Commission report estimates**. This is why global health agencies are [calling for \\$4 billion of additional development funding now to catalyze the next wave of oxygen access gains across the most vulnerable LMICs by 2030](#). This commitment is the initial resource mobilization target set by GO<sub>2</sub>AL in its commissioned [Global Oxygen Strategic Framework and Investment Case 2025-2030](#), expected to increase oxygen access by 25%, benefiting an additional 24 million patients and saving 860,000 lives — including 331,000 children under 5....”

“Why should global health donors and country governments remain committed to investing in oxygen? ....” “Authors list a number of arguments. **The first one being: 1. Oxygen investments are a best buy for global health:** Every dollar invested in medical oxygen returns \$21, putting oxygen on a par with investments in HIV/AIDS, malaria, and tuberculosis interventions, as well as childhood immunization. ....”

## Telegraph - Could a new malaria jab really finish off the disease? Researchers at GSK have high hopes

<https://www.telegraph.co.uk/global-health/science-and-disease/gsk-scientists-malaria-vaccine-jab-long-lasting-protection/#comment>

“Exclusive: **Next-generation jab could be three times as effective as the best currently available.**”

“A groundbreaking new malaria vaccine that could be three times more effective than existing jabs is **under development by scientists at GSK**, the Telegraph can reveal. **The product, earmarked for roll-out in 2035, will target both liver and blood-stages of malaria** and aims to offer 90 per cent protection against the notoriously difficult to control parasite, which is carried and transmitted via mosquitoes.....”

## MPP - Priority medicines for MPP licensing

<https://medicinespatentpool.org/progress-achievements/prioritisation>

The 2025 MPP Prioritisation Report is out — spotlighting key medicines and health technologies for expanded global access.

## Planetary Health

### Devex – How cities are getting a seat at the global climate finance table

<https://www.devex.com/news/how-cities-are-getting-a-seat-at-the-global-climate-finance-table-109956>

“**City leaders from the global south want multilateral development banks to finance them directly** — and at the **Spring Meetings**, they may have taken a step closer to that goal.”

### Devex - Kenya’s climate commitment sets standard before COP30

<https://www.devex.com/news/kenya-s-climate-commitment-sets-standard-before-cop30-109987>

“Despite contributing less than 0.1% of global emissions, **Kenya’s ambitious NDC charts a path to 100% renewable electricity and deeper climate integration across its entire economy.**”

### Guardian - Aviation industry is ‘failing dramatically’ on climate, insiders say

<https://www.theguardian.com/environment/2025/may/06/aviation-industry-failing-dramatically-on-climate-insiders-say>

“**Professionals call for a fundamental transition including controlling flight numbers.**”

“The aviation industry is “failing dramatically” in its efforts to tackle its role in the climate crisis, according to a newly formed group of aviation professionals. They say they are torn between their passion for flying and their concern for the planet and are calling for a fundamental transition of the industry, including controlling flight numbers.”

“The group, **Call Aviation to Action**, says the industry is overly optimistic about emissions-cutting technology and trapped in a business model that demands ever-growing flight numbers. The lack of significant climate action from the industry risks it being destroyed, the group says, as heavy regulation from outside will become necessary as the climate crisis intensifies.....”

### Guardian - Abandoned infrastructure one of the biggest polluters in the world – report

[https://www.theguardian.com/environment/2025/may/07/abandoned-infrastructure-one-of-the-biggest-polluters-in-the-world-report?CMP=share\\_btn\\_url](https://www.theguardian.com/environment/2025/may/07/abandoned-infrastructure-one-of-the-biggest-polluters-in-the-world-report?CMP=share_btn_url)

“Emissions from abandoned coalmines, oil and gas wells globally are larger than any single country except China, the US and Russia.”

“... The methane emissions from abandoned fossil fuel infrastructure now exceed those from Iran, and if considered as a country would be the fourth biggest source in the world, behind China, the US and Russia. Solving the global methane problem is **one of the most urgent issues in tackling the climate crisis**....”

“ ... Cleaning up the world’s abandoned facilities would cost about \$100bn, according to the International Energy Agency (IEA), which has investigated them for the first time in its **annual Global Methane Tracker report**, published on Wednesday. But finding the money to do this will prove difficult..... The IEA’s report found methane from fossil fuels globally remained “stubbornly high” as countries took too little action, despite the potential for cost savings.....”

“..... Durwood Zaelke, a long-time campaigner on methane and president of the Institute for Governance and Sustainable Development, warned: “Measuring methane emissions is not enough to mitigate them, as the IEA shows with its report. Having 25 satellites tell us we have a problem is not enough, nor is reminding the fossil fuel emitters that it’s bad business to waste gas. **It’s time to move from measuring and promising to mandatory performance.** ..... He wants a global agreement specifically targeting methane, a measure espoused by some leading advocates of climate action, including **Mia Mottley, the prime minister of Barbados** and chair of the V20 group of more than 70 of the most climate-vulnerable countries.....”

### Guardian - Two-thirds of global heating caused by richest 10%, study suggests

<https://www.theguardian.com/environment/2025/may/07/two-thirds-of-global-heating-caused-by-richest-study-suggests>

“Paper in Nature Climate Change journal reveals major role wealthy emitters play in driving climate extremes.”

“... By subtracting the emissions of the wealthiest 10%, 1% and 0.1%, they modelled the changes to the climate and frequency of extreme weather events that would have taken place without them. By

comparing those with the changes that have occurred, they believed they would be able to calculate their responsibility for the crisis the world finds itself in today. .... In 2020, the global mean temperature was 0.61C higher than 1990. **The researchers found that about 65% of that increase could be attributed to emissions from the global richest 10%, a group they defined as including all those earning more than €42,980 (£36,472) a year. .... Wealthier groups bore more disproportionate responsibility still, with the richest 1% – those with annual incomes of €147,200 – responsible for 20% of global heating, and the richest 0.1% – the 800,000 or so people in the world raking in more than €537,770 – responsible for 8%.....”**

“We found that the **wealthiest 10% contributed 6.5 times more to global warming than the average, with the top 1% and 0.1% contributing 20 and 76 times more, respectively,**” the write in their paper, published on Wednesday in the journal Nature Climate Change. .... Co-author Carl-Friedrich Schleussner, said: **“If everyone had emitted like the bottom 50% of the global population, the world would have seen minimal additional warming since 1990.”** On the other hand, **if the whole world population had emitted as the top 10%, 1% or 0.1% had, the temperature increase would have been 2.9C, 6.7C or a completely unsurvivable 12.2C.**

## Decolonize Global Health

### Lancet Comment – The Global North is increasingly unsafe for global health meetings

S Banara, M Pai et al ; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)00757-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)00757-3/fulltext)

PS : clearly, this call goes beyond DGH. And for good reasons.

**“...At a time of unprecedented nationalist and far-right politics in some countries, many people working in global health increasingly encounter an unsafe environment for meetings and conferences, especially those who are considered as others, such as citizens of the Global South, immigrants, refugees and Indigenous, LGBTQ+, and racialised minorities.....”**

**“...Visa and passport inequities are not new; they have always been a challenge in global health. The current realities, however, are truly concerning for the safety of people from the Global South and many who could be targeted due to their focus on equity or human rights irrespective of their citizenship. The global health community cannot do business as usual, and must start seriously thinking about the safety and dignity of all people who need to attend meetings and ensure global health meetings are held in venues where the safety of participants is not left to chance. At a minimum, consideration should be given to alternating global health meetings between the Global North and Global South.....”**

“... In a world bracing for impact of rapidly reducing funding to global health in the Global North, the necessity for leadership in the Global South is clear. Therefore, **a logical next step would be to shift our meeting spaces away from countries such as the USA that have chosen a path of isolationism.** An intentional shift of global health meeting spaces will be a small but powerful signal of an increasing commitment to shift power and move away from a neo-colonial and Global North-centric model within global health....”



## Some papers/reports....

UN News – ‘Alarming’ slowdown in human development - could AI provide answers?

<https://news.un.org/en/story/2025/05/1162926>

Coverage of the new Human Development report.

“The progress of **human development** – as measured by people’s freedoms and well-being – has remained sluggish since the major shock of the COVID-19 pandemic. A UN study released on **Tuesday finds that** used in the right way, artificial intelligence could be a powerful tool to improve millions of lives. “

“The **Human Development Report**, an annual publication from the UN Development Programme (**UNDP**), shows that **inequalities between rich and poor countries have widened for the fourth year in a row. Global pressures, such as increasing trade tensions and a worsening debt crisis which limits the ability of governments to invest in public services, are narrowing traditional paths to development.....**” “This deceleration signals a very real threat to global progress,” said **Achim Steiner, UNDP Administrator**. “If 2024’s sluggish progress becomes ‘the new normal’, that 2030 milestone could slip by decades – making our world less secure, more divided, and more vulnerable to economic and ecological shocks.”....”

“**Despite the gloomy indicators, the report is strikingly upbeat about the potential of artificial intelligence**, noting the breakneck pace at which free or low-cost tools have been embraced by businesses and individuals alike..... .... The **report’s authors include recommendations for action to make sure that AI is as beneficial as possible**, including the modernisation of education and health systems to adequately meet today’s needs – building an economy focused on human collaboration with AI (rather than competition) – putting humans at the heart of AI development, from design to deployment.....”

- See also DW – [UN report says aid cuts led to global development slowdown](#)

“Iceland topped the Human Development Index ranking, with Germany at fifth place. **The report warned that aid reduction under US President Donald Trump would have far-reaching consequences for developing nations.....**

- And the Economist – [Which countries have the best, and worst, living standards?](#)

A ranking of 193 countries shows that human development is stalling almost everywhere.

**Lancet – Prevalence of sexual violence against children and age at first exposure: a global analysis by location, age, and sex (1990–2023)**

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)00311-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)00311-3/fulltext)



Authors estimate that “the **global age-standardised prevalence of SVAC was 18·9%** (95% uncertainty interval [UI] 16·0–25·2) for females and 14·8% (9·5–23·5) for males in 2023. ....”

“... **The prevalence of SVAC is extremely high for both females and males across the globe.** Given data sparsity and ongoing measurement challenges, findings probably underestimate the true pervasiveness of SVAC. **An overwhelmingly high proportion of survivors first experienced sexual violence during childhood, revealing a narrow yet sensitive window that should be targeted in future prevention efforts....”**

- Related **Lancet Comment**: [Mapping the unseen: global prevalence of childhood sexual violence](#)

“**Sexual violence against children (SVAC) is a global public health problem that takes on a tremendous toll on survivors and society.** Survivors face increased risk for severe mental (eg, depression and post-traumatic stress disorder), physical (eg, cardiovascular disease and hypertension), and reproductive (eg, cervical cancer) health problems; for health risk behaviours (eg, substance misuse and suicide attempts); and for re-victimisation. Survivors’ parents are at risk of secondary traumatic stress<sup>2</sup> and survivors’ offspring are at increased risk of sexual victimisation....”

“... **Although effective prevention solutions are emerging, they are concentrated in high-income countries,** where reliable prevalence data help draw and maintain attention to child sexual violence....”

“... **Consistent with previous prevalence studies, the authors find enormous variation in rates by country, region, and super region; that girls are typically (but not always) at higher risk than boys; and that risk increases with age throughout childhood....”**

- And check out **coverage in the Telegraph**: [Fifth of girls and one in seven boys sexually assaulted globally, says study](#)

“Analysis published in the Lancet finds that **more than half of all people who have experienced sexual violence did so before the age of 18.**”

## **Lancet Letter - The death of Pope Francis and his global health legacy**

Howard Lopes Ribeiro, Junior; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)00836-0/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)00836-0/fulltext)

Concluding: “..... In a time where trust in science is frequently eroded, the world has lost one of its rare moral leaders who championed evidence, dialogue, and humility. **The legacy of Pope Francis must remind us that the pursuit of health equity, climate action, and global solidarity demands not only data and technology, but also ethical conviction and human connection.** As the scientific community mourns this loss, it is also called to **sustain the bridges he built, between reason and belief, between the laboratory and the street, and between science and the soul.**”

# Global health governance & Governance of Health

## ECDPM (Viewpoint) – How (not) to prepare for the next AU-EU summit

P Van Damme; <https://ecdpm.org/work/how-not-prepare-next-au-eu-summit>

“In March, the EU and the AU launched a **year-long celebration** marking **25 years** of their "unique and successful partnership", looking ahead to the next milestone in this 'robust collaboration': a seventh AU-EU summit slated for the second half of 2025.”

“Philippe Van Damme examines the recurring issues with EU-AU summits, noting a **pattern of vague commitments and lack of real change**. Highlighting the EU's paternalism and reflecting on mutual self-deception, he **calls for a more honest, consultative approach to address power imbalances and build credibility at the 2025 summit.**”

## Foreign Affairs - The End of the Global Aid Industry

Zainab Usman; <https://www.foreignaffairs.com/united-states/end-global-aid-industry>

“**USAID’s Demise Is an Opportunity to Prioritize Industrialization Over Charity.**”

“.... **Foreign aid has rapidly become a sunset industry. But that does not mean that rich countries should give up fighting poverty entirely.** It is in the interest of wealthy states to reduce the pressure of migration by trying to improve the economies and stability of countries in Africa, Latin America, and South Asia. Therefore, **policy experts, intellectuals, activists, philanthropists, and humanitarians must save global development by decoupling it from the aid industry and anchoring it in a strategy of industrial transformation. ....**”

## East Asia Forum – Japan’s soft power gains a hard edge

<https://eastasiaforum.org/2025/05/06/japans-soft-power-gains-a-hard-edge/>

“**Amid discussion of a ‘post-aid world’ in Europe and the United States, Japan has been steadily reorienting its Official Development Assistance (ODA) policy to serve its security interests of strengthening alliances with Indo-Pacific states to counter China.** The transformation has been marked by the relaxation of long-standing restrictions on providing military aid, raising questions about Japan's pacifistic reputation and prioritisation of the enduring goal of ODA — aiding economic development.”

## Global Health Research and Policy - Burden of disease in the Belt and Road countries from 1990 to 2021: analysis of estimates from the Global Burden of Disease 2021

Youyou Wu et al; <https://ghrp.biomedcentral.com/articles/10.1186/s41256-025-00403-3>

**“....Our findings demonstrate that BRI countries face a heavy burden of disease that varies across countries, although health outcomes have improved since 1990. Progress toward 2030 targets for six key health-related SDGs indicators in most BRI countries was slow. ....”**

## Global Policy - Left and Right as a Narrative of the Global

Alain Noël et al; <https://onlinelibrary.wiley.com/doi/10.1111/1758-5899.70026>

**“The left–right narrative is the most universal macro-story to make sense of global politics.** Although the political opposition between the left and the right originated in the West, it has now spread to all continents. **Nation-states remain the primary locus of the politics of left and right, but the distinction has become a global divide that permeates foreign policies, transnational relations, and global governance debates.** Building on the concept of the “narrative of the global,” this article combines insights from political sociology, political psychology, public opinion research, comparative politics, and international relations to **unpack the global meaning of the left–right division.** It shows how, across the world, the language of left and right helps social actors communicate about politics. ....”

With **eight theses** that explain the working of the left–right narrative in global politics.

PS: re the eight one: **“.... most instances of global governance politics can thus be modeled as a clash between the worldviews of four ideal-typical groups: left-wing globalists, right-wing globalists, left-wing sovereigntists, and right-wing sovereigntists.....”**

## CGD - The Trump Administration and the International Financial Institutions: The Good, the Bad, and the Cynical

K Matthiasen; <https://www.cgdev.org/blog/trump-administration-and-international-financial-institutions-good-bad-and-cynical>

**“.... Following Treasury Secretary Scott Bessent’s interventions during the World Bank and IMF Spring Meetings and the White House submission of the “skinny” budget to Congress last week, we now have some clarity around the Trump administration’s policy agenda for the international financial institutions (IFIs).** Bessent affirmed that **the administration intends to remain engaged with the IFIs and outlined a set of policies underpinning this engagement,** most of which mirror Trump’s first term. While there was pushback on the climate and gender agendas, Bessent’s rhetoric did not match the anti-DEI and anti-climate fervor that has featured prominently in other domestic and international agendas. He also embraced some policy positions from the Biden administration, especially at the IMF. The president’s budget submission included \$3.2 billion for IDA, 80 percent of the Biden administration’s IDA pledge, a better outcome than many of us had feared. But the funding picture elsewhere is bleak, with the decision not to fulfill the US pledge to the African Development Fund an especially cruel blow.....”

**“.... Bessent’s core message was that the IFIs “must be made fit for purpose again.” Making the IFIs fit for purpose was also a Biden administration priority, but the focus was on whether they were fit to address the new challenges of the 21st century.** In her Spring Meeting speech last year, then Secretary Yellen recapped her “evolution” agenda designed to help the multilateral development banks better respond to global challenges like climate change and pandemics. **Bessent is less explicit in his vision, but one can infer that he is not a fan of this expanded mandate.....”**

## ODI - Funding cuts and nexus thinking: what can aid actors learn from the 'beautiful game'?

C Sturridge; <https://odi.org/en/insights/funding-cuts-nexus-thinking-humanitarian-development-peacebuilding-football/>

**"In the wake of widespread funding cuts, nexus thinking is more urgent and relevant than ever. In his ['humanitarian reset'](#), Emergency Relief Coordinator Tom Fletcher urged the international community to be 'ruthless in eliminating turf wars' and to 'work genuinely together'. In an era of efficiency, value for money and prioritisation, self-imposed silos that were once tolerable are no longer defensible for an aid community that must do more for less."**

**"... In this era of heightened competition, can we better understand the nexus by looking to the sporting world? We explore why current approaches to the nexus are falling short, and what needs to happen now....."**

## Global Policy - Civil Society Participation in Creating the SDG Indicator Framework: Open but Limited

R K O'Dell;

<https://onlinelibrary.wiley.com/doi/10.1111/1758-5899.70025>

**"This article analyzes how Civil Society and other Stakeholders (CSOs) participated in the creation of the Sustainable Development Goals (SDGs) indicator framework from 2015 to 2016..... Analysis shows that organizations from the Global North and those with more access to resources or networked coalitions dominated....."**

## Global health financing

### Reuters - Will Africa's financial stability fund rise to the debt challenge?

<https://www.reuters.com/world/africa/will-africas-financial-stability-fund-rise-debt-challenge-2025-04-29/>

**"Angola will use its chairmanship of the African Union this year to advance the creation of a continental financial stability mechanism, its finance minister said, to cushion economies from sliding into a liquidity crisis due to external debt repayments. With public debt soaring 170% in the past 15 years to more than \$1.8 trillion, the 54-nation continent faces heightened external refinancing risks that could morph into a liquidity crisis."**

**"Debt repayments, which the African Development Bank (AfDB) estimates at \$10 billion annually between now and 2033, come as the region faces slower economic growth, exchange rate volatility and dwindling aid. .... Angola took over the rotating chairmanship of the African Union in February, and Finance Minister Vera Daves de Sousa said on Friday the AFSD would be a priority to galvanise funds from regional institutions to deal with the debt burden."**

“... Modelled on the [European Stability Mechanism \(ESM\)](#), the AFSM is designed to save countries in the region about \$20 billion in debt servicing costs in the next 10 years, the AfDB estimates. It will **exclusively focus on debt refinancing**, backers said, avoiding roles assigned to other bodies like the International Monetary Fund, which also backstops countries facing balance of payments challenges....”

### ODI Expert Comment - UK aid cuts – minimising the harm, planning for recovery

Kevin Watkins; <https://odi.org/en/insights/uk-aid-cuts-minimising-the-harm-planning-for-recovery/>

Watkins believe **there are five core principles that should guide the government’s approach** to the difficult decisions it now faces.....

Including principle five: **“Putting a human face on the aid budget”**.

### CGD (blog) - West Africa at a Crossroads: Fostering Stability After Aid Cuts

<https://www.cgdev.org/blog/west-africa-crossroads-fostering-stability-after-aid-cuts>

by C Ward & M Plant.

### Geneva Health Files – The US\$ 8 Billion Hole in Global Health: Why Private Capital Must Step Up Now [GUEST ESSAY]

James Bair; [Geneva Health Files](#):

Guest essay from a Switzerland-based global health investment advisory firm, Baraka Impact Finance “..... to give you a flavor on the types of conversations in the ecosystem, on the crisis we are collectively witnessing. **This contribution argues that private capital can be a cornerstone for global health financing to address health inequities at scale, and a new social contract around finance.....”**

### World Bank - Unlocking Subnational Finance: Overcoming Barriers to Finance for Municipalities in Low- and Middle-Income Countries

<https://openknowledge.worldbank.org/entities/publication/91308584-2eab-41ae-9012-877a2c1f9b11>

**“Municipalities in low- and middle-income countries** confront financing needs that greatly exceed available flows. **Currently, most investment in municipal infrastructure is financed directly from public fiscal sources, but needs cannot be met by existing public and international development sources alone.** Much greater use of private and repayable financing will be required. **This report is intended to address this development challenge. It provides a snapshot of repayable finance flows to municipalities in developing countries, showing that such flows have been extremely restricted in recent years.** It then identifies the **chief factors that contribute to these restricted flows, along three dimensions:** municipalities’ effective demand for finance, the supply of finance, and the

intermediating regulatory environment. It offers recommendations for municipalities, national governments, and development partners to address these constraints.”

## **UHC & PHC**

### **International Journal for Equity in Health - Universal health coverage in fragile and conflict-affected States: insights from Somalia**

<https://equityhealthj.biomedcentral.com/articles/10.1186/s12939-025-02486-3>

By Zlatko Nikoloski et al.

### **Vox Dev - Health and microfinance in Burkina Faso**

D Boutin et al; <https://voxdev.org/topic/health/unlocking-financial-protection-informal-workers-bundling-health-insurance-microcredit>

“Unlocking financial protection for informal workers by bundling health insurance with microcredit.”

“Bundling health insurance with microcredit reduced out-of-pocket health expenses by 50% among informal workers in Burkina Faso without decreasing microcredit uptake, offering a promising pathway to universal health coverage.....”

### **Critical Public Health – Perceptions and attitudes towards people with disabilities in Ghana: a qualitative study among healthcare providers**

<https://www.tandfonline.com/doi/full/10.1080/09581596.2025.2497354?src=#abstract>

By Abdul-Aziz Seidu et al.

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

### **Stat – Scientists question NIH project’s use of 20th century technology to make a universal flu vaccine**

<https://www.statnews.com/2025/05/03/nih-500-million-universal-flu-vaccine-project-uses-old-technology/>

“There is incredible work going on. This is not it,’ one critic said.”

PS: « ... mRNA vaccines, so critical in the response to the Covid pandemic, are unpopular with Health Secretary Robert F. Kennedy Jr.'s political base.....”

**Geneva Health Files (new book book launch) - Negotiating Equity: The Amendments to the International Health Regulations - A multilateral effort to strengthen the rules to govern international health emergencies**

“We will have a panel discussion during the World Health Assembly: ***Will the amended IHR deliver on equity goals? ....***” (22 May, breakfast event)

## Planetary health

**Nature (Editorial) – Time for adults to finally act like adults on climate change**

<https://www.nature.com/articles/d41586-025-01380-w>

That would be a first.

**“A report detailing how climate inaction will consign people born today to a lifetime of weather extremes must awaken a sense of responsibility.”**

“Building on an earlier study (W. Thiery et al. Science 374,158–160; 2021), Luke Grant, a climate researcher at the Vrije Universiteit Brussel, and his colleagues **report that children and young people born in the present decade face exposure to heatwaves, crop failures, floods, droughts, wildfires and tropical cyclones, in a way that their parents and grandparents never did** — and that this applies pretty much anywhere in the world.....

- Related: [Nature – How climate change will burden our children: data reveal a lifetime of extreme heat](#)

**Plos Climate - Why aquatic deoxygenation belongs in the planetary boundary framework**

<https://journals.plos.org/climate/article?id=10.1371/journal.pclm.0000619>

by E M Ferrer et al.

**Guardian - Real-world geoengineering experiments revealed by UK agency**

<https://www.theguardian.com/environment/2025/may/07/real-world-geoengineering-experiments-revealed-by-uk-agency>

“Trials will test ways to block sunlight and slow climate crisis that threatens to trigger catastrophic tipping points.”

“... Real-world geoengineering experiments spanning the globe from the Arctic to the Great Barrier Reef are being funded by the UK government. They will test sun-reflecting particles in the stratosphere, brightening reflective clouds using sprays of seawater and pumping water on to sea ice to thicken it..... Getting this “critical missing scientific data” is vital with the Earth nearing several catastrophic climate tipping points, said the **Advanced Research and Invention Agency (Aria)**, the government agency backing the plan. ....”

## Yale Climate Connections - Heat waves may accelerate the aging process

<https://yaleclimateconnections.org/2025/04/heat-waves-may-accelerate-the-aging-process/>

“Recent studies have found that prolonged exposure to elevated temperatures can be harmful to health – and might even influence aging. ....”

“..... Heat is known to affect **cognitive function, cardiovascular health, and kidney function**, and a growing body of research suggests that exposure to rising temperatures also accelerates the body’s aging process. A 2023 German study published in Environment International was the first to find that higher air temperatures are associated with faster aging at the cellular level. It found that **prolonged exposure to elevated temperatures can make the body age faster than its chronological age**, a phenomenon known as **epigenetic age acceleration**. Scientists measure this process using epigenetic clocks, which analyze chemical markers called DNA methylation that turn genes on and off. The study found that in areas where the average annual temperature is 1°C higher, people tend to show signs of accelerated aging at the cellular level. ....”

- Links: [Plos GPH – Potential of citizen science to advance urban planetary health research in low and middle-income countries: A scoping review](#)

By Amollo Ambole, Tolu Oni et al.

## Covid

### Telegraph - Top secret US research lab studying SARS-CoV-2 shut amid safety concerns

[Telegraph;](#)

“The **high security lab at Fort Detrick** has long been linked by Chinese propagandists to the outbreak of Covid-19 - without evidence.”



**International Journal for Equity in Health - How inclusive were strategies to prevent the spread of COVID-19 for people with disabilities? Evidence from qualitative research in eight low- and middle-income countries**

<https://equityhealthj.biomedcentral.com/articles/10.1186/s12939-025-02482-7>

by X Hunt et al.

**Plos GPH - COVID-19 vaccination implementation in six lower- and middle-income countries: Successes, challenges, and lessons for pandemic preparedness**

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0004417>

By Cara Tupps et al.

## **Mpox**

**Plos GPH - Short communication: Mpox memes, the gift that conceals a blade**

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0004496>

by I Pitua et al.

- Coverage via Cidrap News - [Analysis: Although most mpox memes raise awareness, 4 in 10 spread untruths, stigma](#)

## **Infectious diseases & NTDs**

**Telegraph - Rare and deadly disease carried by African snails hits Europe**

<https://www.telegraph.co.uk/global-health/science-and-disease/rare-deadly-african-snail-disease-schistosomiasis-europe/>

“Experts says **climate change, immigration and tourism** are behind the **spread of schistosomiasis.**”

“**Schistosomiasis is a parasitic infection caused by worms that naturally live in freshwater snails.** The worms enter the human body by burrowing through the skin during contact with water in which the snails live – typically when people swim, paddle, or bathe in rivers and lakes. Once largely confined to sub-Saharan Africa, the **disease is now appearing in parts of Europe due to increased migration and tourism, according to researchers gathered at the Wellcome Trust last week.**”

## AMR

### Devex – How unregulated antibiotics are fueling drug-resistant UTIs

<https://www.devex.com/news/how-unregulated-antibiotics-are-fueling-drug-resistant-utis-110001>

“In Malawi, nearly half of all urinary tract infections are now resistant to first-line antibiotics. As antimicrobial resistance rises, women face mounting risks from once-treatable infections.”

## NCDs

### HHR - A Content Review of National Dementia Plans: Are Human Rights Considered?

B Harden et al ; <https://www.hhrjournal.org/2025/05/06/a-content-review-of-national-dementia-plans-are-human-rights-considered/>

“The World Health Organization has set a target for 75% of member states to have national dementia plans by 2025. These plans should align with human rights standards, such as the Convention on the Rights of Persons with Disabilities. The aim of this study was to complete a review of global national dementia plans and their human rights content according to the convention’s principles. ....”

### Plos GPH - Organization of services for severe chronic Noncommunicable diseases at first-level hospitals in nine lower-income countries: Results from a Baseline assessment of PEN-Plus initiation

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0004552>

By Chantelle Boudreaux et al (on behalf of the PEN-Plus working group).

### Plos GPH – Implementation strategies to improve outcomes in patients with established cardiovascular disease in sub-Saharan Africa: A systematic review

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0004544>

By Leah A. Sanga et al.

### Plos GPH - Barriers and facilitators of primary care management of type II diabetes mellitus in the West African sub-region: A scoping review

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0003733>

By Abdul-Basit Abdul-Samed, Dina Balabanova, Tolib Mirzoev, Irene Akua Agyepong et al.

## Social & commercial determinants of health

NEJM - The IARC Perspective on the Effects of Policies on Reducing Alcohol Consumption

<https://www.nejm.org/doi/full/10.1056/NEJMSr2413289>

“Alcohol policy interventions, including those that increase alcohol taxes, raise the drinking and purchase age, reduce days or hours of sale, and impose strong marketing bans, reduce alcohol consumption.”

## Mental health & psycho-social wellbeing

BMJ GH - Adverse childhood experiences and suicidality in low-income and middle-income countries: a systematic review and meta-analysis

<https://gh.bmj.com/content/10/5/e018129>

By Dawn Li-Blair et al.

Nature – Teens with anxiety and depression spend more time on social media

<https://www.nature.com/articles/d41586-025-01359-7>

“Survey of thousands of young people shows that **those with mental health conditions spend more time on social-networking sites but are less happy with their online experience than their peers.**”

## Sexual & Reproductive health rights

Devex – Is unconditional cash the missing link in maternal and child survival?

<https://www.devex.com/news/is-unconditional-cash-the-missing-link-in-maternal-and-child-survival-110002>

“In parts of Africa, pregnant women and new moms are using direct cash aid to pay for hospital care, food and even farmland — as part of a program to cut child and maternal deaths.”

“... As traditional aid models face funding cuts and health systems grow more fragile, experts are rethinking how to deliver help to the most vulnerable. One promising solution: **GiveDirectly is piloting direct cash transfers to pregnant women and families with young children.** .... ..”

GiveDirectly is **testing a direct funding model aimed at the root causes: poverty and access**. The organization is **piloting programs in the Democratic Republic of Congo and Malawi**, which have shown positive results. A previous project in Kenya also found that infant and child mortality went down by about 46% among families that received unconditional cash.....”

“.... Beyond the lifesaving results, **advocates argue that cash transfers address gaps in traditional aid models, including transparency, accountability, and efficiency**. .... With global donors increasingly focused on measurable results, the ability to show clear, documented impact may be cash aid’s strongest selling point, he said. .... **However, some development experts argue that cash transfers are not a silver bullet to solving maternal and newborn problems because they are not sustainable. Instead, what Africa needs is strong health systems that provide diagnosis, medication, and nutrition**, according to Evaline Kibuchi, the chief national coordinator, Stop TB Partnership-Kenya. **Strong health systems should, for instance, equip people with health insurance to cushion them from catastrophic health expenditures. In Africa, health insurance provided by both governments and the private sector covers less than 20% of the population.....”**

## Access to medicines & health technology

Lancet HIV – The future of HIV diagnostics: an exemplar in infectious diseases

<https://www.sciencedirect.com/science/article/pii/S2352301825000785?dgcid=author>

Review.

## Human resources for health

Plos GPH - Integrating community health workers to sustain malaria services in the Greater Mekong Subregion: Findings from implementer case studies

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0004528>

By Laura Buback et al.

## Tweets (via X & Bluesky)

Emily Kopp

“ **Scientific papers funded by NIH will publish online for free at the same time as in paywalled scientific journals**. The grift of charging people to read the results of studies they already paid for is over. Interesting to read **which journals lobbied against this: The trade group for JAMA; NEJM; Elsevier.**”

## M Pai

"We hear a lot about how Africa has 'become too dependent on aid'. We don't hear much about how Africa was impoverished & exploited and why they are owed reparations for colonial damages."

## Eric Reinhart

"**The bottom 60% of Americans do not have anything near "the best lives on the planet."** They live paycheck to paycheck while struggling to afford healthcare and housing, are deprived of labor rights, and die far younger and less happy than their counterparts in other rich nations."

## Podcasts

### Dialogues: a conversation with Chikwe and Vivianne Ihekweazu

[https://www.youtube.com/watch?v=m\\_2V3QXn6po](https://www.youtube.com/watch?v=m_2V3QXn6po)

"In this episode of Dialogues, **host Garry Aslanyan speaks with Chikwe Ihekweazu, Assistant Director General at the World Health Organization (WHO) and acting Regional Director for the WHO Regional Office for Africa, and his wife, Vivianne Ihekweazu, Managing Director of Nigeria Health Watch.** The conversation centers on their **latest book, An Imperfect Storm: A Pandemic and the Coming of Age of a Nigerian Institution.** Chikwe discusses his personal journey in establishing the Nigerian Centres for Disease Control (CDC) and dealing with the COVID-19 pandemic in Nigeria as well as how they as a couple balance personal life with demanding work during challenging times."