

# IHP 840: AI summary: Kicking off August (and some holidays)

This weekly International Health Policies (IHP) newsletter is an initiative of the Health Policy unit at the Institute of Tropical Medicine in Antwerp, Belgium, and this issue is published before IHP goes on a two-week holiday. The current issue highlights World Hepatitis Day (28 July), World Breastfeeding Week, and the recent GAVI Board meeting. Significant space is also dedicated to the pre-COP30 Global Conference on Climate and Health in Brasilia (29-31 July), alongside broader planetary health news.

A key concern raised regarding the climate-health nexus is Alan Dangour's observation that "health has so far mainly been 'part of the circus with entertainment' at COPs, and not in the room where negotiations are happening". There is hope that Brazil can change this at COP30 by promoting the Belém Health Action Plan. Separately, the Non-Communicable Diseases (NCD) draft political declaration for the upcoming UN High-Level Meeting in September has been "watered down," with strong commitments like 'implement' and 'enact' being replaced by passive language such as 'consider' and 'encourage'. This change is seen as a "backslide" influenced by "health-harming industry fingerprints," particularly concerning health taxes and industry interference.

The newsletter also includes a reflection on Western governments' "halfhearted" encouragement for the Israeli government to change its "genocidal ways". It notes a **"huge gap" between public opinion in many Western countries and the lack of action by their leaders** in addressing the "polycrisis era". Sridhar Venkatapuram's poignant question, "what is global health good for if it could not act to stop forced mass starvation?", is highlighted, underscoring the absence of an "all-global-health-stakeholder" joint response to the "relentless horror in Gaza," unlike the unified effort seen with Covax during the pandemic. The situation is described as "mass murder for many, many months," with the lack of global health leadership agreement boding ill amidst a world on "the Edge of WW III".

## Featured Article: Breastfeeding in Indonesia: A Triple Win for Health, Equity and the Economy

The featured article, authored by Wahyu Gito Putro and Rizka Ayu Setyani, underscores **breastfeeding as a vital, cost-effective public health intervention crucial for infant survival, nutrition, and development**. The World Health Organization (WHO) recommends exclusive breastfeeding (EBF) for the first six months, followed by continued breastfeeding with complementary foods for up to two years or more. Despite clear benefits such as reduced infant infections and improved cognitive and maternal health outcomes, Indonesia faces significant challenges in achieving optimal breastfeeding rates.

Indonesia's exclusive breastfeeding rates remain below national (50%) and global targets; the 2018 survey reported only 37.3% EBF for infants aged 0–6 months. More recent data from 2021 show a troubling decline in breastfeeding within the first hour (48.6%, down from 58.2% in 2018) and EBF (52.5%, down from 64.5%).

Several obstacles contribute to these suboptimal rates:

- **Aggressive marketing of formula milk**, particularly in urban areas where it is seen as modern, with weak enforcement of the International Code of Marketing of Breast-milk Substitutes.
- **Cultural beliefs**, such as giving water to infants alongside breast milk, increasing exposure to waterborne diseases.
- **Inadequate healthcare support**, with many midwives and health workers lacking sufficient lactation management training.

- **Economic and workplace factors**, including a mandate of only three months of paid maternity leave (insufficient for six months of EBF) and a lack of workplace lactation facilities. These are highlighted as broader structural challenges rather than just a lack of knowledge.

The economic consequences of inadequate breastfeeding are substantial, with research indicating an estimated **\$1.3 billion annual burden on Indonesia's national health system** due to preventable childhood illnesses. Furthermore, a failure to exclusively breastfeed results in approximately **\$118 million in yearly economic losses** from healthcare costs and lost productivity due to impaired cognitive development in children. These issues collectively threaten Indonesia's future workforce competitiveness and national development.

Despite these challenges, Indonesia has demonstrated policy commitment, including the recently enacted Health Law No. 17/2023, which legally mandates EBF for the first six months. The government's National Nutrition Awareness Movement (GERMAS) also promotes breastfeeding.

To overcome the existing gaps, the article presents key policy recommendations:

1. **Extend Paid Maternity Leave:** Increase leave from three to six months to better support EBF, reduce infant mortality, and improve female workforce retention.
2. **Enhance Workplace Lactation Support:** Provide lactation rooms and flexible work arrangements to help mothers continue breastfeeding.
3. **Expand Community-Based Breastfeeding Education:** Strengthen rural outreach through training community health workers, engaging cultural and religious leaders, and leveraging mobile health technologies to shift social norms and improve rates.
4. **Implement a National Breastfeeding Monitoring System:** Establish comprehensive, publicly accessible data on breastfeeding practices and policy compliance for evidence-based decision-making.

In conclusion, the article emphasizes that strengthening breastfeeding support is not only a health imperative but also **a crucial economic investment in Indonesia's future**.

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## Highlights of the Week

### World Breastfeeding Week (1-7 August)

World Breastfeeding Week is part of a year-long campaign, "Healthy beginnings, hopeful futures," which aims to end preventable maternal and newborn deaths and prioritise women's longer-term health. The campaign particularly spotlights the support women and babies need from the healthcare system throughout their breastfeeding journey. This includes investing in skilled breastfeeding counselling, enforcing the International Code of Marketing of Breast-milk Substitutes, and creating supportive environments at home, in healthcare, and at work.

### World Hepatitis Day (28 July)

The World Health Organization (WHO) is urging accelerated global action to eliminate viral hepatitis as a public health threat and reduce liver cancer deaths. Viral hepatitis, specifically types B, C, and D, can lead to chronic infections that significantly increase the risk of cirrhosis, liver failure, or liver cancer, affecting over 300 million people globally and causing more than 1.3 million deaths annually. The International Agency for Research on Cancer (IARC) recently classified **hepatitis D as carcinogenic to humans**, noting it is associated with a two- to six-fold higher risk of liver cancer compared to hepatitis B alone. WHO is partnering with Rotary International and the World Hepatitis Alliance for this year's campaign, "Hepatitis: Let's break it down," to demand action against the rising toll of liver cancer.

Chronic hepatitis B burden is highest in Sub-Saharan Africa and East Asia & Pacific. The Lancet Commission on addressing the global hepatocellular carcinoma (HCC) burden reports that liver cancer is the sixth most common cancer and the third leading cause of cancer-related mortality worldwide. Without intervention, the number of new liver cancers is projected to nearly double from 0.87 million in 2022 to 1.52 million in 2050. The Commission has set a goal of achieving at least a **2% annual reduction in the age-standardised incidence rate (ASIR)** to curb this rise, with a more ambitious 5% reduction for regions already seeing declines. Achieving this could prevent 8.8–17.3 million new cases and save 7.7–15.1 million lives over the next 25 years. Importantly, **at least 60% of liver cancers are preventable** through targeted management of modifiable risk factors such as hepatitis B virus (HBV), hepatitis C virus (HCV), alcohol consumption, and metabolic dysfunction-associated steatotic disease (MASLD). Africa is expected to face the most dramatic increase in liver cancer cases and deaths due to rapid population growth and high prevalence of HBV and HCV, underscoring the urgent need for coordinated international efforts.

### **GAVI Board Meeting (24-25 July)**

The Gavi Board adjusted its objectives for the 2026–2030 period (Gavi 6.0), prioritising health impact in a resource-constrained environment. Key approvals included a new strategy for supporting fragile and humanitarian contexts, the introduction of RSV vaccines, and the establishment of an Mpox vaccine stockpile. However, internal documents revealed a "slowdown" in some Gavi-supported immunization programs due to a **funding shortfall, with the cost of Gavi 6.0 increasing from \$11.9 billion to \$13 billion.**

To address these challenges, the Board approved a new **"agile" funding tool called the Gavi Resilience Mechanism** for rapid response to outbreaks and emergencies, including in middle-income countries facing acute shocks. Gavi also approved its **first-ever health system strategy**, based on six pillars, to provide more differentiated and tailored programming, simplify funding, and align with primary health care. The organisation is undergoing a significant internal review, reducing its workforce by 24% (155 full-time roles) to cut operating expenses. The Board acknowledges the challenging balance between launching new vaccine campaigns, supporting preventative efforts, investing in health systems, and ensuring financial sustainability amid a tight funding landscape.

### **More on Global Health Governance & Financing/Funding**

- **Rethinking the Role of WHO:** Leading experts Ilona Kickbusch, Michel Kazatchkine, and Peter Piot propose three urgent reforms for WHO: 1) Refocus on its core mandate (norms, intelligence, pandemic preparedness); 2) Ensure financial independence; and 3) Strengthen governance and accountability. Andrew Harmer's blog also explores the consequences of WHO's current budgetary contraction.
- **Gates Foundation's Future:** As the Gates Foundation plans to cease operations by 2045, CEO Mark Suzman stated the foundation is doubling its giving to \$200 billion over the next two decades, with a focus on core priorities like maternal and child health, infectious diseases, and economic mobility. Suzman highlighted the paradox of celebrating 25 years of progress (e.g., halving child mortality) while anticipating a rise in preventable deaths this year due to current setbacks. He noted it's "a crazy world" that a philanthropic foundation has become the second-largest funder of WHO, indicating a misalignment of global resource allocation. The foundation aims for "catalytic" impact, demanding measurable outcomes and deep engagement from its partners.
- **EU Global Health Strategy:** A report provides an overview of the EU Global Health Strategy's implementation. Global Health Advocates responded by calling for scaled-up EU financing, a finalised monitoring and evaluation framework, enhanced engagement with partner countries, and elevating health on the political agenda. The EU has also pledged **US\$4.5 million to support Zimbabwe's First National Public Health Institute**, enhancing its capacity to prevent, detect, and respond to public health threats.
- **Health Taxes:** A Vital Strategies report argues that taxes on tobacco, alcohol, and sugary drinks offer a solution to Africa's growing non-communicable disease (NCD) burden, which is described as a "burning platform" accounting for a third of Africa's deaths. Failure to act on NCDs could cost low- and middle-income countries up to \$21 trillion by 2030. African governments, including South Africa,

Nigeria, and Kenya, are already exploring and implementing such excise taxes. Experts suggest that effective health taxes require careful design.

- **Global Tax Justice and Debt Crisis:** Climate economists at the Potsdam Institute for Climate Impact Research (PIK) suggest that international cooperation on **fossil fuel levies could raise billions annually (USD 66-200 billion)** for climate finance in developing countries. This initiative could be a "win-win" by pairing levies with targeted spending on international climate finance. Separately, climate change is worsening Africa's already heavy debt burden, as climate disasters impact national revenues. Research suggests **state-contingent debt instruments**, linked to predefined economic shocks, could provide financial breathing room for countries facing climate disasters.
- **Trump 2.0 and US Global Health Cuts:** The newsletter highlights concerns about the Trump administration's potential and actual actions affecting US global health commitments. Attempts to cut USAID funding, including PEPFAR, have created "chaos" and made the human toll "near-impossible to calculate," which some suspect is intentional to avoid public debate. A USAID director alleged "malfeasance" in the agency's leadership regarding aid freezes. The administration also scrapped an effort to pause health-research funding from the National Institutes of Health (NIH). Plans for the Development Finance Corporation (DFC) include a significant increase in its portfolio size (from \$60 billion to \$250 billion) with a focus on national security and less on its development mandate for poorer countries. While the Millennium Challenge Corporation (MCC) will survive, half of its programs face cuts. Republicans are also seeking to defund the OECD over global tax rulemaking, representing the latest effort to withdraw from international organisations. These cuts have already jeopardised maternal health advances in countries like Malawi, despite congressional efforts to protect some global maternal health programs.

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### Global Tax Justice, Debt Crisis & Financing of Global Public Goods:

Climate economists from the Potsdam Institute for Climate Impact Research (PIK) have suggested that international cooperation on **fossil fuel levies could generate between US\$66 billion and US\$200 billion annually** for climate finance in developing countries. This initiative is seen as a "win-win" if these levies are paired with targeted spending on international climate finance. Separately, climate change is intensifying Africa's already substantial debt burden, as climate disasters negatively impact national revenues, making debt repayment more challenging. Research proposes **state-contingent debt instruments**, linked to predefined economic shocks, as a mechanism to provide financial relief to countries facing climate disasters.

### Trump 2.0

The newsletter expresses significant concern over the potential and actual impacts of the Trump administration's actions on US global health commitments, describing them as potentially setting the US and part of the world "back to the dark middle ages".

- **USAID Cuts:** The chaotic nature of the proposed cuts to USAID funding, including the **PEPFAR program**, makes it "near-impossible to calculate" the human toll, which some suspect is intentional to avoid public debate. Although US lawmakers may have blocked a specific US\$400 million cut to PEPFAR, they did not restore the program. Lawsuits challenging the Trump administration's dismantling of USAID have been dismissed. An internal USAID director alleged "malfeasance" in the agency's leadership regarding aid freezes, stating that serious issues were ignored.
- **Health-Research Funding:** The Trump administration scrapped an effort to pause billions in health-research funding from the National Institutes of Health (NIH), which had initially restricted the NIH from awarding grants to external researchers.
- **Development Finance Corporation (DFC):** Plans for the DFC include a significant increase in its maximum portfolio size **from US\$60 billion to US\$250 billion**, with a primary focus on national security objectives and less emphasis on its development mandate for poorer countries. The proposal also seeks to expand the number of countries where DFC can operate, including high-income countries.

- **Millennium Challenge Corporation (MCC):** While the MCC will survive, half of its programs face cuts.
- **OECD Defunding:** Republicans in the House of Representatives are seeking to defund the Organisation for Economic Co-operation and Development (OECD) due to its role in global tax rulemaking, which they argue unfairly targets US companies. This move is part of the Trump administration's broader effort to withdraw from international organisations.
- **Impact on Maternal Health:** These funding cuts have already jeopardised maternal health advances in countries like Malawi, despite congressional efforts to protect some global maternal health programs. Former partners in Malawi are now struggling to safeguard gains made with US support, warning that these disruptions will lead to more preventable maternal deaths.

## Global Conference on Climate and Health & Planetary Health

- **2025 Global Conference on Climate and Health (29-31 July, Brasilia):** The World Health Organization (WHO), alongside the Government of Brazil and the Pan American Health Organization (PAHO), hosted this critical event as an official pre-COP30 meeting. The conference aimed to advance "bold and equitable climate-health solutions". Key expected outcomes included concrete inputs to the draft **Belém Health Action Plan** (a roadmap for embedding health into global climate policy), national commitments under the Alliance for Transformative Action on Climate and Health (ATACH), and defined pathways for promoting health as a core pillar of climate action leading up to COP30.
  - **Health at COPs:** The sources highlight a persistent challenge: **health has largely been "part of the circus with entertainment" at COPs, rather than being integral to the negotiation room** where decisions are made. Health is not part of the formal UN climate negotiating framework, and national-level commitments often lack concrete metrics for health outcomes. It is also largely ignored in global climate financial instruments and is not a high priority for most finance or even health ministries despite the increasing impacts of climate change. Experts like Alan Dangour note that despite a "Health Day" at COP28, "we achieved absolutely zero in that little [negotiating] room". A call to action suggests establishing health as a formal parameter in climate negotiations to unlock more investments. Concerns have also been raised about "sky-high accommodation costs" at COP30 in Belém, potentially pricing out poorer countries from negotiations.
  - **Latin America and the Caribbean Common Position:** A landmark declaration from Latin America and the Caribbean on Climate Change and Health, endorsed by over 50 signatories, outlines six strategic pillars: health protection, mitigation, adaptation, climate justice, leadership, and financing, advocating for integrated climate action centered on people's health.

## More on Planetary Health

- **WHO Health and Environment Scorecards:** WHO released its 2024 update of health and environment country scorecards, assessing how 194 countries manage eight major environmental threats to health, including air pollution, unsafe water, climate change, and loss of biodiversity. These scorecards are intended to guide national action by providing detailed data and promoting cross-sectoral engagement.
- **Environmental Impacts of Conflict:** The sources highlight the often-overlooked long-term, cumulative health impacts of conflict pollution, which are gaining increasing attention. War is "always bad for public health," causing widespread mortality, healthcare system collapse, food insecurity, and environmental destruction.
- **Health System Strengthening for Displaced Populations:** A Global Evidence Review on Health and Migration (GEHM) identifies effective strategies and policy directions for building climate-resilient, migrant-inclusive health systems.
- **African Environment Ministers:** African leaders committed to safeguarding the continent's natural resources and seeking innovative finance to address climate change challenges amidst declining official development aid. Tensions over climate financing resurfaced, with Africa

needing an estimated US\$277 billion annually to address climate change but currently receiving only US\$30 billion from multilateral sources.

- **Global Plastics Treaty:** As negotiations continue for the UN Global Plastics Treaty, a "critical linkage between health and environment governance seems to be largely missing from the draft text". This is particularly evident concerning cigarette filters (the world's most littered plastic item) and other health harms of plastics. Experts suggest strengthening the draft's health foundation by explicitly recognising existing health agreements like the WHO's FCTC.
- **Heat's Health Impacts:** The accelerating impacts of heat on health are a significant concern, driven by undeniable weather trends.
- **Dismantling Silos:** There is a call for collaborative action on climate change and health, urging "urgent, systemic action" by bringing together climate scientists, health professionals, and policymakers.
- **Bioethics for the Planet:** Traditional bioethics fields are considered poorly equipped to address planetary-scale drivers of ill health. There's a call for greater inclusion of planetary health in bioethics, prioritising the "bios" of the biosphere and engaging new stakeholders like Indigenous thought leaders and vulnerable groups.
- **Climate Blame in Africa:** Citizens across Africa place primary climate responsibility on themselves and their governments, rather than historic emitters.

#### PPPR (Pandemic Preparedness and Response)

- **Pandemic Fund:** The Pandemic Fund's new External Advisory Council convenes over 19 organisations, including the private sector, philanthropies, academia, and think tanks, to shape and innovate long-term pandemic preparedness and response (PPR) efforts.
- **2025 Pandemic Agreement:** The 2025 Pandemic Agreement is described as a "grand global social bargain" aiming to replace charity with equity. Negotiations involved the global north seeking stronger requirements to curb diseases at their source and access to scientific information, while the global south insisted on equitable access to products and international support for health system building. The World Health Assembly (WHA) took a crucial step toward this treaty to make the world "safer and fairer".
- **CEPI's Adjuvant Library:** A pioneering library of vaccine-enhancing adjuvants, funded by CEPI and hosted by the UK's Medicines and Healthcare products Regulatory Agency (MHRA), has launched. This library will serve as a "vaccine-adjuvant matchmaking service" to create more potent vaccines and accelerate responses to deadly disease outbreaks.
- **White House Official Resigns:** A top White House pandemic preparedness official resigned after roughly six months, indicating broader disarray at a time of numerous biological threats.

#### Health Emergencies

- **Cholera Outbreak in West and Central Africa:** The UN Children's Fund (UNICEF) estimates that **approximately 80,000 children are at high risk of cholera** in West and Central Africa as the rainy season begins. Active outbreaks in hotspots like the Democratic Republic of the Congo (DRC) and Nigeria are increasing the risk of cross-border transmission to neighbouring countries.
- **Mpox Control Efforts:** The mpox continental Incident Management Support Team (IMST) has launched its second continental mpox outbreak response plan, aiming to intensify response efforts, integrate interventions into existing health systems, and invest in preparedness. The plan calls for **US\$424 million in funding and 6.4 million mpox vaccine doses**, but only US\$196 million and fewer than 600,000 vaccine doses are currently available. African countries are urged to increase domestic health investments and focus on measurable results, operational efficiency, and long-term sustainability to contain the outbreak with limited resources. Lessons from countries like Gabon, Guinea, Mauritius, and Zimbabwe, which controlled mpox within three months, show the importance of decisive, promptly implemented public health responses. The **Africa Centres for Disease Control and Prevention (Africa CDC) and the European Commission** launched the Partnership to Accelerate Mpox Testing and Sequencing in Africa (PAMTA) with **€9.4 million** in funding to boost diagnostics and outbreak response capabilities across the continent.

## NCDs

- **Weakened Commitments on NCDs:** Governments have reportedly **weakened their commitments to addressing non-communicable diseases (NCDs)** following pressure from "big tobacco, alcohol, junk food, and fossil fuels". The draft political declaration for the UN High-Level Meeting (HLM) on NCDs in September no longer explicitly calls for high taxes on unhealthy products. The NCD Alliance described the draft as a "backslide," noting that active commitments to 'implement' and 'enact' have been replaced with the "far more passive language of 'consider' and 'encourage'". Vital Strategies urged negotiators to "reinstate explicit commitment to health taxes".
- **Health Taxes in Africa:** Taxes on tobacco, alcohol, and sugary drinks offer African countries an opportunity to regain "sovereignty" amidst declining donor funding. NCDs already account for one-third of Africa's deaths and are projected to surpass the burden of infectious diseases within five years, with potential economic losses of up to **\$21 trillion by 2030** if no action is taken. Some West African governments are exploring and implementing excise taxes to increase health security for universal health coverage.
- **Development Assistance for Health (DAH) and NCDs:** Historically, DAH has primarily focused on infectious diseases and reproductive health. In an era of declining resources, external support needs to be **catalytic, supporting reforms rather than directly financing services**. DAH could help low- and middle-income countries reorient health systems to address NCDs by focusing on neglected areas like economic and social policies, environmental, and behavioural drivers of diseases.

## UHC/PHC

- **African Small and Island States (S&IS):** Despite unique challenges, African S&IS show higher total health expenditure per capita and government prioritisation of health spending, performing relatively well in key health system inputs and outcomes.
- **"Diagonal" Approach to Nutrition Integration:** A new policy paper explores "diagonal" approaches as an alternative to vertical and horizontal models for integrating nutrition into health systems. This approach aims to **embed high-impact nutrition interventions within broader health system strengthening efforts**, with clear outcome measures and accountability mechanisms. This seeks to achieve targeted outcomes and system improvements simultaneously.

## Conflict/War/Genocide & Health

- **Gaza Famine and Starvation:** UN-backed food security experts warn that the "worst-case scenario of famine is currently playing out in Gaza," with mounting evidence of widespread starvation, malnutrition, and disease leading to hunger-related deaths. Children and elderly people are particularly vulnerable. An internal USAID analysis found **no evidence of systematic theft by Hamas** of US-funded humanitarian supplies, challenging a key rationale for a new armed private aid operation.
- **Destruction of Health Systems:** Physicians for Human Rights Israel (PHRI) reports that Israel's military campaign is "deliberately and systematically dismantling Gaza's health and life-sustaining systems," constituting genocide under international humanitarian law.
- **Detention of Medical Staff:** A rising number of doctors, including senior consultants, are among hundreds of medical staff detained in Gaza by Israeli forces, with 28 doctors currently held and none charged with crimes.
- **Call for Humanitarian Action:** Humanitarian agencies are urged to move beyond aid provision and denunciations to **take bold steps to stop what is described as genocide in Gaza**. This includes taking Western governments and EU institutions to national courts, the European Court of Human Rights, and the ICJ for their alleged complicity, and attempting to break the siege of Gaza.
- **Selective Silence:** There's a call to challenge the "selective silence" of many public health, medical, and social science associations regarding the genocide in Gaza, contrasting it with their rapid and vocal support in other conflicts like Ukraine. This suggests a "selectively empathic response".
- **Famines as Moral Failure:** Scientists from the Standing Together for Nutrition Consortium (ST4N) highlight that famines in Gaza, Sudan, South Sudan, and Yemen are a "horrifying human-made famine" and a "moral failure". They urge immediate, sufficient, unimpeded, and unconditional humanitarian access.

- **Halifax Declaration:** The 2025 International Refugee and Migration Health Conference (IRMHC) produced the Halifax Declaration, an urgent response to escalating structural inequities and restrictive refugee and migrant policies globally, affirming core principles to uphold the health, dignity, and rights of forcibly displaced people.
- **War as a Determinant of Health:** "Wars are among the most severe threats to public health," causing widespread mortality, healthcare collapse, food insecurity, and long-term socio-economic destabilisation. Public health institutions are urged to engage deeply with war and conflict as a determinant of health and health inequity, and advocate for peace through diplomacy and disarmament.

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

- **US Tariffs on European Medicines:** The Trump administration plans to impose a **15% tariff on many pharmaceutical products from the European Union**, potentially pinching manufacturers and leading to higher drug prices. These tariffs are contingent on a national security investigation.
- **Pooled Procurement:** There is potential for applying pooled procurement of health technologies in Asia, particularly for high-cost medicines, antibiotics, life-saving medical devices, and vaccines, leveraging existing mechanisms for coordination and information sharing.
- **US Vaccine Misinformation:** The US, despite its respected institutions, has become an unexpected source of global instability in vaccination confidence due to **domestic political interference, institutional undermining, and unregulated digital platforms**. This leads to a loss of credibility and funding for multilateral efforts, fuelling the spread of misinformation and undermining trust in vaccines globally. The urgency is compounded by the threat of future pandemics in a world fragmented by health misinformation.
- **Research Integrity:** The Lancet and the World Conferences on Research Integrity Foundation (WCRIF) are initiating a Commission on research integrity to address threats like paper mills, generative AI, and political attacks on academic freedom.
- **Women's Health Innovation:** The Gates Foundation is partnering with The BMJ on topics related to women's health innovation, emphasising that investments now will define future health and prosperity. To achieve equitable health systems, women need to be the architects of innovation, not just its recipients.

#### More reports & Miscellaneous

- **Global Hunger Trends:** While global hunger declined in 2024, it **continued to rise in most subregions of Africa and Western Asia**. An estimated 673 million people experienced hunger in 2024, still above pre-pandemic levels due to high food inflation.
- **Child Malnutrition:** The 2025 Joint Child Malnutrition Estimates (JME) reveal **insufficient progress towards the 2025 World Health Assembly (WHA) global nutrition targets and SDG target 2.2**. Only a quarter of countries are 'on track' to halve stunting by 2030, and even fewer for overweight targets. **150.2 million children under five are stunted**, and another 43 million are wasting.
- **Global Framework on Well-being:** A new WHO document offers practical insights for ministries of health to implement a global framework on well-being at country level, outlining **five key policy pathways**: nurturing Planet Earth and its ecosystems, promoting social protection and welfare systems, equitable universal health coverage, equitable economies, and equitable digital systems.
- **FGM in Sierra Leone:** The Ecovas court of justice has ordered Sierra Leone to **criminalise female genital mutilation (FGM)** after a ruling that it is tantamount to torture. The government is held liable for human rights violations due to its failure to criminalise the practice.