

IHP news 848 : Early October in global health

(3 October 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 always, it's been a busy week in global health, and this edition captures just on how many fronts the conversation is proceeding. From the [turbulence inside WHO's headquarters on restructuring plans](#), over a [landmark agreement between UNAIDS and Africa CDC](#) aimed at strengthening community health systems and epidemic preparedness, to early [rumble in the PABS jungle](#), the politics of health remain very much alive. At the same time, [youth voices are stepping up](#), reminding us that global health movements need their energy and leadership now more than ever.

One of last week's big moments was the **UN High-Level Meeting on NCDs and Mental Health** (25 Sept). Despite high expectations, the process was [somewhat \(temporarily?\) derailed](#) when the US declined to support it, and of course news of strong industry influence emerged long before the meeting, leading to a watered-down political declaration. The episode is a stark reminder of the uphill struggle to keep commercial interests in check when public health is on the line. This week's **Featured article by Grace Ku** delves a bit deeper into the many challenges ahead.

We also bring you reflections on the **tenth anniversary of the SDGs** ([not all cheerful](#)), some more final analysis of UNGA80, plenty more 're-imagining global health for the new era', and further assessments of pros and cons of Trump's new global health strategy. Do check out also the [Accra Reset](#), an effort led by Ghana's president to declare an end to the era of development-as-usual and push for the creation of new governance, business, and financing models.

Among the **reports** of this week, we feature a record-setting GAVI [annual progress report](#) (1.7 million lives saved last year), and later today, the **2025 EAT-LANCET commission** will be launched in Stockholm. Alongside this, you will find features in this IHP newsletter issue on access to medicines, climate pledges, corruption as a public health issue, and timely pieces marking **World Rabies Day** and **International Safe Abortion Day**.

Plenty to reflect on, plenty to debate and as always, plenty to act upon.

We leave you with an **announcement on the launch of Season 5 of the Global Health Matters podcast**, live from Berlin in ten days. (*We'll be there too!*)

Some background perhaps for the ones among you who are not familiar yet with the podcast from our (TDR) knowledge management colleague, **Garry Aslanyan**: With over 120,000 downloads across 180+ countries, the [Global Health Matters](#) podcast has emerged as a leading platform for bold conversations, diverse voices, and real-world insights in global health. Over four seasons, it has tackled topics ranging from health equity and misinformation to climate change and community-led care, featuring experts and changemakers from six continents. The podcast now offers a mix of "Signature" episodes, "Dialogues," and the popular "Trailblazers with Garry" series. **Season 5**

launches this October with new formats, deeper storytelling, and its first-ever live-recorded and streamed episode from the [World Health Summit](#) in Berlin on 12 October. Listeners can expect unfiltered perspectives, trailblazing guests, and a continued focus on making global health personal, accessible, and inclusive. *Global Health Matters* is available on all major podcast platforms.

Warmly encouraged!

See you all soon in Berlin, and enjoy your reading.

Rajeev B R (IHP resident)

Featured Article

Equity and integration in addressing noncommunicable diseases, mental health and well-being: a work in progress

Grace Ku (ITM)

In this short article, Grace Ku reflects upon the Political Declaration and proceedings of the 4th High Level Meeting on Non-Communicable Diseases during the 80th United Nations General Assembly (UNGA) held in New York on 25 September.

To read the full article, see IHP - [Equity and integration in addressing noncommunicable diseases, mental health and well-being: a work in progress](#).

Highlights of the week

Structure Highlights of the week & '5 reads of the week'

As we're gradually going to incorporate some of the feedback received in the IHP survey, we start this section with an innovation.

The **Overview** should help you navigate the 'Highlights of the week' section. As for the **5 reads of the week**, this is for the ones among you with very little time (*but clearly, can be a very biased selection, we would've liked to have selected plenty more*).

Overview Highlights section:

- Reimagining/resetting global health & development for a new era
- More on Global Health Governance & Financing
- SDGs at 10

- Some more UNGA80 analysis (including on HL meeting on NCDs)
- PABS (& other PPPR updates)
- Health Emergencies
- AMR
- Trump 2.0
- UHC & PHC
- World Rabies Day (28 Sept)
- International Safe Abortion Day (28 Sept) & other SRHR updates
- Determinants of health
- Human Resources for Health
- 2025 EAT-Lancet Commission on Healthy, Sustainable, and just Food systems
- Planetary Health
- Access to medicines, vaccines & other health technologies
- Miscellaneous

Five reads of the week:

- Health Policy Watch - [WHO Staff in Geneva Call for Freeze In Layoffs and Independent Review of Downsizing Plans](#)
- Devex - [The 'Accra Reset': Time's up for the legacy aid system](#)
- The Loop: [The Sustainable Development Goals at 10: how global governance is undermining progress](#)
- Devex Opinion - [How to make United Nations high-level meetings work for global health](#)
- Lancet Comment: [Availability of essential medicines in 14 remaining health facilities in Gaza](#).
(and a sixth : [The evolving Doughnut](#) (Doughnut 3.0))

Reimagining/resetting global health & development for a new era

For obvious reasons, we have decided it makes sense to start a separate subsection on this as this debate will continue for the coming months (perhaps a year). Below you find a few reads from this week. **But first, flagging a survey:**

Survey: The future of global health in the context of an evolving landscape and the Lusaka Agenda

<https://www.surveymonkey.com/r/LX67VNF>

“The European Union and several like-minded donors have launched a reflection process on the future of global health. This inter-governmental effort intends to build alignment among them towards practical actions they can take together to support global health reform. In addition, **the Wellcome Trust is conducting a series of regional dialogues on global health reform**, which includes a Europe and North America dialogue focused on gathering perspectives from stakeholders in this region. **This survey will serve both of these processes, as one of their data-collection activities.....”**

PS: You can weigh in till 15 October.

Devex - The 'Accra Reset': Time's up for the legacy aid system

[Devex](#):

“An effort led by Ghana's president calls for a paradigm shift toward more equitable global cooperation.”

“As the global health architecture struggles to hold steady amid plummeting foreign aid, a group of African leaders, policymakers, and global health experts **met in Ghana's capital city of Accra in August to craft a new path toward health sovereignty** — rooted in national ownership and more equitable global cooperation. And **they reconvened last week during the [United Nations General Assembly](#)**, alongside leaders of multilateral institutions, philanthropic organizations, business innovators, and civil society **to expand this framework beyond health to development more broadly in areas such as climate resilience, food security, and economic growth — and to move beyond the African continent to serve as a global agenda.**”

“They've dubbed it the **“[Accra Reset](#),”** an effort to **declare an end to the era of development-as-usual and to push for the creation of new governance, business, and financing models.** “

“Ghana's President John Dramani Mahama... has led these efforts, with support from former Nigerian President Olusegun Obasanjo. “We need to strategize. The world needs a reset, a re-engineering of the very logic of development itself.” “From Accra, a message went out to the world: If we are to heal our health systems, we must first reset development itself,” he said.

“The broader “Accra Reset” aims to “rebuild global development around sovereignty, workability and shared value,” according to Mahama. Under it, **African nations and others aim to jointly invest, design, and create solutions with external partners. This means moving beyond the temptation to craft another set of global goals once the Sustainable Development Goals expire in 2030, toward building executable business models and fit-for-purpose institutions and financing systems.** These include innovative financing instruments, strategic deal rooms to facilitate risk sharing, and smarter coalitions to multiply rather than ration resources, he said. ...”

“... Mahama also launched a [global presidential council](#) last week to provide political leadership for this vision, which includes government leaders from Africa, Asia, Latin America, and other key regions. **Alongside this presidential council, a high-level advisory panel — “a partnership of the willing” — will bring together leaders from health, finance, innovation, and business to create designs and execute solutions,** Mahama said. It will collaborate with the U.N., regional institutions, and the private sector — serving as a platform to test and refine new models....” **“ These councils will tackle questions such as how to govern in a polycrisis era and unlock trillions in climate finance.”**

“Health will serve as the proof-of-concept, given the long dependence on foreign aid, with lessons applied to other sectors. But before seeking global partnerships and external finance, the vision calls on countries to use existing funding more effectively.....”

PS: **“Experts at UNGA noted that the last major attempt to reset global development was the [Monterrey Consensus on Financing for Development](#) in 2002,** which demanded “a new

partnership between developed and developing countries.” This was an attempt to shift from a paternalistic approach to international development, they said.....”

Devex (Opinion) -Global public investment shows international cooperation can succeed

M Clavijo; <https://www.devex.com/news/global-public-investment-shows-international-cooperation-can-succeed-110982>

“Instead of framing financial flows mainly as “aid” from high- to lower-income countries, **global public investment envisions a system where all countries contribute, all benefit, and all have a say in how resources are used.**”

Re the **the inaugural meeting of a coalition working to advance global public investment** at UNGA80.

“**On Sept. 24**, Uruguay helped [convene](#) the **first working meeting of governments and international institutions on how to design and implement it.** This September in New York, **the work to plan how to put global public investment into practice commenced, with over a dozen governments taking part, and over a dozen more already interested in connecting with the process going forward.** Alongside governments, the coalition involves regional bodies, including the Development Bank of Latin America and the Caribbean, or CAF, former heads of government from the Club de Madrid, international organizations, and over a hundred civil society organizations. **The Global Public Investment Network provides the secretariat.** Regular convenings will take place across 2025, 2026, and 2027. Together, we will work to pilot and scale global public investment through regional dialogues, policy research, and pilot projects....”

PS: via [GPIN](#) : “**By delivering a proof of concept, the aim is to embed global public investment within the global financial architecture by 2028.**”

- See also **GPIN - [GPIN Launches a Government-Led coalition to Build Support for Global Public Investment](#)** (cfr the Seville summit)

Kristof Decoster - On reimagining global resilience & shared solidarity from a ‘social contract’ point of view

<https://kdecoster.blogspot.com/2025/09/on-reimagining-global-resilience.html>

My own (quick) contribution to the ‘reimagining’ debate, from a - national - **social contract** angle.
(with *focus on western countries*)

Starting point - how do we overcome this conundrum: “**if people already can’t agree on the national interest (after elections), why would you expect them to agree on a global interest (and contribute to it in a fair way)?**” (with a few suggestions)

Via LinkedIn - Why youth activism in global health is needed more than ever

Shakira Choonara & David Imbago-Jacome ; [LinkedIn](#);

By a few commissioners of the second Lancet Commission on adolescent health and wellbeing.

“The [second Lancet Commission on adolescent health and wellbeing](#), launched at the World Health Assembly in May 2025, points to concerning trends impacting adolescents, who are already facing unprecedented challenges. As Youth Commissioners, we are gravely concerned....” for a number of [good] reasons.

PS: re ‘Youth movements as catalysts in global health’: “History reminds us that youth movements play a critical role in shaping change—from resisting colonialism and authoritarianism to advancing gender equality. The same holds true for global health. In the face of escalating risks, youth leaders, activists, and movements have the potential to shift course toward better health for both people and planet.....”

More on Global Health Governance & Financing

HPW – WHO Staff in Geneva Call for Freeze In Layoffs and Independent Review of Downsizing Plans

<https://healthpolicy-watch.news/who-staff-in-geneva-call-for-freeze-in-layoffs-and-independent-review-of-downsizing-plans/>

(from last weekend) “**Staff unrest at the World Health Organization’s Geneva headquarters reached a new milestone this week, as the WHO Staff Association (HQSA) adopted three resolutions challenging the fairness and legitimacy of the Organization’s ongoing restructuring process, which has already led to post abolitions, reassignments, and widespread anxiety.**”

PS: “**Together, the Assembly resolutions have poised the Staff Association to play a more assertive role in the WHO downsizing process. However, it remains to be seen how WHO’s senior management might respond to demands by the group, which has never gone on strike and typically remained in the shadows of major WHO management moves. Health Policy Watch could not reach a WHO spokesperson by the time of publication.**”

“For WHO, already facing a US\$1.7 billion budget shortfall after the withdrawal of major donor funding, **the challenge is acute. Leadership must balance cost-cutting imperatives with credibility, fairness, and staff morale.** Headquartered in Geneva, WHO’s staff there is in the eye of the storm.”

- Related: Geneva Health Files – [A No-Confidence Motion at World Health Organization: The Real Crisis is Leadership \[GUEST ESSAY\]](#) (by Edward Kelly)

“Author Edward Kelly (former WHO staff member) argues that crisis at WHO is “not merely a local human resources issue—it is a signal of critical organizational fatigue”. He urges that “international

public leadership should be held to the same transparency standards as those of the organisation's member states."

Starting from: **"A no-confidence motion was passed by WHO staff at the headquarters in Geneva on September 29, 2025.** This is the first time ever against a sitting Director-General in relation to ongoing restructuring measures....."

"their coordinated expression of no confidence is a critical early warning signal to member states: it suggests that the organization's internal cohesion—the basis for executing its global mandate—is under threat....."

"Given the HQSA vote of no confidence and ongoing staff concerns, the January 2026 PBAC session represents a critical opportunity to address these governance risks....."

UNAIDS and Africa Centres for Disease Control and Prevention sign landmark agreement to strengthen community health systems and epidemic preparedness across Africa

https://www.unaids.org/en/resources/presscentre/pressreleaseandstatementarchive/2025/september/20250926_africa-cdc-mou

(26 Sept) "UNAIDS and the Africa Centres for Disease Control and Prevention (Africa CDC) have today signed a Memorandum of Understanding (MoU) on the sidelines of the United Nations General Assembly to deepen collaboration in advancing Africa's health security, strengthening community health systems, and ensuring sustainable HIV responses...."

Frontiers in Public Health – We're closer than ever to ending AIDS—let's not lose ground

Peter Sands; <https://www.frontiersin.org/journals/public-health/articles/10.3389/fpubh.2025.1655240/full>

Opinion, ahead of the Global Fund Replenishment.

Quote: "This is a pivotal moment. **The question is no longer whether we can defeat HIV and AIDS – but whether we will maintain the resolve to do so.**"

Devex Pro – The top grantees of Wellcome

<https://www.devex.com/news/the-top-grantees-of-wellcome-110886>

(gated) "Wellcome has given £6.2 billion worth of grants over the past five years. Who are the top grantees overall? How much did global south organizations get? Devex analyzed the numbers to find out. »

Geneva Health Files - Beyond Crisis: Strengthening Global Health Through Diplomacy

Divya Lakhotia, Helen Clark, Anders Nordström, Garry Aslanyan, Brian Li Han Wong, Katherine Urbáez, Yik-Ying Teo [Geneva Health Files](#);

“In today’s edition, our esteemed guest authors, call on health diplomats **“to ensure that policies are influenced not by temporary geopolitical shifts but are grounded in a future looking world where equitable health is a reality.”** This contribution discusses **“the relevance of health diplomacy or the role health could play in diplomacy is becoming increasingly apparent, not as a soft accessory to health policy, but as a foundational pillar for advancing health impacts.”**

“This commentary points to the historical underpinnings of global health, how those have contributed to our current challenging situation, and the imperative to reimagine and rebuild these structures and invest even more in health diplomacy.”

PS: **“Health diplomacy**—defined as the art and science by which governments, the private sector, civil society, and individuals navigate political processes to improve health outcomes —offers tools for navigating these turbulent waters. This and other critical questions were **examined at a seminar at the World Health Summit Regional Meeting in Delhi in April 2025, from which four key messages emerged:** Strengthening Regional Leadership; Rethinking Health Financing; Shifting Arenas for Collaboration; Local Capacity and Academic Engagement.”

“Our call is to invest in and enhance health diplomacy capacity across the world. We see this as an opportunity and absolute necessity to be able to advance health in a changing geopolitical environment....”

Devex Pro – Could a new coalition around saving lives be the way forward?

<https://www.devex.com/news/could-a-new-coalition-around-saving-lives-be-the-way-forward-110966>

(gated) **“Gates Foundation's Gargee Ghosh on a path forward that makes empathy core to development work and stays focused on progress, despite the turbulent times.”**

“This has been a turbulent year in the global development sector, but **Gargee Ghosh, the Gates Foundation’s president of global policy and advocacy**, still sees a way forward.... While there may be skepticism about aid budgets, people in France, the United States, India, or Senegal care about saving and improving lives, she said, adding that **maybe a new “coalition around saving lives” is the path forward.....”**

(quick hint for her: such a coalition is going to get far more momentum if the billionaire class is at last properly taxed and reined in)

Global Health Research & Policy - Private sector engagement strategies with implications for NCD prevention and control: focus on ten international organisations

Téa E. Collins, Luke Allen et al; <https://ghrp.biomedcentral.com/articles/10.1186/s41256-025-00448-4>

Among the findings: **“Whilst all PSE documents emphasised the importance of conducting due diligence, they varied widely in their approach to the risk of engagement and the sophistication of potential conflict of interest management strategies.** Many documents were silent on prohibited industries, managing reputational risks, and guidance to Member States. **The proactive engagement stance in USAID and World Bank policy documents contrasted starkly with more conservative approaches advanced by UNDP, FAO, and WHO.....” Conclusion:** “The core practices of conducting due diligence and risk mitigation are common to all of the major international organizations we assessed, however, the framing, content, and PSE processes vary widely. **The potential impact of these findings is that WHO and other partners can focus on adopting common approaches wherever possible for greater coherence and smoother coordination across the wider development system.”**

World Bank (Brief) - Health System Transformation & Resilience Fund (HSTRF)

<https://www.worldbank.org/en/topic/health/brief/health-system-transformation-resilience-fund>

“The World Bank’s **Health System Transformation & Resilience Fund (HSTRF)** is the World Bank’s primary Trust Fund vehicle for achieving the goal and supporting countries to [provide quality, affordable health services for 1.5 billion people by 2030.....”](#)

“The HSTRF provides support through three main implementation windows: Country and Regional Support; Global Public Goods; Knowledge Exchange and Learning....”

Do read on, including on geographic focus.

CGD - Financing of Healthcare Supply Chains in Low- and Middle-Income Countries: A Novel Conceptual Framework

P Baker et al; <https://www.cgdev.org/publication/financing-healthcare-supply-chains-low-and-middle-income-countries-novel-conceptual>

“... The reality [is] that health financing and supply chain policymakers work in institutional and disciplinary silos, are backed by different global health agencies and donors, and lack a common understanding or language to develop robust national policies.”

“Following a review of prior theoretical work and case studies, and engagement with policymakers and experts, **this CGD Policy Paper proposes a novel conceptual framework that integrates the functions and policy domains of the two fields.** It defines **financing of supply chains** as “the policies and practices necessary to provide financial resources to the supply chain, and ensure their optimal use, in order to achieve health system goals.” The framework articulates integrated sectoral

governance as a prerequisite for success and then **details 10 distinct functions across four phases of the supply chain: planning, procurement, delivery, and monitoring.....**"

- Related [CGD blog – Financing Supply Chains: The Missing Link in Global Health](#) (by K Klemperer et al)

"... CGD joined forces with the Africa Resource Centre earlier this year **to launch a new [working group on improving the financing of supply chains](#)**. To underpin the policy solutions of the working group, today we have published a [novel conceptual framework](#) on which we are seeking feedback. **By integrating the health financing and supply chain fields**, we hope this framework inspires a new community of practice, better national policies and global guidance, and ultimately improves access to essential commodities....."

SCMP - Why US-China health and drugs cooperation must top Trump-Xi agenda

Yanzhong Huang ; <https://www.scmp.com/opinion/world-opinion/article/3326268/why-us-china-health-and-drugs-cooperation-must-top-trump-xi-agenda>

"The years-long impasse harms both nations and the world, and the stakes in global health security could not be higher."

Excerpt: **"Last month, I joined a US think tank delegation to China, participating in a round table at a top university in Beijing. A remark by a leading professor of diplomacy struck me: "If China and the US can't cooperate on health issues, they can't cooperate on others."** His words underscore the **dire state of bilateral relations**. Even during peak Cold War tensions, public health challenges such as polio and smallpox transcended geopolitical rivalries and forged unlikely alliances. Yet between 2017 and 2024, there were no high-level US-China meetings on public health. These seven years spanned the Covid-19 pandemic, when no serious dialogue occurred; instead, arrangements for cooperation on disease surveillance and response were dismantled...."

"In January last year, following the summit at Woodside between then US president Joe Biden and Chinese President Xi Jinping, the two nations established a working group to tackle illicit synthetic drugs, including fentanyl and its precursor chemicals, yielding real progress. But that mechanism has stalled under President Donald Trump....."

WHO Afro - 14 African countries explore innovative financing solutions for health in the African region

<https://www.afro.who.int/countries/south-africa/news/4-african-countries-explore-innovative-financing-solutions-health-african-region>

(23 Sept) Re a meeting from last week. **" Technical experts from 14 African countries, multilateral development banks, development partners, and global health initiatives are convening in Johannesburg for a three-day Regional Technical Meeting on Innovative Financing for Health in Africa, co-organized by the World Health Organization (WHO) Regional Office for Africa and the Global Fund. "**

“... **The meeting aimed to:** (1) Mobilize and sustain domestic financing for health by exploring fiscal policies and innovative instruments that can expand health budgets and reduce donor dependency. (2) Enhance efficiency, alignment, and impact through improved partner coordination and integration of health financing within national frameworks. (3) Promote innovative approaches such as blended finance, social impact bonds, pooled procurement, and climate-health financing. “

“... **The agenda highlighted country-led innovations** including: Ghana’s Medical Trust Fund and removal of caps on VAT revenue for health insurance. South Africa’s pioneering TB Social Impact Bond, linking financing to measurable health outcomes. Tanzania and Nigeria’s advances in pooled procurement and local pharmaceutical production. “

The meeting culminate[d] in “the development of country ideation maps, outlining pipelines for innovative financing opportunities and a **commitment to establish a regional community of practice** to sustain momentum and foster ongoing collaboration.”

SDGs at 10

The Loop - The Sustainable Development Goals at 10: how global governance is undermining progress

B Faude et al ; <https://theloop.ecpr.eu/the-sustainable-development-goals-at-10-how-global-governance-is-undermining-progress/>

Cool blog, **linked to a recent special issue in Global Policy.**

“This month marks ten years since the adoption of the UN’s Sustainable Development Goals. Yet there is little cause for celebration: progress has been dismal. **Benjamin Faude and Jack Taggart argue that the global governance of the goals has undermined progress.** They warn that rather than achieving transformative change, **SDG governance risks entrenching the beleaguered status quo.**”

Excerpt: “...While these headwinds have slowed progress, **the institutional structure of SDG governance also demands scrutiny. Does the governance system inaugurated by the goals help or hinder their realisation?** At their launch, commentators hailed the SDGs as an innovative approach to global cooperation. They **rest on voluntary commitments and ‘global governance by goal-setting’ rather than binding rules. Governance is also distinctly hybrid.** Treaty-based multilateral organisations such as the UN, WTO, and OECD work with informal bodies like the G20 and thousands of transnational partnerships in pursuit of specific goals and targets. **In theory, SDGs' 'hybrid' governance structure has potential benefits, such as institutional diversity. But in practice, the risks of such diversity have outweighed the benefits....**

“**Our Special Section in Global Policy** shows that SDGs have indeed enabled comprehensive issue coverage and widened opportunities for participation. **Soft forms of governance, however, have reinforced, rather than transformed, existing power structures.**”

- And a link: IISD - [UN Climate and SDG Synergy Report 2025 Quantifies Benefits](#)

“ The report finds that joint action on climate and sustainable development can generate up to 37% greater efficiency, “freeing resources and maximizing co-benefits across people, planet, and prosperity”. With the SDG financing gap currently measured at more than USD 4 trillion annually and the climate financing gap estimated at USD 6 trillion per year, the report argues that “synergistic action is not optional but the most efficient and impactful path forward”.”

Some more UNGA80 analysis (including on the UN HL meeting on NCDs & mental health)

Including some news you might have missed from last week.

UN News - ‘House of diplomacy and dialogue’: UN wraps up high-level week with calls for peace, climate action and reform

<https://news.un.org/en/story/2025/09/1165994>

With **overview of the main themes** of UNGA80. Including the **“five critical choices”** outlined by **Secretary-General António Guterres** at the opening of the general debate.

Devex Invested: Multilateralism and money converge at UNGA80

<https://www.devex.com/news/devex-invested-multilateralism-and-money-converge-at-unga80-110960>

In case you missed this: “Last week at the [80th United Nations General Assembly](#), global leaders gathered for **the first Biennial Summit for a Sustainable, Inclusive and Resilient Global Economy, a new high-level forum** designed to **rethink the international financial system** on the road to achieving the U.N. Sustainable Development Goals.”

Excerpt: “...[IMF](#) chief Kristalina Georgieva [urged countries](#) to **put debt on a sustainable path** as global public debt approaches 100% of gross domestic product. South African President Cyril Ramaphosa **pushed for faster debt relief, fairer financing, and tax reforms** to close the \$4 trillion SDG financing gap, and [WTO](#) head Ngozi Okonjo-Iweala highlighted **trade’s “remarkable resilience” despite global tensions.....**”

PS: re malaria: “... A **new report by [Malaria No More](#) and the [Corporate Council on Africa](#) is making the case that malaria control isn’t just a health imperative — [it’s a smart investment](#)**. The study estimates that **every \$1** the U.S. spends on African malaria control **yields \$5.80 in economic growth**, with \$126.9 billion in untapped GDP at stake. Released last week, the report argues **malaria is a “tax” on African economies** that costs \$12 billion annually and disrupts U.S. business interests on the continent. Malaria No More CEO Martin Edlund said the issue is “just as important, for example, as investing in roads and ports,” while CCA’s Florizelle Liser notes that **health security is increasingly factored into investment decisions**. Their findings land as the U.S. rolls out [its new “America First Global Health Strategy,”](#) which emphasizes partnerships, coinvestments, and advancing U.S.-made health products. With Africa projected to account for 1 in 4 people globally by

2050, advocates say malaria elimination could become one of the continent's biggest economic multipliers — and a competitive edge for U.S. businesses.”

ODI (Expert Comment) - Three key takeaways from UNGA 80

F Carver et al ; <https://odi.org/en/insights/four-key-takeaways-from-unga-80/>

“... Here, ODI Global experts discuss **key takeaways on humanitarian reform, gender and the rights of women and girls, and Palestine.....**”

Devex (Opinion) - How to make United Nations high-level meetings work for global health

K Milton, A Malik & K Buse; <https://www.devex.com/news/how-to-make-united-nations-high-level-meetings-work-for-global-health-110957>

“U.N. high-level meetings are considered a rare and important opportunity to raise the political priority of a global health issue; **realizing that potential will require a series of reforms.**”

“Last week, on Sept. 25, a fourth high-level meeting, or HLM4, of the United Nations General Assembly was held on the topic of noncommunicable diseases, or NCDs, and mental health. While **initial ambitions showed potential, a flawed process led to a disrailing of the negotiation process, a watered-down declaration, and ultimately, negative consequences for global health....**

Authors **therefore recommend five actions to counter the negative impact of industry lobbying** and **“make Political Declarations matter for health”** (*the public health equivalent of MAGA ☹️*).

“To make Political Declarations matter for health, we propose **a five-point agenda:**

- * Tighten controls on undue industry influence, shielding UN processes from commercial interests.
- * Increase transparency in negotiations, including publication of successive drafts and compilation texts.
- * Strengthen collective public health lobbying, to counteract fragmented advocacy.
- * Support government leaders with evidence and political cover to adopt more ambitious commitments.
- * Go big in the zero draft, recognizing that ambition will inevitably be watered down during negotiations.

These steps would help shift from vague aspirations to real commitments — ensuring, adopting, and implementing measures rather than merely encouraging them.....”

Knowledge action portal on NCDs - Fourth Multistakeholder Gathering charts pathways for stronger NCD and mental health governance

https://knowledge-action-portal.com/en/news_and_events/news/10479

“With global health leaders warning that progress on noncommunicable diseases (NCDs) and mental health is still far off track, **the Fourth Multistakeholder Gathering convened on the sidelines of UNGA80 to push for practical solutions.** Hosted on the first day of the high-level debate, the

evening brought together ministers, civil society advocates, academics, and private sector representatives to **debate how to lock in multisectoral governance and make NCD responses more inclusive and evidence-driven.**"

"Organised by the NCD Alliance and co-sponsored by the Ministry of Health of Brazil, the World Diabetes Foundation, and the WHO Global Coordination Mechanism on NCDs, with financial support from Viatris, the event featured case studies from Ghana, Tanzania, Brazil, and Kenya alongside reflections from WHO and regional institutions such as the Africa CDC...."

"The central message was clear: turning the commitments of the HLM4 Political Declaration into action will require sustained political leadership, increased multistakeholder collaboration, smarter use of data, and narratives that resonate across society."

- Related: [Advancing multisectoral and multistakeholder actions on noncommunicable diseases: thematic issue briefs](#)

PABS (& other PPPR updates)

Politico Pro – Pandemic Agreement

<https://www.politico.eu/article/danes-push-to-simplify-rules-in-pharma-package-talks/>

Excerpt: "World Health Organization members have eschewed pharma lobbyists in favor of scientists and academics to advise on the pandemic agreement, despite the EU's nomination of industry reps. "

"Expertly curated: Officials circulated a list ... of scientific experts who will be asked to advise on definitions ahead of next week's negotiating session on the sharing of pathogen data and any resulting drugs, vaccines and diagnostics. The WHO told countries the list was "curated" from the names prepared by the country-appointed officials mediating the talks and those submitted by countries themselves. All 38 experts are already part of a WHO advisory group, committee or research center. **MIA:** We also got hold of the list of names the [EU suggested](#) for inclusion. Notably, it included lobbyists from the pharmaceutical industry, including David Reddy, director general of the International Federation of Pharmaceutical Manufacturers and Associations (IFPMA). But his name didn't make the final cut. **Why does this matter?** The move annoyed some negotiators from developing countries and NGOs, who warned it risked blurring the lines between expert and lobbyist. They feared pharma reps would try and tilt the design of the system in their favor if they were granted an advisory role." *(also with the reaction from EU and IFPMA)*

Health Emergencies

Cidrap News - DR Congo Ebola outbreak total rises to 64 amid encouraging signs

<https://www.cidrap.umn.edu/ebola/dr-congo-ebola-outbreak-total-rises-64-amid-encouraging-signs>

“Seven new Ebola virus cases have been reported in the Democratic Republic of Congo’s (DRC’s) latest Ebola outbreak, amid **signs transmission is decreasing**, the **World Health Organization (WHO) African regional office said in an update yesterday**. The new cases were reported from three areas within Bulape health zone in Kasai province. **“The Ebola outbreak in Kasai Province is showing encouraging signs of decline, with transmission now more localized and less explosive than in the initial phase characterized by nosocomial spread and superspreading events,”** the WHO said. However, the **WHO warned risks remain**, and small clusters within families and close contacts could sustain transmission if sick people aren’t promptly identified and isolated.”

PS: **“Vaccination expands in hot spots:** So far, 4,115 people have been vaccinated with the Ervebo (VSV-EBOV) as of September 28, focusing on health and frontline workers, contacts, and contacts of contacts. Apart from the ring vaccination campaign, targeted vaccination began on September 27 in high-risk populations in hot spots, which include Bulape, Bulape Communautaire, Dikolo, Bambalae, Ingongo, and Mpianga health areas. Twelve more vaccination teams were trained to support the expanded immunization activities. So far 12,130 vaccine doses have been deployed to Kasai province.”

- For more detail, see **WHO Afro** - [Response efforts slowing down Democratic Republic of the Congo Ebola outbreak](#) (2 Oct)

WHO Afro - Regional Strategic Preparedness and Response Plan for Ebola Virus Disease Outbreak in the Democratic Republic of Congo, Version 01, September 2025

<https://www.afro.who.int/publications/regional-strategic-preparedness-and-response-plan-ebola-virus-disease-outbreak>

“The plan outlines response priorities aligned with the five pillars of the WHO Health Emergency Preparedness and Response Framework: collaborative surveillance, community protection, safe and scalable care, emergency coordination, and access to countermeasures. **It also provides a platform to strengthen preparedness capacities and build long-term resilience in the health system, particularly in areas such as water and sanitation, laboratory capacity, and human resources.”**

AllAfrica - African Nations Review Mpox Response

<https://allafrica.com/stories/202509300301.html>

“Scores of representatives from African countries grappling with the ongoing mpox crisis in the region have met in the Ethiopian capital, Addis Ababa, for an "intra-action review" of the response measures of individual states.”

“Speaking during the regular online briefing of the African Centers for Disease Control (Africa CDC) on Thursday, September 26, the head of the Incident Management Team in the DR Congo, Yhap Boum, said the meeting became necessary to agree on a continental approach for the next three years, including integrating mpox response in the healthcare systems of each state. The Africa CDC official said the gathering also presented an opportunity for countries with high prevalence rates of the disease to share their experiences....”

Cidrap News - Kenya and Zambia battle mpox spikes as African countries manage multiple health threats

<https://www.cidrap.umn.edu/mpox/kenya-and-zambia-battle-mpox-spikes-african-countries-manage-multiple-health-threats>

Cfr Africa CDC's media briefing of yesterday.

"Though some of Africa's biggest mpox hot spots continue to see downward trends, fresh spikes are occurring in other countries such as Kenya and Zambia. Meanwhile, local spread is now suspected in Senegal, following an earlier detection of an imported travel-linked case."

"In Africa this year, 26 countries have experienced mpox outbreaks. Meanwhile, **deadly cholera outbreaks have struck 23 of the region's countries, with 20 also grappling with measles,** as well as other infectious disease outbreaks including dengue and Lassa fever."

"At a weekly media briefing today, Yap Boum, PhD, MPH, deputy incident manager for Africa CDC's mpox response, said no mpox deaths were reported over the past week, which is encouraging...."

AMR

Stat – WHO says the antibacterial pipeline reveals a dual crisis: scarcity and lack of innovation

<https://www.statnews.com/pharmalot/2025/10/02/antibiotics-antibacterials-tuberculosis-infections-medicines-pharma/>

"The number of medicines under development has fallen, and relatively few have been deemed innovative."

"Despite ongoing concern over antibiotic resistance, a new report finds there are fewer antibacterial medicines in clinical pipelines than just two years ago and relatively few qualify as innovative, suggesting the majority of treatments would be insufficient to tackle the fast-growing public health threat."

"Specifically, the number of antibacterial medicines under development fell to 90 this year from 97 in 2023; of these, just 15 were deemed innovative. Moreover, there was insufficient data to confirm that 10 of those innovative agents could combat cross-resistance, which is a way of saying that resistance to one antibacterial could reduce the effectiveness of another treatment....."

Trump 2.0

BMJ News - Experts welcome Trump's "America first" global health strategy

<https://www.bmj.com/content/390/bmj.r2049>

“Donald Trump’s America First Global Health Strategy has been largely welcomed by global health experts, but some have raised concerns over the practicalities of its implementation and gaps in its policies.”

With views of T Bollyky, T Frieden, C Kyobutungi & others.

Devex - Supreme court rules that Trump administration can let foreign aid expire

<https://www.devex.com/news/supreme-court-rules-that-trump-administration-can-let-foreign-aid-expire-110946>

“Constitutional questions about who controls government spending are at the center of this closely watched case.”

“The Supreme Court ruled Friday that the Trump administration does not have to obligate \$10.5 billion in foreign aid funding set to expire on Sept. 30, overturning a lower court order. The majority of the justices struck down the Washington D.C. District Court’s preliminary injunction that compelled the administration to obligate the funds, including about \$4 billion that it had asked Congress to rescind. The high-stakes case goes beyond just foreign aid money, challenging how much power the executive branch has over government spending, which is typically the purview of Congress.....”

Our World in Data - Foreign aid from the United States saved millions of lives each year

S Van Teutem & H Ritchie; <https://ourworldindata.org/us-foreign-aid-saved-millions>

Update (as of 29 Sept). Including: “...We conclude that aid programs financed by American taxpayers saved approximately three million people annually. ...”

CGD (blog) - Who Bears the Burden? Tracking the Global Impact of Recent US Foreign Policy Shifts

H Dempster et al; <https://www.cgdev.org/blog/who-bears-burden-tracking-global-impact-recent-us-foreign-policy-shifts>

‘Since January, the United States has adopted a range of foreign economic policies with negative impacts on the rest of the world, including higher tariffs on exports, taxes on remittances, and reductions in US foreign assistance. In this blog we draw on that analysis to construct a ranking assessing the combined impact of these changes: which countries are likely to suffer most from the US’s new trade, remittances, and aid policies, and which are comparatively unaffected.’

Check out the **top 20 (table) of most affected countries**.

“The country examples illustrate three patterns that stand out in the ranking: Poorer countries have been disproportionately hurt; US allies have not been spared; Gas and oil exporters have been insulated.”

Georgetown (Centre for Global Health Policy & Politics) (Working paper) - Global Health Equity Considerations of Political Decisions Trump, The US, and Immunization

<https://repository.digital.georgetown.edu/handle/10822/1102269>

“In their new working paper, ["Global health equity of political decisions: Trump, the US, and immunization,"](#) the Center's Nina Schwalbe, Juan-Pablo Gutiérrez, Brian Wahl, and Susanna Lehtimäki use the **4As framework (affordability, availability, accessibility, and acceptability)** to show how these shifts are derailing vaccine access and weakening countries' abilities to maintain pre-2025 coverage. **The authors warn that unless affected countries and donors step in to close funding gaps, the gains of the last 20 years towards equitable vaccine access may be lost.**”

Reuters - Babies' deaths in Cameroon show how US aid cuts curtail malaria fight

[Reuters:](#)

Local officials attribute **the spike this year in malaria fatalities** to foreign aid cuts by the United States.

Politico - Trump plans to block funding to groups that promote diversity policies abroad

<https://www.politico.com/news/2025/10/01/trump-plans-block-funding-groups-promote-diversity-policies-abroad-00591078>

“The administration **wants to expand a policy that already restricts U.S. funding to foreign groups that promote abortion access.**”

“The Trump administration **plans to block U.S. funding to organizations that do work abroad on issues related to gender identity and diversity**, according to a U.S. official and nonprofit groups informed of the plan. **It's a major expansion of the Mexico City Policy**, which prevents foreign groups receiving U.S. global health funding from providing or promoting abortion, even if those programs are paid for with other sources of financing.”

PS: “MSI and other nonprofits with knowledge of the policy **worry that the Trump administration would use this new policy to compel foreign governments to change their policies around abortion and DEI and other issues the administration disavows in exchange for any kind of U.S. foreign funding.** “That’s part of what looks really insidious here,” said Beth Schlachter, a senior director of U.S. external relations at MSI Reproductive Choices....”

- See also AVAC’s Global Health Watch : [The US May Expand Mexico City Policy / Global Gag Rule](#)

“... **Reportedly, the language in this latest iteration of the policy would be expanded to also ban US funding for foreign assistance that promotes “gender ideology” or DEI initiatives.** The inclusion of gender affirming care and DEI continues this Administration’s ongoing mischaracterization of existing foreign assistance programs, and attacks on programs that are trans inclusive or seek to

address racial and gender disparities. “ **“IMPLICATIONS: This expansion of the Global Gag Rule would fulfill a long-standing conservative goal, explicitly named in [Project 2025](#), to reshape US global public health funding away from evidence-based programs that affirm the needs and dignity of sexual and gender minorities.** Turning away from these vulnerable populations further threatens and sets back progress towards ending the global HIV epidemic. “

UHC & PHC

HPW - AI Poses ‘Existential’ Threat to Europe’s Health Systems, Summit Chief Warns

<https://healthpolicy-watch.news/ai-poses-existential-threat-to-europes-health-systems-summit-chief-warns/>

Re **Gastein**. **“Artificial intelligence poses an “existential” threat to Europe’s health and social security systems through its potential to “completely replace” human work and eliminate the income tax funding base on which they depend,** a leading health policy figure has warned. Clemens Marten Auer, president of the European Health Forum Gastein, used the opening of the summit’s 28th edition in Austria’s Tauren mountains to **sound the alarm that AI automation could hollow out the tax revenues that underpin Europe’s postwar welfare systems.....”**

“...Europe’s social contract—the postwar consensus guaranteeing health, housing and education funded through employment-based taxation—is under attack from all sides as stagnating economic growth and ageing populations collide with budgets strained by war, climate change and digitalisation.”

The Lancet Regional Health – Americas Commission: Resilience in Primary Health Care across Latin America and the Caribbean

<https://www.thelancet.com/commissions-do/primary-care-resilience>

“The Latin America and the Caribbean (LAC) region is particularly vulnerable to shocks, including natural, anthropogenic, and climate change-related, which threaten the health of millions. Considering the history of underwhelming responses to past public health emergencies, and the region's high risk for future shocks, it is urgent to put resilience as a cornerstone of primary health care (PHC)-based systems.”

“This Commission sets out five high-level recommendations that mutually reinforce essential health services coverage and resilience by ensuring that everyone can access the health care they need, in their community, along the resilience cycle: before, during, and after shocks. There is no trade-off between the development of PHC-based systems and health system resilience; in fact, they are synergistic and mutually reinforcing.”

Start with the **The Commission** itself: [Lancet Regional Health Americas - Political economy of primary health care resilience in Latin America and the Caribbean: insights from the WB/PAHO Commission recommendations](#) (by Ernesto Báscolo, S Bennett et al)

But there are also a number of related Viewpoints.

World Rabies Day (Sept 28)

GAVI - Partnering for a rabies-free future: integrating rabies control into national health priorities

<https://www.gavi.org/news/media-room/partnering-rabies-free-future-integrating-rabies-control-national-health-priorities>

“In line with this year’s **World Rabies Day** theme, “*Act Now: You, Me, Community*”, the **Global Alliance for Rabies Control (GARC)** and **Gavi, the Vaccine Alliance (Gavi)** are calling for **shared responsibility, strong advocacy and inclusive planning** to ensure that voices from all levels – national to community – shape countries’ rabies control priorities.”

“With **rabies being a serious public health problem in more than 150 countries, mainly in Asia and Africa**, causing tens of thousands of deaths each year, communities are making meaningful progress aimed at prevention. **GARC urges eligible countries to integrate rabies control into broader immunisation and primary health care strategies, leveraging support from Gavi to access affordable PEP.** GARC is also working to strengthen the public’s understanding of how to avoid dog bites and what actions to take if one is bitten, as well as surveillance and data collection to improve the quality of interventions.”

International Safe Abortion Day (28 Sept) & other SRHR updates

O’Neill (Expert column)- A New Wave of Abortion Exceptionalism in the United States

S Wetter et al;

<https://oneill.law.georgetown.edu/a-new-wave-of-abortion-exceptionalism-in-the-united-states/>

“This **Expert Column** is part of a two-part series that examines how abortion is regulated compared to other health services in the United States and globally. The following piece will examine how other countries have pushed back against abortion exceptionalism by treating it as health care, aligning their abortion laws and policies with recommendations from the WHO and various human rights bodies.” **(this article focuses on the US)**

“Today (28 Sept) marks **International Safe Abortion Day**, the **global day of action to demand access to safe and legal abortion care everywhere and for all women, girls, and gender-diverse individuals.** This September 28, we reflect on the increasing prevalence of “abortion exceptionalism” in the United States — particularly its rise post-Dobbs v. Jackson Women’s Health Organization — and what it means for access to abortion care.....”

WHO - New study reveals sex life impacts are major reasons for contraceptive discontinuation

<https://www.who.int/news/item/26-09-2025-new-study-reveals-sex-life-impacts-are-major-reasons-for-contraceptive-discontinuation>

“A new study from the World Health Organization (WHO), the United Nations’ Special Programme in Human Reproduction (HRP), and The Pleasure Project finds that **approximately 1 in 20 people who discontinue contraception while still needing it – whether for pregnancy prevention or safer sex – do so because they perceive negative impacts on their sex lives.**”

“Published today, the **systematic review**, titled *The Sex Effect: The prevalence of sex life reasons for contraceptive discontinuation*, analyzed 64 studies involving over 125 000 participants. **Its findings have important implications for public health.** Ensuring that **people have contraceptive options that meet their needs – including their sexual well-being – improves contraceptive uptake.** This in turn reduces unintended pregnancies, maternal mortality, and the spread of sexually transmitted infections....”

- And a link: **Lancet Letter** - [Inequalities in women's empowerment during childbirth in sub-Saharan Africa](#) (part of a few letters related to a Lancet Editorial)

Determinants of health

Guardian - Study links greater inequality to structural changes in children's brains

<https://www.theguardian.com/science/2025/sep/30/study-links-greater-inequality-to-structural-changes-in-childrens-brains>

“Researchers say findings show inequality creates toxic environment and reducing it is ‘a public health imperative’.” (re study on the US)

“....The research found that children living in areas with higher levels of societal inequality, including socioeconomic imbalances and deprivation, for example, were linked to having a reduced surface area of the brain's cortex, and altered connections between multiple regions of the brain. The data was gathered from the Adolescent Brain Cognitive Development study and published in the journal Nature Mental Health.”

“The findings, the first to reveal the impact societal inequality has on the structures of the brain, also provided evidence that the impacted neurodevelopment might relate to future mental health and cognitive function. Notably, these brain changes in children were seen regardless of their economic background....”

EuroHealthNet-CHAIN report - A report on the Social inequalities in health in the EU

<https://eurohealthnet.eu/publication/social-inequalities-in-health-in-the-eu/>

“A report, developed by [CHAIN Centre for Health Equity Analytics](#), maps **trends in health, mental health, and inequalities in Europe over the period 2014-2024**. Among its many findings, it shows that people with low education are twice as likely to report poor health as those with high education. **In those countries where inequalities have declined, this reflects worsening health or mental health in higher social groups.**”

ToitūHauora Podcast Series 2025 | Nau mai, whakarongo mai!

<https://ow.ly/XNz050X3mIH>

A great podcast (Season 5, Episode 2) discussing Indigenous global policy and the Indigenous Determinants of Health. In this podcast, Geoffrey Roth (Lakota – Standing Rock, UN Permanent Forum on Indigenous Issues, Cedar Rock Alliance) and Alejandro Bermudez del Villar (Mestizo ally, Cedar Rock Alliance, IDHA) are **leaders in advancing the Indigenous Decolonizing Human Rights Approach (IDHA)**. Together, they explore the IDHA framework, the evolution of the UN in supporting Indigenous rights, the WHO Resolution on Indigenous Health, and the impact of global policy shifts at the community level.

Human Resources for Health

HPW - Strike in Rural India Underscores Global Dependence on ‘Precarious’ Health Workers

<https://healthpolicy-watch.news/strike-in-rural-india-underscores-global-dependence-on-precarious-health-workers/>

“**Nearly 16,000 staff employed under India’s National Health Mission (NHM) have been on an indefinite strike since 8 August.** In early September, the dispute escalated dramatically when the state government dismissed 25 union leaders, prompting the mass resignation of more than 14,000 health workers. **At the centre of the standoff are demands for permanent contracts, pay parity with regular staff, and improved benefits.** Union leaders say the dispute in Chhattisgarh is not an isolated battle, but a symptom of deeper structural problems in India’s health system – problems that resonate globally.....”

“... The crisis in Chhattisgarh is not unique. **Around the world, governments have leaned on temporary or flexible contracts to stretch health budgets and scale up ambitious programs, often with similar results.....** Labour analysts say **these parallel struggles expose a global fault line.** “**The pandemic briefly highlighted the indispensability of frontline health workers,**” said a global labour rights advocate while talking to Health Policy Watch. **“But once the emergency faded, many governments reverted to treating them as expendable.”**”

2025 EAT-Lancet Commission on Healthy, Sustainable, and Just Food Systems.

J Rockström et al ; <https://www.thelancet.com/commissions-do/EAT-2025>

“The 2025 EAT-Lancet Commission on healthy, sustainable, and just food systems presents new evidence-based insights on nutrition and human health, within safe and just planetary boundaries. **New to this Commission** are updates to the planetary health diet, measurement and assessment of the impact food systems have in driving transgressions of planetary boundaries, an exploration of multi-dimensional and underlying issues of food justice, new research and extensive modelling insights, and transformative and action-based recommendations and roadmaps.”

“The Commission lays the foundations for food systems to take a central role in the post-SDG era, presenting global, regional, local, and individual means to achieve that while creating and retaining a just social foundation, that protects human health and minimises harms to planetary health.”

Cfr the **press release**:

“The Lancet: Billions lack access to healthy diets as food systems drive climate and health crises, but sustainable, equitable solutions are within reach, says new EAT-Lancet report.”

“Building on the landmark 2019 report, **the 2025 EAT-Lancet Commission presents the most comprehensive scientific analysis of global food systems to date. It establishes a clear, science-based approach to provide 9.6 billion people with access to healthy diets within planetary boundaries** while recognising that healthy and sustainable diets are the foundation of human rights. The report reveals that **the global food system contributes to 30% of greenhouse gas emissions and is the largest driver of planetary boundary transgressions** through its impacts on climate, biodiversity, freshwater consumption, and land use change. **Although there is enough food produced globally, almost half of the world’s 8 billion people (about 3.7 billion) don’t have reliable access to healthy food, a clean environment, or earn a living wage.** “

“The Planetary Health Diet (PHD), which emphasises minimally processed plant-rich foods with moderate intake of animal products such as meat and dairy, **is associated with a 27% lower risk of premature death. Global adoption of this dietary pattern could potentially prevent approximately 15 million premature deaths per year and greatly reduce risks of chronic diseases** such as type 2 diabetes, cardiovascular disease, cancer, and neurodegenerative conditions.” **“ The report also emphasises the urgent need to take social justice into account as part of overall efforts to transform food systems** by calling for equitable access to healthy food, fair labor conditions, and inclusive governance.”

- Related Lancet Comment - [A global and just future for food](#) (by T Lucas & R Horton): **“ food justice is the beating heart of the new Commission. This social foundation drives what we observe and suggest is the beginning of a great food revolution—one that could place food systems at the centre of the post-2030 agenda.....”**
- Coverage via [Devex - Planet at risk: new EAT-Lancet report warns food system overhaul is vital](#)

“The updated version of a landmark 2019 scientific study warns that **business as usual in food systems could push global warming beyond 1.5 degrees Celsius even if fossil fuels are phased out**, while again recommending less meat consumption.”

PS: “**The report finds that fewer than 1% of the world’s population is currently in the “safe and just” space where people’s rights and dietary needs are being met within safe planetary boundaries.** It also finds that responsibility for breaching those boundaries is highly unequal, with the wealthiest 30% of the world’s population generating more than 70% of food-related environmental pressures....”

- Related **Guardian coverage** - [‘Planetary health diet’ could save 40,000 deaths a day, landmark report finds](#)

Planetary Health

Carbonbrief – Analysis: Half of global emissions covered by 2035 climate pledges after UN summit in New York

<https://www.carbonbrief.org/analysis-half-of-global-emissions-covered-by-2035-climate-pledges-after-un-summit-in-new-york/>

“Half of global greenhouse gas emissions are now covered by a 2035 climate pledge following a key UN summit this week, Carbon Brief analysis finds.”

“**China** stole the show at the [UN climate summit](#) held in New York on 24 September, announcing a [pledge](#) to cut greenhouse gas emissions to 7-10% below peak levels by 2035. However, **other major emitters also came forward with new climate-pledge announcements at the event**, including the world’s fourth biggest emitter, [Russia](#), and [Turkey](#). Following the summit, around **one-third (63) of countries have now announced or submitted their 2035 climate pledges**, known as “[nationally determined contributions](#)” (NDCs). ... **countries that have either announced or submitted their 2035 climate pledges now represent half of global emissions**, according to Carbon Brief analysis...”

Nature (News) - China pledges to cut emissions by 2035: what does that mean for the climate?

<https://www.nature.com/articles/d41586-025-03166-6>

“The country’s plan to reduce greenhouse gases will largely determine the world’s emissions trajectory, researchers say.”

“The pace at which China cuts emissions will have profound global impact. **The country has accounted for 90% of the growth in the world’s CO₂ emissions since 2015 and it is now the largest GHG emitter in the world, responsible for around one-third of the global total,**

according to the **Asia Society Policy Institute**, a think tank based in New York City. **Analysts have warned that China's action could make or break the 2015 Paris agreement...."**

Devex - John Kerry: The world is moving ahead on climate — with or without the US

[Devex;](#)

"The world needs to shift from a narrative of moral responsibility to one of investment opportunity, Kerry said — adding that those willing to think seriously about financing the transition stand to benefit the most."

PIK - Four major Earth system components are losing stability

<https://www.pik-potsdam.de/en/news/latest-news/four-major-earth-system-components-are-losing-stability>

"Four key parts of the Earth's climate system are destabilising, according to a new study with contributions from the Potsdam Institute for Climate Impact Research (PIK). Researchers analysed the interconnections of four major tipping elements: the Greenland ice sheet, the Atlantic meridional overturning circulation (AMOC), the Amazon rainforest and the South American monsoon system. All four show signs of diminished resilience, raising the risk of abrupt and potentially irreversible changes....."

Nature (Editorial) - End GDP mania: how the world should really measure prosperity

<https://www.nature.com/articles/d41586-025-03144-y>

"The obsession with economic output as a measure of human development puts sustainability on the back burner. Researchers can now help to devise better indicators."

" UN secretary-general António Guterres has put together a high-level group of specialists to propose new indicators for human and planetary prosperity that go 'Beyond GDP'. The intention is to accelerate progress towards achieving the UN Sustainable Development Goals (SDGs), and [researchers are being invited to contribute](#). When the working group publishes its recommendations next year, its advice could have far-reaching consequences. That is why we are urging researchers the world over to engage....."

PS: "... GDP fetishism, as economist Joseph Stiglitz, of Columbia University in New York City, calls it, is one reason why the SDGs are a long way from being achieved [before their 2030 target deadline](#)...."

Nature – Doughnut of social and planetary boundaries monitors a world out of balance

A L Fanning & K Raworth; <https://www.nature.com/articles/s41586-025-09385-1>

Re the **all-new Doughnut**. (or “**Doughnut 3.0**”) “Transformed from a single-year snapshot to an annual global monitor of 21st century social & ecological thriving.”

“... The doughnut-shaped framework of social and planetary boundaries (the ‘Doughnut’) provides a concise visual assessment of progress towards the goal of meeting the needs of all people within the means of the living planet. **Here we present a renewed Doughnut framework with a revised set of 35 indicators that monitor trends in social deprivation and ecological overshoot over the 2000–2022 period.** Although global gross domestic product (GDP) has more than doubled, our median results show a modest achievement in reducing human deprivation that would have to accelerate fivefold to meet the needs of all people by 2030. Meanwhile, the increase in ecological overshoot would have to stop immediately and accelerate nearly two times faster towards planetary boundaries to safeguard Earth-system stability by 2050. **Disaggregating these global findings shows that the richest 20% of nations, with 15% of the global population, contribute more than 40% of annual ecological overshoot, whereas the poorest 40% of countries, with 42% of the global population, experience more than 60% of the social shortfall.** “

* Related report: [The Evolving Doughnut](#)

“A report by Kate Raworth on the Doughnut's evolution since 2012, with the latest Doughnut diagrams available to download.” By now, we have reached **Doughnut 3.0**.

The Conversation - Will the G20 listen to its own advisors? 4 urgent steps on climate change

G Montmasson-Clair; <https://theconversation.com/will-the-g20-listen-to-its-own-advisors-4-urgent-steps-on-climate-change-265873>

“The world’s 20 most powerful economies, the G20 – currently led by South Africa – face mounting pressure to slash greenhouse gas emissions and help nations adapt to climate change. **Economist and international affairs specialist Gaylor Montmasson-Clair co-heads the think-and-do tank Southern Transitions and also co-chairs the G20’s Think 20.** This group advises on climate, energy and environmental transition policies. ... **Here, he lays out the four urgent steps the G20 must take to adapt the world to the new climate future.....”**

They are: (1) Getting climate adaptation the funding it needs; (2) Sourcing, processing and trading minerals in ways that protect people and the planet; (3) A just transition: include everyone in the shift from fossil fuels; (4) Tackling nature, climate and development problems together.

New Economics Foundation (report) - Introducing: the ultra-frequent flyer

A Chapman; <https://neweconomics.org/2025/06/introducing-the-ultra-frequent-flyer>

With focus on the UK. But no doubt, fairly “global” in terms of profile.

Science (Editorial) – UN politics won’t deliver an ambitious plastics treaty

P Dauvergne et al ; <https://www.science.org/doi/10.1126/science.aec1353>

“Negotiators again failed to finalize the text for a global plastics treaty in Geneva in August 2025. **The talks exposed two harsh truths. Consensus on the treaty text, where no state formally objects, cannot be reached. And securing a high-ambition treaty is going to require launching a new process outside the United Nations (UN) framework....**”

Authors conclude: “Adopting a plastics treaty without the support of states such as Russia, Iran, Kuwait, Saudi Arabia, or the US is not ideal. Nor would a coalition of ambitious states want to alienate China, the world’s largest producer of plastics, or key states such as India or Brazil. But **the lesson from Geneva is clear: Inclusivity must be balanced with practicality to achieve an ambitious treaty. It’s time to bypass the UN negotiating process to empower states genuinely committed to ending plastic pollution.**”

Access to medicines, vaccines & other health technologies

HPW – Vaccinations Averted 17 Million Deaths Since 2019 – But Global Challenges Persist

<https://healthpolicy-watch.news/vaccinations-averted-17-million-deaths-since-2019-but-global-challenges-persist/>

“Vaccinations have saved the lives of an estimated 17 million people between 2021 and 2024 – but global immunisation programmes face several challenges, according to an assessment by the World Health Organization’s (WHO) Strategic Advisory Group of Experts (SAGE) on Immunisation. Dr Kate O’Brien, WHO director of Immunisation, Vaccines and Biologicals, acknowledged the “deep commitment of countries and communities around the world to vaccination” at a **media briefing on Tuesday following SAGE’s biannual meeting.**”

“While vaccination coverage has largely rebounded to pre-pandemic levels, “backsliding in Gavi-ineligible middle-income countries, and an increasing number of people living in fragile and conflict settings, threaten the global gains”, according to the WHO. Immunisation programmes are being tested by “geopolitical instability”, constrained global and national budgets, and “shifting health architectures”. In addition, “the **information and trust crisis** threatens vaccine confidence and uptake”, the WHO noted.....”

- See also UN News - [‘Trust crisis’ impacts vaccine rollouts](#)

“Immunisation experts at the UN World Health Organization (WHO) have warned that global protection against preventable diseases is **under threat, in part because of an “information and trust crisis” regarding vaccines.**”

Cidrap News - Gavi-supported immunizations saved record lives in 2024

<https://www.cidrap.umn.edu/childhood-vaccines/gavi-supported-immunizations-saved-record-lives-2024>

“In a **progress report** covering its activities in 2024, Gavi, the Vaccine Alliance, today reported that **Gavi-supported vaccines saved a record 1.7 million lives, 400,000 more than in 2023.** In a statement, **the group also reported major progress in boosting vaccine campaigns in some of the countries experiencing some of the biggest humanitarian challenges.** Beyond just public health benefits, **the group estimated that Gavi-supported countries gained nearly \$20 billion in economic benefits** from having healthier populations, reducing healthcare costs, and boosting productivity. ...”

PS: “Since **the group was established in 2000, Gavi said its immunization investments have generated \$280 billion in economic benefits,** which it said supports stability and growth. As a result, **recipient countries have been able to assume more responsibility for their vaccine programs.** For example, **countries paid a record \$255 million toward the cost of their own vaccines in 2024.** ...”

“**Gavi’s other achievements for 2024 include the fastest vaccine rollout in the group’s history, with wide malaria vaccine deployment in 2024** protecting millions of children in Africa who represent 70% of the world’s disease burden.....”

- Fore more, see the **GAVI press release:** [Gavi announces record-setting year for saving lives through immunisation](#)

PS: “...Beyond malaria, **2024 saw a rise in coverage across all vaccines supported by Gavi, including in some of the most challenging environments – fragile and conflict-affected settings where health systems are under strain and access is limited.** Eight of the twelve countries Gavi classifies as experiencing fragility and conflict saw gains in basic immunisation coverage, including major improvements in countries like Mali, Syria and Haiti. This upward trend reflects a growing national commitment to immunisation, backed by increased investments from Gavi in reaching the most vulnerable communities in fragile and humanitarian settings. However, conflict-affected countries like Sudan and Yemen saw major declines, underscoring the challenges of protecting children and communities in these settings.....”

GAVI - UEFA and Gavi team up to launch vaccine awareness campaign in Africa

<https://www.gavi.org/news/media-room/uefa-and-gavi-team-launch-vaccine-awareness-campaign-africa>

“**UEFA and Gavi, the Vaccine Alliance have joined forces to launch a groundbreaking vaccine awareness campaign that harnesses the power of football to build trust in immunisation across Africa.** With the support of the Confederation of African Football (CAF) and its member associations,

Goal Getters will use youth tournaments across the continent to teach children about the role of vaccines in preventing deadly diseases....”

HPW - Nigeria Deal with China Will Enable it to Make Insulin Alongside Egypt and South Africa

<https://healthpolicy-watch.news/nigeria-deal-with-china-will-enable-it-to-make-insulin-alongside-egypt-and-south-africa/>

“A deal with China will enable Nigeria to join Egypt and South Africa as a producer of insulin, the drug that is essential to control diabetes. The memorandum of understanding between Nigeria’s National Biotechnology Research and Development Agency (NBRDA) and Shanghai Haiqi Industrial Company Limited of China was announced last week.....”

Quote: **““Chinese companies are in talks with Nigeria to build Africa’s first local insulin production facility, potentially ending Nigeria’s reliance on imported insulin and positioning it as a hub for African biotechnology,”** Chinese Ambassador to Nigeria Yu Dunhai said.”

TWN – Health: Perilous Delay in Lenacapavir Registration Compromises Access in Developing Countries

C Rao; <https://www.twn.my/title2/health.info/2025/hi251001.htm>

“Delay in registration to secure market authorization of a groundbreaking HIV prevention treatment undermines timely access, notwithstanding the existence of a voluntary license for the majority of low-and-middle income countries (LMICs).”

Lancet - Availability of essential medicines in 14 remaining health facilities in Gaza

Saleh Aljadeeah, Gautam Satheesh et al ; <https://www.thelancet.com/action/showPdf?pii=S0140-6736%2825%2901819-7>

Via one of the authors: **“Between 21 May and 9 July 2025, we surveyed 25 essential medicines across 14 functioning health facilities in Gaza.** Our findings show **crucial shortages in medicine availability.** Several medicines, including first-line treatments for diabetes, hypertension, and epilepsy, had very low availability. For example, none of the private pharmacies surveyed had insulin. **We highlight the need to view medicine availability as one dimension of access. Affordability and quality are equally crucial,** especially in Gaza, where nearly 100% of the population lives in poverty. Even when medicines are available, affordability remains a major barrier, and deteriorating infrastructure raises risks of substandard or unsafe medicines. **The observed shortages are not isolated outcomes but symptoms of a pharmaceutical system under siege....”**

FT – US set to honour 15% tariff cap on drugs from the EU and Japan

<https://www.ft.com/content/62e92784-1811-4a26-b8a3-1e48ec04f787>

(gated) “The Trump administration is set to honour a 15 per cent tariff cap on pharmaceutical imports from the EU and Japan, providing a significant relief from the 100 per cent levy on drugs announced by the US president on Thursday. The 15 per cent ceiling is in line with trade deals that Japan and the EU have with the US.....”

- See also [Stat - Trump administration backs off 100% pharma tariffs threatened to start today](#)

“Trump promised to enact the tariffs on Oct. 1 unless companies agreed to build infrastructure in the U.S...a White House official told STAT on Wednesday that the tariffs have not gone into effect and that the administration would now “begin preparing” tariffs on companies that don’t build in the U.S. or make a drug pricing agreement with the administration. The official didn’t share a new timeline for those import taxes, which would apply to branded drugs. **The postponement signals that months of tough talk from the White House on pharma tariffs may ultimately be aimed at leveraging more voluntary commitments from drugmakers, such as investing in the U.S. and striking deals to lower their prices....**

NYT – Trump’s Tariffs Would Spare Many Rich Drugmakers While Punishing Some Small Ones

<https://www.nytimes.com/2025/09/26/health/trump-tariffs-drug-prices-manufacturing.html>

(from late last week). “The details of the president’s proposed tariffs were not clear. But it seemed that many big companies would qualify for exemptions.... In particular, the tariffs could harshly punish a different kind of company: certain smaller manufacturers of brand-name drugs. These companies are unknown to most Americans and make drugs in countries like Canada or Mexico or in the Middle East. They can’t afford to spend billions of dollars on new factories in the United States.....”

NYT - Trump and Pfizer Announce Deal to Lower Some Medicaid Drug Prices

<https://www.nytimes.com/2025/09/30/health/trump-pfizer-trumprx-medications.html>

“The administration also announced it will create a website, TrumpRx, that will help consumers buy drugs directly from manufacturers.”

“The drugmaker Pfizer agreed to lower the prices it charges to state Medicaid programs for many of the drugs the company currently sells, Mr. Trump and Dr. Albert Bourla, Pfizer’s chief executive, announced in an Oval Office news conference. **Under the deal, the drugmaker would also introduce new drugs in the United States at prices comparable to what it asks European countries to pay....**”

“The website is still under construction, and, officials said, it will include products from many major pharmaceutical companies, in keeping with demands the president laid out in an executive order [in May....](#)”

PS: re the tariffs: “Dr. Bourla said his company had been assured that it would receive a three-year grace period to avoid the tariffs because it is building and expanding factories in the United States.

Pfizer already does some manufacturing in the United States, but also has significant production in Europe.....”

* Link: [Stat - Trump, Pfizer, and the art of a drug pricing deal](#)

“The first ‘most-favored nation’ deal is here”. “The drug giant’s Albert Bourla keeps the president and investors happy. Will consumers rejoice, too?”

“The Trump administration’s posture toward the pharma industry has largely been driven by threats, and a tense negotiation over prices. On Tuesday, there was talk of friendship....”

BMJ News - Trump cuts: Gaps in drug research funding in Europe can’t be filled, experts warn

<https://www.bmj.com/content/391/bmj.r2067>

“US withdrawals of funding and pharmaceutical tariffs have left European drug development on a cliff edge, delegates at the European Health Forum in Gastein, Austria, have warned. In May the Trump administration stopped the US National Institutes of Health (NIH) approving new research grants to foreign scientists. **Michelle Childs, policy advocacy director of the non-profit drug research and development organisation Drugs for Neglected Diseases,** warned that **the effect on European drug development could be substantial.** “There is a real question about where the new medicines and the new treatments are going to come from,” she told the conference. “I think there is a real need to look at the way in which Europe is going to be funding this early stage and development stage research.””

Bloomberg - Pharma Is Pushing \$200,000 Cancer Drugs When Cheaper Doses May Work

<https://www.bloomberg.com/features/2025-experimental-cheaper-treatments-cancer-capitalism/>

“Doctors are experimenting with using lower doses of blockbuster cancer drugs. It could help hundreds of thousands of people — if pharmaceutical companies would allow it....”

“The remarkable thing is that the radically low doses may also be effective at keeping cancer sufferers alive, doctors here and in other hospitals across India say. The science isn’t settled, but hospitals in Israel, France, the Netherlands, Canada and the UK are all testing or implementing more modest dose reductions. A small trial in the US also found some benefits. **The consequences could be dramatic, expanding access to cancer treatment in poor countries and bending the curve of skyrocketing drug prices in the developed world. Smaller doses could also help limit the serious side effects many patients endure, from diarrhea to thyroid problems.**”

PS: **“Updating its list of essential medicines this month, the World Health Organization added several new uses of Keytruda and endorsed the use of weight-based dosing to improve access. It said ultra-low doses like those in India “could be a viable strategy” pending further research. A group of cancer experts advising the health group had said in January that “clinical evidence supporting dose reduction” for immunotherapies “is rapidly growing.””**

Lancet GH Comment : Geospatial modelling of vaccination coverage in Africa: addressing gaps, advancing equality, and realising promise

[https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(25\)00355-9/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(25)00355-9/fulltext)

Geospatial modelling of vaccination coverage is a powerful tool, but it needs ongoing refinement to reach its full potential. The new [paper by Liyew and colleagues](#) demonstrates how such analysis can highlight progress and current or persistent gaps. With many African countries falling short of meeting IA2030 targets, leveraging this methodology to effectively **map out the unimmunised or under-immunised subpopulations** is crucial for course-correction.

Lancet World Report – HIV community welcomes lenacapavir deal

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02006-9/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02006-9/fulltext)

“A generic version of the HIV prevention medicine will cost \$40 per year, although there are concerns about whether it can reach all who need it. Sophie Cousins reports.

Researchers and civil society leaders have welcomed the news that **low-cost generic versions of lenacapavir, a twice-yearly injection to prevent HIV, will be available in more than 100 countries from 2027....”**

“Others, however, have expressed concern about how lenacapavir will be rolled out. The US President's Emergency Plan for AIDS Relief and The Global Fund plan to provide the drug to an initial 2 million people in high-burden countries But **the [Trump administration has suggested its funding of lenacapavir might only apply to pregnant and breastfeeding women.](#)** “It's wonderful news we've managed to reach this price so quickly”, Andrew Hill, Senior Visiting Research Fellow in the Department of Pharmacology and Therapeutics at the University of Liverpool (Liverpool, UK), told *The Lancet*. **“However, we need at least 10 million people taking lenacapavir to have a significant effect on the HIV epidemic, especially after the cuts in US funding...Who knows the commercial sex workers if all the outreach workers have been sacked? Specialised units shut down overnight earlier this year. The benefits of giving 10 million people lenacapavir will be much smaller if Americans insist the money be channelled to pregnant women.”**

“... Hill added that he was concerned about the countries excluded from Gilead's deal. He told *The Lancet* that Gilead's licence excluded countries where around 38% of global HIV transmission occurs, such as parts of Latin America, central Asia and eastern Europe, and north Africa and the Middle East. Numerous countries excluded from the deal have already said they cannot afford the drug....”

Conflict/War/Genocide & health

Lancet GH - Strengthening community protection: a call for localised preparedness, response, and resilience for public health emergencies

A Jansen, J Hanefeld et al; [https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(25\)00353-5/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(25)00353-5/fulltext)

“The ongoing conflicts in the occupied Palestinian territories, Ukraine, and Sudan underscore a crucial dilemma: what happens when public health systems are severely disrupted by conflict or insecurity, and external actors (eg, Emergency Medical Teams, the Global Outbreak Alert and Response Network, and other humanitarian actors) face limitations in access or ability to intervene?.... Relying on externally driven, ad-hoc interventions in high-risk or conflict-affected settings is no longer sustainable, and the limitations have merely underscored the need for more sustainable and locally led approaches.” “....The centrality of communities in crisis response is no longer an aspirational idea or fall-back option, but a structural imperative.”

“... In contexts where these health responders are now the only line of support, the international public health and humanitarian community needs to find more beneficial and flexible ways to assist from a distance. This approach should be formally recognised as a core element of national and global public health capacity and aligned with existing emergency preparedness frameworks, such as the WHO Health Emergency Preparedness, Response and Resilience (HEPR) architecture. **At the [World Health Summit 2024](#), key stakeholders in community-centred preparedness, response, and resilience identified five strategic recommendations for strengthening community protection in public health emergencies”**

PS: “....To begin this work, **an inaugural global meeting of the community of practice will be held at the World Health Summit in Berlin (Germany) in autumn 2025.**”

UN News - Gaza health system overwhelmed as WHO reports 42,000 people have life-changing injuries

<https://news.un.org/en/story/2025/10/1166023>

“Nearly 42,000 people in Gaza are living with life-changing injuries from the ongoing conflict – including more than 10,000 children – as the health system collapses under relentless strain, the World Health Organization (WHO) warned on Thursday.....”

New Humanitarian - Aid is political. It's time for philanthropy to take a stand

Funders4Palestine (Funder network mobilising the philanthropic sector toward deeper solidarity with Palestine, and a vision of collective liberation);

<https://www.thenewhumanitarian.org/opinion/2025/09/29/aid-is-political-philanthropy-must-take-stand>

“Philanthropy cannot remain on the sidelines of the systems it funds.”

“... Humanitarian aid is not neutral. It never has been. From Palestine to Sudan to Haiti and across much of the world – especially in countries living with the legacy of colonisation – aid has been wielded as a tool of control, manipulation, and geopolitical dominance. ... **Philanthropy stands at a critical inflection point. It can continue treating humanitarian aid as an isolated, apolitical issue – thereby reinforcing systemic inequalities and sidelining the voices of those most impacted. Or it can make a decisive shift toward systemic change and justice by supporting the true frontline responders: the communities themselves.....”**

“There is no war in this world in which we are not implicated, especially if we live in the Global North – through our tax dollars, pension funds, or university and philanthropic endowments”.

HPW - 'Ban All Attacks on Hospitals to Prevent Genocide'

<https://healthpolicy-watch.news/ban-all-attacks-on-hospitals-to-prevent-genocide/>

"All attacks on hospitals should be banned without exception to close a loophole in international humanitarian law (IHL) that enables aggressors to justify bombing hospitals by claiming that they are shielding combatants....."

Coverage of a **recent seminar** co-hosted by the **Geneva Graduate Institute's Global Health Centre, MSF and Queen Mary university** – with a number of interesting **interventions (by Neve Gordon, Maarten van der Heijden & others)**.

BMJ (Opinion)- I was arrested for peacefully protesting against genocide—why our medical leaders need to speak up

Fiona Godlee (former editor in chief BMJ); <https://www.bmj.com/content/390/bmj.r1994>

As you might have noticed, Fiona was arrested early September in London.

Excerpt from her Opinion: **".... Do health professionals have a special duty to speak up against the genocide? I think we do, for two reasons: we are likely to have a greater appreciation of the true human cost** of these terrible events, and we have the credibility to stand in vital solidarity with Gaza's health workers, those who have been tortured and killed, and those who continue to provide what care they can under appalling conditions with almost no resources and while they themselves and their families struggle to survive. "

Related **comment by Rajeev B R**: *" Fiona's piece is powerful and deeply moving. Her willingness to risk arrest to speak out is a reminder of the moral responsibility health professionals hold in the face of atrocities. At the same time, I am struck by how much of a privilege it is to be able to protest and exercise free speech even at the cost of arrest, when in many parts of the world, the right to protest is severely curtailed or violently suppressed. For colleagues in such contexts, the dangers of dissent are far greater and the safety nets far weaker. This makes acts of protest, wherever they occur, even more significant. It also calls on those of us with relative freedom to raise our voices not only in solidarity with health workers in Gaza, but also with those who are unable to protest in their own countries."*

In and Around War(s) - Podcast by the Geneva Academy of IHL and Human Rights

<https://soundcloud.com/geneva-academy/sets/in-and-around-war-s-podcast>

This **podcast** focuses on **contemporary legal issues related to wars**. Each episode discusses issues relating to wars with expert guests, who use the law as a powerful shield to protect peace, human dignity and non-discrimination, bring justice and alleviate human suffering during armed conflicts.

Miscellaneous

Lancet Editorial – The far-right and health: an evolving political crisis

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02003-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02003-3/fulltext)

“... A [diverse and inclusive](#) scientific and health workforce accrues benefits ranging from more innovative science to [improved health for all](#). As such, **policies to promote Equity, Diversity, and Inclusion (EDI) are foundational to science and health**. Attacks on EDI have wrongly characterised it as an ideology. And these attacks have been accompanied by a creeping sense of EDI fatigue, rooted in slow systemic change, tokenistic gestures, and the framing of EDI as mere compliance rather than genuine transformation. **In many organisations, EDI has been interpreted as nothing more than a human resources strategy. But at its heart, EDI is about how one views a just society. It is about making better decisions. And it is about reversing unfair disparities.** “

This week’s editorial concludes: “Medical and science communities cannot change societies alone. But we can set standards of behaviour and create value systems that resist corrosive social and political forces. **We must take a stand against racism and prejudice. Scientific academies, medical associations, and scientific journals should make clear statements opposing the normalisation of racism and discrimination in political discourse, lead anti-racist activism, and make equity a defining goal of their mission.**”

UN News - Calls grow louder for more age-inclusive societies

<https://news.un.org/en/story/2025/10/1166015>

“Member States, UN officials and civil society came together on Wednesday to shift the global perspective on ageing, with a call for new policies and action that bring older persons in from the margins of society.” “Every older person has the right to age with dignity security and access to opportunities that enrich their lives,” said one of the key organisers of the [International Day of Older Persons](#).....”

PS: “**The number of people aged 60 or over has more than doubled to 1.2 billion in the past three decades and is projected to reach 2.1 billion by 2050**, according to a [mission statement](#) by organisers of the event in New York.....”

David Clarke (on Substack) – Beyond Politics and Fraud Investigation: Corruption as a Public Health Issue

https://governancerox.substack.com/p/beyond-politics-and-fraud-investigation?r=68ljyh&utm_campaign=post&utm_medium=web&triedRedirect=true

“I have recently been appointed as a **Commissioner on the Lancet Commission on Anti-Corruption in Health**. For me, the **Commission** represents an opportunity to shift how we conceptualize corruption in healthcare, with a new focus on tackling corruption as a public health problem....”

“...corruption in health should not be viewed solely as a political or compliance issue, but rather as a public health problem that requires public health tools to understand its causes and implement effective public health solutions.....”

Ps: “Recent **modeling conducted by my colleague Bill Savedoff** estimates that **approximately 7% of global government health spending—equivalent to \$441 billion annually—could be lost to corruption**. Bill’s analysis further estimates that these losses contribute to 76 million lost disability-adjusted life years (DALYs), effectively causing 7.6 million people to lose 10 years of healthy life. These are significant costs and losses.....”

“...This is why **Anti-Corruption, Transparency, and Accountability (ACTA)** must be recognized not as an end in itself, but as a fundamental public health strategy for improving population health outcomes.....”

“...**The real antidote to corruption is not endless investigations. It is strong public institutions — institutions that pay health workers on time, keep medicines on the shelves, and treat every patient with dignity.** This is why **anti-corruption in health** must be seen for what it really is: not a compliance exercise, but as **a core component of the work of building effective and resilient health systems.**”

Global health events

WHO’s Alliance for HPSR- From local insights to global learning: Strengthening immunization through health policy and systems research

<https://ahpsr.who.int/newsroom/news/item/29-09-2025-from-local-insights-to-global-learning-strengthening-immunization-through-health-policy-and-systems-research>

“**The Alliance recently organized two workshops to facilitate cross-country learning for two ongoing immunization strengthening initiatives.** These two programmes of work leverage health policy and systems research (HPSR) approaches to improve immunization coverage and uptake in low- and middle-income countries (LMICs).....”

Check out the **common themes** that emerged across both.

Global health governance & Governance of Health

Disasters & Development Policy Review (special issue) – Critical Perspectives on the future of aid

ODI Global guest editors; [Special issue](#);

“...**Will a new paradigm of development cooperation, including humanitarian policy, emerge? If so, what form might this take?** What impact will current changes have on the architecture of the humanitarian system and its already constrained ability to provide assistance and protection to

people in crisis? How important is the established template for development cooperation and humanitarian assistance and how will governments in different regions navigate these changes? **Leading scholars, policy analysts and aid professionals from a wide range of geographic and institutional contexts discuss the political, ethical, financial and technical problems confronting the development system and the mechanisms of humanitarian response, and outline options for a more relevant and effective future.”**

Check out among others:

* [**Taking \(anti-\)‘woke’ seriously: the future of development cooperation and humanitarian aid**](#)

“This article examines the Trump administration’s ‘war on woke’ as a key narrative in dismantling USAID in early 2025, arguing that its cultural framing is politically significant alongside material and geopolitical impacts.”

* J Ghosh: [**Can the end of ‘foreign aid’ be the beginning of global public investment?**](#)

Stimson International Cooperation Report Spotlights “Justice in Action”

[**https://sdg.iisd.org/news/stimson-international-cooperation-report-spotlights-justice-in-action/**](https://sdg.iisd.org/news/stimson-international-cooperation-report-spotlights-justice-in-action/)

(third edition of this report). **“Themed, ‘Justice in Action: Beyond Promises to Progress,’ the report warns that “[w]ithout bold and decisive action, acute injustices within and between countries risk undermining global stability and collective progress”.** It outlines challenges, threats, and opportunities for “justice in action”. These, it argues, can “be found in reforming political-judicial institutions, filling socioeconomic justice gaps, and advancing environmental justice”.

BMC Global and Public Health - Analysis of Health Systems Strengthening investment activities by Global Health Initiatives

Dijana Spasenoska et al;

[**https://bmcbglobalpublichealth.biomedcentral.com/articles/10.1186/s44263-025-00205-2**](https://bmcbglobalpublichealth.biomedcentral.com/articles/10.1186/s44263-025-00205-2)

“We used the Health Systems Strengthening (HSS) Investments Database, available in the Primary Health Care for Global Health Initiatives Toolbox, to examine the budgeted contributions of Gavi and the Global Fund toward HSS in 32 countries, in the period 2007–2024.”

Findings: **“... The majority (52%) of intended investments were classified as Health Workforce, including activities such as training, salary costs, and per diem. Service Delivery accounted for 21% of investments.** However, there was heterogeneity in distribution across categories by the GHIs and across regions by each GHI....”

Africa CDC - UK Approves Direct Funding to Africa CDC

[**https://africacdc.org/news-item/africa-cdc-welcomes-uks-formal-approval-of-direct-funding-following-successful-due-diligence-assessment/**](https://africacdc.org/news-item/africa-cdc-welcomes-uks-formal-approval-of-direct-funding-following-successful-due-diligence-assessment/)

“The United Kingdom has officially approved direct funding to Africa CDC, marking a major vote of confidence in the agency’s governance and financial systems. This milestone follows nearly a year of rigorous due diligence and reflects Africa CDC’s institutional reforms since 2023 -including alignment with African Union financial regulations, strengthened internal oversight, and the adoption of robust ESG and anti-fraud policies. The UK joins a growing list of global partners - including the World Bank, Gavi, CEPI and the EU -that now entrust the Africa CDC with direct financial management of major health programmes.....”

CGD (blog) - The World Bank’s Civic Test

L Coates et al; <https://www.cgdev.org/blog/world-banks-civic-test>

“As you read this, World Bank Group leadership is deliberating on the future of civic engagement. They are considering the proposed *Citizens at the Center: A Strategic Framework for Renewed World Bank Support for Civic and Citizen Engagement*, which aspires to shift civic engagement from the periphery to the center of the bank’s development model, from a risk management mindset to meaningful community engagement. What would it take to make this happen? The answer is straightforward: strong backing from World Bank management and financial resources to match the ambitions.....”

PS: **“... The World Bank has not yet endorsed the framework. Even if eventually taken up in some capacity, the framework will only be aspirational unless driven by leadership and matched with dedicated resources. Yet, if implemented with seriousness and support, *Citizens at the Center* could help the World Bank deliver development that works not only for people, but with them.”**

Boston University - IMF Lending Returns to Low Levels While the PBOC Continues as the Largest Provider of Currency Swaps: Insights from the Updated Global Financial Safety Net Tracker

B Fritz; <https://www.bu.edu/gdp/2025/09/24/imf-lending-returns-to-low-levels-while-the-pboc-continues-as-the-largest-provider-of-currency-swaps-insights-from-the-updated-global-financial-safety-net-tracker/>

“In a world beset by [lower growth prospects](#), unprecedented [uncertainty](#) in international trade and high [debt service pressures](#), [access to timely financial resources is essential](#) for central banks and governments in order to stabilize their economies without compromising spending on domestic priorities. This **crisis financing comes from the so-called **Global Financial Safety Net (GFSN)**—a network of institutions and arrangements that includes the International Monetary Fund (IMF), regional financial arrangements (RFAs) and central bank currency swaps. **Although the GFSN is the cornerstone of the global financial architecture, comprehensive and up-to-date systematic analyses that encompass all elements of the GFSN have [dwindled](#) in recent years since the [COVID-19 pandemic](#).....”****

“The GFSN has increased its firepower since 2020, yet the newest release of the [GFSN Tracker](#)—a first-of-its kind data interactive co-produced by the Boston University Global Development Policy Center (GDP Center), Freie Universität Berlin and United Nations Conference on Trade and Development (UNCTAD)—reveals that the distribution of GFSN financing is highly asymmetric, with developing countries in general and Africa in particular eligible for the least level of financing and subject to the most onerous conditions.”

PS: “Despite the fact that public debt in developing countries is [reaching record heights](#) and external debt service is rising, especially in [lower-income countries in Africa](#), these numbers reflect that **the demand for new IMF funds is not increasing. This reluctance by countries to apply to IMF programs** could be driven by the IMF’s [fiscal adjustment requirements](#) that negatively impact growth, [poverty and inequality](#).....”

CGD - The African Development Fund Replenishment: China and the Procurement Paradox

K Mathiasen et al; <https://www.cgdev.org/blog/african-development-fund-replenishment-china-and-procurement-paradox>

“Multilateral development bank (MDB) procurement guidelines are one of the many channels that the US and other shareholders are using to thwart China’s influence globally. The focus on procurement reflects China’s bidding successes at major MDBs, where they surpass all other countries. In recent months, both the World Bank and the Asian Development Bank (ADB) have modified their procurement guidelines in response to donor pressure, particularly from the US. Right now, shareholders are pursuing comparable reforms at the replenishment negotiations of the African Development Fund (AfDF), the arm of the African Development Bank (AfDB) that provides grants and highly concessional loans to the poorest countries. The focus on procurement makes sense for an institution that is a major financier of infrastructure in a region where weak procurement capacity perennially undermines project preparation and implementation, provided the negotiation outcomes include meaningful initiatives to build this capacity. The risk is that shareholders press for inflexible procurement rules that introduce additional transaction costs and further strain low-capacity countries, an outcome that could—paradoxically—undermine the ability of local bidders to more effectively compete against China.....”

International Organisations Law Review - Informal Rulemaking at the World Health Organization: Technocratic, Iterative, and Political Constraints

https://brill.com/view/journals/iolr/22/1/article-p48_002.xml

by Tsung Ling-Lee.

Review of International Political Economy - Governing through guesstimates: mock precision in international organisations

Lukas Linsi et al; <https://www.tandfonline.com/doi/full/10.1080/09692290.2025.2560928?src=exp-la>

« International organisations (IOs) collect and disseminate a wide array of statistics. In many cases, the phenomena these statistics seek to quantify defy precise measurement. Hard-to-measure statistics frequently represent ‘guesstimates’ rather than solid measures. Nonetheless, they are often presented as if they were perfectly reliable, precise estimates. What drives IOs to disseminate guesstimates and why are they frequently presented with seemingly excessive precision? To answer these questions, we adopt an ecological framework where IOs must pay attention to both internal and external audiences. The framework informs three mechanisms: Mock precise

guesstimates are fuelled by how organisations seek to attract attention to their work, signal scientific competence, and consolidate their professional standing.....”

PPPR

CEPI – New study shows all-in-one coronavirus vaccines could save millions of lives in future pandemics

<https://cepi.net/new-study-shows-all-one-coronavirus-vaccines-could-save-millions-lives-future-pandemics>

“A new study published in *Nature Communications* reveals that vaccines designed to protect against a wide range of coronaviruses could dramatically reduce deaths and economic disruption and limit the need for lockdowns in the event of another global coronavirus pandemic. The research, led by Imperial College London and supported by CEPI, modelled the potential impact of broadly protective sarbecovirus vaccines — innovative vaccines that could defend against multiple viruses including a novel sarbecovirus, referred to as SARS-X....”

“Stockpiled vaccines would dramatically reduce the need for non-pharmaceutical interventions like lockdowns. If they had been available during the COVID-19 pandemic, as many as 65 percent of deaths could have been averted in the first year....”

UHC & PHC

Lancet World Report – Health care under Milei

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02007-0/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02007-0/fulltext)

“Inflation in Argentina has come down under President Javier Milei, but health workers fear universal health coverage is under threat from hardline economic reforms. Chris McCall reports.”

Planetary health

Guardian - World’s major cities hit by 25% leap in extremely hot days since the 1990s

<https://www.theguardian.com/environment/2025/sep/30/worlds-major-cities-hit-by-25-leap-in-extremely-hot-days-since-the-1990s>

“Capitals from London to Tokyo need urgent action to protect people from deadly high temperatures, analysts say.” Cfr an ... assessment by the International Institute for Environment and Development (IIED).

Guardian - Meat is a leading emissions source – but few outlets report on it, analysis finds

<https://www.theguardian.com/environment/2025/sep/27/meat-gas-emissions-reporting>

“Sentient Media reveals less than 4% of climate news stories mention animal agriculture as source of carbon emissions.”

“Food and agriculture contribute one-third of global greenhouse gas emissions – second only to the burning of fossil fuels. And yet **the vast majority of media coverage of the climate crisis overlooks this critical sector, according to a new data analysis from Sentient Media.** The findings suggest that only about a quarter of climate articles in 11 major US outlets, including the Guardian, mention food and agriculture as a cause. And of the 940 articles analyzed, only 36 – **or 3.8% – mentioned animal agriculture or meat production, by far the largest source of food-related emissions.**”

“The data reveals a media environment that obscures a key driver of the climate crisis.....”

Climate Change News – In new forest finance plan, 34 nations endorse Brazil’s rainforest fund

<https://www.climatechangenews.com/2025/09/26/forest-finance-plan-backed-by-34-countries-endorse-brazils-rainforest-fund/>

“The **Forest & Climate Leaders’ Partnership** of forest-rich and donor countries backs **Brazil’s Tropical Forest Forever Facility**, set to be launched at COP30.”

“The Forest & Climate Leaders’ Partnership (FCLP) – a coalition formed at COP27 in Egypt to raise ambition for forest protection – **unveiled an action plan in New York this week.** It proposes **six solutions to reverse forest loss by 2030, among them the creation of Brazil’s Tropical Forest Forever Facility (TFFF).** The TFFF would invest in financial markets and use the expected returns to pay forest-rich nations to halt deforestation. **It aims to raise initial capital of \$25bn in public funds and \$100bn from private investors. Brazil is the only country to have pledged money so far, announcing a \$1bn investment this week.....”**

Review of International Political Economy - The Chinese road to decarbonisation: China’s party-state capitalism in the political economy of fossil energy phase-out

<https://www.tandfonline.com/doi/full/10.1080/09692290.2025.2556757?src=exp-la>

By Chris Saltmarsh.

CFR - The Climate Adaptation Crisis in Global Health: Rebuilding U.S. Foreign Policy Leadership on Adaptation in a Divided, Warming World

T Bollyky; <https://www.cfr.org/report/climate-adaptation-crisis-global-health>

“For the United States to address the global health risks posed by accelerating climate change, it will need to reframe climate adaptation as a pragmatic policy that can bridge partisan divides and earn the support of everyday Americans. “

“.... Renewing the case for climate adaptation and global health in U.S. foreign policy needs to start somewhere. For the next few years, other governments, local policymakers, intergovernmental mechanisms, nongovernmental actors, and researchers will have to lead responses to the adaptation challenge—until domestic consensus is rebuilt and the U.S. government is ready to reengage with the health threats that climate change poses domestically and around the world.....”

Wellcome Trust Awards GBP 1 Million to Strengthen Public Health Through Climate Action in Developing Countries

<https://ndcpartnership.org/news/wellcome-trust-awards-gbp-1-million-strengthen-public-health-through-climate-action-developing>

“The Wellcome Trust has awarded the NDC Partnership GBP 1 million to support countries’ efforts to improve public health through their Nationally Determined Contributions (NDCs). “

“...the Wellcome Trust’s contribution will be directed to the Partnership Action Fund (PAF). PAF enables implementing partners with limited resources to respond to countries’ support requests, accelerating climate planning and implementation where it is needed most. ...”

International Journal for Equity in Health -Health & nature: a critical review of historical perspectives to support narratives for change

Miquel Amengual-Moreno et al ;

<https://equityhealthj.biomedcentral.com/articles/10.1186/s12939-025-02550-y>

« We conducted a critical review to identify the main perspectives of the health-nature relationship in the scientific literature over the past 60 years, and to categorize them based on their ecological theoretical positions, ranging from anthropocentric to non-anthropocentric.... »

“Our review identified eight main perspectives on the health-nature relationship during this time period: Environmental health, Ecology of health, Holistic medicine, Political ecology of health, Eco Health, One Health, Planetary Health, and Indigenous traditions.....”

And a link:

- Guardian - [Frailty in ageing populations worsened by air pollution, global review finds](#)

Infectious diseases & NTDs

Telegraph – Africa’s ‘meningitis belt’ has killed hundreds of thousands – a new vaccine may turn the tide

<https://www.telegraph.co.uk/global-health/science-and-disease/vaccine-could-turn-the-tide-on-africas-meningitis-belt/>

“Desert winds, dust storms and fragile health systems mean the bacteria that cause the disease can infect people more easily.”

“Scientists have been battling to break the cycle for decades, but have had only limited success – largely because **meningococcal disease is not just caused by one type of bacterium, but many**. But they **may now have a new weapon in their arsenal**. Along the belt, countries have begun rolling out a **five-in-one vaccine that targets the varieties of Neisseria meningitidis bacteria that are responsible for almost all epidemic meningitis in sub-Saharan Africa**. It is **the first major breakthrough since the MenAfriVac vaccination was introduced in 2010**, which proved highly effective against serogroup A, effectively eliminating the leading cause of meningitis and saving millions of lives. The new jab, called Men5CV, **protects against four more serogroups – C, Y, W and X – and experts are hailing it as the next milestone towards the World Health Organization’s (WHO) goal of eliminating epidemic meningitis by 2030.**”

“The vaccine is already being rolled out in Niger and Nigeria, while Mali, Ghana, Burkina Faso, Chad and Togo all have plans to introduce it in the coming months.....”

“... The product of a 13-year development collaboration between Serum Institute of India and PATH, the Seattle-based non-profit, Men5CV is **expected to cost just \$3 a dose**, meaning even the poorest countries in the meningitis belt should be able to add it to their vaccine schedules.....”

Nature Africa (Comment) – Drug development for neglected diseases must account for kids

<https://www.nature.com/articles/d44148-025-00304-0>

“Including children in trials, shaping regulation locally, could deliver safer, more effective therapies in Africa.”

AMR

Plos Med - Whose burden, whose benefit? Revisiting ethical trade-offs in the WHO guidelines on scaling up mass azithromycin administration

Maple Goh et al; <https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1004736>

“New evidence suggests that mass drug administration of azithromycin (MDAA) can significantly reduce childhood mortality in high-burden, low-resource settings, yet the World Health

Organization's (WHO) 2020 guidelines take a cautious approach due to concerns about antimicrobial resistance (AMR). While the WHO guidelines cite ethical principles, they insufficiently address key considerations, such as intergenerational justice, equitable burden sharing, and the structural determinants of health that shape infectious disease vulnerability. **Global AMR policy often prioritizes conservation over access in ways that disproportionately burden low-income countries, despite high-income countries also bearing significant responsibility for the emergence and spread of AMR.** A **balanced ethical framework is needed:** one that explicitly integrates contextual values, including justice across generations, historical inequities, and community input under uncertainty. **Revised WHO guidelines that expand eligibility for MDAAs based on context-specific criteria, establish thresholds for mortality and resistance monitoring, and encourage global investment in sustainable health systems and antibiotic access, may better align with the WHO's own principles on equity, human rights, and social determinants of health in the development of guidelines."**

NCDs

NPR Goats & Soda - Neglected form of diabetes with unusual symptoms finally gets its own name

[NPR Goats & Soda](#);

Excerpts: "... Now, 70 years later, **an international team of researchers is trying to formalize a new name — Type 5 diabetes.** "The time is ripe" to **recognize this disease that could impact as many as 25 million people,"** says Dr. [Meredith Hawkins](#), a diabetes researcher at Albert Einstein College of Medicine." **"In April, the International Diabetes Federation adopted the new name. Now, in a perspective published in *The Lancet Global Health*, Hawkins and an international team of researchers are [urging other entities](#), including the World Health Organization, to get on board too...."**

Guardian (Comment) – Colon cancer is on the rise among young people – and research points to one major culprit

D Sridhar; <https://www.theguardian.com/commentisfree/2025/oct/01/colon-cancer-young-people-smoking-ultra-processed-foods>

"If smoking was the cancer villain of the 20th century, eating ultra-processed food may be its 21st-century counterpart."

Guardian - Autism should not be seen as single condition with one cause, say scientists

<https://www.theguardian.com/society/2025/oct/01/autism-should-not-be-seen-as-single-condition-with-one-cause-say-scientists>

"Those diagnosed as small children typically have distinct genetic profile from those diagnosed later, study finds."

“... Previously, it was generally assumed that those diagnosed earlier tended to be those with more marked autistic traits, underpinned by people carrying a higher proportion of autism-linked gene variants. However, the latest study revealed a different pattern. **The analysis, published in Nature, found that the underlying genetic profiles differed between those diagnosed with autism earlier and later in life, with only a modest overlap. The average genetic profile of later-diagnosed autism is closer to that of ADHD, as well as to mental health conditions such as depression and PTSD, than it is to autism diagnosed in early childhood....**”

NYT - Should the Autism Spectrum Be Split Apart?

<https://www.nytimes.com/2025/10/01/health/autism-spectrum-neurodiversity-kennedy.html>

“Families of people with severe autism say the repeated expansion of the diagnosis pushed them to the sidelines. A new focus on the disorder has opened the way for them to argue their cause.”

“Ms. Singer, who is the head of the **Autism Science Foundation**, a nonprofit that funds autism research, is one of a **group of parents and clinicians who are calling for the autism spectrum diagnosis to effectively be split in two, saying it has become so broad that it is obscuring the experiences of the seriously disabled people it was first meant to describe**, like her daughter. **At major autism conferences and in scientific journals, the group has proposed the creation of a separate category, called profound autism, for people with the most severe disabilities....**”

“... Yet many autistic activists strongly object to the idea of **splitting the diagnosis, warning that it risks invalidating their own experiences**. The field of psychiatry, they argue, long dismissed people at the milder end of the autism spectrum as merely quirky or difficult, before recognizing that they, too, often required support. Many of the activists who helped change that — pioneers of what is known as **the neurodiversity movement** — worry that splitting the diagnosis could marginalize people with less visible struggles....”

Social & commercial determinants of health

Stat - Perimenopause is the new buzzword in the business of women's health

<https://www.statnews.com/2025/09/29/perimenopause-symptoms-booming-business-supplements-apps-therapies/>

(gated) “**The menopause market has proved so successful that companies are increasingly pushing products aimed at younger women too.**” (focus on the US)

“ **Menopause has been flooded with attention in recent years**, the subject of books, businesses, and advocacy by celebrities like Drew Barrymore, Naomi Watts, Halle Berry, and, in a new ad for WeightWatchers, Queen Latifah. **Now health entrepreneurs are coming for perimenopause, menopause's “smaller sister,” as Okafor puts it. Hoping to expand on the \$18 billion menopause market, businesses are marketing perimenopause communities, supplements, meal plans, wearables, prescription medications, and more to women starting in their late 30s.**”

Nature (Book review) – Power and profit drive what we eat: here’s why the food system needs a revolution

https://www.nature.com/articles/d41586-025-03150-0?utm_source=bluesky&utm_medium=social&utm_campaign=nature&linkId=17031124

“Decades of corporate control have shaped diets, harmed farmers and strained the planet — transforming the system will take collective action.” Re **“Food Fight: From Plunder and Profit to People and Planet”** (by Stuart Gillespie).

“... Stuart Gillespie’s book Food Fight offers a sharp diagnosis: a global system once designed to stave off famine through cheap, calorie-dense foods now fuels obesity, disease, environmental harm and inequality. Drawing on four decades of experience in global nutrition and policy, Gillespie argues that tinkering won’t do. Fixing the system will take nothing less than a revolution.....”

Sexual & Reproductive health rights

CNN – Exclusive: Report reveals hidden reality of child marriage. Three girls share the impact on their lives

<https://edition.cnn.com/2025/09/29/world/child-marriage-impact-worldwide-as-equals-intl>

“The 2025 State of the World’s Girls report by global NGO Plan International reveals how these relationships leave girls vulnerable for the rest of their lives. It looked at 15 countries with high child marriage rates across Latin America, the Middle East, Africa and Asia, and found that in all, advocates believe such marriages and unions are going largely unchecked by authorities, despite there often being laws in place, while the needs of young brides are going unheard.....”

- The report: [2025 State of the World’s Girls report](#)

Access to medicines & health technology

Africa CDC Congratulates Ethiopia’s Regulatory Authority on Achieving WHO Maturity Level 3

<https://africacdc.org/news-item/africa-cdc-congratulates-ethiopias-regulatory-authority-on-achieving-who-maturity-level-3/>

“The Africa Centres for Disease Control and Prevention (Africa CDC) congratulates the Ethiopian Food and Drug Authority (EFDA) on achieving the World Health Organization (WHO) Maturity Level 3 (ML3) for its medicines regulatory system. This milestone is a major step forward in ensuring the safety, quality, and effectiveness of medicines in Ethiopia. With this achievement, Ethiopia joins a select group of African nations, including Egypt, Ghana, Nigeria, South Africa, Tanzania, Zimbabwe, Senegal, and Rwanda, that have attained WHO Maturity Level 3 (ML3)....”

PS: “The **WHO Global Benchmarking Tool (GBT)** is the international gold standard for assessing the **maturity of regulatory systems**. By achieving Maturity Level 3 (ML3), EFDA has demonstrated that its regulatory system is stable, well-functioning, and capable of delivering essential regulatory functions effectively....”

ECDPM (paper) – Realising the potential of AI for diagnostics in Africa: From barriers to scalability

<https://ecdpm.org/work/realising-potential-ai-diagnostics-africa-barriers-scalability>

“**Philomena Apiko and Melody Musoni** examine AI use cases in medical imaging for diagnosing Africa’s prevalent diseases – tuberculosis, malaria and cancer – as well as in prenatal and maternal diagnostics. They find that AI plays a critical role in addressing healthcare challenges, but regulatory and investment gaps must be addressed.”

Rice University - New one-hour, low-cost HPV test could transform cervical cancer screening in Africa and beyond

<https://news.rice.edu/news/2025/new-one-hour-low-cost-hpv-test-could-transform-cervical-cancer-screening-africa-and>

“A team of researchers led by Rice University, in collaboration with colleagues in Mozambique and the University of Texas MD Anderson Cancer Center, has developed a simple, affordable human papillomavirus (HPV) test that delivers results in less than an hour with no specialized laboratory required. The breakthrough could provide an option for women in low-resource settings to be screened and treated for cervical cancer in a single clinic visit, a step that global health experts say could save countless lives. The research was recently published in [Nature Communications](#)....”

Economist – Donald Trump is waging war on sky-high drug prices. Can he win?

<https://www.economist.com/business/2025/09/28/donald-trump-is-waging-war-on-sky-high-drug-prices-can-he-win>

“Big pharma faces a reckoning in America.”

Excerpts: “**Big Pharma has a big headache: Donald Trump**. Lately drugmakers have had to contend with the American president’s pronouncements on everything from vaccines to paracetamol. In the coming days the pain is set to intensify. **Intent on lowering prices, Mr Trump has given leading pharma firms until September 29th to comply with an executive order to peg their prices to the lowest charged in other rich countries—a rule he calls “most favoured nation” (MFN) pricing**. If they do not, he thundered, they will face “every tool in our arsenal” against “abusive drug pricing”. **At the same time, the president wants to encourage homegrown manufacturing. He plans to impose a 100% tariff on branded drugs from October 1st, unless their makers are building factories in America**. His administration is also pondering additional duties under a law allowing imports to be restricted on national-security grounds.....”

Guardian – Big pharma is at war with the UK, and the government can't back down now

Nick Dearden; <https://www.theguardian.com/commentisfree/2025/oct/01/big-pharma-war-uk-government-nhs-drugs>

“The industry has always wanted the NHS to pay more for its drugs; now it is pulling research and investment out of Britain.”

Journal of Medicine Access - Assessing the performance of local pharmaceutical systems: An analytical approach to improve access to medicine

Maarten Olivier Kok et al; <https://journals.sagepub.com/doi/full/10.1177/27550834251371502>

Cfr one of the co-authors: “ Most frameworks to assess #pharmaceutical #systems focus on national level, but **many key functions, eg medicine distribution and use, are managed locally**. We present a method to assess #local pharmaceutical systems & identify ways to improve their #performance. “

- And a link: **UNITAID - [Building oxygen access from the ground up: an update on the East African Program on Oxygen Access](#)**

Decolonize Global Health

Plos Med - “You can't see what you've never had to live” —Cultivating imagination and solution spaces in global health and development

Safieh Shah, M Pai et al ;
<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0005242>

« Ideally, our space to imagine ought to be unconstrained. Similarly, when we seek solutions, we need to begin by considering all possible ways of doing things. Often, this is structurally challenging in global health.... »

Lancet Perspective – The gaze reversed: global health through local eyes

T Naidu ; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)01967-1/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)01967-1/fulltext)

Book review of **Seye Abimbola's The Foreign Gaze: Essays on Global Health**.

Miscellaneous

BMJ - Medical opposition to capital punishment is needed as executions surge

<https://www.bmj.com/content/391/bmj.r2017>

“Healthcare professionals can use their position to advocate for abolition, writes Bharat Malkani.”

“As civil liberties are threatened around the world, there has been a concerning increase in use of the death penalty. Amnesty International and Human Rights Watch have raised concerns about the rising number of death sentences and executions in 2024 and 2025, the way in which executions are carried out, and the vulnerabilities of people facing execution. The healthcare community has an important role in opposing the death penalty. Doctors must refuse to participate in the execution process and speak out against a practice that is antithetical to their commitment to promote health and wellbeing.....”

WEF - AI in healthcare risks could exclude 5 billion people; here's what we can do about it

G Onuh; <https://www.weforum.org/stories/2025/10/ai-in-healthcare-risks-could-exclude-5-billion-people-here-s-what-we-can-do-about-it/>

“Most artificial intelligence (AI) health systems are trained on data from high-income countries, leaving billions of people in the Global South invisible in diagnostic models, risk assessments and treatment algorithms. Without representative data, AI-powered tools can misdiagnose or fail to recognize conditions in underrepresented populations, deepening global health inequalities rather than reducing them. Bridging the gap demands global cooperation by building diverse global health datasets, investing in local digital infrastructure and creating fair governance frameworks that ensure AI health systems benefit all.”

Eric Topol - Dawn of A New Era of Primary Prevention in Medicine

Eric Topol - <https://erictopol.substack.com/p/dawn-of-a-new-era-of-primary-prevention>

“Recent groundbreaking reports highlight our newfound potential to prevent diseases.” (*one for the medics*)

Devex – At UNGA80, leaders call for treating journalism as global public good

<https://www.devex.com/news/at-unga80-leaders-call-for-treating-journalism-as-global-public-good-110927>

“In a new report, a panel of 11 top economists emphasized that journalism is a stabilizing force in society — and at a Devex Impact House panel on the sidelines of UNGA80, experts reiterated that message.”

« A group of 11 leading economists issued a stark warning this week: the global crisis of access to reliable information poses an existential threat to economic growth, human welfare, and global development efforts broadly. In a new report, the High-Level Panel on Public Interest Media convened by the [Forum on Information and Democracy](#) argues that public interest media is as vital to the 21st-century economy as central banks are to financial systems, providing the trust and accountability needed for markets to function. If governments don't step in to protect and invest in public interest media, they caution, disinformation will continue to erode economies, weaken social welfare, and undermine democracy itself.”

Geneva Solutions - Humanitarians are ready for reset – but what does it mean?

<https://genevasolutions.news/peace-humanitarian/humanitarians-are-ready-for-reset-but-what-does-it-mean>

“As the UN rushes to come up with ideas to reboot the multilateral system, humanitarian leaders say they are ready to put plans in action, beating other sectors to the start line.”

Nature Africa (News) – South Africans trust both science and tradition – here’s why

<https://www.nature.com/articles/d44148-025-00303-1>

“Most South Africans navigate between traditional knowledge and modern science depending on the context, a survey shows.”

“... This insight comes from the South African Public’s Relationship with Science (SAPRS) survey, conducted by the Human Sciences Research Council for the Department of Science, Technology and Innovation.....”

Papers & reports

HP&P- What affects the performance of hospital financing interventions in low- and lower-middle-income countries from the program design and implementation perspective? A scoping review

<https://academic.oup.com/heapol/advance-article/doi/10.1093/heapol/czaf065/8267629?searchresult=1>

By Wu Zeng, B Meessen et al.

Globalisation & Health - Evaluation of integration in WHO’s tuberculosis, HIV, and antimicrobial resistance policies through the social-ecological lens

<https://globalizationandhealth.biomedcentral.com/articles/10.1186/s12992-025-01150-3>

By Jian Yan, Ming Xu et al.

Book –The Construction of Social Health Systems : History and Self-Reference of Medicine and Public Health

J Costa; <https://cup.columbia.edu/book/the-construction-of-social-health-systems/9783837679540/>

“...João Costa offers new insight into health systems thinking by emphasizing the social nature of health systems. He traces health systems back to their origins in Ancient Greece and investigates their development throughout history, focusing on the notion of systems’ self-reference, a constitutive feature of social systems. The study is built on Luhmann’s Social Systems Theory and his outline of health as social system.....”

Tweets (via X & Bluesky)

Dr Tedros

(quote from a speech at the “Group of Friends of UHC” (in NY))

“Building more self-reliant national health systems is essential, **but so too is addressing the underlying power imbalances and global inequities that have historically shaped our international systems.** ”

Global Fund

“On the sidelines of #UNGA80, leaders from @JNJHealthEquity, @SkollFoundation, @AfricaCDC , community health workers (CHWs), African governments & partners spotlight **the Africa @Frontline1st Catalytic Fund** as a powerful **model for private & philanthropic investment in CHWs and health systems strengthening.**”

(for more on this fund, see <https://globalhealthprogress.org/collaboration/africa-frontline-first-catalytic-fund-aff-cf/>) (exists since 2022)

Joseph Cherabie

“And **the CDC has officially decided to switch back from Mpox to Monkeypox.** A reminder, the world still uses Mpox, this disease does not come from monkeys, Mpox is less stigmatizing and racist. Switching back is just meaningless, unnecessary, racist, and homophobic.”

For more, see **the Telegraph** - [America reverts to calling mpox ‘monkeypox’ in anti-woke drive](#)

Bethlehem Tekola

“**Very few journals accept commentaries that people send in on their own. Most journals prefer to publish commentaries and editorials that they ask specific people to write. I do not think this is good.** It makes it harder for early career researchers, people outside certain well-known universities to share their views. Instead, the same established names often get invited and published repeatedly.”

Nicholas Kristof

“Skeptics say: Why is it our job to save lives abroad? I'd say: because our shared humanity is more important than our passport color. We can save a child's life with a \$2 bednet. **And because Trump slashed aid, 88 children are now dying each hour.** What if that were your kid?”

Anthony Costello

“Gen Z are angry. Rightly so. Bangladesh, Nepal, Indonesia, Philippines, Madagascar, Morocco have seen mass protests and some governments toppled. **Gen Z are sick of corruption, inequality, bullshit jobs, climate inaction. The West is not immune.”**

Gabriel Zucman

“Whether we look at Brazil, New York (with Z. Mamdani), France (minimum tax on the super rich passed by the National Assembly), the UK (which got rid of the nondom regime), we're seeing the beginning of a global movement to effectively tax the super-rich. The tide is turning.”