

# IHP news 855 : Important days for global health

( 21 November 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,

The world (*minus the US*) is gearing up for the **G20 Leaders summit** in South-Africa this weekend (22-23 Nov). Ahead of the summit, the **Global Fund Replenishment** is scheduled (*for today in Johannesburg, more in particular*). Things look rather gloomy on that front.

The backdrop is also a bit odd, with on the one hand Africa CDC's new [Health Security and Sovereignty agenda](#) (*see Jean Kaseya in the Lancet this week*), egged on by the **Decolonizing Global Health movement** and the vaccine apartheid during the pandemic, and on the other hand more and more instances of blatant **neocolonialism** and attacks on multilateralism. Not quite sure where the new **US Global Health Strategy** is situated in this respect, now that [bilateral health agreements are moving full speed ahead](#), but it seems likely it will have a bit of both (*and I'm rather worried about the "proportion", frankly*). The 'trickle-down' [start of the roll-out of Lenacapavir in a few sub-Saharan countries](#) (*but not yet in South-Africa*) seems to be a case in point.

More in general, it will be an **interesting G20 summit** though, the first one taking place in Africa, with an [agenda](#) more than usual focusing on some of the continent's concerns. (*On a side note, I personally certainly wouldn't mind an "[IPCC on inequality](#)", sooner rather than later. Not that I expect it to happen soon ...* )

From the IPCC, it's relatively small step towards the **COP30 in Belém** – which we'll continue to cover (*second week now*), focusing first of all on **the climate-health nexus**, but also broader. In Geneva, the **Conference of the Parties ( COP 11 ) to the WHO Framework Convention on Tobacco Control (FCTC)** is ongoing (17-22 Nov). On the commercial determinants of health front, we also want to flag an important [Lancet series on UPF and human health](#), yet another [public health emergency](#). Earlier this week, the global health world celebrated the **1<sup>st</sup> World Prematurity Day** and the **1<sup>st</sup> World Cervical Cancer Elimination day**. And oh yes, it's also [World AMR Awareness Week](#). By now, we all know how important that is.

Last week, **Health Systems Global (HSG)** launched its call for abstracts for the [2026 symposium](#) in **Dubai**. Given that one of the subthemes is '**Politics and Polycrises**', I hope to read soon an HSG Board statement on the UAE's weapons deliveries in Sudan, as well as [Western countries'](#) involvement in these – as data from the Stockholm International Peace Research Institute indicate.

We leave you with a few final news snippets. **Larry "global health champion" Summers** is at last [resigning](#) from his role as neoliberal public intellectual (*three decades late, but still*). The same goes for a bunch of other commitments - among others, Larry [was also chair of CGD's Board](#).

Unfortunately, **Klaus Schwab** is still very much “alive”, however, having just published a new book, [“Thriving and Leading in the Intelligent Age: Mastering Change with Purpose.”](#) Bet you’re all running to the virtual bookshop now to get a copy for under the Christmas tree.

Enjoy your reading.

Kristof Decoster

## Featured Article

### **SEKOCI: a community innovation for maternal and child health in Indonesia, and a model for the One Million More Midwives agenda**

**Rizka Ayu Setyani** ( *Bachelor of Midwifery and Professional Midwifery Education, Faculty of Medicine, Universitas Sebelas Maret, Indonesia*)

Global progress in maternal and child health continues to stall, not because solutions are unknown, but because health systems often overlook the environments in which women experience their pregnancies. Social stressors, limited support networks, gender inequalities, and poor nutrition exert a stronger influence on outcomes than any single clinical intervention. This is exactly where midwives play a pivotal role, not only as clinical providers, but as trusted community anchors who understand the social, cultural, and emotional realities shaping women’s health. By working at the intersection of community life and primary care, midwives bridge critical gaps that health systems often fail to address.

In this article, I will share Indonesia’s experience with the SEKOCI model, a community-driven midwifery innovation. Next year, at an international midwives conference in Lisbon, I aim to show how grounded, collaborative, and culturally attuned approaches like SEKOCI can help translate the global call for [‘One Million More Midwives’](#) into meaningful improvements in maternal and child health at the community level. ....

- To read on, see IHP: [SEKOCI: a community innovation for maternal and child health in Indonesia, and a model for the One Million More Midwives agenda](#)

## Highlights of the week

### Structure of the Highlights Section

- Run-up to G20 Leaders’ Summit (22-23 Nov)
- Today: Global Fund Replenishment (21 Nov, Jo’burg)
- Reimagining Global Health

- More on Global Health Governance & Financing
- PPPR
- World AMR Awareness Week
- Health Emergencies
- Conference of the Parties (COP11) to the WHO Framework Convention on Tobacco Control (FCTC) (17-22 Nov)
- More on Commercial Determinants of Health
- NCDs
- World Prematurity Day (17 Nov)
- 1<sup>st</sup> World Cervical Cancer Elimination Day (17 Nov)
- COP 30 in Belém, Brazil – Week 2 (focus on health)
- COP 30 – more general analysis/coverage
- More on planetary health
- SRHR
- Conflict/War/Genocide & Health
- Access to Medicines, vaccines & other health technologies
- Some more reports of the week
- Miscellaneous

## Run-up to G20 Leaders' Summit (22-23 Nov)

Ahead of the summit this weekend, you find some **reads, analyses, pre-events, final HL advocacy....**

PS: info on the run-up to **Global Fund replenishment** (today, 21 Nov) in Jo'burg you find in the next section.

### Devex – What are the key issues at stake at the G20 summit in South Africa?

<https://www.devex.com/news/what-are-the-key-issues-at-stake-at-the-g20-summit-in-south-africa-111340>

Great curtain raiser. **“Debt, inequality, and climate finance dominate the agenda, but boycotts and geopolitical rifts threaten to overshadow South Africa’s historic year at the helm.”**

« ...**This year, the G20’s agenda was set by South Africa. From day one, the country has emphasized three themes — solidarity, equality, and sustainability —** which have meant focusing on debt burdens across the global south, addressing inequality gaps, and financing for a just energy transition, among other priorities tied to global economic cooperation....”

« ...**The G20 Leaders’ Summit will take place from Saturday, Nov. 22 to Sunday, Nov. 23, immediately following the G20 Social Summit, a three-day event** that’s meant to bring the voices of civil society into the G20 conversation. **Here’s what we’ll be watching, and why the G20 matters for the world of global development.....”**

## Nature (Editorial) – South Africa is right to put debt, climate and inequality at the heart of G20

<https://www.nature.com/articles/d41586-025-03758-2>

“The host of the high-level meeting must not be swayed from its priorities, which are **in line with the evidence from research.**”

PS: “...According to a **report published last week by Chatham House**, a think tank in London, **the 17 largest international donors are expected to cut annual aid spending by more than US\$60 billion between 2023 and 2026** (see [go.nature.com/446zfam](https://go.nature.com/446zfam)). This amounts to **almost one-third of expected aid**. The health systems of some of the world’s poorest countries are [wholly reliant on such assistance....](#)”

## South Africa [to] host the G20 Social Summit

[https://dirco.gov.za/south-africa-to-host-the-g20-social-summit/?utm\\_source=chatgpt.com](https://dirco.gov.za/south-africa-to-host-the-g20-social-summit/?utm_source=chatgpt.com)

The **Social Summit** also took place ahead of the G20 Leaders’ summit. Below some related info:

“...South Africa [will] **host the G20 Social Summit from 18 to 20 November 2025** at the Birchwood Hotel and OR Tambo Conference Centre in Ekurhuleni, Gauteng Province. Under the overarching theme Solidarity, Equality and Sustainability, South Africa’s G20 Presidency reflects the nation’s strategic priorities of inclusive growth, poverty reduction, and the building of a capable, ethical, and developmental State. **In keeping with the G20 theme of Solidarity, Equality, Sustainability, the G20 Social Summit will convene formal and informal networks, including youth movements, women’s organisations, faith-based groups, organisations of persons with disabilities, community forums, and other grassroots structures.**”

“... **Building on Brazil’s innovative introduction of the G20 Social Summit**, President Cyril Ramaphosa has committed to continuing and expanding this people-centred platform during South Africa’s Presidency. **The G20 Social Summit seeks to elevate issues of social development, equity, and inclusion to the same level of priority as macroeconomic and financial matters....**”

- And a **short report on this G20 Social summit**, via [Devex](#):

“Before heads of state arrive for the G20 Leaders’ Summit this weekend, **civil society delegates are [having their say during the week](#) in talks meant to culminate in the G20 Social Summit Leaders’ Declaration**. The events **spanned a wide spectrum**, from using spirituality to inspire climate justice to regulating [artificial intelligence](#) in mental health tools. **Attendees discussed five core themes:** digital inclusion; trade and resilient value chains; just energy transitions; sustainable financing; and work to achieve both the U.N. Sustainable Development Goals and the African Union’s Agenda 2063 — its 50-year blueprint to transform the continent. **The resulting document will be presented to Ramaphosa today.....**”

## AFP – G20 Billionaires Could End World Poverty In One Year's Earnings: Oxfam

[AFP](#);

**“Billionaires in the world's leading economies made \$2.2 trillion last year, which would have been enough to lift all the world's poor out of poverty, global campaign group Oxfam said Thursday.”**

**“The British-based charity urged this weekend's summit of the powerful G20 group of major economies to back initiatives by the host, South Africa, to address massive global wealth inequality and the debt undermining developing countries.”**

**“Billionaires in the 19 countries that are part of the grouping made \$2.2 trillion last year as their combined wealth grew to \$15.6 trillion dollars, it said, basing its figures on the Forbes list. “The annual cost to lift up the 3.8 billion people who currently live below the poverty line is \$1.65 trillion,” it said in a statement.”**

**“Oxfam backed a recommendation that South Africa will present to the November 22-23 summit for the establishment of an international panel to tackle inequality in the same way the UN's IPCC works on the threat from global warming....”**

## **Reuters - Africa experts call for greater oversight of ratings agencies in G20 report**

**[Reuters;](#)**

**“A panel of Africa experts on Tuesday urged the Group of 20 major economies to step up oversight of credit rating agencies, which they accused of using flawed and opaque methodologies that increase borrowing costs for African governments. The panel, established under South Africa's G20 presidency, said in a report to the group that rating agencies exhibit “perception biases”, often assessing African risk as higher than other regions with comparable economic fundamentals....”**

**“Ahead of a G20 summit this weekend, the panel called on the group to impose stricter oversight of rating agencies, mandating greater disclosure of the data and models underpinning their decisions. It also recommended updating rating frameworks to better capture the diversity of African economies such as their growth potential and natural resources, and avoiding knee-jerk rating cuts that can exacerbate financial strains....”**

**PS: “The African Union, meanwhile, is working on an African Credit Rating Agency, which it plans to launch in the second half of 2025 to offer an Africa-based assessment of [credit risk](#)....**

**“...The panel was chaired by South Africa's former Finance Minister Trevor Manuel and its members include Nobel laureate economist Esther Duflo and former African Development Bank President Donald Kaberuka.....”**

## **Growth, Debt and Development: Opportunities for a New African Partnership Report of the South Africa G20 Africa Expert Panel for the G20 Leaders’ Summit**

**[https://g20.org/wp-content/uploads/2025/11/FINAL-AEP\\_Report\\_Individual\\_Pages\\_v251115.pdf](https://g20.org/wp-content/uploads/2025/11/FINAL-AEP_Report_Individual_Pages_v251115.pdf)**

But there’s a lot more in the abovementioned expert report. Check out the **key recommendations**.

- Related link: **[All Africa – Experts Call for Urgent, Politically Feasible Solutions to Sovereign Debt Crisis Ahead of G20 Summit.](#)**

## Devex - G20 panel calls for a new debt refinancing plan for low-income nations

<https://www.devex.com/news/g20-panel-calls-for-a-new-debt-refinancing-plan-for-low-income-nations-111384>

Very neat analysis. **“A new Africa debt proposal has landed at the G20, and will be considered by heads of state at the Leaders’ Summit this weekend.”**

**“The Group of 20 major economies has been handed a new proposal on debt — one that calls for a “fresh debt-refinancing initiative” for low-income countries.** That initiative would focus on refinancing debt **instead of rescheduling it**, and using a collection of resources to do so — including selling some of the 90 million ounces of gold held by the International Monetary Fund....”

PS: **“The proposal also pitches a “borrowers’ club” to give African nations more leverage in negotiations. ...”**

**“... Echoing a ministerial declaration on debt released by G20 finance ministers last month, the report recommends building on the G20 Common Framework — the bloc’s existing debt restructuring initiative — so that the process can be faster, fairer, and more efficient.... “ With 4 concrete suggestions for reform.**

**“... It’s not just the system that needs rethinking, the report says: There’s also a need to boost investment in the continent itself. That includes through development finance,** especially given the collapse of the U.S. Agency for International Development, and the dwindling of official development assistance across the world....”

## NYT – Trump Officials Are Policing Words and Foiling Deals at G20 Summit

J Eligon; <https://www.nytimes.com/2025/11/15/world/africa/trump-g20-boycott.html>

**“At the annual meeting of the world’s major economic powers, U.S. objections are blocking the usual policy statements, highlighting the president’s distaste for multilateralism — and compromise.” “John Eligon interviewed more than a dozen diplomats and government or civil society officials involved in the G20. He reported from Johannesburg....”**

**“... In interviews with The New York Times, more than a dozen participating G20 officials said the United States had spent much of the year drawing red lines, skipping working meetings and refusing to negotiate** in the lead-up to the final gathering in Johannesburg. The moves, they said, put into stark relief Mr. Trump’s aggressive foreign policy and distaste for multilateralism, compromise and anything he considers political correctness..... “

Including: **“.... In a meeting about global health, U.S. officials objected to the use of terms like “equity” and “universal health care,” according to Matthew Kavanagh,** director of Georgetown University’s Center for Global Health Policy and Politics, who was in the room....”

**“... In a working group on health,** U.S. representatives stayed silent for most meetings, according to Mr. Kavanagh, of Georgetown. It was only during one of the final sessions that a representative from the Department of Health and Human Services spoke up and said the Trump administration, disagreeing with many details in the working draft, could not support a joint declaration, according to one of the officials who spoke with The Times. **The U.S. delegation said it could collaborate on**

fighting noncommunicable diseases like cancer, but issues of equity, universal health care and support for the World Health Organization were nonstarters, Mr. Kavanagh said. "All of which is kind of bizarre," he said. "None of these three things are controversial in public health." **While G20 declarations are not binding, analysts say they can spur countries to take tangible action, such as [the creation of a fund three years](#) ago to help countries prepare for pandemics...."**

- Related: (20 Nov) via [Devex](#): "...on Tuesday, the U.S. formally warned South Africa against issuing a joint leader's statement, [according](#) to a diplomatic document seen by Bloomberg. The document stated that the U.S. would block any outcome framed as a group decision because South Africa's priorities "run counter to US policy views."

## **AP - Top economists call on world leaders to set up an international panel on inequality**

<https://apnews.com/article/global-inequality-wealth-g20-347e08555b43a4c0c568e44ea69982fc>

(13 Nov) "Hundreds of top economists and other experts, including former U.S. Treasury Secretary Janet Yellen, **called on Friday for the world to set up an independent international panel on [income and wealth inequality](#)**. The call in an open letter came before the [Group of 20 summit](#) in South Africa next weekend, **when a report on global inequality chaired by Nobel Prize-winning American economist Joseph Stiglitz is due to be presented to world leaders....."**

- For the **letter**, see [500 economists and inequality experts from seventy countries support call for new 'IPCC for inequality'](#)

"Hundreds of the world's leading economists and other experts on inequality from seventy countries are **urging world leaders to establish an International Panel on Inequality (IPI) inspired by the Intergovernmental Panel on Climate Change (IPCC)**. The IPI is the **central recommendation of the [G20's first ever report on global inequality](#)**, which will be presented to leaders at next week's G20 Leaders Summit in Johannesburg....."

## **Project Syndicate - The G20 Can No Longer Postpone Debt Relief**

Hailemariam Desalegn Boshe (former prime minister of Ethiopia & **member of the African Leaders Debt Relief Initiative**); <https://www.project-syndicate.org/commentary/g20-must-deliver-debt-relief-to-africa-at-johannesburg-summit-by-hailemariam-desalegn-boshe-2025-11>

"**The idea that Africa can finance the green transition while simultaneously spending huge sums on debt service is absurd. That is why the upcoming G20 summit in Johannesburg must end with a commitment to restructuring the liabilities of highly indebted countries**, most of which are on the continent."

"... The G20 must seize this moment **to devise a fair debt-resolution framework that both lenders and borrowing countries can agree on, and that recognizes the legitimacy of factoring climate vulnerability and investment needs into debt-sustainability assessments**. This would unlock Africa's green transition and, crucially, help to restore faith in multilateralism."



## The Conversation – Africa has a debt crisis: momentum from G20 in South Africa can help find solutions

D Bradlow; <https://theconversation.com/africa-has-a-debt-crisis-momentum-from-g20-in-south-africa-can-help-find-solutions-269004>

Some analysis re post-G20 summit. “The end of South Africa’s G20 presidency does not mean the end of its ability or responsibility to promote the issues it prioritised during 2025. **It can still advocate for action on some of these issues through its further participation in the G20 and in other international and regional forums.** In this article, I argue that going forward South Africa should prioritise the financial challenges confronting Africa that it championed in 2025.....”

“....there are three actions that South Africa can take beyond the end of its term to ensure that the **African debt crisis continues receiving attention.** First, it should ask a group like the African Expert Panel that it established to advise the president to prepare a technical report that identifies and analyses all the barriers to Africa accessing affordable, sustainable and predictable flows of external development finance. ....Second, South Africa and the African Union should **create an African Borrower’s Club that is independent of the G20.** ....Third, South Africa should capitalise on the fact that the impacts of climate, inequality, unemployment and poverty on Africa’s development prospects are now acknowledged to be macro-critical, and so within the IMF’s macro-economic and financial mandate. **South Africa should call for a review of the IMF’s operating principles and practices and its governance arrangements.....”**

## The Conversation - G20 and the civil society elite: spectacle instead of meaningful action

Luke Sinwell; <https://theconversation.com/g20-and-the-civil-society-elite-spectacle-instead-of-meaningful-action-269515?s=09>

“**Behind the talk of fighting inequality** at the group of 20 most powerful economies in the world, the G20, lies a carefully staged show – one that manages dissent rather than redistributes power.”

“... As a sociologist who researches protest and civic responses to inequality, I have found that **participation, when stripped of confrontation, becomes a technology of legitimacy.** In other words, including grassroots communities in discussions about governance, public services, and other social and economic issues becomes a polite consultation. This justifies existing power structures instead of challenging them. People may appear to have a voice, but the outcomes are already decided. I argue that the G20’s inequality agenda is simply a way of governing through spectacle or political theatre – a show in which leaders can appear to respond to serious problems faced by the working class while protecting the system that benefits elites.”

“**My own research** points not only to the exclusive nature of forums similar to the G20, but also suggests that **these forums can be genuinely transformed through disruptive acts or protests led by democratic grassroots organisations with a socialist vision.**”

“... **My book, The Participation Paradox,** offers a lens through which the G20’s current performance of “participation” can be viewed. ....”



## Global Fund – Private Sector Mobilize Innovation for Health Equity and Resilience at B20 Global Health Breakout

<https://www.theglobalfund.org/en/news/2025/2025-11-19-private-sector-mobilize-innovation-health-equity-resilience-b20-global-health-breakout/>

(19 November) “**Private sector leaders, philanthropists, and global health experts convened today at the B20 Global Health Breakout, held on the margins of the G20 Leaders’ Summit, to spotlight a new wave of innovation transforming the fight against AIDS, tuberculosis (TB), and malaria.** Hosted by the **B20 South Africa in partnership with the Global Fund’s Private Sector Constituency**, the event underscored how bold leadership, collaboration and catalytic investments are rapidly accelerating access to cutting-edge health technologies and strengthening the resilience and sustainability of health systems across the world. ....” (with a **bunch of examples**)

## African Business - Africa’s Voice at the G20: Turning challenges into opportunities

AUDU-NEPAD; <https://african.business/2025/11/partner-content/africas-voice-at-the-g20-turning-challenges-into-opportunities>

“**South Africa’s hosting of the first G20 Summit on African soil marks a watershed moment for the continent.**” By the **African Union Development Agency (AUDA-NEPAD)**.

PS: “...we are in the final stages of concluding our **feasibility study of the African Union Development Fund**, a fund by Africa for Africa **aimed at fast-tracking the realisation of Agenda 2063...**”

## Reuters - China pledges \$3.5 million for South Africa's HIV response

[Reuters](#);

“**China has pledged \$3.49 million to support HIV prevention services in South Africa over the next two years under a new partnership facilitated by UNAIDS**, Beijing's ambassador said on Thursday....”

- And a link: **New Economics Foundation** - [The G20 at a crossroads](#)

“**This report assesses the record of the G20 across five policy domains and applying two lenses.** First, it measures the G20’s delivery against **its own stated aims of “strong, sustainable, balanced, and inclusive growth”**. Second, it applies an **economic justice framework**, testing outcomes across distributive, procedural, recognition, restorative, capability, and environmental dimensions.”

## Guardian -Brazilian president will take fossil fuel phase-out plan to G20 summit

<https://www.theguardian.com/world/2025/nov/20/brazilian-president-fossil-fuel-transition-roadmap-g20-summit>

“**Luiz Inácio Lula da Silva says he is ready to fight for transition roadmap** despite opposition from some states.” (*for much more on this, see the COP30 section below*)

# Today: Global Fund Replenishment (21 Nov, Jo'burg)

Taking place today. Let's see what the day brings....

## HPW - Global Fund Seeks \$14 Billion at Replenishment Summit – With Progress Against HIV, TB and Malaria at Risk

<https://healthpolicy-watch.news/global-fund-seeks-14-billion-at-replenishment-summit-with-progress-against-hiv-tb-and-malaria-at-risk/>

**“The Global Fund (GF) has only raised \$4 billion of its \$18 billion budget for the next three years – so much is riding on its Replenishment Summit in Johannesburg on Friday (21 November) as it seeks the balance to advance progress against HIV, tuberculosis (TB) and malaria. “**

**“The United States has been the largest donor to the Global Fund, contributing around one-third of its budget – but whether it will still contribute generously is an open question, given the Trump administration’s “America First” focus.”**

**“ ... Médecins Sans Frontières (MSF) has described initial pledges as “deeply concerning”. “Germany and the United Kingdom – the only major traditional donors to pledge so far – have both decreased their commitments compared to the last cycle. Specifically, Germany has pledged €1 billion instead of €1.3 billion and the UK has pledged £850 million instead of £1 billion,” [MSF noted on Thursday](#). “No donor has increased their pledge when considering inflation. If other major donors follow Germany and the UK’s examples, the results would be catastrophic for people impacted by TB, HIV, and malaria worldwide,” MSF said.”**

- See also the [Telegraph - Fundraising summit for Aids, TB and malaria expected to fall billions of pounds short](#)

**“The Global Fund aims to raise £14bn (\$18bn) on Friday to fight Aids, malaria and tuberculosis over the next three years, at a UK-co-hosted event at the G20 in Johannesburg. **However cuts from leading donors including Britain and America are expected to see the fund miss the target by as much as £3bn to £3.8bn (\$4bn to \$5bn),** sources told the Telegraph.”**

**“Global health campaigners fear the shortfall will deflect efforts to end Aids as a public health threat by 2030 and weaken momentum in cutting malaria and TB deaths. In total, the pledges for what is known as the fund’s replenishment cycle are expected to be in the region of £10bn to £11bn (\$13bn to \$14bn).”**

PS: **“...Michel Kazatchkine, a former executive director of the Global Fund and currently a special advisor to the WHO, said: “I am hearing a lot of concern and also I would say a lot of confusion until the last minute.”**

## African Diplomats Reaffirm Africa's Unwavering Commitment to Global Health and Support to the Global Fund's Replenishment

<https://www.theglobalfund.org/en/news/2025/2025-11-17-african-diplomats-reaffirm-unwavering-commitment-global-health-support-replenishment/>

(17 Nov) "Representatives from African Union Member States met last week in Addis Ababa, Ethiopia, to engage on the Global Fund's Eighth Replenishment, just days ahead of the pledging summit in Johannesburg, South Africa, on the margins of the G20 Leaders' Summit....."

PS: **"The meeting saw a remarkable moment: the announcement of the first African pledge to the Eighth Replenishment – a US\$3 million contribution by the Republic of Uganda,** conveyed by Ambassador Rebecca Amuge Otengo, Uganda's Ambassador to Ethiopia....."

## CGD (blog) - Weathering the Donor Downturn: The Case for a New Financial Model for the Global Fund

J M Keller et al ; <https://www.cgdev.org/blog/weathering-donor-downturn-case-new-financial-model-global-fund>

See also last week's IHP newsletter.

Concluding: **"Rethinking global health financing for a new era:** This debate also relates to a larger reckoning happening in global health. Many commissions and panels are currently **proposing** new visions for global health, **focusing** on redefining institutional mandates, improving coordination among actors, and reforming governance structures. But far fewer are asking a critical and urgent question: **Are current financing models suitable for a world with limited aid? Our paper highlights the opportunity cost of maintaining the status quo: sticking with a grants-only model in an era of shrinking aid would compromise long-term sustainability.** Importantly, our approach does not replace the Global Fund's commitment to grants for the poorest countries but instead proposes an evolution in the Global Fund's financing relationship with middle-income countries....."

**"The key question** is not just whether the Global Fund will achieve its \$18 billion goal for this replenishment, but **how it should adapt its model to put itself on sustainable financial footing at a time of significant funding uncertainty....."**

And a few links:

- Global Fund - [The Government of the Netherlands is pledging €195.2 million to the Global Fund to Fight AIDS, Tuberculosis and Malaria for the period 2026–2029.](#)
- Euractiv: [HIV fight at risk as Macron expected to skip major health summit](#)

"French President Emmanuel Macron is expected to skip a major HIV summit in South Africa on Friday, signalling France's waning interest in global development aid..... **Paris is reportedly preparing to reduce its funding for the Global Fund,** the organisation hosting the summit and the world's main financing body for programmes tackling HIV, malaria, and tuberculosis...."

# Reimagining Global Health

## Chatham House (Expert Comment) - The UK should go ahead with its plans to host a global conference on the future of development

O O'Sullivan; [Chatham House](#);

"The UK and allies must coordinate to manage the consequences of their own aid cuts, and those driven by President Trump – by prioritizing what still works in the multilateral system."

PS: quote – "Many countries in the Global South are less interested in direct aid provision and more in renewed offers on trade...debt relief, and a more functional and responsive international system...."

**"A global conference in 2026 will not address all the concerns emerging from an uncertain new world and heavy cuts to Western aid. But it will be a good first step for the UK to convene other donors, funders, and recipient states to coordinate more closely on a slimmed-down, effective multilateral system. That is more important than ever in a less American world."**

## Devex – 'More creativity, more humanity'

<https://www.devex.com/news/devex-newswire-ngos-face-fight-or-flight-moment-against-trump-attacks-111360>

"...One of the world's best-known philanthropies is also undergoing some changes. The Gates Foundation is hiring for three big communications roles on the back of a refreshed communications strategy. All three positions are director-level, with salary ranges approaching \$500,000 a year. Alex Reid, Gates' chief communications officer, tells my colleague Michael Igoe that the foundation wants to reach "broad public audiences" and get people "to care again about health and development around the world, at a time when attention and resources are pulled in so many different directions." ..."

"In the wake of USAID's dismantling and global cuts to foreign aid, many development advocates are soul-searching for reasons their message and mission have struggled to gain traction. It appears Gates is putting some serious resources behind an effort to take back the story. The foundation wants to "reach out to folks beyond the development community to try to appeal to the hearts and minds of everyday people," Reid tells Michael. "We are looking for more creativity, more humanity in our communications," she says."

## More on Global Health Governance & Financing

With updates on Africa CDC, WHO, the US Global Health strategy, and plenty more.

## Lancet Comment – Africa's Health Security and Sovereignty agenda: a new way forward

Jean Kaseya; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02315-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02315-3/fulltext)

**“In the aftermath of the COVID-19 pandemic, Africa articulated the ambitious the New Public Health Order (NPHO) to strengthen institutions, the workforce, manufacturing, domestic financing, and partnerships for health security. This vision, endorsed by African Heads of State in 2022, guided the continent's public health rebuilding process from the vulnerabilities exposed by the pandemic....”**

**“... The Africa Centres for Disease Control and Prevention (Africa CDC), following the guidance from the September, 2025 meeting of its Committee of Heads of State and Government, adopts a new way forward to realise and transition the commitments of the NPHO to a more concrete, practical, transformative, and evolving vision. This new strategic transition, termed Africa's Health Security and Sovereignty (AHSS), reflects the growing recognition that achieving universal health coverage, pandemic preparedness, and sustainable development cannot be realised without health sovereignty—the ability of African nations to finance, produce, and govern their own health systems and countermeasures....”**

**“This strategic shift from NPHO to AHSS responds to three unfolding realities....”**

**“... The AHSS agenda is built on five mutually reinforcing pillars designed to operationalise sovereignty across the health ecosystem in Africa....”**

**Kaseya concludes:** “The AHSS agenda represents Africa's transition from dependency to ownership, from vulnerability to resilience, and from aspiration to action. This is not only Africa's journey, it is the world's opportunity. A sovereign and secure Africa strengthens global health security for all.”

## HPW – WHO Cutting Up to 25% of Staff by June 2026 – But ‘Shadow Workforce of Consultants’ Is Unreported

<https://healthpolicy-watch.news/exclusive-who-cutting-up-to-28-of-staff-by-june-2026-but-shadow-workforce-of-consultants-is-unreported/>

**“WHO will have terminated, retired or separated by agreement an estimated 2371 staff worldwide by mid-2026 – shedding about 25% of a workforce that numbered 9,457 in December 2024 – a 15-year peak. That’s [according to a new report](#) that is to be presented and discussed with WHO member states on Wednesday. ...”**

**“Despite the huge cuts, there remained a \$141 million gap in 2025 salary costs as of September 2025 – and a projected \$1.05 billion funding gap for the 2026-27. That as compared to a \$1.7 billion gap in May, 2025, according to the report, posted on the WHO website Tuesday morning with no announcement. It was shared Tuesday evening by WHO Director General Dr Tedros Adhanom Ghebreyesus in a message to all staff worldwide. Significantly, the report also provides no data as to the number of non-staff consultants who continue to be employed by the organization – sometimes described as WHO’s “shadow workforce.” And that represents a significant gap in the reporting, in light of the more than [8,000 consultants who were engaged](#) by WHO globally in 2024. ...”**

- See also Devex - [WHO to lose nearly 2,400 jobs by mid-2026](#)

“The cuts are brutal. **But with a \$1 billion funding gap in 2026, there remain uncertainties ahead.**”

“... In a staff email, the **WHO chief executive said he expected new opportunities “will open up” in the future, and that separated staff will be prioritized for those.** One senior WHO official, however, described the cuts in one word: “CHAOS.” ...”

“The **biggest reductions will fall on the organization’s Geneva headquarters and the Africa regional office in Brazzaville, Republic of Congo**, which will lose 808 and 774 workers of their workforce, respectively. The data shows some slight discrepancies in numbers and percentages. **The biggest impacts proportionally will be on those in either the director or entry-level professional positions. But the highest absolute number of workforce reductions will fall on locally recruited staff and those serving in administrative and support positions.**”

“The official told Devex that one thing still to be explained is what will be deprioritized. “We have not set out what we will not do, and **the narrative from the top continues to be we do more with less, which is not realistic,**” the official said....”

**Guardian - Huge staff cuts at WHO will leave world ‘less healthy and safe’, experts warn**

<https://www.theguardian.com/global-development/2025/nov/19/huge-cuts-to-staff-at-who-will-leave-world-less-healthy-and-less-safe-experts-warn>

“Health organisation is to lose almost a quarter of its workforce in 2026, **reducing its ability to help countries facing disease outbreaks.**”

With views from **Pete Baker (CGD), Eloise Todd, Kazatchkine, ...**

**Geneva Health Files - Is Neutrality in Politics Making Indonesia “Checkmate” in the Global Health Play?**

N R Rilfi; [Geneva Health Files](#);

“Middle-income countries are challenging the status quo in the international order. But the extent to which they will succeed depends on a number of factors including domestic realities and their aspirations in a changing world. **In today’s edition, we examine the evolving role of Indonesia in global health** - a country illustrative of the growing power of emerging economies....”

A few excerpts:

“... **Indonesia consistently frames its contributions through a posture of neutrality in diplomacy.** Geopolitically, it occupies the role of a middle power, balancing relations across multiple blocs. **As a G20 member and the leading democracy in Southeast Asia, Indonesia plays a pivotal role in shaping discussions on health and development within multilateral platforms.** Its foreign policy has been described by Dino Patti Djallal, a former Indonesian ambassador to the US, presidential spokesperson, and foreign policy expert, as “**politically polygamous**”—**maintaining strong ties with**

**both Washington and Beijing. .... This balancing act extends into health diplomacy**, where Indonesia collaborates with a wide range of partners to secure pandemic preparedness support, medical innovation, and equitable access to vaccines. Indonesia also consistently champions ASEAN centrality and neutrality, promoting Southeast Asia as an “oasis of growth” where major powers must adapt to regional norms rather than impose their own....” “ ... **Indonesia’s long-standing practice of bebas-aktif diplomacy illustrates how neutrality can be applied not as passive detachment but as an active force in global politics.** By positioning itself between competing powers, **Indonesia has often played the role of mediator and “bridge builder,”** fostering dialogue across rival blocs.”

PS: “... There is a **strong buzz in Geneva**, that Indonesian minister of health – **Budi Sadikin**, would potentially run for the election of WHO’s Director-General in the coming months...”

### **BMJ (Opinion) - Action is needed to implement World Health Assembly social participation resolution**

A Bok et al ; <https://www.bmj.com/content/391/bmj.r2445>

**“At the 77th World Health Assembly in 2024** governments made a unanimous and unprecedented commitment to put patients, people and communities with lived experience, and healthcare workers at the heart of health policy design, delivery, evaluation, and decision making. **The landmark resolution on social participation** represents a historic milestone, but emerging challenges now require our collective action to turn opportunity into reality. .... However, despite governments reconfirming their commitment at the 78th World Health Assembly in 2025, **two developments put momentum at risk** and require the active involvement of patient organisations, healthcare worker associations, and civil society if we are to evolve healthcare into a truly collaborative, people centred system....”

### **Reuters – US and European aid cuts could result in 22.6 million deaths worldwide, study finds**

<https://www.reuters.com/business/healthcare-pharmaceuticals/us-european-aid-cuts-could-result-226-million-deaths-worldwide-study-finds-2025-11-17/>

**“Abrupt cuts to development aid by major donor countries could cause up to 22.6 million additional deaths in developing countries by 2030, including 5.4 million children under five,** according to [a new study](#) by the **Barcelona Institute for Global Health (ISGlobal)** and other **organizations.** The warning comes as the United States, Britain, Germany and France have each reduced development aid for the first time in nearly three decades and are planning further cuts in 2025. ....”

“The global health research centre's report, a copy of which was viewed by Reuters, **examined data from 93 low- and middle-income countries to estimate the impact of further reductions in official development assistance (ODA) in 2025, on top of sharp cuts over the past five years.** It concluded that a severe reduction in that assistance would lead to 22.6 million additional deaths, including 5.4 million children under five, by 2030, significantly higher than the research institute had estimated in a previous study that focused on U.S. cuts. **The authors modeled both a severe and a mild scenario for future aid cuts, along with one that would have maintained 2023 funding levels....”**



“... The study released on Monday by a coalition of health and development organizations **builds on previous research published in The Lancet medical journal in June**, which estimated deep cuts to the U.S. Agency for International Development could result in more than [14 million additional deaths](#) by 2030. **The new study, which has been submitted to The Lancet for peer review**, noted that if the U.S., Britain, Germany and France make further reductions in 2025, it would be the first time that all four countries have cut ODA simultaneously for two consecutive years.....”

## HPW- US Steams Ahead With ‘Extractive’ Health Aid Agreements With African Countries

<https://healthpolicy-watch.news/us-steams-ahead-with-extractive-health-aid-agreements-with-african-countries/>

“The United States government is moving rapidly to secure Memorandums of Understanding (MOU) with African countries that offer [limited health aid](#) for five years in exchange for 25 years’ access to countries’ data about “pathogens with epidemic potential”. ... The process is being driven by [Brad Smith](#), formerly one of the leaders of Elon Musk’s Department of Government Efficiency (DOGE), who was responsible for implementing deep cuts to the US Health and Human Services (HHS) department. **Smith is now a global health advisor in the US State Department**, overseeing the reorganisation of the US President’s Emergency Plan for AIDS Relief (PEPFAR) and health grants from the now defunct US Agency for International Development (USAID).....”

PS: “Bizarrely, the MOUs also want governments to commit to a 25-year “data sharing arrangement” for “exchanging data on the long-term performance of this MOU and for accountability to the United States Congress for appropriated funds”. However, the country grants will only run from 1 April 2026 until 2030. .... Author Emily Bass [published a template](#) for this data-sharing arrangement over the weekend, saying that it “reveals the unprecedentedly extractive nature of these ongoing negotiations” ....”

PS: “By placing itself at the centre of rapid information-sharing about dangerous pathogens, the US appears to be attempting to usurp the World Health Organization (WHO). WHO member states are currently negotiating a Pathogen Access and Benefit Sharing (PABS) system that unite countries, pharmaceutical companies and non-profits in a single process aimed at speedily sharing information and developing counter-measures for pathogens that can cause pandemics. The US and Argentina are the only countries that have opted out of these negotiations. **However, if the US is the gatekeeper of pathogen information via these MOUs, this is likely to fracture and slow down the global response to pandemics.** In addition, US companies could also get the first shot at developing vaccines, therapeutics and diagnostics for these pathogens.....”

## Devex – US health strategy aims to position African governments as customers

<https://www.devex.com/news/us-health-strategy-aims-to-position-african-governments-as-customers-111378>

“Under the ‘America First’ global health strategy, African governments “won’t be aid recipients, but customers who recognize value,” said the State Department's Jeff Graham.”

“The United States’ new global health strategy will work to position American companies to lead in African markets — home to the world’s fastest growing populations — with African governments

serving as customers of American products. That's according to **Jeff Graham, senior bureau official for the State Department's Bureau of Global Health Security and Diplomacy**. In this vision, the role of donors is to support innovation, he said, as opposed to focusing on responding to emergencies. ... Graham is **part of a team of roving State Department officials traveling across the African continent to negotiate bilateral agreements with countries** as part of the new 'America First' global health strategy."

"... The U.S. has [started its negotiations](#) with 16 African governments. Graham said there are currently two American teams simultaneously negotiating with countries and Rwanda is the third country in his own five-country tour of negotiations...."

"He said two **new flagship deals with the private sector** "demonstrate this new approach in action." This includes the **U.S.'s new \$150 million investment in Zipline** — an American company that delivers medical supplies to remote areas by drone. ... Graham pointed to another deal that reflects the administration's new approach: A **September agreement with U.S. pharmaceutical company Gilead** and the [Global Fund to Fight AIDS, Tuberculosis and Malaria](#) to roll out the HIV prevention drug lenacapavir, which he described as an innovative product. The [first doses](#) are being delivered this week in Eswatini and Zambia. ...."

### Nairobi Wire -Kenya and US Finalize Health Partnership to Boost Universal Health Coverage

[https://nairobewire.com/2025/11/kenya-us-bilateral-health-agreement-strengthens-uhc-disease-fight.html#google\\_vignette](https://nairobewire.com/2025/11/kenya-us-bilateral-health-agreement-strengthens-uhc-disease-fight.html#google_vignette)

By way of example. "**Kenya is set to strengthen its health partnership with the United States through a new bilateral agreement** aimed at boosting Universal Health Coverage (UHC) and combating diseases such as HIV, tuberculosis, and malaria....."

"...According to the PS, both governments are in the final stages of finalising a new bilateral agreement that **will align Kenya's healthcare goals with the US's global health priorities.....**"

### The Forsaken - No seat at the table

A Green; <https://theforsaken.substack.com/p/no-seat-at-the-table>

"Washington has started talks with African countries about future health funding. **In Botswana, most NGOs are not included.**"

Green: "With negotiations over bilateral health agreements underway across Africa, **what does it mean that organizations providing services for gay men, sex workers and other vulnerable communities weren't invited to the talks?...**"

### Lancet Comment- The new America First Global Health Strategy goes back to the future

T Bollyky ; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02264-0/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02264-0/fulltext)

**“...That vision—the US State Department's new America First Global Health Strategy—describes itself as forward-looking, but is more counter-revolutionary in its aims, seeking to return US programmes to first principles.** The strategy rightly asserts that US global health leadership is not charity; it must directly benefit the US people and their interests. Yet, the strategy does not assess which health risks most threaten US lives, livelihoods, and the stability of allied nations, nor does it consider which interventions would be best suited to mitigate those risks. Instead, **the America First strategy simply preserves the long-standing US global health priorities that do not run afoul of the President's populist precepts and omits those that do.** In are HIV, tuberculosis, malaria, and polio; outbreak surveillance and response; competition with China; US corporations; and bilateral aid. Out are climate-related risks; paediatric vaccines disfavoured by the President's Health Secretary, Robert F Kennedy Jr; women, including maternal and reproductive health; aid for manufacturing or sanitation in other nations; US non-governmental organisations; and regional and multilateral institutions....”

**“... Rather than tailoring US foreign policy responses to meet the demands of the threat, the America First Global Health Strategy has tailored the threat and the response to meet the demands of current US foreign policy.** In doing so, **this strategy takes the USA back 25 years—to** circumstances that existed before the last consequential reassessment of US foreign policy and global health in 2000.....”

**“In 2000, the US National Intelligence Estimate (NIE), entitled *The Global Infectious Disease Threat and its Implications for the United States*, broke new ground, helping elevate global health on the US foreign policy agenda and shaping how other governments characterised the national security implications of infectious disease. ....”** Do read on.

Bollyky concludes: **“...Yet, in returning to many of the approaches that characterised the era before the NIE in 2000, the new America First strategy risks recreating the circumstances that necessitated that earlier strategy.** The world still faces dire health threats that countries cannot fight alone without the infrastructure and medical solutions (eg, research and technology, data and monitoring, market shaping, and procurement) that only an international coalition can sustainably provide. The America First Global Health Strategy is a missed opportunity to mobilise that collective response to today's changed geopolitical, technological, and epidemiological circumstances.”

## **World Bank – At a Crossroads: Prospects for Government Health Financing Amidst Declining Aid**

[https://www.worldbank.org/en/topic/health/publication/government-resources-projections-health-financing-report?cq\\_ck=1759507565293](https://www.worldbank.org/en/topic/health/publication/government-resources-projections-health-financing-report?cq_ck=1759507565293)

**“Government health spending is well below the minimum needed to achieve universal health coverage (UHC).** But bold reforms in health spending can deliver rapid gains by saving lives, creating jobs, and driving economic growth.”

**“This report – [part of an annual series](#) – monitors the latest trends and provides an outlook on government and donor health spending in these countries. ...”** Check out the findings.

- Related tweet by Kalypso Chalkidou: **“ ...combined government and donor health spending is expected to fall in 80% of LICs and 40% percent of LMICs by 2030, as sharp cuts**

to development assistance for health—projected to decline by around 20%—offset growth in government spending.”

## **WB (blog) - World Bank Group and Global Fund: A strengthened partnership for global health**

A Renaud, K Ranson et al ; <https://blogs.worldbank.org/en/health/world-bank-group-and-global-fund--a-strengthened-partnership-for>

« **The World Bank Group (WBG) and the Global Fund have a long history of this alignment, and since 2016, have collaborated on 13 joint investments across 10 countries, mobilizing approximately 185 million in grant financing and leveraging more than \$3 billion in total joint investments to advance health outcomes and strengthen health systems. Recognizing this momentum and to further strengthen collaboration, in November 2023, the WBG and the Global Fund finalized a Memorandum of Understanding that laid the groundwork for more efficient and sustainable financing to improve health outcomes. The collaboration between the Global Fund and the WBG helps achieve their respective ambitious 2030 health goals....**”

« ... **Joint financing is a critical mechanism prioritized in this partnership to achieve our shared goals. ...** ” (with some country examples).

PS: « **Looking ahead, the WBG–Global Fund partnership will be pivotal in navigating a shifting global health financing landscape, as countries are driving better alignment of external funds and calling for stronger collaboration among major players. The Lusaka Agenda calls for united action to strengthen health systems and ensure accountability, alongside increased calls for greater health sovereignty. This goal is being supported through the new [Health Works Leaders Coalition](#) – launched by the WBG in which the Global Fund is a founding member. Through this coalition, members will be supporting countries in developing compacts that align financing and deepen mutual accountability. Bringing together leaders from both public and private sectors, the coalition is driving collective action, mobilizing resources, and advancing national health priorities toward the UHC Forum in Tokyo in December 2025....**”

## **Devex- Sen. Grassley probes top foundation's China funding, nonprofit status**

Devex - <https://www.devex.com/news/sen-grassley-probes-top-foundation-s-china-funding-nonprofit-status-111393>

**“The Gates Foundation and Ford Foundation defend compliance with U.S. tax law as Senate inquiry cites reports of CCP-linked giving.”**

“Republican Sen. Chuck Grassley, head of the Senate Judiciary Committee, said he is probing the Gates Foundation, Ford Foundation, and Rockefeller Brothers Fund to **determine if their funding of programs in China violated nonprofit tax rules....**”

## Kiel Institut (Working paper) - Can Development Assistance for Health Mutually Benefit Donors and Recipient Countries?

G Yamey et al ; <https://www.kielinstitut.de/publications/can-development-assistance-for-health-mutually-benefit-donors-and-recipient-countries-19104>

“... In this paper, we therefore set out to examine the research evidence on the impact of health ODA on both recipients and donors. We use the term “mutual interest health ODA” to denote health ODA that has benefits for both recipients and donors. We found evidence that health ODA could mutually benefit recipients and donors and categorized these benefits into (i) health benefits and health-related economic benefits; (ii) economic benefits unrelated to health; and (iii) political benefits. .... “

## ODI - The missing harmony in the next generation of country platforms

A Gilmour; <https://odi.org/en/insights/the-missing-harmony-in-the-next-generation-of-country-platforms/>

“Countries, donors and financing institutions need assurances from each other that country platforms really are taking off. **Could philanthropies hold the key?**”

“...The next generation of country platforms may be able to find harmony through coordinated and far-sighted support from philanthropies.....”

## CGD (Brief) - Tough Times, Tough Choices: Charting PEPFAR's Next Chapter While Safeguarding its Legacy

R Bonnifield et al; <https://www.cgdev.org/publication/tough-times-tough-choices-charting-pepfars-next-chapter-while-safeguarding-its-legacy>

“... We propose a **differentiated three-track framework to operationalize a responsible PEPFAR transition** while meeting the administration's key strategic goals: **Track 1 – Graduation:** For wealthier and stable partner countries able to feasibly absorb PEPFAR funding on a relatively rapid timeline, following a phased shift of service delivery to government systems; **Track 2 – Toward self-reliance:** For poorer, higher-burden countries, allowing extended timelines to gradually increase domestic financing while sustaining PEPFAR funding for key treatment and prevention outcomes; **Track 3 – Compassionate:** For the poorest and most fragile countries where sustained PEPFAR investment is required, with potential scope for partial service delivery via national systems in some settings.....”

PS: “This analysis and proposed timeline only apply to PEPFAR, and should not be extended to other global health programmatic areas and investments.....”

## Lancet World Report – The European Investment Bank's focus on health

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02362-1/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02362-1/fulltext)

**“As national overseas aid falls dramatically, the European Investment Bank is ramping up financing for global health projects. Udani Samarasekera reports.”**

**“...a few Scandinavian countries and some philanthropies have increased their support for global health this year. However, calls have also been made for multilateral development banks, which spend billions on overseas development projects each year, to boost their contributions. One such bank, the European Investment Bank (EIB), is doing just that. EIB plans to increase its annual funding for countries outside of the EU from €9 billion to €10 billion, according to its global strategy released in October. Funding for the health sector is a key priority in the new plan. “Health has become more of a core focus of EIB”, Felicitas Riedl, a Director in EIB's projects department, told *The Lancet*. EIB's new strategy will focus on high-impact partnerships between the EU and partner countries worldwide....”**

**“... Over the past 5 years, it has invested around €22 billion in health and life sciences inside and outside of the EU; €4.3 billion went directly to global health projects. EIB Global is the bank's development arm, which oversees its work outside of the EU and will implement the new global strategy. It operates in sub-Saharan Africa, Latin America, the Caribbean, Asia, and the Pacific. In 2024, EIB Global financed projects outside of the EU that it estimates will provide 4.2 million people with better health services, 1.8 million people with safer drinking water, and 7.2 million households with renewable energy. EIB's new global strategy will have a focus on health systems. “We will be pushing for quality and the concept of resilience”, says Triki... ... EIB Global will also be partnering with Gavi and the Gates Foundation on vaccine manufacturing in Africa....”**

**“Although some experts welcome the contribution of multilateral development banks to global health financing, others warn that their profit focus will not deliver health equity....”**

With also the **view from Felix Stein.**

## **Lancet Correspondence – The challenges of improving access to quality of care in LMICs**

Farid Fezoua; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)01901-4/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)01901-4/fulltext)

The author belongs to the International Finance Corporation and reacts to a previous Lancet World report.

He concludes: **“...The World Bank Group agrees that patient safety and protection must be of foremost importance. The World Bank Group holds its clients to high standards, and, over the past year, has further strengthened its due diligence processes and supervision of private sector health-care projects to better identify and manage risks relating to patient rights and protections. The World Bank Group is committed to improving health care, and looks forward to continuing dialogue with its clients to adhere to the highest standards when providing health care to people in the countries in which it operates....”**

## **Lancet Letter – Gender equality, health, and the rise of the far right**

Sergo Chikhladze et al ; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02127-0/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02127-0/fulltext)

**“A Lancet Editorial rightly highlighted the growing health threats posed by far-right populism. However, shockingly, it overlooked a crucial dimension central to the far right, namely an anti-feminist, anti-gender equality agenda with profound effects on the health and wellbeing of women and girls, LGBTQI+ individuals, and the health workforce. Across Europe and North America, similar to other parts of the world, far-right movements have led a systematic backlash against gender equality, sexual and reproductive health and rights, and the rights of sexual and gender minorities...”**

**“... We need to build stronger alliances across feminist, anti-racism, and global health efforts and collectively reaffirm gender equality as a core determinant of health and democracy.”**

## **UNAIDS releases updated guidelines for conducting National AIDS Spending Assessments**

(14 Nov)

[https://www.unaids.org/en/resources/presscentre/featurestories/2025/november/20251114\\_NASA\\_guidelines\\_revised](https://www.unaids.org/en/resources/presscentre/featurestories/2025/november/20251114_NASA_guidelines_revised)

**“ UNAIDS is releasing an updated version of its guidelines for conducting National AIDS Spending Assessments (NASA). The guidelines are aimed at NASA implementers and HIV programme managers utilizing HIV expenditure data to influence budgetary, policy and programmatic decisions. ...”**

## **Reuters - Germany reverses cuts to global polio fund after virus traces found at home**

[Reuters:](#)

**“ Germany has gone back on plans to cut its contribution to a global fund to support the eradication of polio after authorities found traces of a variant of the disease in Hamburg wastewater, officials said [last week] on Friday. In last-minute negotiations finalising the 2026 budget, legislators decided to allocate an additional 4 million euros to Germany's contribution to the Global Polio Eradication Initiative, bringing the total contribution to 23 million euros ...”**

## **Devex - Denmark to cut IAVI funds, prioritizing multilaterals over smaller grants**

<https://www.devex.com/news/denmark-to-cut-iavi-funds-prioritizing-multilaterals-over-smaller-grants-111321>

**“The government is moving toward funding a smaller batch of multilaterals, as opposed to providing smaller grants to a broader set of organizations.”**

**“Denmark’s government, which has been a consistent supporter of the [International AIDS Vaccine Initiative](#) for over two decades, is planning to cut its support. ... IAVI, a nonprofit scientific research organization, works on developing vaccines and antibodies for HIV, tuberculosis, and other emerging diseases.....”**



PS: “The news comes in the wake of much broader funding cuts to IAVI. The organization lost some \$22 million from last January through June 2026 due to the U.S. foreign aid cuts and the dismantling of the [U.S. Agency for International Development](#). The U.S. was the largest donor to the organization’s HIV vaccine research. These cuts triggered workforce layoffs of about 15%-20%, clinical trial cuts, cuts to support for clinical research partners across Africa, and a delay to an HIV vaccine clinical trial partly backed by USAID. IAVI has since secured funding to begin the trial....”

## PAN becomes Rani

<https://rani.co/evolving-to-become-rani/>

“The Pandemic Action Network (PAN) becomes **rani**, which stands for **Resilience Action Network International**. Rani is a **global advocacy network, coordinating advocacy to build societal resilience to overcome shifts, change, and crises**. This new name is a better reflection of the work we do – it encapsulates our world view, and connects us with our partner, RANA (Resilience Action Network Africa). ....”

- Related **discussion paper** (from a few weeks ago): [Reframing Resilience: An Agenda for a More Equitable Future](#)

## PPPR

### Pandemic Fund (blog) - Three Years On: Sustaining Momentum to Build a Safer, Healthier World

<https://www.thepandemicfund.org/news/blog/three-years-on-sustaining-momentum-to-build-safer-healthier-world>

Update on the Pandemic Fund by **Priya Basu** (Executive Head, Pandemic Fund).

“Three years ago, the world was still reeling from the devastating consequences of the pandemic....In its wake, leaders around the world recognized the urgent need to invest—not reactively, but proactively—in preventing and preparing for the next pandemic. **At the request of the G20, and under Indonesia’s G20 Presidency, the Pandemic Fund was formally launched on November 13, 2022 as the first multilateral financing mechanism dedicated exclusively to helping low- and middle-income countries strengthen their pandemic prevention, preparedness, and response (PPR) capacities.** Three years on, the Pandemic Fund has grown into a dynamic global partnership, with 28 contributors, committing nearly US\$3 billion. Working through trusted international institutions, and leveraging its catalytic financing model, the Fund has already built a US\$7 billion portfolio across 47 projects in 75 countries spanning six regions. Each of these investments helps countries build core systems that save lives: strengthening disease surveillance, upgrading laboratories, and training health workers—the first responders when outbreaks strike. **The momentum continues. Very soon, the Pandemic Fund will finalize its third call for proposals, expanding its portfolio and deepening our impact across regions....”**

Related: (18 Nov): **Today, the Governing Board of @Pandemic\_Fund convened its 18th meeting in #Kigali, #Rwanda.** Representatives from contributor & co-investor governments, #civilsociety, our

Technical Advisory Panel, Implementing Entities, and other observing entities came together to discuss where and how the Fund can make the greatest impact in an evolving #healthfinancing landscape. **The Board and Secretariat will reflect on progress to date and discuss key priorities. They will also visit Rwanda's Pandemic Fund-supported project to see firsthand how country-led investments are driving real impact on the ground....."**

PS: The **Africa Centres for Disease Control and Prevention (Africa CDC)** participated in the **Pandemic Fund (PF) Board Meeting** held in Kigali, Rwanda, from **17–19 November 2025**.

- Fyi – **Pandemic Fund Board**: <https://www.thepandemicfund.org/who-we-are/board>

And a link: AP - [MacArthur Foundation awards \\$100M to outbreak surveillance network, a boost amid global health cuts](#) "The **MacArthur Foundation** is awarding **\$100 million** to a **private pandemic prevention network across Africa**, offering critical support to infectious disease surveillance at a time when governments are reducing global health spending... " **Sentinel**, that is.

- And a **tweet by Jean Kaseya** (re **Pandemic Fund's third call decisions**): "I welcome the **@Pandemic\_Fund** 's selections of **USD 234 million** to **@\_AfricanUnion** Member States to strengthen preparedness and response across the continent. **AfricaCDC** has also secured **USD 40 million** to reinforce regional coordination, early detection and cross-border surveillance." For more, see [Africa CDC Welcomes Pandemic Fund Selections and Strengthened Support for African Preparedness](#).

## Policy Strategy -Bilateral Gambits and the Future of PABS

<https://policystrategy.group/insight/bilateral-gambits-and-the-future-of-pabs/?privacy=updated>

Analysis by Spring Gombe.

Excerpt: "**Africa is not simply being wooed; it is being instrumentalized. If a critical mass of African countries accepts such terms without clear safeguards, the signal to the rest of the world is stark: when the politics get rough, the path of least resistance is bilateral.** That is intended to weaken the collective hand of the Africa Group in the PABS talks, invites other powers to field their own template deals, and accelerates the very race-to-the-top-of-the-queue behaviour the Annex, and indeed the entire Pandemic treaty was meant to discipline. **Even if African governments hold firm on PABS and treat any MOU with extreme caution, this episode exposes, in unusually sharp focus, what negotiation in a multipolar health order now entails. It is no longer "multilateral versus bilateral", but an overlapping web of instruments in which major powers test how far they can stretch conditionality before it is called what it is: an attempt to shape the global rules of pathogen access through selective offers to those with the least room to refuse...."**

## World AMR Awareness Week (18-24 Nov)

### World AMR Awareness Week 2025 urges action to turn political commitments into life-saving interventions

<https://www.who.int/news/item/17-11-2025-world-amr-awareness-week-2025-urges-action-to-turn-political-commitments-into-life-saving-interventions>

“... As World AMR Awareness Week approaches (18 to 24 November 2025), the **World Health Organization (WHO)** and partners urge all countries to turn political commitments into life-saving interventions. This year’s theme, “**Act Now: Protect Our Present, Secure Our Future**”, builds on momentum from the 2024 UN High-Level Meeting on AMR and the adoption of its political declaration. It calls for strengthening surveillance, improving access to quality medicines and diagnostics, spurring innovation, and building resilient health and food systems. ....”

### More countries report rising levels of drug-resistant gonorrhoea, warns WHO

<https://www.who.int/news/item/19-11-2025-more-countries-report-rising-levels-of-drug-resistant-gonorrhoea--warns-who>

“The World Health Organization (WHO) warns that gonorrhoea, a sexually transmitted infection, is becoming increasingly resistant to antibiotics, according to new data from its *Enhanced Gonococcal Antimicrobial Surveillance Programme (EGASP)*, which monitors the spread of drug-resistant gonorrhoea. The report highlights the need to strengthen surveillance, improve diagnostic capacity and ensure equitable access to new treatments for sexually transmitted infections (STIs). ....”

### IDS - Researchers call on UK to step up support for antimicrobial discovery and development

<https://www.ids.ac.uk/news/researchers-call-on-uk-to-step-up-support-for-antimicrobial-discovery-and-development/>

“The threat of drug-resistant diseases has increased but the urgently needed research for new antimicrobial drugs, including antibiotics, has stalled, researchers warn today. **With fewer pharmaceutical companies and scientists conducting antimicrobial research, they call for a new approach, driven by public sector partnerships, to speed up and expand antimicrobial discovery and development globally.**”

“...two policy briefs published by the [Leadership in Enhancing Antimicrobial Discovery \(LEAD\)](#) coalition, including IDS, set out ways to boost the critically needed antimicrobial discovery. They **set out the need to make antimicrobials a public good**, and drive new development through international partnerships, and **set out why and how the UK Government is well-placed to step up its role in mobilising the global effort required....**”

# Health Emergencies

## WHO Afro - Ethiopia confirms first outbreak of Marburg virus disease

<https://www.afro.who.int/countries/ethiopia/news/ethiopia-confirms-first-outbreak-marburg-virus-disease>

**“Ethiopia’s Ministry of Health has confirmed an outbreak of Marburg virus disease in the South Ethiopia Region, the first of its kind in the country, following laboratory testing of samples from a cluster of suspected cases of viral haemorrhagic fever. Genetic analysis by the Ethiopia Public Health Institute revealed that the virus is of the same strain as the one that has been reported in previous outbreaks in other countries in East Africa. A total of nine cases have been reported in the outbreak that has affected Jinka town in the South Ethiopia Region.....”**

- See also [CIDRAP News – Ethiopia faces its first Marburg outbreak, which has proved deadly](#)

PS: “Unlike Ebola, **there is no vaccine against Marburg**, which has an average case-fatality rate of 50%, with some outbreaks as **high as 88%.**”

## Conference of the Parties (COP11) to the WHO Framework Convention on Tobacco Control (FCTC) (17-22 Nov)

### FCTC – Government leaders open critical meeting to combat the global tobacco epidemic

<https://fctc.who.int/newsroom/news/item/17-11-2025-government-leaders-open-critical-meeting-to-combat-the-global-tobacco-epidemic>

(17 Nov) “More than 1400 delegates gathered here today to begin deliberations on accelerated action on tobacco control at the **opening of the Eleventh session of the Conference of the Parties (COP11) to the WHO Framework Convention on Tobacco Control**. The opening day was **capped by a high-level strategic dialogue reviewing two decades of progress under the Convention, also known as the WHO FCTC**, the first treaty negotiated under the auspices of the World Health Organization (WHO), and one of the most widely and rapidly embraced treaties in United Nations history.” “The delegates from government, international organizations and civil society – representing **162 Parties to the WHO FCTC** – began discussions **on a wide range of measures to stem tobacco use**, which kills more than 7 million people annually, **and to protect the environment from the harms caused by tobacco production, use and waste.....”**

“The first day also included the launch of the **2025 Global Progress Report on Implementation of the WHO Framework Convention on Tobacco Control**, a biennial report issued by the Convention Secretariat based on the analysis of the reports submitted by the Parties on their implementation of the Convention, including their achievements and the challenges they face in their implementation work....”

**“... COP11, organized around the theme of “20 years of change – uniting generations for a tobacco-free future”, will consider a wide of matters that will affect future implementation of the WHO FCTC by its Parties and the work of the Convention Secretariat. These include:**

- regulation of contents and disclosure of tobacco products (Articles 9 and 10 of the WHO FCTC);
- implementation of Article 19 of the WHO FCTC: Liability;
- forward-looking tobacco control measures (Article 2.1 of the WHO FCTC);
- protection of the environment and the health of persons (Article 18 of the WHO FCTC); and
- implementation of measures to prevent and reduce tobacco consumption, nicotine addiction and exposure to tobacco smoke, and the protection of such measures from commercial and other vested interests of the tobacco industry in light of the tobacco industry’s narrative on “harm reduction” (Articles 5.2(b) and 5.3 of the WHO FCTC).”

**PS: COP11 will be followed by the Fourth Meeting of the Parties to the Protocol to Eliminate Illicit Trade in Tobacco Products on 24–26 November.**

## **Geneva Health Files - The 2025 Global Tobacco Industry Interference Index; COP11 of The WHO Framework Convention on Tobacco Control (FCTC)**

Iman Ibrahim; [Geneva Health Files](#);

Curtain raiser by Geneva Health Files.

**“Activists have warned of rising, insidious interference by the Tobacco industry. ... My colleague Iman discusses the various kinds of influence of the Tobacco lobby on policy-making efforts - as has been revealed by a network of activists across the world. “Negotiations in Geneva do not begin from a neutral baseline; they reflect months or years of domestic access, cross-border lobbying, and institutional vulnerabilities”: read on....”**

**“As governments convene in Geneva this week for the Eleventh Conference of the Parties (COP11) to the WHO Framework Convention on Tobacco Control (FCTC), concerns about tobacco industry interference have reached a new peak.** In the lead-up to the negotiations, the WHO FCTC Secretariat issued an unusually explicit warning: industry actors are intensifying efforts to influence the treaty process - from attempts to sway delegations and insert sympathetic voices, to deploying misleading economic and scientific narratives designed to weaken control measures....”

**“.... The patterns documented in the [2025 Global Tobacco Industry] Index - crisis exploitation, normalization, legislative interference, and uneven political will - shape the political environment into which Parties now enter at COP11. Negotiations in Geneva do not begin from a neutral baseline; they reflect months or years of domestic access, cross-border lobbying, and institutional vulnerabilities....”**

**PS: “.... The 2025 Global Tobacco Industry Interference Index arrives at a defining moment for the FCTC. Its findings challenge the assumption that high-income countries are inherently more resilient to interference; instead, resilience reflects political will, institutional safeguards, and cultural norms....”**

- Link: [Euractiv - EU split at WHO meeting seen as test for upcoming tobacco fight at home](#)

“Europe’s divided stance will leave the EU silent in a key WHO debate, denting its global credibility.”

## More on Commercial Determinants of Health

### Devex – ‘Emergency’: Lancet studies sound alarm on rise of ultra-processed foods

<https://www.devex.com/news/emergency-lancet-studies-sound-alarm-on-rise-of-ultra-processed-foods-111380>

**“A trio of studies in the medical journal shows how greater consumption of UPFs poses a major public health threat, with experts calling for a response akin to efforts to challenge the tobacco industry decades ago.”**

**“People worldwide are eating more and more ultra-processed foods, leading to a rise in chronic diseases that pose an urgent public health threat and require an immediate response by global policymakers.** Those are the conclusions of a much-anticipated [trio of studies](#) published Tuesday in *The Lancet*....”

“...The three studies, conducted over two years, **present one of the most comprehensive-ever examinations of how the food system is increasingly controlled by transnational corporations that prioritize their own profits above human health.** The authors define ultra-processed foods, or UPFs, according to the widely used [NOVA classification](#) system: UPFs are snacks, drinks, and ready meals made from cheap ingredients and combined with additives, and mostly contain little to no whole foods.....”

“...With **annual sales of \$1.9 trillion, UPFs are the most profitable food sector.** It’s dominated by a handful of manufacturers, including [Nestlé](#), [PepsiCo](#), [Unilever](#), and [Coca-Cola](#)...”

PS: **“Although consumption of UPFs is rising worldwide, the world’s richest countries are behind when it comes to regulating them....”**

**“The policy leadership on UPFs is coming from Latin America and sub-Saharan Africa. It’s not coming from the global north,”** said Phillip Baker, a report author with the [University of Sydney](#) in Australia. “Mexico, Chile, Brazil, Colombia, South Africa. These are the countries which are taking the policy actions that we know we need to tackle this problem.”

### Lancet Series: Ultra-Processed Foods and Human Health

[https://www.thelancet.com/series-do/ultra-processed-food?dgcid=tl.com\\_carousel5\\_lancetupf25](https://www.thelancet.com/series-do/ultra-processed-food?dgcid=tl.com_carousel5_lancetupf25)

The abovementioned series. “This 3-paper Series reviews the evidence about the increase in ultra-processed foods in diets globally and highlights the association with many non-communicable diseases. **This rise in ultra-processed foods is driven by powerful global corporations who employ sophisticated political tactics to protect and maximise profits.** Education and relying on behaviour change by individuals is insufficient. Deteriorating diets are an urgent public health threat that

requires coordinated policies and advocacy to regulate and reduce ultra-processed foods and improve access to fresh and minimally processed foods. **The Series provides a different vision for the food system with emphasis on local food producers, preserving cultural foods transitions and economic benefits for communities.**"

### Guardian – Nestlé accused of 'risking health of babies for profit' over added sugar in cereals sold in African countries

<https://www.theguardian.com/global-development/2025/nov/17/nestle-accused-of-risking-health-of-babies-for-profit-over-added-sugar-in-cereals-sold-in-african-countries>

"Campaigners say the company is contributing to rising rates of childhood obesity, while the firm says it is helping to combat malnutrition." Re a new investigation by **Public Eye**.

"Nestlé is still adding sugar to most baby cereals sold across Africa, according to an investigation by campaigners who have accused the company of "putting the health of African babies at risk for profit". ...."

## NCDs

### WHO launches global guidelines on diabetes during pregnancy on World Diabetes Day

<https://www.who.int/news/item/14-11-2025-who-launches-global-guidelines-on-diabetes-during-pregnancy-on-world-diabetes-day>

(14 Nov) "**WHO released its first global guidelines for the management of diabetes during pregnancy**, a condition affecting about one in six pregnancies – or 21 million women annually. The new recommendations provide a critical roadmap to tackle this growing health challenge and prevent serious complications for both women and their children...."

- Related: [UN News – Diabetes now affects 1 in 6 pregnancies: What you need to know](#)

### Lancet Editorial – Chronic kidney disease: breaking the silence

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02363-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02363-3/fulltext)

"The early stages of **chronic kidney disease (CKD)** are usually asymptomatic, with kidney function progressively and irreversibly declining over months or years. **The silent nature of CKD is perhaps one reason it has, until now, received little attention from policy makers and health agencies compared with other non-communicable diseases.** The **WHO kidney health resolution**, adopted at the **78th World Health Assembly earlier this year**, urges member states to invest in prevention, early detection, and management of CKD; address key risk factors such as diabetes and hypertension; and ensure equitable access to affordable, high-quality renal care. **The resolution is long overdue, with neither awareness nor action yet matching the threat posed to health...."**



**“The WHO resolution signifies a global health community waking up to the threat of CKD. How the resolution is implemented—and whether member states will provide sufficient funding, infrastructure, and governance—will prove critical. ...”**

## **Nature Medicine (Correspondence) - The evolving landscape of cardiovascular health in Africa: insights from WHO AFRO**

B Galal et al; <https://www.nature.com/articles/s41591-025-04048-0>

« ... the World Health Organization Regional Office for Africa (WHO AFRO) has articulated a vision for reducing the burden of CVD through multisectoral action. ... Its strategic priorities include strengthening prevention programs, developing the health workforce, improving investment in care, enhancing research and surveillance capacity, and integrating digital innovation. These strategies aim to align with local contexts and ensure equitable cardiovascular care across Africa.....”

## **BMJ (Editorial) - Redressing inequities in women’s cardiovascular health**

T Truong et al ; <https://www.bmj.com/content/391/bmj.r2365>

« Policies for research and practice must acknowledge how sex affects outcomes....”

- And a link: Lancet Perspective - [Non-communicable diseases of poverty: what's in a name?](#) (by L Manderson et al)

“....Supporting calls to attend to poverty and associated social, commercial, and environmental determinants of health, **here we reflect on the way poverty influences the distribution and outcomes of NCDs globally and locally.....”**

## **World Prematurity Day (17 Nov)**

### **WHO promotes lifesaving intervention for small and preterm babies on first official World Prematurity Day**

<https://www.who.int/news/item/14-11-2025-who-promotes-lifesaving-intervention-for-small-and-preterm-babies-on-first-official-world-prematurity-day>

**“The World Health Organization (WHO) is marking its first official observance of World Prematurity Day with the launch of a new global clinical practice guide for Kangaroo Mother Care (KMC) – a simple, proven and life-saving intervention that significantly improves survival for preterm and low birth weight babies.”**

**“Each year, an estimated 15 million babies are born too soon (before 37 weeks of pregnancy), and complications from preterm birth are the leading cause of death among children under five years of age. In the poorest countries, most extremely preterm babies die within days – whereas in high-income countries, almost all survive. KMC – which combines prolonged skin to skin contact with breast-milk feeding – has been shown to dramatically improve outcomes for small and preterm**

**newborns, and to be feasible and cost-effective in all settings.** Among other positive impacts, it is associated with a more than 30% reduction in newborn deaths, a close to 70% reduction in hypothermia and a 15% reduction in severe infections – as well as improved weight gain and better longer-term health and cognitive development....”

## 1<sup>st</sup> World Cervical Cancer Elimination Day (17 Nov)

<https://www.who.int/news/item/17-11-2025-world-marks-cervical-cancer-elimination-day-as-countries-accelerate-action>

(17 Nov) **“World marks cervical cancer elimination day** as countries accelerate action.”

**“Today marks the first World Cervical Cancer Elimination Day – mandated by the World Health Assembly – a historic milestone in global efforts to end a preventable cancer.** This day of action builds on powerful momentum, with countries and partners uniting to launch ambitious vaccination campaigns, expand screening and treatment services, and accelerate progress **toward eliminating cervical cancer as a public health problem.**”

**“The annual commemoration highlights a critical opportunity: cervical cancer – the fourth most common cancer in women – claims over 350 000 lives each year,** yet it is a disease that we have the tools to eliminate. **The Day supports the core pillars of the WHO’s global elimination strategy: vaccinating 90% of girls against human papillomavirus (HPV), screening 70% of women, and treating 90% of those with pre-cancer and invasive cancer.** It serves as a critical platform to strengthen advocacy, accelerate service delivery, and mobilize resources to ensure every woman and girl has access to life-saving care...”

## Devex -Gavi and partners reached HPV vaccine goal, immunizing 86 million girls

<https://www.devex.com/news/gavi-and-partners-reached-hpv-vaccine-goal-immunizing-86-million-girls-111274>

**“The vaccine alliance reached its target of immunizing an estimated 86 million girls with the vaccine that prevents human papillomavirus,** a sexually transmitted infection which can lead to cervical cancer. The organization **estimates this will prevent an estimated 1.4 million deaths....”**

**“The vaccine is recommended for girls aged 9 to 14 years old — making campaigns for this vaccine unique,** given that many vaccines target younger children, and so routine vaccination systems are built around that age group. **At the end of 2022, Gavi’s board approved this goal to reach 86 million girls by the end of 2025.....”**

**“By the end of this year, the vaccine will be available in countries where 89% of global cervical cancer cases occur.** This cancer has the highest burden in lower-income countries, which often lack screening and equitable treatment access. **Gavi made the announcement on the world’s first cervical cancer elimination day....”**

**“.... In 2023, 14 million girls were vaccinated for HPV — more than the total vaccinated in the previous decade. The momentum continued last year, with that number more than doubling to 32.6**

million. A key element was that in 2022, the World Health Organization changed its recommendations from two doses to one — meaning health systems don't have to track down the girls that got one dose to ensure they receive a second. **Additionally, there was previously a global shortage of the vaccine, which prevented countries from scaling up vaccinations. But supply constraints have now been alleviated.** ....There are now four manufacturers that Gavi-supported countries can choose from — the alliance is currently procuring from three of them....”

“Through UNICEF tenders and contracts, Gavi can access the vaccines at about \$2.90 to \$5.18 per dose. This is somewhat high relative to other vaccines, but the Gavi price is the best in the world — in other markets, the HPV vaccines range from \$13 to over \$100, Kobayashi said.....”

## COP 30 in Belém, Brazil – Week 2 (focus on health)

In this COP30 related section, we focus on the **climate-health interface**.

The next COP30 section dwells more on **the general picture** (in week 2). *(For more related reads, see also the extra Planetary Health section.)*

### HPW - Health Systems Are Unprepared for The Climate Crisis

<https://healthpolicy-watch.news/health-systems-unprepared-climate/>

(14 Nov) From end of last week.

“**Nations worldwide must finance and implement climate adaptation measures for health systems or risk losing millions of lives** as extreme weather, rising temperatures, and intensifying heat threaten healthcare access for nearly half the global population, **according to a report published Friday by the World Health Organization and Brazil.**

“The **special report**, released at the COP30 summit in Belém, **follows Thursday’s launch** of the **Belém Health Action Plan**, which **won backing from roughly two dozen countries but secured no financial commitments from governments.** The only funding to support the plan came from philanthropies: a \$300 million one-time grant. The **report estimates health system adaptation needs at \$22 billion per year by 2035....”**

“... The **report does not present new evidence, functioning instead as a synthesis of the best available science and data on the risks posed to unprepared health systems by climate change**, drawing on academic literature, government and UN reports, and real-world case studies....”

PS: “**Mitigation left out of the main Belém text** : While the report and Belém Health Action Plan focus on preparing health systems for climate impacts, **the synthesis document draws a clear conclusion about what would most protect those systems: cutting emissions.** “**The evidence is clear: urgent and sustained mitigation across all sectors is the single most important health adaptation intervention,**” **states the executive summary.** “There are profound physical, financial, and technological limits to adaptation, and health systems cannot remain resilient in a world of unchecked warming.” ... By reducing emissions, health systems would face less extreme weather

events, fewer heat deaths, and smaller disease burdens, making adaptation needs less severe in the first place. **That finding sits awkwardly with the Belém Health Action Plan itself, which contains no references to phasing out fossil fuels, the main driver of climate change.**"

PS: ".... **The fossil fuel omission came at the explicit instruction of the Brazilian COP30 presidency, according to people familiar with the negotiations,** likely to open the door for more nations to sign on who will not commit to language on fossil fuel phase-out. **What the report identifies as "the most effective measure" to protect health systems is excluded from the political Belém framework, which requires endorsement from governments, instead relegated to a supporting document with no political weight.**"

PS: ".... **Direct health sector adaptation interventions will require more than \$22 billion annually by 2035, according to the report, approximately 7% of total adaptation financing needs in climate-vulnerable countries.** Current health-specific climate finance reaching those countries totals around \$500 to \$700 million annually, representing 2% of adaptation funding and 0.5% of multilateral climate finance....."

- The special report: [COP30 Special Report on Health and Climate Change](#)

"This COP30 Special Report on Health and Climate Change, presented by the Ministry of Health of Brazil and the World Health Organization, **serves as the evidence base that underpins the Belém Health Action Plan.** Prepared by the **Centre for Sustainable Medicine at the National University of Singapore and global experts and practitioners from every continent,** it offers a roadmap for building health system resilience and adaptation, moving from evidence to implementation.....

With **six central conclusions** for health policy-makers and practitioners.

## **The Conversation - COP30 report reveals how climate change is spreading infectious diseases to new regions**

Tulio de Oliveira et al ; <https://theconversation.com/cop30-report-reveals-how-climate-change-is-spreading-infectious-diseases-to-new-regions-269439>

"Rising temperatures, changing rainfall patterns and extreme weather events create ideal conditions for pathogens and their vectors – such as mosquitoes, midges and ticks – to thrive." *" This is confirmed by a **recent report for the global climate change conference, COP30.** The report was produced by a team of global south scientists from the **Climate Amplified Diseases and Epidemics consortium**, which studies and figures out ways of responding to infectious diseases that climate change is making worse. **It sets out how deadly diseases like West Nile virus, dengue and chikungunya are now spreading to new regions in Africa and Europe because of the changing climate....."***

## **Global Climate & Health Alliance - COP30: Global Health Leaders Call for a Life-Saving Transition Away from Fossil Fuels**

<https://mailchi.mp/6642b2aec97a/cop30-global-health-leaders-call-for-a-life-saving-transition-away-from-fossil-fuels?e=3289726e8a>

(18 Nov) “At COP30, **physicians, nurses, and health and medical students representing millions of health workers worldwide issued an urgent call for countries to support a global commitment to Transitioning Away from Fossil Fuels (TAFF)**. Speaking at the joint “Health Leaders Call for Life-Saving Transition Away from Fossil Fuels” press conference, experts stressed that **TAFF is not simply a good climate and energy policy option: it is a public health imperative and the fastest public health intervention available to save lives.**”

- Related: [How the global health community has been a leader in calling for an accelerated, just and equitable phase-out of fossil fuels.](#)

## Lancet Comment – Uniting academies of medicine on climate and health

Victor J Dzau et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02323-2/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02323-2/fulltext)

**“Brazil launched the Belém Health Action Plan (BHAP) at the UN Climate Change Conference COP30 in November, 2025, a landmark framework to integrate health within climate adaptation and mitigation efforts and to mobilise coordinated action across nations and sectors. The BHAP represents the first comprehensive global framework to guide adaptation of the health sector to climate change...”**

**“...Recognising the alignment between the BHAP's three core pillars and the missions of national academies, the NAM and the Academia Nacional de Medicina, Brazil, launched the Global Coalition of Academies of Medicine on Climate and Health (GCAMCH) to mobilise shared leadership and accelerate implementation of the BHAP. The coalition has brought together academies globally to make a unified commitment to advance science-driven, health-centred climate action. At COP30 in November, 2025, GCAMCH members issued a joint statement ([panel](#)) endorsing the BHAP. The statement represents the academies' unified commitment to advancing the BHAP and harnessing support for BHAP's three priority areas and initiatives to strengthen health system resilience, guide research agendas, and advance equitable climate adaptation.”**

**“... The GCAMCH represents a pivotal step towards uniting the scientific and medical communities in advancing the BHAP. Its work underscores that confronting climate change is inseparable from safeguarding human health, equity, and sustainable development.”**

## COP 30: More general updates & analyses (week 2)

With some **mid-week updates/analyses, coverage from this week** (without going into detail), and some more **reports**. (You find more COP news in the extra Planetary Health section. )

While waiting for the **“mutirão” decision**, a central plan of the **hoped for outcome** of Cop30.

On that note, see an **update** from this morning: [Cop30: dozens of countries threaten to block resolution unless it contains roadmap to fossil fuel phase-out.](#)

## Devex - Special edition: Ministers arrive, money stalls, and minerals teeter at COP30

<https://www.devex.com/news/special-edition-ministers-arrive-money-stalls-and-minerals-teeter-at-cop30-111365>

Update from Devex as week two was starting. “As ministers land in Belém, **finance fights, fragile mineral language, and rising Indigenous pressure** set the stage for a tense second week at COP30.”

“While **Week 1** was more technical, **Week 2** is when the ministers arrive and the political side of COP begins.....”

PS: Via **Climate Change News**: “ On Sunday night, the COP presidency dropped its summary note of consultations on four key topics that are without a formal home in the negotiations: the emissions gap for 1.5C, climate finance, trade measures and the transparency of country reports. It suggested a set of options, mainly for the first three, which could be brought together in a “mutirão decision”. ....”

## Climate Change news – COP30 Bulletin Day 6: First week ends with a colourful march and much work left to do

<https://www.climatechangenews.com/2025/11/15/cop30-bulletin-day-6-adaptation-talks-held-hostage-by-finance/>

“UN climate chief Simon Stiell tells governments “to give a little to get a lot”, as many thorny issues remain for ministers to resolve next week.”

- On the march mid-week, see also the [Guardian - Thousands hit streets of Belém to call for action during crucial Cop30 summit](#)

“Funeral for fossil fuels held as part of ‘Great People’s March’ calling on governments to step up climate efforts.”

“.... The joyous and defiant demonstration was the first major protest outside the annual climate talks since Cop26 four years ago in Glasgow, as the last three gatherings were held in locations with little tolerance for demonstrations – Egypt, Dubai and Azerbaijan. The “Great People’s March” comes at the halfway point of contentious negotiations and follows two protests earlier in the week that were led by indigenous activists from the Tapajós region....”

PS: “The talks still have one week to run, and it is unclear what the outcome will be. **The Brazilian hosts have said they do not plan to issue a cover decision** – the agreement that is sometimes gavelled out at the end of the talk. **Instead, they will focus on implementation. As yet no one is quite sure what that will look like.** Meanwhile **delegates are also stuck on the “big four” issues of climate finance; trade; transparency; and how to address the inadequacy of nations’ recently submitted national climate plans** – into a separate set of “presidency consultations”, that emerged as countries tried to agree an agenda last Sunday, before the start of the two weeks of talks.....”

## Guardian - Cop30 was meant to be a turning point, so why do some say the climate summit is broken?

<https://www.theguardian.com/environment/2025/nov/15/cop30-was-meant-to-be-a-turning-point-so-why-do-some-say-climate-summit-broken>

**Analysis.** “Swamped by lobbyists and hobbled by a lack of urgency, there are fears Cop could become a sprawling spectacle that betrays those who depend on it most.”

Quote: “**The Cop process has delivered what it was designed for: diplomacy and consensus,**” said Albert Norström, an associate professor at Stockholm Resilience Centre. “It gave us the Paris agreement, methane pledges, and finance mechanisms. **But the world has moved into the implementation decade, and here the Cop is lagging badly.** “Emissions are still rising, carbon sinks are weakening, and 1.5C [above preindustrial levels] will likely be breached within years. The architecture was built for negotiation, not ambitious delivery. **So, yes, it worked for building the framework – but it’s failing to turn promises into performance.....**”

## Climate Change News - Africa wants wiggle room on energy transition as funds fall short

[https://www.climatechangenews.com/2025/11/14/\\_trashed-2/?utm\\_source=brevo&utm\\_campaign=cop30\\_day\\_6&utm\\_medium=email&utm\\_id=153](https://www.climatechangenews.com/2025/11/14/_trashed-2/?utm_source=brevo&utm_campaign=cop30_day_6&utm_medium=email&utm_id=153)

“African nations say **a just transition away from oil, gas and coal should give them scope to use their fossil fuel resources to fund economic development.**” “African countries at COP30 **say a lack of climate finance to speed the transition to renewable energy** means they should be given more leeway to use their fossil fuel resources to benefit their people....”

## HPW – World Falls Far Short of Methane Cut Targets Halfway to 2030 Deadline

<https://healthpolicy-watch.news/world-falls-far-short-of-methane-cut-targets-halfway-to-2030-deadline/>

“**First UN assessment since the 2021 Glasgow pledge shows methane cuts falling far short of targets needed to meet climate goals.** Accelerated action **could yield \$330 billion in annual benefits** by 2030 through improved health and reduced crop losses.”

“**Four years after more than 100 countries pledged to slash methane emissions 30% by the end of the decade, a UN assessment has found nations are on track to deliver barely a quarter of that target.** The [Global Methane Status Report](#), released Monday at COP30 in the Brazilian Amazon city of Belém, found that **current national commitments would cut global methane emissions by just 8% below 2020 levels by 2030.** Despite the lack of progress, **the 30% target remains technically achievable with increased investment and policy-driven reform,** the report found, adding it could yield some \$330 billion in benefits to health and cost production, nearly double the cost of investment in methane emissions mitigation.....”

PS: “While **methane emissions are not a part of formal negotiations in the UN Framework Convention on Climate Change (UNFCC)**, it is the world’s [second largest contributor to](#) global



warming, after CO<sub>2</sub>, [with a global warming potential 86 times greater](#). ... A precursor to ground-level ozone formation, methane is a contributor to air pollution-related deaths as well as reduced crop yields. **With an atmospheric lifespan of only about 12 years, reducing methane emissions can yield enormous co-benefits for health as well as reducing the pace of climate change.** “

## Climate Change News – Poorest countries appeal for more adaptation finance at COP 30

<https://www.climatechangenews.com/2025/11/18/poorest-countries-issue-appeal-for-adaptation-finance-at-cop30/>

(gated) “The **least developed countries want a new goal to triple adaptation finance by 2030**, saying an expected agreement on metrics for progress is meaningless without money.”

Related (also via Climate Change News – 20 Nov): “ ... **UN Secretary-General António Guterres urged countries to have courage and make compromises to agree on a balanced political package.** That means being [“concrete on adaptation funding, credible on emissions cuts, and bankable on finance”](#), he said. **Backing a key demand from the world’s poorest nations for the first time, Guterres called for tripling adaptation finance to \$120bn a year by 2030.**”

## Guardian - Keeping promises on renewables, energy efficiency and methane ‘would avoid nearly 1C of global heating’

[Guardian](#);

“**Analysis published at Cop30 summit** shows adhering to pledges offer world hope of avoiding climate breakdown.”

“**Sticking to three key climate promises – on renewables, energy efficiency and methane – would avoid nearly 1C of global heating and give the world hope of avoiding climate breakdown**, analysis published at the [Cop30](#) climate summit suggests.... Governments have already agreed to triple the amount of renewable energy generated by 2030, double global energy efficiency by then, and make substantial cuts to methane emissions.... If they follow through on these promises – still a big if, even though countries are meeting for climate crisis talks in Brazil this week – it would be a “gamechanger”, shaving 0.9C from projected temperature rises this century, according to the [Climate Action Tracker coalition](#)....”

- PS: but check out also [Scientists statement on state of COP30 Negotiations, November 19, 2025](#) (with J Rockström & others).

“**....The global curve of GHG emissions needs to bend next year, 2026, not sometime in the future. We need to start, now, to reduce CO<sub>2</sub> emissions from fossil-fuels, by at least 5% per year.** This must happen in order to have a chance to avoid unmanageable and extremely costly climate impacts affecting all people in the world...”

## Guardian – More than 80 countries at Cop30 join call for roadmap to fossil fuel phase-out

<https://www.theguardian.com/environment/2025/nov/18/more-than-80-countries-join-call-at-cop30-for-roadmap-to-phasing-out-fossil-fuels>

(18 Nov) “Countries from Africa, Asia, Latin America, Pacific and Europe plead for transition to be central outcome of talks.”

## Ken Opalo - COP30: policymaking needs a developmentalist makeover

<https://african.business/2025/11/energy-resources/cop-30-policymaking-needs-a-developmental-makeup>

“Poverty is not a viable climate strategy - **China shows that climate policies can be developmentalist**, argues Ken Opalo.”

## Eurodad – Make polluters pay: Proposal for a surtax on fossil fuel industries’ profits

[https://www.eurodad.org/fossil\\_fuel\\_surtax?utm\\_campaign=newsletter\\_20\\_11\\_2025&utm\\_medium=email&utm\\_source=eurodad](https://www.eurodad.org/fossil_fuel_surtax?utm_campaign=newsletter_20_11_2025&utm_medium=email&utm_source=eurodad)

“Against the backdrop of rising inequalities and the accelerating climate and environmental crisis, **this paper, by Eurodad and the Global Alliance for Tax Justice (GATJ) proposes additional taxes – or surtaxes – on the profits of the fossil fuel industry.** “

“....As this paper demonstrates, if a **20 per cent surtax** had been applied on the global profits of the world’s 100 biggest oil and gas companies since the adoption of the Paris Agreement, an accumulated US\$1.08 trillion of additional tax revenues could have been collected....”

And some **final COP30 snippets** that for some reason struck our attention:

- **S Whitehouse** ( US Democratic Senator) [\(via Devex\)](#):

“The senator framed the [European Union](#)’s carbon border adjustment mechanism as the “last lifeboat” for global climate safety — and warned that protecting it from geopolitical pushback, particularly from the Trump administration, must be a top priority. Expanding CBAM-style carbon pricing systems to Canada, Australia, Mexico, and others, he said, is the only credible path to aligning global markets with climate goals. **Without it, he argued, low- and middle-income countries face outcomes far worse than any border tax: “catastrophe” driven by unmitigated warming, collapsing real estate markets, and spiraling insurance failures** already visible in places such as Florida and Texas.” ....”

- Devex - [Germany commits €1 billion to flagship COP30 forest fund](#)

**“After weeks of uncertainty, Germany is in: Berlin will invest €1B in Brazil’s new Tropical Forest Forever Facility. ... Germany’s pledge will add to the previously committed total of \$5.5 billion by the other nations....”**

- PHM - [Declaration of the People's Summit Towards COP30](#) (five-pager with analysis & recommendations). The People’s Summit took place from 12-16 Nov.

## More on Planetary Health

**Lancet (Health Policy) - *Lancet* Countdown on health and climate change in Africa: an international collaboration for locally led research and action**

Z Ali et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02174-9/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02174-9/fulltext)

“Climate change inflicts substantial economic damage on developing African nations, threatening progress towards the UN Sustainable Development Goals. **There are synergies between actions needed to tackle climate change and other ongoing development priorities for Africa, including infectious disease control, facilitating clean energy access, reducing air pollution, tackling malnutrition and food insecurity, and providing universal health coverage. Action to protect human health against climate change needs to be integrated into all systems that are responsible for delivering essential services and implementing policies across all sectors that underpin the attainment of key development priorities for Africa.** These systems include the Sustainable Development Goals and the African Union's 2063 Agenda for building The Africa We Want, and the ongoing negotiations and work programmes in the UN Framework Convention on Climate Change. Adequate stocktaking of and access to robust data and scientific evidence is needed to support this effort and guide priorities for policies that protect and promote health and for monitoring progress over time. **In response to this need, the Lancet Countdown is launching a new initiative to bring together a transdisciplinary research collaboration to help build regional capacity, strengthen existing networks, generate evidence, and mobilise data across numerous domains at the climate change and health nexus in Africa.”**

**BMJ (Analysis ) - Responding to rising heat in workplaces and homes of low income workers**

<https://www.bmj.com/content/391/bmj-2025-086218>

**“Robert Meade and colleagues highlight the need for research and solutions aimed at reducing heat at both work and home to protect the most vulnerable workers.”**

**Graduate Institute (Global Health Centre working paper)- The global governance of climate change and health: what does the literature say about its evolution, weaknesses and priorities for change?**

Gomez-Mejia, S Moon et al; <https://repository.graduateinstitute.ch/record/321418?v=pdf>

“This literature review examines the **evolving global governance of climate change and health (CC&H)**, focusing primarily on how health is being integrated into climate policy frameworks, the actors and institutions shaping this process, as well as the tools available to support this integration....”

“We then synthesize key insights from the literature to **highlight four recurring themes** that inform current challenges and opportunities **for strengthening global governance in this space.....”**

## SRHR

### Nature Medicine (Correspondence) - Harnessing evidence-based solutions for climate resilience and women's, children's and adolescents' health

R Khosla et al; <https://www.nature.com/articles/d41591-025-00066-0>

“**Climate change is a major global health threat. Women and children are disproportionately affected by climate change**, facing heightened risks of preterm birth, low birth weight, stillbirth, respiratory illness and malnutrition. **Taking effective climate action provides an opportunity to drive transformative solutions that deliver co-benefits for the climate ecosystem and for women's, children's and adolescents' health (WCAH)**. Yet **little attention** is given to the specific needs and vulnerabilities of women, children and adolescents **in climate mitigation and adaptation strategies....”**

### Bloomberg - The World Is Failing Women and Children

<https://www.bloomberg.com/opinion/articles/2025-11-19/g20-meeting-ramaphosa-clark-say-world-is-failing-women-and-children?embedded-checkout=true>

More **high-level advocacy ahead of the G20 Summit**, by Cyril Ramaphosa and Helen Clark.

“...The G20, which represents 80% of the global economy, holds the power to reverse this dangerous drift. **We urge G20 leaders to make women's, children's and adolescents' health a central pillar of global recovery and security. This requires three urgent steps:**

**Recommit to global targets.** The world is on track to miss the UN's sustainable development goals by 2030. G20 nations must reaffirm their commitment to reducing maternal and child mortality, ensuring universal access to sexual and reproductive health, and protecting adolescent health and rights.

**Protect and expand financing.** Despite economic pressures, investment in primary health care and community health workers remains one of the highest-return interventions available. Diversified financing mechanisms can help sustain progress.

**Integrate women's, children's and adolescents' health into peace and security agendas.**

Humanitarian aid, peacebuilding efforts and global security strategies must explicitly prioritize women and children, not as passive victims, but as agents of recovery and resilience.....”

## Nature (Scientific Data) (Comment) - Global health data precarity: Safeguarding the Demographic and Health Survey program as a global public good

B Wahl et al ; <https://www.nature.com/articles/s41597-025-06128-9>

“...This commentary examines the precarious nature of the program following budget cuts by the current US government...”

## Conflict/War/Genocide & Health

### UN News - Ending world hunger costs less than 1% of military spending

<https://news.un.org/en/story/2025/11/1166397>

**“Ending hunger by 2030 would cost just \$93 billion a year — less than one per cent of the \$21.9 trillion spent on military budgets over the past decade, according to the UN World Food Programme (WFP). “**

**“By 2026 a staggering 318 million people would face crisis levels of hunger or worse, more than double the figure recorded in 2019, the food agency reported in its 2026 Global Outlook. .... In 2026, the agency plans to assist 110 million vulnerable people at an estimated cost of \$13 billion, providing emergency food, nutrition support, community resilience programmes, and technical assistance to strengthen national systems....”**

### Lancet Correspondence – El Fasher crisis: over 500 days under siege amid global inaction

Majdi M Sabahelzain et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02244-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02244-5/fulltext)

**« El Fasher, the capital of North Darfur and the historic centre of the Darfur region, has endured more than 500 days of siege by the Rapid Support Forces (RSF) since April, 2024. Despite the scale of the catastrophic humanitarian crisis in the city, it remains largely absent from international headlines. Reports from El Fasher depict a dire situation, with civilians trapped and unable to leave the city as the threat of mass atrocities increases, mirroring recent violence against ethnic groups in El Geneina city and Zamzam camp in the same region. We aim to highlight the humanitarian catastrophe in the besieged city of El Fasher amid ongoing conflict in Sudan and the collapse of its health system.....”**

## Access to medicines, vaccines & other health technologies

NPR – A 'breakthrough' drug to prevent HIV, an 'unprecedented' rollout

<https://www.npr.org/sections/goats-and-soda/2025/11/18/g-s1-98178/hiv-prevention-drug-lenacapavir>

**“Five months after a "breakthrough" HIV prevention drug got approval in the United States and became available in many wealthy countries, it's getting rolled out in two African countries hit especially hard by the disease. On Wednesday, the U.S. State Department announced that Eswatini and Zambia have each received 500 doses of lenacapavir...”**

**“... The delivered doses mark the first small step toward providing at least 2 million doses to the highest burden countries, largely in Africa, by 2028. That's the goal of the Global Fund, a major donor to combating HIV, tuberculosis and malaria, along with Gilead Sciences and the State Department.”**

PS: **“The State Department [announced its investment](#) in lenacapavir in September, pledging to provide up to 2 million doses by 2028.”**

**“... Where will the drug go next? The company has filed for approval in Botswana, Kenya, Malawi, Namibia, Rwanda, Tanzania, Uganda and Zimbabwe, with more in the works, said O'Day. "We continue to prioritize 18 high burden countries representing 70% of the HIV epidemic." ...”**

- See also Washington Post - [Trump HIV prevention plan shuts out South Africa — the nation most affected](#)

**“Administration officials say the country has “significant means” to fund a promising new drug on its own and doesn’t need U.S. help. Critics call the move self-defeating.”**

PS: **“South Africa will receive some doses to supply injections beginning in April, via donations from the Global Fund to Fight AIDS, Tuberculosis and Malaria. At an event last month, South Africa’s health minister said that initially there would be enough for fewer than half a million people over the first two years. With almost 8 million HIV-positive people in South Africa, “demand will likely outstrip supply at first,” said the minister, Aaron Motsoaledi.”**

**“South Africa is not the only country that will have its doses funded mostly by the Global Fund, without U.S. backing. Nigeria, another populous African country at odds with the Trump administration, is also not receiving doses purchased by the U.S. But experts say South Africa is the most glaring exception, not only because it has the largest HIV-positive population but also because it has a large health care system that could absorb many more lenacapavir doses....”**

- And via [Stat](#): **“Meanwhile, Gilead, which manufactures the drug and is providing it at cost, maintained it continues to seek regulatory approval in more than a dozen other sub-**

**Saharan countries where HIV infection rates run high.** The region remains the epicenter of the AIDS pandemic....”

### **Health Justice Initiative - Africa Demands Lenacapavir for All: The South African Government Should Act Decisively Against US bullying and for Equitable Access**

<https://healthjusticeinitiative.org.za/2025/11/20/africa-demands-lenacapavir-for-all-the-south-african-government-should-act-decisively-against-us-bullying-and-for-equitable-access/>

**Must-read** (five-pager). **“Africa Deserves More Than Tokenism. Civil Society Groups Respond to US Government’s announcement of a paltry 500 lenacapavir doses for certain African countries while excluding South Africa....”**

**“Ahead of World AIDS Day**, the United States government, Gilead and the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) announced the arrival of a donation of just 500 doses of lenacapavir (LEN-LA) each for Zambia and Eswatini. **Activists sharply criticised this move as a public relations stunt, despite platitudes to the contrary.** LEN-LA is a potentially revolutionary new twice yearly HIV pre-exposure prophylaxis (PrEP) prevention injection, which confers virtually 100% protection against HIV infection....”

Quote: **“...Gilead can claim LEN-LA is ‘introduced’ in Africa, creating demand and laying the path for commercial bullying instead of introducing the product at actual cost, and at scale.** This is a profit seeking, corporate strategy dressed up as solidarity,” said **Fatima Hassan, Director of the Health Justice Initiative (HJI).**”

### **Stat - South Africa is urged by advocates to issue a compulsory license for Gilead’s HIV prevention drug**

<https://www.statnews.com/pharmalot/2025/11/20/south-africa-compulsory-license-gilead-hiv-drug/>

“The move comes after the Trump administration refused to fund delivery of any doses to the country....”

### **Stat Plus - Many poor countries where experimental drugs are tested fail to benefit after approval, analysis finds**

(gated) <https://www.statnews.com/pharmalot/2025/11/17/pharma-biotech-clinical-trials-poor-helsinki-ethics/>

**“Review suggests the industry is failing to adhere to ethical requirements following clinical trials.”**

**“Numerous medicines are not accessible in many of the countries where they were tested before approval by the Food and Drug Administration, raising concerns about whether pharmaceutical companies are adhering to ethical standards, a new study finds.....”** “The researchers reviewed 172 medicines that were approved by the agency and tested between 2015 and 2018 in 89 countries. Of



the 144 drugs that were tested outside the U.S., only 34 — or 24% — were physically accessible in those countries, according to **the analysis published in JAMA Internal Medicine..”**

- The study in JAMA: [Physical Accessibility of Medicines in Countries Hosting Trials for FDA Approvals](#) .

### **New DNDi report: Open science in a closed world – lessons and opportunities for securing openness and equitable access in R&D collaborations**

[https://dndi.org/news/2025/new-dndi-report-open-science-in-closed-world/?utm\\_source=socialmedia&utm\\_medium=referral&utm\\_campaign=DAMportal](https://dndi.org/news/2025/new-dndi-report-open-science-in-closed-world/?utm_source=socialmedia&utm_medium=referral&utm_campaign=DAMportal)

“Building on DNDi’s more than 20 years of experience developing treatments for neglected populations, **the report explores how open and collaborative science, including a pro-access approach to managing intellectual property**, can accelerate innovation, promote knowledge sharing, and ensure that life-saving health technologies are affordable and accessible to all who need them. ...”

**“The report provides one of the first comprehensive looks at how openness can be operationalized in real-world R&D collaborations.** In particular, it examines: The tensions and trade-offs between open science and more traditional, proprietary biomedical research models; DNDi’s continuum of open science approaches, ranging from bilateral partnerships with industry to more open-source collaborations such as the Open Synthesis Network and the COVID-19 Moonshot; Case studies exploring how open science approaches were navigated in specific DNDi projects and partnerships; A practical framework for embedding openness and equitable access across the innovation lifecycle based on DNDi’s experience; and Actionable recommendations for governments, R&D funders, academia and other research organizations, and industry to operationalize openness and equity in their innovation policies, practices, and partnerships. “

### **Nature (Book Review) - How COVAX raced to protect the world from COVID-19**

[https://www.nature.com/articles/d41586-025-03717-x?utm\\_source=bluesky&utm\\_medium=social&utm\\_campaign=nature&linkId=17760346](https://www.nature.com/articles/d41586-025-03717-x?utm_source=bluesky&utm_medium=social&utm_campaign=nature&linkId=17760346)

“A physician–scientist involved in the equitable-access initiative examines its achievements and discusses what can be done better when the world faces the next pandemic.” **Seth Berkley** (former GAVI CEO), that is.

Rather ‘friendly’ book review of **“Fair Doses: An Insider’s Story of the Pandemic and the Global Fight for Vaccine Equity”** (by Seth Berkley) (2025).

### **Guardian - New drug could be a breakthrough in treatment for killer TB, trial suggests**

<https://www.theguardian.com/global-development/2025/nov/19/new-drug-could-be-breakthrough-killer-tb-tuberculosis-sorfequiline>

**“Sorfequiline, a new antibiotic, showed stronger action against the deadly bacteria than existing treatments, with a comparable safety profile, researchers from the TB Alliance told the Union Conference on Lung Health in Copenhagen on Wednesday. ... The trial involved 309 people across 22 sites in South Africa, the Philippines, Georgia, Tanzania and Uganda, with different dose regimens. All participants had “drug-sensitive” tuberculosis, meaning a standard cocktail of drugs can safely treat them but researchers believe TB infections that are resistant to standard treatment could also be helped. The trial suggested a sorfequiline-based regimen could be used for anyone testing positive, said Dr Maria Beumont, vice-president of TB Alliance.....”**

## **CGD - Millions of Children Need Life-Changing Lead Poisoning Medicine. Why Isn't It Affordable?**

Theo Mitchell et al; <https://www.cgdev.org/blog/millions-children-need-life-changing-lead-poisoning-medicine-why-isnt-it-affordable>

**“Children with extreme exposure to lead are at risk of lifelong physical and mental disability. The most practical treatment for this kind of exposure is oral chelation therapy—and we estimate there are millions of children who need this treatment...”**

Authors explore why off-patent chelation drugs still cost \$1,000.

And conclude: **“Despite potentially cheaper prices for the Indian generic, most international buyers will still opt for the American-made, FDA-approved succimer brand because it is the only option approved by a national drug regulatory authority recognised as a WHO-Listed Authority (WLA). This is for good reason: approval from a WLA basically guarantees that the drugs are appropriately labeled and high-quality, which is a real concern here. To this point, the Indian company that makes the generic has recently been involved in a [fake drugs scandal](#). To break the monopoly, we need a cheap generic with an international stamp of approval—either from a WLA or through WHO prequalification. WHO could expand its prequalification program to include chelation drugs, enabling international buyers to purchase prequalified generics. Donors, meanwhile, could signal to manufacturing companies that they would be willing to finance the ~\$600,000 upfront cost of getting a new generic prequalified—perhaps in exchange for an even cheaper purchase price in future years.....”**

## **Devex (Opinion)– Global south's TB diagnostics innovations are key to fight the epidemic**

U B Sing, M Pai et al ; <https://www.devex.com/news/global-south-s-tb-diagnostics-innovations-are-key-to-fight-the-epidemic-111335>

**“As G7 aid cuts threaten TB programs, affordable diagnostics developed in the global south offer a path forward for high-burden countries to help close the testing gap and save lives.”**

## Some more reports of the week

### HPW – 840 Million Women Have Faced Violence During their Lifetime, WHO Estimates

<https://healthpolicy-watch.news/840-million-women-have-faced-violence-during-their-lifetime-who-estimates/>

Coverage of a new report, released ahead of the International day for the elimination of violence against women and girls observed on 25 November.

**“Nearly 840 million women, or roughly one in every three globally, has experienced intimate partner or sexual violence during their lifetime, according to a landmark report released on Wednesday by the World Health Organization (WHO) and United Nations (UN) partners.”**

**“... Progress on reducing intimate partner violence has been painfully slow with only 0.2% annual decline over the past two decades.**

PS: “Even as evidence is mounting on the effectiveness of strategies to prevent violence against women, the **funding for such initiatives is declining**. Even before this year’s recent crisis, as of 2022, only 0.2% of the global development aid was allocated to programmes focused on the prevention of violence against women. The crisis has become all the more acute with the sharp cutbacks in global health funding by rich donors, including but not limited to the United States’ dismantling of USAID. Moreover, some of the hardest hit services have been programmes on sexual and reproductive health, which are an important entry point for survivors of violence to access the care that they need....”

PS: “... The report was accompanied by the **launch of the second edition of the *RESPECT Women: preventing violence against women framework***, that is a framework meant to guide policymakers on policies to deal with violence against women and girls....”

- Link: WHO - [Lifetime toll: 840 million women faced partner or sexual violence](#)

PS: “**For the first time, the report includes national and regional estimates of sexual violence by someone other than a partner**. It finds **263 million women** have experienced non-partner sexual violence since age 15, a figure experts caution is significantly under-reported due to stigma and fear....”

- Related: Plos GPH - [The shadow of violence: How intimate partner violence shapes contraceptive and maternal health service use across 25 African countries](#)

## Miscellaneous

**Cidrap News – After unprecedented autism-vaccine messaging change, scientists, advocates say CDC no longer trustworthy**

<https://www.cidrap.umn.edu/childhood-vaccines/after-unprecedented-autism-vaccine-messaging-change-scientists-advocates-say-cdc>

**“For nearly 80 years, the Centers for Disease Control and Prevention (CDC) was respected around the world for its authoritative, evidence-based leadership in public health. But the CDC’s stunning reversal Wednesday—stating on its website that “studies have not ruled out the possibility that infant vaccines cause autism”—shows the agency can no longer be trusted, multiple doctors and public health advocates told CIDRAP News.....”**

**UN News - UNICEF: 20% of world’s children still trapped in extreme poverty**

<https://news.un.org/en/story/2025/11/1166414>

**“More than 19 per cent of children worldwide live in extreme poverty, surviving on under \$3 a day, according to a new UNICEF report. Nearly 90 per cent of those children are in Sub-Saharan Africa and South Asia, but even in high-income countries, 23 per cent live with far less income than their peers....”**

**CGD (Brief) – Commitment to Development Index 2025**

Ian Mitchell et al; <https://www.cgdev.org/publication/commitment-development-index-2025>

**“The CDI covers eight distinct policy areas that affect development.... “**

Check out findings. Among others: **“Sweden tops this year’s CDI, followed by Germany in second place and Norway in third place.....”**

- Related CGD blog - [Beyond Aid Cuts: The Forgotten Policies That Still Matter for Development](#)

**“The retreat from development is not only financial....”**

With a number of suggestions.

**AXA - The Fragmentation Factor: How Social Division in 2025 Is Amplifying Global Risks**

<https://riskandinsurance.com/the-fragmentation-factor-how-social-division-in-2025-is-amplifying-global-risks/>

**“As climate change loses ground to geopolitical instability and cybersecurity threats, AXA’s latest research reveals a world where the erosion of trust and social cohesion are making every crisis harder to overcome.”**

**“In a year marked by divisive elections, trade wars, and technological disruption, the world’s risk landscape is undergoing a fundamental shift. For the first time in five years, climate change, while still the top concern, is losing its commanding lead as other anxieties close in. According to the recently released AXA’s Future Risks Report, the gaps between the top three risks have narrowed dramatically, with geopolitical instability and cybersecurity threats now breathing down climate’s neck.”**

**“But the report’s most striking revelation is not about any single risk. It’s about the thread connecting them all: fragmentation. ...** When respondents were asked what factors divide their societies most, economic and social inequalities topped the list globally, followed closely by political and ideological divisions. But the specifics vary by region: Europeans cite immigration tensions most frequently, Americans point to misinformation and polarization on social networks, while respondents in Asia-Pacific and Africa emphasize economic disparities and unequal access to education. **This fragmentation isn’t just a social concern – it’s a risk multiplier. Divided societies struggle to mount coordinated responses to threats, from climate adaptation to pandemic preparedness. Trust erosion undermines the collective action needed to prevent crises. And yet, paradoxically, 67 percent of respondents still believe international decision-making offers the most effective path to solutions, even as 56 percent of experts predict countries will increasingly go it alone....”**

### **ODI expert comment - The AI time bomb: 2.5 million jobs at risk, is Kenya ready?**

A Lemma; <https://odi.org/en/insights/the-ai-time-bomb-25-million-jobs-at-risk-is-kenya-ready/>

**“The global AI jobs debate has overlooked Africa.”**

**“The global debate about Artificial Intelligence (AI) and its impact on jobs has been dominated by a simple but polarising narrative: AI will either cause mass unemployment or usher in a productivity boom benefiting everyone. However, while much of this discussion has focused on high-income economies, the reality of African workers is vastly different. What does AI really mean for African workers – many of whom are farmers, drivers, or traders rather than software engineers or graphic designers?”**

**“...This Kenyan case study offers one of the first data-driven insights into this question. Using microdata from the [2022 Kenya Continuous Household Survey](#), each reported occupation was classified into one of six AI exposure gradients, following the International Labour Organization’s (ILO) [Generative AI and Jobs](#) framework. This analysis provides a clear snapshot of who is most vulnerable to AI disruption, their incomes and where they live.....”**

# Global health governance & Governance of Health

## Foreign Affairs – The New Soft-Power Imbalance

M Repnikova; <https://www.foreignaffairs.com/united-states/new-soft-power-imbalance>

Interesting analysis. “China’s Cautious Response to America’s Retreat.”

“It would be premature to declare the relative improvement in China’s soft-power position a definitive victory for the country....”

## Chatham House - Rethinking UK aid policy in an era of global funding cuts

J Puri et al; <https://www.chathamhouse.org/2025/11/rethinking-uk-aid-policy-era-global-funding-cuts/03-security-consequences-oda-cuts>

“How the UK can respond to emerging security and geopolitical risks.”

“This paper examines how the UK government can best respond to the security and geopolitical risks of this new era of aid scarcity. Fiscal constraints, partly related to defence commitments, mean that additional funding for UK foreign aid is unlikely to be forthcoming. The aid budget is being cut to 0.3 per cent of gross national income by 2027. As a result, the government will need to do more with less, and be more selective and strategic in its approach. **The paper argues, among other recommendations, that the UK needs to work with European allies on a clearer offer of partnership (going beyond aid) to states in the Global South; join forces with like-minded states to address ‘aid fragmentation’ and shore up the multilateral system; preserve internal expertise for dealing with fragile and conflict-affected countries; and tell a clearer public story about how foreign aid supports UK interests and security.** “

## KFF - A Small Texas Think Tank Cultivated Covid Dissidents. Now They’re Running US Health Policy.

<https://kffhealthnews.org/news/article/brownstone-institute-vaccines-acip-cdc-jeffrey-tucker-bhattacharya-kulldorff/>

Related **tweet Amy Maxmen**: “*The Brownstone Institute, whose members now run US health policy, is funded by a subset of people who support prominent groups in conservative politics, such as the Federalist Society and the Heritage Foundation.*”

## ECDPM – Eight challenges for AU-EU relations

<https://ecdpm.org/work/eight-challenges-au-eu-relations>

This compendium brings together a **set of thematic analyses that seek to inform the debate in the run-up to the AU-EU summit.**

- With one of them focusing on health: “**European investments in health in Africa: from rhetoric to mutual benefits.**” (by P Apiko)

**“The AU-EU health partnership is evolving towards ‘mutual interests’, with lessons drawn from the COVID-19 pandemic and a focus on supporting [health security and sovereignty](#). Five dedicated [health Team Europe Initiatives](#) and a joint high-level steering meeting provide structural foundations. However, beyond policy alignment, commitments must be translated into sustainable investments in local and regional manufacturing, health system strengthening, workforce development and innovation. ....”**

## **ODI (Expert Comment) - Strange bedfellows? Blending development and export finance in Europe’s Global Gateway**

Y Chen et al ; <https://odi.org/en/insights/strange-bedfellows-blending-development-and-export-finance-in-europes-global-gateway/>

« The last year has seen a new course in the European Union’s (EU) development finance, one that shifted external action beyond traditional aid towards a model that seeks to blend development finance with export credit instruments under the Team Europe umbrella. This transition also reflects a broader recalibration of EU external policy – realigning development partnership priorities with the Union’s strategic interests. »

« In October, the European Commission held the second edition of the Global Gateway Forum, as well as a second high-level conference on the Enhanced Coordination of External Financial Tools. The conference brought together the usual partners: EU institutions, Member States, Development Finance Institutions (DFIs), private sector representatives and policy experts – but **also Export Credit Agencies (ECAs)**. The timing was significant: in the same week, the Commission launched the Global Gateway Investment Hub, signalling the new emphasis on export finance as a key instrument within the EU’s external action. **Going forward, there is a clear intent for ECAs to play a more coordinated role in the Global Gateway alongside development finance actors.** ...The integration of ECAs into the Global Gateway raises several challenges and a series of questions, practical and philosophical....”

## **Devex (Opinion) - The world is fragmenting — Africa and Europe can still hold it together**

M Robinson & E J Sirleaf ; <https://www.devex.com/news/the-world-is-fragmenting-africa-and-europe-can-still-hold-it-together-111375>

**“As a vital stabilizing axis, the Africa-Europe partnership must seize the opportunity for a necessary and urgent reset — one that could unlock \$2.3 trillion in investment and solidify a shared future for the benefit of both continents, and the world.”**

“...For decades, aid dependency, political conditionality, and asymmetric trade terms have fuelled mistrust, and in Africa’s case, have forced the continent to look elsewhere for partners.

**It is time for a reset. Recent research from the Africa-Europe Foundation estimates that a genuinely effective partnership could [unlock \\$2.3 trillion in investment](#). Neither continent can afford to let this slip through their fingers.”**



“Europe, facing ageing demographics and competitiveness challenges, must capitalize on Africa’s resources, growth, and youthful population. Africa, in turn, can learn from the world’s largest single market and its deep institutional experience in integration and investment. But **realizing this \$2.3 trillion opportunity demands more than rhetoric. Both continents must push back against political populism and the false promise of isolationism — and instead renew their commitment to multilateralism. ... we can act as co-architects of a reformed multilateralism that enables Africa and Europe to realize the potential of the partnership.** A stabilizing axis, yes, but also a force for change.”

“This is what we have both been working to achieve **through our support of the [Article 109 Coalition](#) — a group committed to invoking Article 109 of the U.N. Charter that would open up a political space to reimagine the multilateral system** — which formally launched at UNGA80 in New York this year.....”

### **Devex Pro – NGOs say they’re under attack from Trump — and are ready to fight back**

(gated) <https://www.devex.com/news/ngos-say-they-re-under-attack-from-trump-and-are-ready-to-fight-back-111334>

“INGOs — and the whole nonprofit sector — have been targeted by a raft of vague but threatening pronouncements from the White House. It’s **creating a culture of fear**, which has driven some into silence, but pushed others into the beginnings of a fightback....”

### **Devex – Millennium Challenge Corporation changes country selection criteria**

<https://www.devex.com/news/millennium-challenge-corporation-changes-country-selection-criteria-111347>

“The Millennium Challenge Corporation has made significant changes to its scorecard, paving the way for more countries to meet the requirements and qualify for funding.....”

“The [Millennium Challenge Corporation](#) quietly released its annual scorecards assessing whether countries are eligible for hundreds of millions in U.S. funding last week — and they look quite different from last year. These changes **loosen key criteria — notably on corruption** — but it remains to be seen what their impact will be and how they will translate to what countries MCC chooses for new grants next month....”

“MCC, a U.S. development agency, operates through a unique model, selecting partner nations based on a rigorous set of policy criteria and then codesigning large-scale grant agreements to tackle barriers to economic growth. These grants, called compacts, hinge on MCC’s scorecard, which measures factors such as government corruption, economic policy, land rights, health, and education spending. And that scorecard has changed this year..... “

### **Devex Pro - Pressure mounts on IFC to release report on Bridge sexual abuse case**

(gated) <https://www.devex.com/news/pressure-mounts-on-ifc-to-release-report-on-bridge-sexual-abuse-case-111328>

**“Civil society organizations say the International Finance Corporation needs to ramp up its transparency and accountability framework. Civil society groups are ramping up pressure on the International Finance Corporation — the World Bank’s private sector arm — to release the findings of an independent investigation into the institution’s handling of sexual abuse allegations at a Kenyan school chain it helped finance between 2013 and 2016....”**

### **Journal of Critical Public Health -The post-politics of partnership: Understanding corporate power in multistakeholder governance**

Rob Ralston; <https://journalhosting.ucalgary.ca/index.php/jcph/article/view/80109>

**“...Through an examination of a food policy partnership, this article explores processes of political marginalisation that occur within multistakeholder governance, contrasting formal structures of inclusion with informal exclusion. ... This article unpacks how pressures to maintain the vision of multistakeholder partnership as deliberative and inclusive can paradoxically result in processes of marginalisation and exclusion, which enhance the power and influence of corporations over policy making. In doing so, the article contributes to understandings of power in a world increasingly characterised by multistakeholder governance, illustrating the tensions that surface between the ‘post-political’ vision of partnerships and informalisation and exclusion in practice.....”**

## **Global health financing**

### **ODI (Research Report) - What can a ministry of finance do to improve health spending?**

D Serebro et al ; <https://odi.org/en/publications/what-can-a-ministry-of-finance-do-to-improve-health-spending/>

**“Lower middle-income country governments spend only \$56 per capita on health while low-income country governments spend less than \$10 per capita. However, budgetary space to increase these allocations is severely constrained by stagnant or low economic growth, limited capacity to mobilise revenue, and rising debt-service costs. In these circumstances, where it may be unrealistic to expect large funding increases for the health sector, what can a ministry of finance do to improve the efficiency and effectiveness of health spending?”**

**“This paper suggests 10 areas that ministries of finance, ministries of health and their partners can explore to improve the quality of health spending across three themes: improved budgeting and prioritisation of health spending; improved budget execution and procurement; and stronger public financial management frameworks for health spending.”**

### **BMJ GH (Analysis) – US divestment in global health: disruption, uncertainty and response**

C Franz et al ; <https://gh.bmj.com/content/10/11/e019990>

“The decisions of the US administration under Donald Trump in January 2025 to divest from many development activities have severely disrupted the state of affairs in global health. **We analyse the extent of this disruption from two perspectives. First, we show that about 45 out of every 100 dollars spent on global health from 2019 to 2022 came from the US.** Using data on bilateral official development assistance for health from the US, **we identify recipient countries and health areas that will be most affected. We demonstrate differential sectoral impacts in more than a dozen countries—mainly within WHO’s Africa region—**which have been heavily reliant on US aid and other external sources to fund their health services. Severe fiscal constraints and/or ongoing conflicts and fragility in these countries further exacerbate potential impacts. **Second, we analyse US contributions to UN organisations and other multilateral bodies most relevant to global health.** This combined analysis provides a baseline for countries and organisations to understand the immediate financial fallout and the future risks within a changed global health financing system.”

## UHC & PHC

### International Journal of Health Planning and Management - Global Health Initiatives and Universal Health Coverage in Pakistan-Aligned for the Future?

<https://onlinelibrary.wiley.com/doi/epdf/10.1002/hpm.70038>

By S Zaidi & S Witter et al.

### HP&P - Time to fully account for cost in monitoring financial protection and universal health coverage in low- and middle-income settings

Peter Binyaruka, Josephine Borghi ; <https://academic.oup.com/heapol/advance-article/doi/10.1093/heapol/czaf085/8326643?searchresult=1>

“Financial protection is a core pillar of universal health coverage (UHC), yet current monitoring approaches in low- and middle-income countries (LMICs) **largely focus on direct medical costs, neglecting direct transport costs and indirect time costs lost** when seeking care. **This commentary highlights the importance of fully accounting for these often-excluded costs, which disproportionately affect poorer and rural populations and can significantly hinder access to essential health services and lead to foregone care.** We outline **five priority areas for action**, including improved measurement of transport and time costs through household surveys, methodological advancements in valuing time, increased investment in primary health care to reduce physical access barriers, adaptation of financing schemes and social protection programs to cover non-medical costs, and a multisectoral approach to address structural determinants....”

### Book (Open Access) – Achieving Health for All: Primary Health care in action

Edited by D Bishai & M Schleiff. <https://muse.jhu.edu/book/77991>

From 2020. **“How did seven low- and middle-income countries, inspired by the landmark Alma-Ata Declaration, dramatically improve citizen health by focusing on primary health care?** The Alma-Ata Declaration of 1978 marked a potential turning point in global health, signaling a commitment to primary health care that could have improved the safety of air, food, water, roads, homes, and

workplaces in all 180 countries that signed it. Unfortunately, progress in many countries stalled in the 1980s. The declaration was, however, embraced by a number of countries, where its implementation led to substantial improvement in citizen health. **Achieving Health for All reveals how, inspired by Alma-Ata, the governments of seven countries executed comprehensive primary health care systems**, deploying new cadres of community-based health workers to bring relevant services to ordinary households. **Drawing on a set of narrative case studies from Bangladesh, Indonesia, Ethiopia, Nepal, Ghana, Sri Lanka, and Vietnam,**the book explains how a **primary health care focus succeeded in improving population health**. The book also conclusively demonstrates that **comprehensive, multisector, community-controlled, and population-level primary health care is a viable strategy** that, against the odds, **has led to sustainable, scalable good health at lower cost**. **Bringing together a group of experts to analyze the forty-year legacy of the Alma-Ata Declaration, Achieving Health for All** is a fascinating look at the work needed to transform nations from places that make people sick to places where they stay healthy ....”

### International Journal for Equity in Health -Beyond cost-effectiveness: a reflective commentary on adapting global health technology assessment for equity considerations in South Africa and other LMICs

Chantel Siriram et al; <https://equityhealthj.biomedcentral.com/articles/10.1186/s12939-025-02676-z>

“This **commentary critiques the global transplantation of Health Technology Assessment (HTA) frameworks grounded in cost-effectiveness analysis (CEA) and cost-utility analysis (CUA)**, highlighting their potential misalignment with the ethical and historical realities of LMICs such as South Africa. ...”

## Pandemic preparedness & response/ Global Health Security

### TWN – WHO: Divergences persist in talks on pathogen access & benefit-sharing system

S Shashikant et al; <https://www.twn.my/title2/health.info/2025/hi251103.htm>

(18 Nov) “**The third meeting of the open-ended Intergovernmental Working Group on the Pandemic Agreement ended with a draft PABS Annex text that incorporates textual suggestions from Members of the World Health Organization (WHO), adding clarity to the divergences that continue to persist along North-South lines....**”

“**Textual suggestions from developing countries** were largely aimed at addressing the many gaps in the Bureau’s text and to infuse legal certainty in the terms and conditions governing the sharing of PABS Materials and Sequence Information (PMSI).

“... In contrast, **the text insertions proposed by developed countries** were primarily aimed at establishing a system in which manufacturers of vaccines, therapeutics and diagnostics (VTDs) may choose to voluntarily commit to benefit-sharing – either de-linked from access or only after access has already been granted. Their proposals impose no benefit-sharing obligations on any other users

of the PABS System; monetary benefit-sharing would be left to mutual agreement, and governance would be shifted towards a multi-stakeholder-led administration of the PABS System. ....”

## Plos GPH - The use of quarantine as an international travel measure during the COVID-19 pandemic: A comparative analysis of implementation and equity impacts in five “exemplar” countries

Kelley Lee et al;

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0005457>

re Australia, Aotearoa New Zealand, Singapore, South-Korea, Taiwan.

## Planetary health

With first, more news & reports from **COP 30**.

### Some more COP30 related reports, via (WHO's) ATACH's mailing list

- WHO Guidance: [Measuring greenhouse emissions in health systems](#)

**“Overview:** This guidance sets out a common approach to calculating health system emissions, outlining that rapid and significant progress can be made with modest resources. This is not a one-size-fits-all approach – the guidance allows systems to identify the next appropriate meaningful step in developing GHG measurement. It is accompanied by case studies which provide insights for implementation of key concepts in a diverse range of real-world contexts. ...”

- WHO: [Decarbonizing the healthcare supply chain - strategic actions for health systems](#)

**“Overview:** This report highlights practical actions for health systems to decarbonize their supply chain, depending on their local context and priorities. It outlines two complementary approaches: accelerating supplier decarbonization through procurement and optimizing demand and usage of supplies. The report encourages better understanding of supply chain hotspots, partnership working and international alignment, while also discussing the key steps that will lead to the most transformative action moving forward. These approaches are illustrated by real-world ‘implementation examples’ embedded in the report. ...”

- World Bank, the Inter-American Development Bank, and KfW with support from partners: [Smart Buys: High-Value Actions for Health Sector Adaptation](#)

**Overview:** This report offers countries a set of options of adaptable, cost-beneficial actions to strengthen health sector adaptation and resilience in the face of climate change, highlighting eight

promising, high-value actions. It serves as a resource for countries seeking to translate climate-health commitments into investments and action that deliver measurable results. ....”

### Devex - Slashing super pollutants is a win. So where's the money?

<https://www.devex.com/news/slashing-super-pollutants-is-a-win-so-where-s-the-money-111381>

**“At COP30, 10 countries pledged new action on black carbon, but the health and climate gains from cutting super pollutants still don’t count toward global climate targets.”**

**“Super pollutants is an umbrella term for several climate-warming and health-harming emissions: methane, which comes from agriculture and organic waste; black carbon, or soot, the fine particulates produced by diesel engines, coal combustion, and wood and biomass burning; hydrofluorocarbons, which are used in air conditioning, refrigeration, fire suppression and aerosols; and tropospheric ozone, a greenhouse gas and component of smog formed when sunlight reacts with other pollutants. Action on super pollutants is often framed as a public health intervention, as they contribute to cardiovascular and respiratory diseases, from asthma to heart disease. Many experts say counting these efforts toward climate mitigation as well could benefit both the environment and human health. ...”**

### CESR (blog) – COP30 is billed as the “Implementation COP”: will this year’s annual summit deliver the tangible action we need?

M Forgette <https://www.cesr.org/cop30-is-billed-as-the-implementation-cop-will-this-years-annual-summit-deliver-the-tangible-action-we-need/>

**(13 Nov) “As COP30 unfolds in Belém, governments face a real test. Will they finally commit to the public, reparative finance and structural changes that climate vulnerable countries have long called for, or repeat the delay that deepens today’s crises?”**

With **three key issues**: 1. Can the Baku to Belém Roadmap deliver an actionable path to \$1.3 trillion?... 2. Is the Just Transition Work Programme the best hope for tangible progress?... 3. How will the international court advisory opinions impact negotiations?....”

### Guardian (Explainer) - Can Cop30 begin the process of phasing out fossil fuels?

<https://www.theguardian.com/environment/2025/nov/16/can-cop30-begin-the-process-of-phasing-out-fossil-fuels>

**“Ending use of coal, oil and gas is essential in tackling climate crisis – but even talking about it is controversial...”**

### Guardian - What is Bam? The acronym everyone is talking about at Cop30

<https://www.theguardian.com/environment/2025/nov/18/bam-belem-action-mechanism-explainer-cop30>

**“Securing the Belém Action Mechanism is a top priority for climate justice advocates at the talks in Brazil.”**

“All through the halls of the UN climate talks, civil society activists are wearing badges that read “Bam!”. They are not showing their fandom for old superhero comics but rather indicating their support for **the Belém Action Mechanism (Bam), a proposal for states to drive action on a just transition towards a low-carbon economy. Securing the Bam is a top priority for climate justice advocates at Cop30.** Proponents say that if a just transition is not a priority, climate action will unintentionally leave workers and communities behind.....”

## **Guardian – Can methane cuts pull us back from the brink of climate breakdown?**

<https://www.theguardian.com/environment/2025/nov/16/methane-cuts-climate-breakdown-cop30>

Analysis. “With temperatures breaching the Paris limit, **experts say tackling the powerful gas could buy crucial time as the clean-energy shift stalls.**”

“...The **biggest worry for scientists is that further heating could trigger irreversible tipping points**, such as the widespread drying out and dying off of the Amazon, or the melting of the Greenland ice sheet, beyond which climate breakdown could spiral out of control. **For the UN, and the world, minimising and, if possible, reversing that “overshoot” must now be the priority.** But shifting the world’s energy systems to burn less fossil fuel is taking decades, time we no longer have to spare. **Some scientists believe the answer lies elsewhere: with the powerful greenhouse gas, methane.....”**

PS: “**Scientists estimate that methane alone has driven at least a third of the warming in recent year ...** Cutting methane would give the planet essential breathing space, staving off the worst consequences of climate breakdown while the transition to a clean energy future gathers pace. **Global temperature rises could be held down by about 0.3C in the next decade with a 40% cut in methane, or by as much as 0.5C by 2050 with further cuts.** If the world is to **minimise the overshoot of the threshold of 1.5C above preindustrial levels, action on methane is indispensable.**”

“...A paper published in October in the peer-review journal Science found that **substantial cuts to methane could delay key tipping points:** it could reduce the likelihood of the Amazon rainforest dying back by about 8%, and of disruption to the Indian monsoon by about 13%. The study **also found that reducing methane paid for itself three times over – or six times over if health benefits were included.** Cutting methane by a third by 2030 would be worth about \$1tn a year for the global economy....”

“**Yet, action lags.** More than 150 countries are bound to cut their methane levels from 2020 by 30% by 2030, under the global methane pledge signed at Cop26 in 2021. But China, India and Russia – all major producers – are missing, and the US under Donald Trump now looks unlikely to fulfil its part. There are moves in some key countries to control the gas.....”

PS: “... **While fixing leaky energy infrastructure offers the quickest, cheapest and most direct way to cut global methane emissions, agriculture, waste and livestock are responsible for about 40% of human-made methane and cannot be ignored.** A report published last month by Foodrise, Friends of the Earth US, Greenpeace Nordic and the Institute for Agriculture and Trade Policy found that 45 of the biggest meat and dairy companies around the world generated more than 1bn tonnes of greenhouse gas emissions, surpassing those of Saudi Arabia.....”



## Annals of Global Health (Collection) - Lessons from the field: Case studies to advance research on climate adaptation strategies and their impact on public health

Edited by P Kumar et al; <https://annalsofglobalhealth.org/collections/lessons-from-the-field>

This Special Collection includes **case studies from 14 countries**—written by researchers from around the globe— and aims to:

## Nature Sustainability -Ten principles for transforming economics in a time of global crises

Jasper O. Kenter, K Pickett et al; <https://www.nature.com/articles/s41893-025-01562-4>

“Unconventional economic approaches seeking holistic human and planetary well-being have transformative potential, but mainstreaming them is hampered by vested interests and intellectual lock-ins. They are also diffuse and struggle to develop sufficient discursive power to gain more widespread traction in policy. To bring coherence, we undertake a qualitative content analysis of 238 document sources from science and practice. **We identify ten ecological, social, political economy and holistic principles cutting across 38 economic approaches. They include: (1) social–ecological embeddedness and holistic well-being; (2) interdisciplinarity and complexity thinking; (3) limits to growth; (4) limited substitutability of natural capital; (5) regenerative design; (6) holistic perspectives of people and values; (7) equity, equality and justice; (8) relationality and social enfranchisement; (9) participation, deliberation and cooperation and (10) post-capitalism and decolonization.** We also consider opportunities and barriers to applying these principles in the context of global crises.”

## Pre-print: Techno-optimistic scientists take fewer climate actions

F Dablander et al ; [https://osf.io/preprints/psyarxiv/c3skb\\_v1](https://osf.io/preprints/psyarxiv/c3skb_v1)

“Technological innovation is key to mitigating climate change, yet excessive faith in technology may undermine the wider societal transformations needed to address it. **In their roles as knowledge producers and trusted public figures, scientists play a vital part in shaping how societies understand and respond to climate change. We examine techno-optimism — here defined as the belief that technology will largely solve the problems caused by climate change — among scientists** using survey data from 199 scientists across 115 countries. **Our findings show that techno-optimism is most prevalent among scientists in applied and natural sciences, and among those with right-leaning political views.** Techno-optimistic scientists are **substantially less likely to engage in civic climate action** (28% lower) or make high-impact lifestyle changes (20% lower). These results suggest that **techno-optimistic worldviews within science may inadvertently constrain the behavioral and cultural shifts required for effective climate action.**”

# Mpox

## Telegraph - Cases of mutant mpox 'drastically' increase in Europe

<https://www.telegraph.co.uk/global-health/science-and-disease/cases-of-mutant-mpox-drastically-increase-in-europe/>

**"At least 46 cases of the more dangerous mpox strain clade 1b** have been detected across the continent since August."

## Infectious diseases & NTDs

### Lancet GH Viewpoint -Beyond malaria: can intermittent preventive treatment with sulphadoxine-pyrimethamine reduce the number of small vulnerable newborns globally?

[https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(25\)00405-X/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(25)00405-X/fulltext)

By Holger W Unger et al.

### Nature Africa (Research Highlight) – AI to tailor malaria and TB drugs to Africa

<https://www.nature.com/articles/d44148-025-00361-5>

**"AI methods find gene variants that weaken drugs efficacy: Researchers have developed an AI model to predict how a person might react to different drugs.** Despite Africa's rich genetic diversity, most drug discovery and development have historically taken place outside the continent resulting in treatments that often do not perform well in patients from Africa. For the **Nature Communications study**, the researchers, from South Africa and Spain, combined machine learning and simulations of how drugs move through the body (a technique called physiologically based pharmacokinetic, PBPK) with statistical models that capture genetic differences between people to pinpoint drug–gene pairs likely to be relevant in African populations. The researchers then simulated how genetic variants could alter drug absorption, metabolism, and distribution, providing a basis for adjusting doses to improve treatment outcomes...."

### MSF - WHO algorithms could double the number of children diagnosed and treated for tuberculosis

[https://www.msf.org/who-algorithms-could-double-number-children-treated-tuberculosis?utm\\_campaign=18112025&utm\\_medium=social&utm\\_source=bluesky](https://www.msf.org/who-algorithms-could-double-number-children-treated-tuberculosis?utm_campaign=18112025&utm_medium=social&utm_source=bluesky)

**"Our operational research has shown that use of the WHO treatment decision algorithms for diagnosing tuberculosis in children could nearly double the number of children initiated on lifesaving care.** Countries must adopt the WHO algorithms in their national guidelines so that more children can receive treatment for tuberculosis."

**“At the World Conference on Lung Health** this week, Médecins Sans Frontières (MSF) released data from our operational research highlighting that using the World Health Organization (WHO) recommended treatment decision algorithms for diagnosing tuberculosis (TB) in children can nearly double the number of children who can be initiated on lifesaving TB treatment....”

### **BMJ GH – Scorpion sting envenomation: a neglected tropical disease in the shadow of global health priorities: an urgent call to action**

<https://gh.bmj.com/content/10/11/e020682>

by E A H Munoz et al.

## **AMR**

### **FT - New GSK-backed venture targets drug-resistant superbugs with AI**

<https://www.ft.com/content/85252c42-0834-487c-9287-3446f838b58e>

**“Pharmaceutical group and Fleming Initiative** launch project to combat antimicrobial resistance.”

**“Pharmaceutical company GSK is teaming up with UK scientists to use artificial intelligence to fight superbugs that are making life-saving medicines increasingly ineffective. A £45mn venture with the Fleming Initiative** will fund about 50 researchers and launch six programmes to target pathogens such as MRSA “hospital superbugs” and fungi that are spreading because of climate change, GSK will announce on Tuesday....”

## **NCDs**

### **The Conversation -Toilets can make Africa’s roads safer, according to this new study**

F G Boateng; <https://theconversation.com/toilets-can-make-africas-roads-safer-according-to-this-new-study-269297>

By a **researcher in mobility governance at the Transport Studies Unit of the University of Oxford.**

**“My research interests include toilet access within mobility systems. In a recent paper, I drew attention to the road safety benefits of toilets.** I argue that enhancing drivers’ reasonable and reliable access to toilets can yield road safety benefits in ways that are comparable to enforcing laws against drunk or fatigued driving....”

## BMJ Global Health- Intersectional stigma and resilience in the uptake of cervical cancer prevention services in Nigeria: a qualitative study

Wapmuk AE et al; <https://gh.bmj.com/content/10/11/e020065>

“Themes emerging from the data: (1) positive perceptions (self-efficacy): many women understood the importance of protecting themselves and their daughters from cervical cancer and strongly believed that they could educate their partners/husbands and would not let other people’s experiences with the vaccine influence them negatively. (2) Negative perceptions (anticipated stigma): some women expressed that because the human papillomavirus that causes cervical cancer is mainly sexually transmitted, they were concerned that they may be perceived as being promiscuous if they decide to commence routine cervical cancer screening. (3) Enablers (social support): nearly all women wanted the support of their spouses before receiving cervical cancer screening. (4) Nurturers (resilience): many clearly understood the complex social and economic realities faced by Nigerians that negatively affect their access to healthcare.”

**“These findings offer intersectional insights into advancing public health and culturally anchored interventions to preventing cervical cancer-related stigma in Nigeria. “**

## BMJ GH Blog- Uncovering Bright Spots: How Karnali Province is Leading the Fight Against Anaemia in Nepal

Shweta Rawal, Vani Sethi, Tsering Pema Lama;

<https://blogs.bmj.com/bmjgh/2025/10/17/uncovering-bright-spots-how-karnali-province-is-leading-the-fight-against-anaemia-in-nepal/>

**“Anaemia affects every second adolescent girl and women aged 15–49 years in South Asia. Anaemia stifles potential, productivity and entire economies, costing the South Asia region US\$32.5 billion each year.** Despite years of effort, progress has been uneven, with some communities still facing alarmingly high anaemia rates. **Nepal is no exception.** Nepal has made steady national gains, but the burden remains high affecting one third of women 15-49 years. Yet, quietly and often unnoticed, remarkable successes are unfolding in regions that face the toughest odds. Some provinces have made remarkable progress, while others have stagnated or worsened. Amid these challenges, **Karnali province has emerged as a remarkable success story. Despite its remoteness and deep poverty—where nearly half the population lives in rural areas and 87% of rural households are among the poorest—Karnali has achieved some of the fastest declines in anaemia nationwide.** This positive outlier shows that with targeted action and local leadership, real change is possible even in the most disadvantaged settings....”

## Nature News – How obesity drugs quiet ‘food noise’ in the brain

<https://www.nature.com/articles/d41586-025-03766-2>

**“Researchers have identified a neural biomarker of compulsive food cravings, and showed that it is suppressed by the weight-loss drug Mounjaro.”**

# Social & commercial determinants of health

## Health Promotion International - Adverse commercial determinants of health in low- and middle-income countries: a public health challenge

<https://academic.oup.com/heapro/article/40/6/daaf193/8326296?login=false>

By M Mofizul Islam, D Gleeson et al.

## Annual Review of Public Health - The Politics and Profit of Disinformation in Public Health

Nason Maani et al; <https://www.annualreviews.org/content/journals/10.1146/annurev-publhealth-071723-124408>

“Disinformation is a coordinated or deliberate effort to knowingly circulate misinformation (i.e., false information) to gain money, power, or reputation. While most public health research has focused on misinformation, disinformation can have particularly pernicious direct and indirect public health effects, including a growing impact on public health policy and the reputation of public health evidence and institutions. **This review focuses on the role of disinformation for profit among multinational corporations, antiscience policy, and how and why disinformation is increasing. It also examines approaches to address disinformation in public health and social policy,** such as a greater focus on the nature and power of framing, strategies for “prebunking” of predictable narratives, and denormalization and countermarketing.”

# Access to medicines & health technology

## FT - Neglecting infectious diseases is a market failure

<https://www.ft.com/content/7e9bd070-a99e-4f1f-bff9-3709007104e1>

(gated) “Major companies are reducing research on new medicines for illnesses that affect billions of people.”

## FP – How One Vaccine Could Help Fight Drug-Resistant Infections

A Sparrow et al; [https://foreignpolicy.com/2025/11/18/vaccine-bcg-neonatal-drug-resistant-amr-health/?tpcc=recirc\\_latest062921](https://foreignpolicy.com/2025/11/18/vaccine-bcg-neonatal-drug-resistant-amr-health/?tpcc=recirc_latest062921)

“A cheap and practical intervention, given at birth, could save lives in conflict zones and beyond.”

“....the century-old Bacille Calmette-Guérin (BCG) vaccine, which is cheap, safe, and widely available. Evidence from multiple randomized trials shows that the BCG vaccine given within 24 hours of birth cuts infection-related deaths nearly in half, including those due to drug-resistant pathogens. But most of the around 100 million infants targeted for the vaccine receive it weeks or

months after birth. That delay costs hundreds of thousands of lives and is accelerating the silent pandemic of AMR.....”

“...The BCG vaccine was developed in 1921 to fight tuberculosis, so repurposing it against neonatal sepsis may initially sound implausible; tuberculosis develops slowly and rarely kills infants, after all. But though BCG provides modest protection against tuberculosis, **it is now clear that it strongly stimulates the immune system to defend against a broad range of pathogens responsible for most neonatal infections....**

“... Simple policy changes could save countless newborns around the world: **The WHO should state clearly that all babies—including preterm, fragile, and underweight infants—should receive the BCG vaccine at birth.** Vaccinators should open a BCG vial even for a single child. Coverage should be assessed at one week and a scar check added at six weeks. .... **Beyond updating WHO guidance, national immunization programs and donors need to act.** Ministries of health, supported by global health organization Gavi and UNICEF, should classify BCG as an essential at-birth vaccine, delivering it within 24 hours alongside the polio and hepatitis B vaccinations. ....”

“... In short, implementation policy must catch up with evidence.... In conflict areas and beyond, BCG vaccination could be transformative.....”

## HPW (Opinion)- Smarter Local Medicine Choices Can Save Countries Millions of Dollars

T K Lin et al ; <https://healthpolicy-watch.news/smarter-local-medicine-choices-can-save-countries-millions-of-dollars/>

“Ministries of health, funders, and technical partners need to make **regular smart reviews of Essential Medicines Lists the norm.**”

## Human resources for health

### BMJ - From dumplings to diagnoses: how China’s delivery drivers became healthcare heroes

<https://www.bmj.com/content/391/bmj.r2197>

“China’s “barefoot doctors” have expanded since the pandemic—with a modern twist: **food delivery drivers now doubling as health workers.** Sally Howard and Iris Liuyi report.”

“Some of China’s millions of [food delivery drivers are taking on the responsibility of being paid or volunteer community health workers](#), delivering medical supplies, checking on people’s wellbeing and helping older people to navigate the country’s increasingly digital health service.....”

**BMJ GH - Improving Sierra Leone's skilled health-worker-to-population ratio: how unsalaried and auxiliary health workers are barriers in its path to universal health coverage**

<https://gh.bmj.com/content/10/11/e021043>

by P Pieterse et al.

**SSM – Health Systems: The regulation-practice gap, regulatory relationships, and quality improvement in resource-constrained health systems: Findings from a study of professional regulation for doctors and nurses in Uganda**

<https://www.sciencedirect.com/science/article/pii/S2949856225001011>

By G Seruwagi et al.

## Decolonize Global Health

**Guardian (Longread) – What AI doesn't know: we could be creating a global 'knowledge collapse'**

[https://www.theguardian.com/news/2025/nov/18/what-ai-doesnt-know-global-knowledge-collapse?CMP=share\\_btn\\_url](https://www.theguardian.com/news/2025/nov/18/what-ai-doesnt-know-global-knowledge-collapse?CMP=share_btn_url)

**"As GenAI becomes the primary way to find information, local and traditional wisdom is being lost. And we are only beginning to realise what we're missing."**

**"... It should not come as a surprise that a growing body of studies shows how LLMs predominantly reflect western cultural values and epistemologies. They overrepresent certain dominant groups in their outputs, reinforce and amplify the biases held by these groups, and are more factually accurate on topics associated with North America and Europe. ... And beyond merely reflecting existing knowledge hierarchies, GenAI has the capacity to amplify them, as human behaviour changes alongside it. The integration of AI overviews in search engines, along with the growing popularity of AI-powered search engines such as Perplexity, underscores this shift. ... With each training cycle, new models increasingly rely on AI-generated content. This risks creating a feedback loop where dominant ideas are continuously amplified while long-tail or niche knowledge fades from view."**

**"The AI researcher Andrew Peterson describes this phenomenon as "knowledge collapse": a gradual narrowing of the information humans can access, along with a declining awareness of alternative or obscure viewpoints...."**



## Conflict/War & Health

### BMJ GH (Commentary) - Accelerating progress towards better public health and sustainable development in fragile settings

R Ndejjo et al ; <https://gh.bmj.com/content/10/11/e020653>

“Recent evidence from Uganda, the Democratic Republic of Congo and Somalia highlights that most SDGs are mutually reinforcing, with **SDG 16 (peace, justice and strong institutions)** playing a particularly significant role in promoting both sustainable development and health in these countries, while trade-offs exist, especially between environmental SDGs and those related to industry and the economy.....”

## Miscellaneous

### UN News - UN calls for legal safeguards for AI in healthcare

<https://news.un.org/en/story/2025/11/1166400>

“Use of artificial intelligence (AI) is accelerating in healthcare – but basic legal safety nets that protect patients and health workers are lacking. The warning comes in a report by the UN World Health Organization’s (WHO) office in Europe, where AI is already helping doctors to spot diseases, reduce administrative tasks and communicate with patients.”

“... The report is the first comprehensive assessment of how AI is being adopted and regulated in health systems across the region. The survey was sent to the 53 countries there, and 50 participated.”

- Related: [HPW – European Commission Moves to Ease AI Rules as WHO Warns of Patient Risks due to Regulatory Vacuum](#)

“Technological advances in Artificial Intelligence applications for healthcare are quickly outpacing regulatory and ethical safeguards, creating a dangerous gap in patient safety, warns a milestone [report on AI in Health Systems](#), published Wednesday by the World Health Organization’s European Region (WHO/EURO). **Paradoxically, the WHO’s urgent call for tighter AI regulation coincided with a far-reaching European Commission (EC) proposal Wednesday to loosen certain AI regulations in the European Union’s 27 member states – as part of a new “Digital Omnibus” package.** The package aims to cut red tape for AI and other digital industries in the EU, but critics argue that it would severely water down data protection for individuals. ....”

### Lancet Offline – A reservoir of illusions (part 2)

R Horton; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02321-9/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02321-9/fulltext)

Horton continues on **AI & health** in this week’s Offline. “Emily Bender is a Professor of Linguistics at the University of Washington in Seattle. Her book, **The AI Con: How to Fight Big Tech’s Hype and**

**Create the Future We Want (2025)**, written with Alex Hanna, is a compelling antidote to the techno-optimism paraded by Marc Andreessen and other cyber-futurists....”

Quote: “Trust in science will erode further if article retractions continue to spiral upwards, especially at journals (and especially at open access journals) which prioritise volume over quality. **If it becomes clear that systems of editorial oversight and peer review cannot meet the challenge of AI-generated fake research, the whole edifice of science as a core part of our culture will begin to collapse.** The emergence of evidence indicating collusion between some editors and authors in publishing fraudulent AI-generated science only makes the trust crisis more urgent....”

## **Our World in Data – The end of progress against extreme poverty?**

Max Roser ; <https://ourworldindata.org/end-progress-extreme-poverty>

« In the last three decades, the world has made progress against extreme poverty faster than ever before. But **unless the poorest economies start growing, this period of progress against the worst form of poverty is over.**”

## **Papers & reports**

### **BMJ Collection - Generative AI and the clinical encounter**

<https://www.bmj.com/collections/gen-AI>

**“As generative artificial intelligence (AI) becomes more widely used by health professionals and patients everywhere, it is transforming the clinical encounter.** AI systems are no longer just background tools. AI scribes using large language models generate clinical notes, chatbots create conversations, and AI diagnostic tools interpret patient data. These AI tools now shape every stage of clinical care, from recording patient information to supporting diagnosis and shared decision making and to planning care. **This BMJ series introduces the concept of triadic care, where AI is increasingly the third party in the clinician-patient encounter.** The articles explore how healthcare relationships, skills, responsibilities, and risks are changing and examine not just what generative AI can do, but how it can be used openly and responsibly in ways that respect trust, patient agency, and good clinical practice.”

### **Book – The State and the Imperative for Social Policy Reform in Africa**

Editors: D Béland et al ; <https://link.springer.com/book/10.1007/978-3-032-02432-9>

Open access.

### **HP&P - Responsibility without autonomy: exploring the emergence of distributed leadership in a district hospital of the Western Cape province, South Africa**

<https://academic.oup.com/heapol/advance-article/doi/10.1093/heapol/czaf094/8324891?searchresult=1>

By Oupa Motshweneng, Lucy Gilson et al.

## The Journal of Community Systems for Health – Special issue on Indigenous Communities, Health and Wellbeing

<https://journals.ub.umu.se/index.php/jcsh/issue/view/87>

“This collection explores the **diverse challenges Indigenous peoples face across continents**. The articles highlight lived experiences of health and wellbeing, viewed through the lens of social determinants and grounded in community perspectives.”

## BMC “We’ve already been doing this, we just didn’t call it implementation science”: a call for shared language in global health

<https://bmcplobalpublichealth.biomedcentral.com/articles/10.1186/s44263-025-00223-0>

By Amelia E. Van Pelt et al.

## Blogs & op-eds

### The Healthiest Goldfish – A call for structured heterodoxy in medicine and public health

S Galea; [Substack](#);

“Can we have the discipline to **create space for productive disagreement?**”

## Tweets (via X, LinkedIn & Bluesky)

Mishal Khan

“**#GlobalHealth - what should the role of scholars from the 'Global North' be?**

Never one to shy away from creating some productive discomfort, at #OxfordGlobalHealth I proposed that **it is time to flip the narrative**:

Instead of going in with the assumption that:

Global North = Source of Expertise, "the solution finders"

Global South = Source of Problems, "in need of help and reform"

Change to:

Global North = Driver of many #health and #development problems

Global South = Holds valuable expertise

**Focus on investigating the role of Global North institutions in impeding progress in the Global**

South and what can be reformed here ....”

## Bodo Ellmers

(for more see <https://moderndiplomacy.eu/2025/11/12/the-global-debt-crisis-and-the-case-for-structural-reform-interview/> )

“ **“Debt kills the SDGs”** 3.4bn people live in countries spending more on debt interest than on health + education. Solutions, from debt restructuring to shifting [#ClimateGinance](#) from loans to grants, exist. What’s missing is political will.”

## Paul Belcher

Quoting [Caroline Costongs \(via LinkedIn\)](#):

““A **#FarRight** politician recently told me that “ **#PublicHealth** is a political ideology – it is a recipe for expanding government control over people’s lives ”.

## Shomy Hasan Chowdhury

“**I am so sick of these exploitative “youth leadership” positions.** Just read the Terms of Reference for the World Food Forum Youth Policy Board, expecting young people to dedicate 25 hours a month, lead regional consultations, draft policy documents, represent FAO in global spaces... and it’s completely unpaid. Plus it is a 4-round selection process! If our voices are valuable enough to shape policy, they’re valuable enough to be paid. **FAO World Food Forum**, please set a better example!”

## J Rockström

**"The rate of warming is showing signs of accelerating"** PIK Director Johan Rockström gives an analysis of the current situation on climate & planetary boundaries at #COP30. **The data suggests the world is heading for global temperatures not seen in millions of years."**