

IHP news 856 : M/multilateralism in the year 2025

(28 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,

Last week(end) **three major global events** were concluded: the [Global Fund Replenishment](#), the **G20 summit** and [COP 30](#), respectively in **South Africa and Brazil** - all with major global health implications. We come back on them in this newsletter, trying to explore where they are situated on the vast continuum between **'empty multilateralism'** and a **'victory for multilateralism'** (ps: *arguably, the Global Fund replenishment is [a bit different](#) from the others, due to the somewhat unexpected continued US contribution, not exactly a multilateralism-minded powerhouse these days*). As you know, for the **pandemic treaty**, a similar discussion is possible, to a great extent depending on whether negotiators will manage to secure a fair PABS annex or not in the coming months. Whereby I tend to agree with the ones arguing that **'holding the line in the current geopolitical environment'** is already a feat in itself, unfortunately.

In most abovementioned cases, the picture is rather blurred. Yes, of course, progress was/is anything but sufficient, overall outcomes were disappointing, and "voluntary initiatives" as always far too dominant. From that 'glass half empty' angle, it's extremely important that some people **continue to tell it like it is**, cutting through all the PR (like **J Rockström** on the disappointing [COP outcomes & what's really needed with respect to the roadmap idea](#) on the phaseout of fossil fuels; or check out a hard-hitting letter on the danger of **'toxic positivity'** at the COP; or the **Global Fund Observer** warning for **'health austerity'** in Africa, plain and simple). Yet, all three events also provided some positives. Just flagging one here for example for the COP: it seems likely [the roadmap idea will dominate future COPs](#). Better late than never, I hear you say.

Overall, given the **multiple & intersecting emergencies** the world is facing on a number of fronts (planetary, geopolitical/military, [inequality](#), ... and let's not forget the societal/security impact of AI in a few years from now), we tend to agree with [RANI](#) that **'resilience'** will be the overarching lens in power corridors all around the world (well, at least, the ones still trying to align somewhat with science). Not that we particularly like the concept, and neither do we like the sound much of what **Carsten Schicker** (CEO World Health Summit) calls **'resilience returns'** in an interview earlier this week, stating that *'...By 2035, the **defining shift in global health** will be mainstreamed **'resilience returns'**, where governments and partners treat health spending as a strategic investment that safeguards stability, growth, and peace...'*. But as we're too dumb as a species for degrowth, ecosocialism and the like, **"resilience"** will be the name of the game in the coming decades at all levels, I'm afraid. (whereby 'boosting resilience' at global & other levels will probably be as makeshift as how a rusty fiftysomething tries to get through his/her days :))

In this issue, we also come back on the **AU-EU summit** in Luanda, Angola (24-25 Nov), well-attended by EU leaders (*featuring both “Jupiter” and the [more provincial types](#)*). The theme: “*Promoting peace and prosperity through effective multilateralism*”.

In the **run-up to World AIDS day**, UNAIDS published a dire report, [Overcoming Disruption, Transforming the AIDS Response](#). We also pay some more attention to **AMR Awareness week**, among others in the extra AMR section and with a featured article from **Cesar Vargas**.

Finally, we want to flag the **Emerging Voices for Global Health call for 2026** (linked to the Dubai HSR symposium). Check it out [here](#)!

Enjoy your reading.

Kristof Decoster

Featured Articles

“Act Now!” Yes, but with what, exactly? On #AMR and the realities of unequal access

[Cesar Vargas](#)

Imagine some place on Colombia’s Pacific coast: an idyllic riverine community reachable only by boat, where the river is the main road, the rain sets the rhythm of the day, and the sound of the forest blends with the voices of the people. That’s where “María” lives.

One day, during a hospital stay for a cardiovascular condition, she develops a bloodstream infection caused by a multidrug-resistant bacterium. Her hospital does not have ‘Zavicefta’ in stock – that’s a last-line combination antibiotic (ceftazidime–avibactam) designed to treat severe Gram-negative infections that no longer respond to conventional therapy. The outcome for María is painfully predictable: delayed treatment, clinical deterioration, and a narrow window of options disappearing fast.

This scene is not unique to the Colombian Pacific. It could take place in a hospital room in Nairobi, in a district hospital in Dhaka, or in any setting where the geography of antimicrobial resistance and the geography of access fail to overlap. Which, unfortunately, is all too often the case.

This year’s [World AMR Awareness Week](#) ended just a few days ago, urging us to “*Act now: protect our present, secure our future.*” But when it comes to María, and patients in Nairobi, Dhaka, or Port-au-Prince facing the same microbial odds, ‘acting now’ is often impossible for their doctors when the treatments that could protect these patients are simply not available where they are needed....

- To continue the read, see IHP - [“Act Now!” Yes, but with what, exactly? On #AMR and the realities of unequal access](#)

Solo travel as a pregnant woman: a learning experience in vulnerability, empathy and redefining strength

[Dr Deepika Saluja](#)

When I received confirmation to attend the [Global Forum for Bioethics in Research](#) in Ghana (18-19 Nov), I was thrilled, but also a bit anxious. At 26 weeks pregnant, traveling internationally and alone was not a decision everyone understood. “Can you travel during this time? Is it even allowed? How will you manage? Why now? Why alone? Take someone with you!” Even my doctor hesitated. I negotiated medications, precautions, and promised it would be a short, work-only trip. Five days, in and out. No sightseeing. No risks.

But, beneath the concern lay something deeper: the cultural lens. In India, pregnancy often comes wrapped in layers of caution, control, and fear. It's seen less as a natural process and more as a fragile state requiring constant protection - of the woman or the unborn child? Maternal health outcomes differ across geographies and contexts, but so do societal attitudes and perceptions towards pregnancy and pregnant women. In a patriarchal society like India, genuine health risks often coexist with the cultural narratives that amplify fear around pregnancy and restrict autonomy of women. Was my decision to travel shaped by a desire to challenge that narrative? Perhaps.

- To continue the read, see IHP: [Solo travel as a pregnant woman: a learning experience in vulnerability, empathy and redefining strength](#)

Highlights of the week

Structure of the Highlights section

- Global Fund Replenishment
- G20 Summit in South-Africa
- AU-EU summit in Angola
- Global Health & Development Reimagining
- More on Global Health Governance & Financing
- PPPR
- AMR Awareness week
- Run-up to World AIDS Day
- Health Emergencies
- Trump 2.0
- Commercial Determinants of Health
- COP30 in Brazil
- More on Planetary Health
- SRHR
- Human Resources for Health
- Access to Medicines, vaccines & other health technologies

- Conflict/War/Genocide & health
- Some more reports & publications of the week
- Miscellaneous

Global Fund Replenishment (21 Nov, Jo'Burg)

In the words of colleagues, (last week) “...Friday’s event was the **most highly anticipated global health replenishment this year**. It was **held on the margins of the G20 Leaders Summit** — also taking place in Johannesburg — and was **co-hosted by South Africa and the United Kingdom**....”

After the **Global Fund press release, coverage & analysis** below from various sources.

Global Fund press release - Global Fund Partners Demonstrate Unity and Resolve to Sustain Progress and Strengthen Global Health Security

<https://www.theglobalfund.org/en/news/2025/2025-11-21-global-fund-partners-demonstrate-unity-resolve-sustain-progress-strengthen-global-health-security/>

“US\$11.34 billion raised amid global challenges marks renewed solidarity and **sets the stage for a transformed, more resilient global health system.”** A few excerpts:

“...The Summit also marked a renewed commitment to work differently – embracing a more agile, country-driven form of partnership that can adapt to a rapidly changing global health landscape, mobilize new donors, and accelerate domestic resource mobilization for health....”

“... The United States, the Global Fund’s largest donor, committed US\$4.6 billion in recognition of the Global Fund’s role as an essential partner that scales innovations with a world-class pooled procurement mechanism and supports critical frontline health care workers. **...Commitments from the G20 member states reached US\$8.96 billion**, reflecting the consensus that the Global Fund is a worthwhile investment in advancing global health....”

“...A number of African countries, all of whom are also implementers of Global Fund grants, made solidarity commitments totaling US\$51.59 million....”

“...The private sector played a defining role: The Gates Foundation, the Global Fund’s largest private donor, pledged US\$912 million. The Children’s Investment Fund Foundation (CIFF) pledged a further US\$135 million, taking their total additional commitment to US\$200 million since the Seventh Replenishment, a significant increase from their previous pledges. **(RED) continued its nearly two-decade partnership with a US\$75 million commitment**, and other private donors committed a total of US\$201.85 million to bring overall Eighth Replenishment support to **US\$1.34 billion so far, with more pledges to come....”**

Devex - Global Fund raised \$11.34 billion with a surprising US pledge

<https://www.devex.com/news/global-fund-raised-11-34-billion-with-a-surprising-us-pledge-111310>

Must-read analysis & overview of the pledges.

“The U.S. showed unexpected levels of support, pledging \$4.6 billion and maintaining its matching pledge ratio.”

“...the U.S. showed surprising levels of support in the wake of mixed messages from the Trump administration, including whether it would pledge at all. In the last funding cycle, it committed up to \$6 billion — but even with a reduction, the country remains the largest donor. The U.S. also maintained its matching pledge ratio, in which for every \$1 it contributes, the Global Fund must secure \$2 from other donors — something the Trump administration previously said it would change so that the U.S. would donate less compared to others.”

“...The fund’s other top public contributors ranked by their status as leading donors: • France said it will announce its pledge when the nation’s parliamentary budget debate concludes. It also noted that its support to the Global Fund remains unchanged. • The United Kingdom committed £850 million, a 15% reduction from its previous pledge. • Germany pledged €1 billion, down from the €1.3 billion it offered during the last replenishment. • Japan said it would commit later. • Canada pledged CAD 1.02 billion, whereas it pledged CAD 1.21 billion during the previous replenishment. • The European Union Commission said it expects to announce its pledge early next year.....”

PS: **“... European countries made individual contributions, such as €150 million from Italy, €40 million from Belgium, DKK 375 million from Denmark, €195.2 million from the Netherlands, \$200 million from Norway, Spain increased its pledge to €145 million, and €72 million from Ireland — a 10% increase from its previous cycle.....”**

- And via [HPW](#): **“Announcing the US pledge via video, Jeremy Lewin, US Under Secretary for Foreign Assistance, Humanitarian Affairs, and Religious Freedom, described the Global Fund as a “critical partner” in advancing his country’s new ‘American First’ strategy. The US had undergone a “rigorous review” of its multilateral commitments, and “left numerous multilateral organisations, including the WHO and Unesco, as they do not work for the American people,” Lewin noted. “The Global Fund is a critical partner in advancing our America First strategy. It has long advanced the key tenets of our approach, investing much of its resources in scaled procurement of health commodities,” said Lewin.**

TGH – The United States Maintains Its Global Fund Commitment

P Yadav et al; <https://www.thinkglobalhealth.org/article/the-united-states-maintains-its-global-fund-commitment>

“The \$4.6 billion pledge shows the willingness of the United States to support multilateral agencies that meet certain criteria.” “... The \$4.6 billion pledge signals a willingness from the United States to support multilateral efforts that align with certain criteria of the America First Global Health Strategy....”

PS: **“In line with these priorities, the Global Fund’s procurement system will need to prioritize innovative private-sector health technology at a larger scale and ensure that companies generating innovations in health technologies are receiving incentives to stay in the market, rather than allow the market to be left largely for companies producing generic drugs.....”**

Also assessing the other pledges.

Including: “Another notable pledge came from South Africa, cohost of the replenishment conference, whose \$26 million nearly triples its three-cycle average for contributions. ...”

GFO – The Global Fund’s 8th Replenishment: A Missed Opportunity

<https://aidspace.org/Blog/view/32581>

Brilliant issue. **“This special issue of the GFO, dedicated to the Global Fund’s Eighth Replenishment, highlights the scale of the funding shortfall revealed in Johannesburg and shows how the weakening of international solidarity further exposes Africa. It also underscores the risks of a new “health austerity,” while pointing to opportunities to strengthen sovereignty, alignment with national systems, and local accountability. Finally, it calls for a rethinking of international cooperation to preserve both effectiveness and justice in the fight against the three diseases.”**

“... Johannesburg, therefore, was not a failure; it was a mirror. It reflected a world in transition, where the moral grammar of aid is being rewritten. The challenge now is not only to fill a financial gap but to restore coherence: to balance realism with solidarity, sovereignty with interdependence, and efficiency with justice.”

Below a bit more on **some of the reads in this GFO issue:**

- [The Global Fund raises US\\$11.34 billion in pledges at its 8th replenishment meeting: Between failure and hope](#)

“This article analyzes the Global Fund’s eighth replenishment, which fell short of its financial target. This shortfall is seen as a symptom of the weakening of international solidarity. The article demonstrates that the mobilized funds remain crucial, especially for Africa, which is at the epicenter of the three diseases. While highlighting the concrete risks of underfunding for HIV, tuberculosis, and malaria programs, the article also identifies opportunities to leverage underfunding for strategic reorientation, such as protecting essential functions, strengthening national systems, and empowering African actors.”

“...the financial result - \$11.34 billion so far confronts the Fund with a harsh arithmetic reality: even considering continued fundraising efforts and subsequent contributions, it will be impossible for it to finance all the priorities it deems essential. The 6th, 7th, and 8th replenishment phases thus tell a simple story: ambition remains high on paper, but the political capacity to finance it is eroding.”

“This erosion is part of a broader restructuring of official development assistance.... ... Added to this is a gradual shift in political priorities. Health security, pandemic preparedness, the fight against climate change, and, more recently, energy and military security are absorbing an increasing share of attention and budgets. The Global Fund is not excluded from these new frameworks, in fact, it is increasingly positioning itself explicitly as an actor in global health security and the strengthening of health systems - but it must now demonstrate its relevance in an environment saturated with competing demands. The 8th reconstruction shows that this argument still works to some extent, but with more difficulty than before.”

“The main lesson from the eighth replenishment is twofold. First, the \$11.34 billion result confirms that the era of continuous expansion of multilateral funding for HIV, tuberculosis, and malaria has ended. International solidarity, as it was known during the era of major HIV initiatives, is under strain. Second, **this amount, which exceeds \$10 billion over three years when additional contributions and expected supplementary funding from major absentees are included, shows that a solid base of partners refuses to abandon these three diseases.....”**

Three main trends emerge for Africa: **“Protecting the essentials: Anchoring Financing in National Systems... Building Broader Political Coalitions Around the Fund....”**

- [Global Fund’s Eighth Replenishment: A Funding Chasm](#)

“The silence of several historic donors in Johannesburg is also political. France, Japan and the European Commission have all played structuring roles in the global health architecture of the past two decades. Their failure to put numbers on the table at the very moment the Global Fund is sounding the alarm sends an **ambiguous signal: symbolic support to multilateralism, but clear reluctance to fund it at the level needed.** Moreover, according to an [internal document revealed by Euractiv](#), the European Commission is considering ending its financial support to the Gavi Alliance and the Global Fund by 2030.....”

“Africa on the front line, but not in the cockpit The parameters that will determine country allocations for 2027–2029 will be set by a Board still largely dominated by traditional donors. Decisions on how to manage the shortfall – which countries see their envelopes reduced, which programme areas are deemed “less essential”, which innovations will have to wait – will be taken more in Geneva, Washington, London, Brussels or Tokyo than in Abidjan, Kinshasa or Maputo.....”

- [The cracked pact of international aid and its consequences for global health](#)

“This article analyzes the creation of a veritable "health austerity" in Africa, with the continent at its epicenter, due to the rapid decline in international aid, particularly in health, combined with the budgetary under-prioritization of health by many African governments. **The article shows that the Global Fund is at the heart of this crisis, caught between donor disengagement and the failure to honor domestic commitments, such as the Abuja Budgets and the promises made during the seventh replenishment.** The article **argues for a two-pronged approach:** wealthy countries must fulfill their commitments, and African states must finally assume their share of responsibility by adequately funding health.”

“At this pivotal moment, the Global Fund community - including donors, recipient countries, civil society, and the secretariat - has a unique role to play. Through its equal governance, strong African roots, and ability to demonstrate impact, the **partnership has the rare credibility to argue that health is an investment in global stability and prosperity, not an adjustment item. However, this requires clearly naming what is happening: global health austerity.** The poorest populations in Africa are the first victims of this austerity.”

“Rejecting this austerity does not mean denying the reality of budgetary constraints; rather, it means challenging the political choices that underpin it. By 2025, the architecture of global health, particularly the Global Fund, will reach a crossroads. We must either accept that the fight against HIV, tuberculosis, and malaria will become increasingly narrow, reserved for a few countries and a few "priority" interventions, or reaffirm that health solidarity remains a pillar of the international order with appropriate instruments and renewed alliances. This debate, rather than the amount of

pledges announced at replenishment conferences, will determine **whether we look back on 2025 as the year we allowed austerity to take hold or the year we chose to fight it.**"

- PS: this GFO issue also has an **analysis of the new US Global Health Strategy**
<https://aidspan.org/Blog/view/32575>

Lancet World Report - Amid massive cuts, Global Fund raises \$11 billion

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02419-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02419-5/fulltext)

"With more big pledges expected in the coming months, the result of The Global Fund's eighth replenishment allayed the worst fears. Ann Danaiya Usher reports."

Some excerpts:

"... According to terms set by the US Congress, US funding for The Global Fund cannot exceed a third of total contributions from all donors. This 2:1 matching set-up implies that other donors will have to provide \$9.2 billion to trigger the full US pledge. In that case, The Global Fund would reach \$13.8 billion for 2026–28. But donors other than the USA have so far pledged just \$6.7 billion...."

"... "The US announcement did come as a positive surprise, but there are many questions around what actual amount the United States ends up disbursing, and how much comes in from other major donors like France, the European Union, and Japan", said Janeen Madan Keller at the Center for Global Development in Washington, DC (USA). Fundraising efforts for the next period are compounded by the fact that The Global Fund is still chasing billions of dollars that were pledged back in 2022 but have not yet materialised. Although \$15.8 billion was formally pledged to the seventh replenishment, the total received as of Nov 14, 2025, amounted to less than \$11.7 billion. Securing this money is crucial because The Global Fund promises funding to countries based on donor pledges. Indeed, earlier this year, The [Global Fund reportedly had to cut \\$1.4 billion from grants](#) it had already awarded."

M Kavanagh: "If you look at the way replenishments work, it is all about peer pressure, building a politics of consensus to back certain organisations", he said. "Certainly, France and Japan did not expect the United States to come in in this bold way. That might partly explain why they didn't pledge. Now, the chances of decent-sized pledges have gone way up because, who wants to be outdone by Donald Trump?""

Also with the view of Antoine de Bengy Puyvallée who compares with WHO's Investment Round: "... Of a target of \$7.1 billion, WHO received donor commitments amounting to just \$1.65 billion. Over the past year, the total has risen to \$1.97 billion. "WHO does not have anywhere close to the support system that Gavi and The Global Fund have", he said...."

Lancet Editorial - The Global Fund and the future of global health

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02421-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02421-3/fulltext)

The Lancet also comes back on the Global Fund Replenishment, assessing also what this might imply for the future of Global Health, pointing to both trends in the North and in Africa.

“... the decision not to fully support the Global Fund—the most successful multilateral health programme in history—risks the health of millions and prompts serious questions for the organisation....”

The Editorial concludes on a positive note: **“...Change is coming, and although it has been driven at least partly by adverse circumstances, it also affords huge opportunities: to create more equitable and effective institutions, to redistribute power, and to reimagine what global health should look like in the post-SDG era.”**

G20 summit in South-Africa (22-23 Nov)

With some **coverage, analysis, some reactions** (including from a **global health angle**), a **look ahead to the next G20 host** (US) and more.

- **Leaders Declaration:** <https://dirco.gov.za/g20-south-africa-summit-leaders-declaration-22-and-23-november-2025/> More or less mentioning the expected on global health causes (such as PPPR, UHC, etc)

Some analysis of the Leaders declaration via IISD: [G20 Leaders Push Solidarity, Equality, Sustainability for Inclusive Growth](#)

Devex - G20 summit in South Africa adopts declaration without the US

<https://www.devex.com/news/g20-summit-in-south-africa-adopts-declaration-without-the-us-111425>

Recommended **overall analysis**. “Despite U.S. boycotts and geopolitical strain, **South Africa secures a hard-won G20 consensus — though many describe the commitments as “holding the line” as opposed to driving real change.**”

“On the first day of the G20 leaders’ summit, delegates adopted a declaration with “overwhelming consensus” on debt reform, climate change, and inequality — even as the United States, which was absent from the gathering, warned countries against doing so....”

““This is a victory for the diplomatic process, but doesn’t really move the needle on policy substance,” said Gilad Isaacs, the executive director of the Institute for Economic Justice, a progressive think tank based in South Africa. **“But some might argue that holding the line in this current geopolitical environment is an achievement in itself.”...**”

“....More than anything, Isaacs continued, **South Africa’s presidency shone a spotlight on issues that matter to the African continent.** That meant calling for peace in Sudan, the Democratic Republic of Congo, the Palestinian territories, and Ukraine — in that order — and including four pages on the need to invest in disaster response, mitigation and adaptation, and respond to the “urgency and seriousness” of climate change. The [declaration](#) also included inequality, rising debt burdens, and Africa’s steep cost of capital, which refers to the interest rates countries face when trying to borrow cash. **With the declaration elevating those issues, Isaacs said, G20 member countries now have greater ability to push them forward....”**

- Via [Devex](#): “.... At the top of the G20 agenda were debt and the cost of capital. At the G20 leaders’ summit last weekend, **heads of state largely stuck to existing commitments on debt**: They **reaffirmed support for the G20 Common Framework on debt treatments and failed to take up any of the major reforms provided by a [G20-commissioned expert panel](#) earlier this month**, including a new refinancing initiative that provides low-cost loans that would allow countries to repurchase foreign currency debt which is trading at a discount on the secondary markets.... **“We had four consecutive global south presidencies, but the outcome is rather disappointing,”** says Bodo Ellmers, the managing director of the [Global Policy Forum Europe](#). **“One had hoped that this exceptional series would lead to tangible outcomes that elevate the role of the global south in global governance, but the revolution failed to materialize.”** **“Still, the G20 declaration acknowledged Africa’s rising debt pressures and high borrowing costs** — and many countries from across the world took note. Throughout the year, South Africa raised the continent’s cost of capital issue, and hammered the fact that the credit ratings of African nations are often weighted with perceived risk. **The bloc also launched the Africa Engagement Framework**, a new initiative meant to anchor G20-Africa cooperation with African financial issues. South Africa committed to backing the initiative until 2030.... “
- And via [Al Jazeera: G20 fails to deliver on sovereign debt distress](#)

“.... despite repeated pledges – including in the leaders’ summit declaration to “strengthen the implementation of the G20 Common Framework” – **South Africa did not deliver any new proposals for easing fiscal constraints in indebted nations.** In March, South Africa convened an **expert panel** – headed by a former finance minister and a former Kenyan central banker – to explore how to assist heavily indebted low-income countries, particularly in Africa. In a report released earlier this month, the panel echoed many of the ideas put forward by the 165 charities that wrote to Ramaphosa in October, calling for measures like an IMF-backed special debt fund and the formation of a debtors’ club. **But the experts’ proposals “weren’t even acknowledged at the leaders’ summit”, Kevin Gallagher, director of Boston University’s Global Development Policy Center, told Al Jazeera.** He said that **the G20 presidency “failed to address the scale of the global debt problem”**. “Ultimately,” Gallagher added, **“South Africa was outmanoeuvred by larger, more economically important members of the G20 who saw little benefit to themselves in reforming the international financial architecture on debt.”**”

- Related: IPS - [The G20 has Failed on Debt. Time to Look to the UN](#) (by T J Yungong (Afrodad) et al)

UNAIDS Executive Director Winnie Byanyima, speaking at G20 Summit, welcomes Leaders’ Declaration

https://www.unaids.org/en/resources/presscentre/pressreleaseandstatementarchive/2025/november/20251122_g20

“The declaration includes a call to action from the G20 on what it labels “deepening inequality” and calls for greater action to improve the world’s future health security and address today’s pandemics like AIDS. G20 leaders highlighted the constrained “fiscal space” for low- and middle-income countries and called for comprehensive and coordinated action on debt vulnerabilities as well as for increased sustainable financing for health and tackling disease, through domestic

revenue and through the Global Fund to Fight AIDS, TB, and Malaria. They **highlighted the opportunity to increase access to medicines through the WHO Pandemic Agreement**. The declaration also reaffirms the centrality of the United Nations in achieving these goals. “

HPW - A Turning Point: Lusaka Agenda is Anchored in the G20 Declaration

S Haheim (Norway's State Secretary for International Development) et al; <https://healthpolicy-watch.news/a-turning-point-lusaka-agenda-is-anchored-in-the-g20-declaration/>

*“For the first time, the **G20 Leaders’ Declaration** explicitly references the **Lusaka Agenda** – a significant milestone for developing countries that have long called for a fairer global health architecture. This acknowledgement gives political weight to an agenda that places integrated health systems, universal health coverage, and national leadership at the center of global health reform. But a reference alone is not enough. Commitments must translate into action....”*

PS: “... South Africa, through its G20 Presidency under the theme “Solidarity, Equality, Sustainability”, has elevated priorities that matter: universal health coverage, primary health care, and non-communicable diseases. ...”

“Norway, as a G20 guest country this year, stands firmly alongside South Africa in these efforts. Both nations share a commitment to sexual and reproductive health and rights (SRHR), a cornerstone of equity and resilience. Together, we champion integrated health systems that protect the most vulnerable and deliver care for all. South Africa’s leadership also extends to health sovereignty. The Johannesburg Process – supported by Norway, the World Health Organization (WHO), Gavi, and others – is strengthening local production of vaccines and medicines, including the mRNA technology transfer hub in Cape Town.”

Global Policy - The South Africa G20 signals Global Diplomatic Rebalancing amid Trump/US Disruption, Absenteeism, and Erraticism

A Cooper; <https://www.globalpolicyjournal.com/blog/24/11/2025/south-africa-g20-signals-global-diplomatic-rebalancing-amid-trumpus-disruption>

“US President Trump has cast a profound if distant shadow on the South African G20. Diplomatically, the Trump/US approach has exhibited a mix of disruption, absenteeism, and erraticism. A combination that instead of imposing a dominant influence over the summit, ended up exposing the limitations of this type of negative, disengaged and disconnected approach. ...

- And another analysis by the same author, focusing more on the G20 Social summit: [South Africa pushes back against the Mood of Pessimism at the G20 Social Summit](#)
- [The Conversation - South Africa’s G20 presidency: diplomatic victory, but a weak final declaration](#) (by D Bradlow)

Devex – What does the United States’ G20 presidency mean for the world?

<https://www.devex.com/news/what-does-the-united-states-g20-presidency-mean-for-the-world-111428>

“The end of South Africa’s G20 term ushers in a new U.S. presidency — one with almost all priorities that feel nearly opposite to those in recent years.”

“Under South Africa, that was solidarity, equality, and sustainability; under the United States, the G20 will focus on growth, deregulation, and energy. South Africa also expanded the pool of nations and organizations engaging in the G20 process, while the U.S. is expected to shrink it. And South Africa focused on the needs of its home continent, while the U.S. is led by a leader who has made “America First” the cornerstone of his agenda....”

“...Analysts expect the hot topics of America’s culture war — namely, gender and climate — to be stripped from the G20 process, though the State Department and U.S. Treasury did not respond to a request for comment in time for publication..... While energy is expected to be a main priority of the U.S. G20 presidency, it’s positioned more as an all-encompassing approach, in contrast with the sustainable lens taken by both South Africa and last year’s G20 president, Brazil. The U.S. is also expected to shift the G20’s focus from the global south, something the last four G20 presidents — South Africa, Brazil, India, and Indonesia — centered their engagement on.”

“...For Bessent, the tax cuts allow the country to “unleash the full potential of the U.S. economy,” and encourage businesses to invest in America again. But the moves go against calls for more progressive taxation from the last several G20 presidencies, all of which have been from the global south. “It’s clear that the G20 next year will not be a G20 where the consensus will help in progressing this agenda,” said Susana Ruiz, Oxfam International’s global tax justice lead....”

PS: “While the U.S. has not released its plan for the G20 just yet, several are taking hints from Bessent’s remarks at October’s annual World Bank meetings and the Treasury’s engagement with international financial institutions throughout the year. A critical piece of that, explained Eric LeCompte, head of the debt reform organization Jubilee USA Network, is that Bessent has continued the call for debt relief processes to be more timely and efficient....”

Reuters - South Africa's G20 debt focus to be tested as US takes the chair

[Reuters:](#)

Re the future on the debt issue. “US presidency to test G20's debt relief ambitions; Debt across emerging economies hits record high; G20's Common Framework shows limited progress on debt relief.”

“The G20's leadership is heading away from the Global South just as debt problems in poorer countries threaten to flare again, testing whether the group's ambitions on debt relief will translate into action under a United States presidency. South Africa on Sunday handed the G20 presidency over to the United States, completing a run of four major emerging economies, including Indonesia, India and Brazil, steering the group, years in which debt sustainability across developing nations became an increasingly prominent priority.....”

And some other G20 news snippets:

- [Guardian – South Africa declares gender-based violence a national disaster amid G20 protests](#)

“Women’s groups welcomed the announcement on the eve of the international leaders’ summit in Johannesburg.”

- [Rockefeller Foundation -NEW POLL: G20 Countries Agree on the Importance of Humanitarian and International Development Issues and Preventing War and Conflict](#)

“Those surveyed in G20 countries also agree that their country should cooperate on global challenges even if it requires compromising on some national interests, according to a new Rockefeller Foundation and Focaldata study. Strong pluralities of G20 respondents believe international organizations should take the lead on development and humanitarian-focused issues.”

“Ahead of the 2025 G20 Summit taking place this weekend in Johannesburg, South Africa, The Rockefeller Foundation released the results of its latest study, *A Mandate for International Cooperation: G20 Popular Opinion on Global Action*. ...” Check out the other findings.

- The Globe & Mail - [No more feminist foreign policy, Carney says](#) In Canada, that is.

[ODI \(Expert Comment \) What next for the G20? Prospects for transition finance under future presidencies](#) (by A Gilmore et al)

- Via [Devex](#): “The heads of Brazil, South Africa, Spain, and the African and European unions backed a **new proposal to create an international panel on inequality**, one that would synthesize data on the topic and provide policy analysis to governments.
- [The Global Public Investment Network and Club de Madrid welcome the South Africa-led Ubuntu Commission on global public challenges and on global public investments](#)

“The Global Public Investment Network (GPIN) and Club de Madrid have welcomed the announcement of the South Africa-led Ubuntu Commission. The G20 Leaders’ Declaration announced the Ubuntu Commission, that will “encourage research and informed dialogue [on global public challenges and on global public investments](#).”

PS: “.... In a **key complementary process, the Global Public Investment Network has announced how a growing group of governments and international institutions are coming together to plan the implementation of this new financing approach, working to ensure its realisation within this decade.** One of the **champion governments, Uruguay**, has described the initiation of this work in a **recent op-ed** which set out how global public investment “has the potential to recalibrate international cooperation, steering the world away from entrenched and inequitable power dynamics, toward truly collective international cooperation.”

- [NYT - Trump Says South Africa Is Not Invited to G20 Summit in U.S. in 2026](#)

AU-EU Summit in Angola (24-25 Nov)

In Luanda, **the 54 leaders of the African Union and the 27 heads of state of the European Union held a meeting** focused on the theme: **“Promoting peace and prosperity through effective multilateralism”**.

[Joint Declaration 7 th African Union \(AU\) – European Union \(EU\) Summit](#)

Ps: item 19 re global health.

Some of the main results: <https://www.consilium.europa.eu/en/meetings/international-summit/2025/11/24-25/>

At the summit, leaders discussed how to strengthen cooperation: towards a prosperous and sustainable future; in the areas of peace, security and governance; in multilateral for a; as regards migration and mobility.

“According to the summit's joint declaration, both sides stressed support for multilateralism, the peaceful settlement of conflicts, and stronger cooperation in areas such as counterterrorism, climate adaptation, green energy, digital transformation, agriculture, and health systems. They also pledged to boost investment, support Africa's industrialization, enhance regional integration, and adopt a balanced approach to migration that expands legal pathways while addressing irregular flows...”

PS: Leaders welcomed the significant progress on the **implementation of the Global Gateway Africa-Europe investment package, worth €150 billion.**

Reuters - African Union chair calls for fairer debt restructuring tools at summit with EU

[Reuters:](#)

“Angolan President Joao Lourenco, current chair of the African Union, on Monday called for fairer debt restructuring tools and innovative financing instruments to support Africa's development. Lourenco's comments, delivered to African and European Union leaders assembled in Angola's capital, come as a growing number of African countries are at risk of debt distress....”

“.... The Group of 20's Common Framework, set up during the COVID pandemic to speed up debt restructuring for poorer nations, has made limited progress, though last weekend's G20 summit in South Africa committed to improving it....”

Euractiv - EU, Africa leaders to talk trade and minerals, as Ukraine looms large

<https://www.euractiv.com/news/eu-africa-leaders-to-talk-trade-and-minerals-as-ukraine-looms-large/>

“Talks with African nations [will] centre on trade, migration and critical raw materials.”

The Luanda summit: reaffirms ties rather than make waves

Kathleen van Hove (Senior Policy Officer, Partnership Development and AU-EU coordinator); <https://www.linkedin.com/pulse/luanda-summit-reaffirms-ties-rather-than-make-waves-kathleen-van-hove-tcefe/>

Excerpt: “.... This summit basically reaffirmed the [outcome of the G20](#), in terms of reform of the global institutions and multilateralism and of the international financial architecture, empowering the Global South as well as the importance of climate action and finance....”

“A comparison with the 2022 declaration shows a **markedly stronger emphasis on the need to “reset the multilateral system.”** This renewed priority reflects the global instability generated by recent actions of the U.S. President. Highlighting co-investment and backing the AfCFTA marks a shift away from a traditional aid-driven approach. There was **a more pronounced emphasis on critical minerals and industrial sovereignty**, which aligns with both Africa’s desire to move up the value chain and Europe’s need to secure green transition inputs. **Peace and security remains a key topic of shared concern, but with an added focus on hybrid threats, cyber, digital, disinformation and a stronger call for joint decision-making in peace process financing.** The declaration touched on each of the **four pillars of the partnership ‘people, planet, peace and prosperity’**. “

Related links:

- (7 Nov): Africa CDC - [Africa and Europe strengthen the AU-EU health partnership](#) (re the preparatory meeting in Pretoria)
- (March 2024) – Briefing European parliament: [African Union–European Union cooperation on health](#)

Global Health & Development Reimagining

Global Policy – What will the Global Development Architecture look like in 2030? And What can the EU and UK do to Influence It?

Andy Sumner and Stephan Klingebiel;

<https://www.globalpolicyjournal.com/blog/27/11/2025/what-will-global-development-architecture-look-2030-and-what-can-eu-and-uk-do>

“Picture the year 2030. US President JD Vance is in the White House, AI has reshaped labour markets, and climate shocks are harder to ignore. **In that setting, what sort of global development system will exist?** That question is already on the desks of G7 development ministers and also the G20, who are debating how the development “architecture” should be reorganised. ***In a new Policy Brief, we map in detail the competing political visions that are visible in 2025 and could dominate by 2030. ..***

“So what are the visions for the global development architecture in 2030 that we see?

“One is ‘**Aid Retrenchment with Nationalist Conditionality**’. Assistance is folded into foreign, trade, and interior policy. Grants shrink, multilateral agencies are sidelined, and cooperation becomes bilateral deals tied to migration control, geopolitical alignment, or access to minerals. Rights, gender, and climate justice recede.

A second world is ‘**Strategic Multilateralism**’. The multilateral development banks stay central, but their remit narrows to macro-stability, crisis response, and “risk containment”. Concessional finance is rationed to countries seen as fragile or geostrategic. Aid rhetoric turns technocratic and securitised and health framed as biosecurity.

A third vision is **'Pluralist Development Cooperation'**. There is no single system, but many partially overlapping regimes: Chinese, Indian, Gulf, regional, and club initiatives. Low and middle income countries gain bargaining space by choosing across offers. The trade-off is fragmentation. Rules on debt workouts, safeguards, and transparency diverge, and global public goods struggle for predictable funding.

Finally, a fourth vision is **'Global Solidarity 2.0'**. Development cooperation is rebuilt around shared risks such as climate stability, pandemics, antimicrobial resistance, and debt contagion. North and South co-lead a pooled Global Public Goods Facility. Contributions reflect income and carbon profile, and access reflects exposure to cross-border risk. The donor-recipient binary fades, even if frictions persist. "

- And a link: **WHO - [WHO, UN80 & the Global Health Architecture](#)** (Member state information session, 20 Nov)

More on Global Health Governance & Financing

Lately, this has turned more into a Global health governance/Global Governance for Health & Global Health Financing & Funding section :)

Africa CDC Unveils a New Vision for Health Security and Sovereignty Across the Continent

<https://africacdc.org/news-item/africa-cdc-unveils-a-new-vision-for-health-security-and-sovereignty-across-the-continent/>

(see also last week's **viewpoint** by Jean Kaseya in the Lancet)

"The Africa Centres for Disease Control and Prevention (Africa CDC) today unveiled a renewed vision for Africa's Health Security and Sovereignty (AHSS) Agenda to safeguard the continent against rising health threats while reducing dependency on external systems, manufacturing, procurement, supply chains, and financing...."

"The AHSS Agenda builds on the foundations of the New Public Health Order (NPHO), endorsed by African Heads of State in 2022. While the NPHO drove major progress in institution building, workforce development, and regional collaboration following COVID-19, **Africa now faces a more complex and constrained global health landscape...."**

"External health aid to the continent has dropped by nearly 70% since 2021, even as disease outbreaks increased by more than 40% between 2022 and 2024. **Climate shocks, shifting geopolitical priorities, fragile supply chains, and persistent inequalities** continue to place African health systems at risk...."

"... At the heart of the agenda is a shift towards a more equitable global health architecture, one in which Africa holds decision-making power proportional to its needs and contributions...."

With **5 interconnected pillars**.

PS: **"Africa's Health Security and Sovereignty (AHSS) Agenda reinforces the message championed by the New Public Health Order (NPHO) while adding two previously missing, critical components: a robust digital transformation agenda and reform of the global health architecture.**

Devex – Will African nations lose their leverage in an 'America first' health plan?

<https://www.devex.com/news/will-african-nations-lose-their-leverage-in-an-america-first-health-plan-111396>

"Public health experts expressed concern that African governments are losing their collective bargaining power with the 'America First' approach to global health."

"...The African continent has been working through the African Union to approach the global community as a bloc. While countries may not have much leverage on their own, they can benefit from the aggregate power of 55 countries. Examples of this include the African Continental Free Trade Area, African Medicines Agency, pooled procurement of medical supplies, and negotiations through the [World Health Organization](#) on the global pandemic agreement. But bilateral agreements with the U.S. move the continent away from this model, experts told Devex last week in Nairobi at the Africa Health and Development Annual Research Symposium....."

Quote: **".... Dr. Seye Abimbola, associate professor of health systems at the [University of Sydney](#), said at least it's "gratifying" to see these levels of blunt honesty. "It is far more honest than anything the U.S. government has said about global health ever," he said. "There's something reassuring about that — we know the game we are in now. It's a different thing from the charity case." And knowing where the U.S. stands may help African countries in negotiations, he said. "Your hand is stronger when you know what the terms of the deal are, unlike when it is under the table," Abimbola said. "On the other hand, I am also deeply aware of how strong the hand of the United States government is in that deal — and that is the part that bothers me.""**

PS: **"Yap Boum, deputy incident manager at Africa CDC, said during a press briefing on Thursday that his agency has engaged with countries before their meetings with the U.S. There will be another meeting to touch base with countries on these negotiations to determine how to move forward as a continent to ensure they get the best deals, he added. Africa CDC Director-General Dr. Jean Kaseya recently [called upon ministers](#) to share information on their ongoing negotiations with the U.S....."**

AVAC – US Global Health Strategy Negotiations Leaving Communities Behind

<https://mailchi.mp/avac/global-health-watch-april18-2107597?e=f66302bb8e>

"African advocacy partners including Eastern Africa National Networks of AIDS and Health Service Organizations (EANNASO) and the Coalition to build Momentum, Power, Activism, Strategy & Solidarity in Africa (COMPASS) have been taking stock of the ongoing country negotiations around the US government's Memorandums of Understanding (MoUs) as part of its new "America First" global health strategy. They are finding that communities are being systematically excluded from the "government-to-government" negotiations for new 5-year PEPFAR MoUs, a direct reversal of the community engagement that has defined decades of the HIV response. Efforts to ensure program effectiveness, implementer accountability, programs for key populations, and commodity security are all at stake. ... With an MoU signing deadline of December 12, there is a great need to mobilize to demand transparency, inclusion and fair terms for all parties. ..."

Africa CDC hails Nigeria's health reform model

<https://guardian.ng/features/health/africa-cdc-hails-nigerias-health-reform-model/>

“At the 2025 Joint Annual Review, DG Jean Kaseya praised Nigeria’s leadership in integrated health financing, UHC, and local production.”

“Africa CDC has praised the ongoing reforms in Nigeria’s health sector and emphasised that Nigeria will be among the few pilot countries for integrated health financing under the G20 partnership, signalling the nation’s increasing role as a continental health leader. The Director General of Africa CDC, Dr. [Jean Kaseya](#), who stated this at the 2025 Joint Annual Review of the Health Sector in Abuja, themed “All hands, one mission: Bringing Nigeria’s health sector to light,” observed that **the country’s healthcare reform model is a practical pathway to strengthening healthcare systems across the continent.....”**

Lancet World Report – Aid cuts: Tanzania looks to boost domestic financing

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02420-1/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02420-1/fulltext)

“Following a large drop in international aid, and the harms that followed, Tanzania is taking steps to decrease its reliance on external funding for health. Syriacus Buguzi reports from Dar es Salaam.”

Tanzania “now aims to generate additional revenue from taxpayers, totalling US\$225 million—about half of its 2024–25 health-care budget—to make up for declining donor funding for HIV and other health initiatives. Tanzania's move epitomises a broader global trend where developing nations are seeking greater self-reliance as international priorities shift. Inspired by the “trade, not aid” model, countries including Rwanda and Ethiopia have already made strides in domestic health financing, reducing dependency on external aid and minimising vulnerability to geopolitical changes.....”

“In June, in response to significant cuts in aid from the US Agency for International Development (USAID), Tanzania's then Minister of Finance, Mwigulu Nchemba, announced a raft of measures including new taxes and levies to raise additional revenue for health care. This includes increased excise duties on alcoholic beverages and electronic communication services, and new levies on fuel, minerals, imported vehicles, sports betting, land-based casinos, and train and air transportation tickets. [The Ministry of Finance](#) said that 30% of the revenue from the taxes and levies go to the Universal Health Fund, established to help finance Tanzania's push towards universal health coverage. The other 70% of the revenue would be allocated to the AIDS Trust Fund—an initiative established by Parliament in 2001 to increase domestic funding for the country's HIV/AIDS response...”

“...Tanzania has also announced it is reviving the Tanzania Pharmaceutical Industries. Originally government-owned, but now a public–private partnership, it is expected to help revive the manufacture of generic medicines such as antiretroviral drugs...”

Plos Med - From dependence to self-reliance: The future of the global tuberculosis response

Petra Heitkamp, M Pai et al;

<https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1004824>

“Just as tuberculosis services were recovering after the COVID-19 pandemic disruptions, abrupt funding cuts by G7 nations are putting progress at risk. **These trends, while perilous, also reveal a turning point toward a more equitable, resilient, and self-reliant TB response, led by high-burden countries.**”

Economist – The changing shape of Chinese aid to Africa

<https://www.economist.com/middle-east-and-africa/2025/11/27/the-changing-shape-of-chinese-aid-to-africa>

“As Western countries cut support, **China is unlikely to fill the gap.**” “...**China’s health aid is carefully targeted at countries where it seeks commercial or strategic rewards.....**”

Among others, focusing on Zambia in this article.

IISD - Tax Cooperation Treaty Talks Discuss Commitments, Tax Disputes

<https://sdg.iisd.org/news/tax-cooperation-treaty-talks-discuss-commitments-tax-disputes/>

“Initial discussions took place on illicit financial flows, tax evasion, and tax avoidance, as well as on taxing high-net-worth individuals, among other issues. The INC also **opened discussions on capacity building and technical assistance**, with many delegates calling for country-driven needs assessments.”

PS: “Intersessional work will continue in advance of the INC’s next meeting in February 2026. **INC-3 convened in Nairobi, Kenya, from 10-19 November 2025.**”

Global Policy (Briefing) - UN negotiations caught between corporate lobby and the struggle for global justice

<https://www.globalpolicy.org/en/publication/un-negotiations-caught-between-corporate-lobby-and-struggle-global-justice>

“**Report on the eleventh session of the intergovernmental working group on transnational corporations and other business enterprises with respect to human rights (“UN Treaty”).**”

“From **October 20–24, 2025**, 63 states came together at the United Nations (UN) Human Rights Council to negotiate an international, legally binding instrument to regulate the activities of transnational corporations and other business enterprises (also known as the “UN Treaty”)....” **State of affairs.**

Globalization & Health- The landscape of public-private partnerships in global health governance: introducing a new dataset

L Shipton; <https://globalizationandhealth.biomedcentral.com/articles/10.1186/s12992-025-01162-z>

“This article analyzes a new dataset of 73 global health public-private partnerships governed by a total of 630 actors. These analyses offer three high-level insights. First, high-income country representatives hold 69% of seats on partnership governing boards. Thus, while public-private partnerships have expanded the types of actors that can participate in governance, there remain significant disparities in access to decision-making based on country income-level. Second, a typology of public-private partnerships based on the composition of decision-makers on governing boards is presented. The typology includes Business, Civil Society, Trio, and Super public-private partnerships, of which Trio and Civil Society partnerships are the most common. Third, as public-private partnerships themselves hold governing seats in 24 partnerships, this article lends support to the idea that some partnerships are gaining agency and autonomy in global health through inter-partnership cooperation. Additional analyses shed light on the timeline of the rise of public-private partnerships and a range of characteristics, including their headquarter location, function, health issues addressed, and legal status.”

Concluding: **“Together, the analyses suggest that moving from multilateral governance through international organizations like the World Health Organization, to multistakeholder governance through public-private partnerships has contributed to a decrease in decision-making influence for low and middle-income countries and an increase for high-income countries. ”**

Global Health 50/50 - Groundbreaking new analysis shows gender pay gaps are smaller under women’s leadership

<https://global5050.org/closing-the-gap/>

“This report presents evidence on gender pay gaps across 45 (UK-based) organisations active in global health. We show that over the past eight years organisations in the global health sector led by women CEOs have smaller median gender pay gaps on average than organisations led by men. These findings suggest that organisations with women leaders may be more likely to have processes in place to address structural pay inequalities....”

“The analysis draws on data from the United Kingdom (UK), where employers with 250 or more staff have been legally required since 2017 to publish annual gender pay gap figures.”

Some findings: **“Organisations led by women CEOs have average gender pay gaps that are 4.3 percentage points smaller than those led by men. And when women have been in the top role for five of the past eight years, organisations are predicted to close their gaps four years earlier.”**

- Related [BMJ Opinion – Where women lead, equality follows](#) (by Helen Clark, K Buse et al)

“Countries can learn from the UK’s success with mandatory gender pay gap reporting and accountability, write Helen Clark and colleagues.”

PPPR

Update on PABS via the [Resilience Action Playbook](#):

“Intergovernmental Working Group pivot moment. Next week, WHO Member States return to Geneva for the fourth meeting of the Intergovernmental Working Group ([IGWG 4](#)). The week-long session (1-5 Dec.) will resume negotiations on the Bureau’s [draft Pathogen Access and Benefits Sharing \(PABS\) Annex text](#). Yet, expectations for breakthroughs remain modest, given the limited opportunities for informal dialogue since the last session three weeks ago. **This week, the Bureau held two informal sessions in which Member States, experts, and relevant stakeholders discussed PABS contracts (24 Nov.) and databases and laboratory networks (25 Nov.) – areas marked by significant divergences. ...”**

Elders warn against bilateral pandemic deals that could impact multilateral cooperation

<https://theelders.org/news/elders-warn-against-bilateral-pandemic-deals-could-impact-multilateral-cooperation>

“The Elders caution that bilateral agreements giving access to pathogen data could fragment multilateral arrangements for pandemic preparedness and response, which are needed to keep all people safe from future threats.....”

PS: “The Elders **support the objectives of the Accra Reset**, which **encourage countries to assert health sovereignty**. Bilateral agreements that do not pair pathogen access with benefit-sharing would be unlikely to advance that goal....”

Geneva Health Files - Is There a Third Way? Lessons for PABS from Parallel Treaty Contexts [Guest Essay]

[Geneva Health Files](#);

Timely and comprehensive **guest essay on the lessons for PABS from the recent negotiations on the Biodiversity Beyond National Jurisdiction (BBNJ) Agreement**.

“Siva Thambisetty, a scholar from the London School of Economics has worked with several delegations in shaping key features of the BBNJ agreement. In today’s edition, she has painstakingly drawn out suggestions, and cautions against pitfalls that could play out in the PABS talks - based on her first hand experience at BBNJ.”

Siva offers **“six ways to rethink some of the more difficult aspects of these negotiations. The third way is an integrated system beyond the so-called open and closed systems**, based on recognition of the link between materials and sequences, the purpose of origin information, salience of form and function of identifiers, levels of data access, the vulnerability of a closed system, the role of public databases and the thorny question of intellectual property....”

Pandemic Fund - Announcement: 3rd Call for Proposals

<https://www.thepandemicfund.org/news/announcement/announcement-3rd-call-proposals>

“At its meeting in Kigali, Rwanda on November 19, 2025, the Pandemic Fund Governing Board approved a further US\$500 million in grants under the 3rd Call for Proposals—supporting 32 low- and middle-income countries through 20 projects to strengthen pandemic prevention, preparedness, and response (PPR) capacities (see Table 1). Thanks to additional international co-financing and domestic co-investments, these grants will mobilize over US\$4 billion, underscoring the strong catalytic capabilities of the Pandemic Fund—the sole dedicated international instrument to prevent and prepare for pandemics....”

“Through just three Calls for Proposals since February 2023, the Pandemic Fund is set to mobilize a total of over US\$11 billion, reaching 98 countries across six regions. Detailed funding allocations under the 3rd Call for Proposals will be announced early in the new year once project arrangements are finalized....”

“The Board also endorsed a new methodology to identify countries with the highest risks and needs—so the Pandemic Fund can best fill capacity gaps in the most challenging contexts....”

Global Health Centre - New Database Policy Comparison for the Pathogen Access and Benefit-Sharing (#PABS) Annex to the WHO

https://docs.google.com/spreadsheets/d/1kKzugt582jGyNY_Rjsnwzl2xleXZIRNe/edit?gid=1287293218#gid=1287293218

Resource.

WTO - TRIPS Council explores technology transfer, pandemic preparedness, digital infrastructure

https://www.wto.org/english/news_e/news25_e/trip_10nov25_202_e.htm “

“At a meeting of the Council for Trade-Related Aspects of Intellectual Property Rights (TRIPS) on 10-11 November, WTO members had active discussions on key aspects of intellectual property (IP), including technology transfer, digital public infrastructure, and lessons learned from the COVID-19 pandemic. In the meeting, chaired by Emmanuelle Ivanov-Durand of France, members were also updated on notifications under various provisions of the TRIPS Agreement and continued talks on how to proceed on the review of implementation of the Agreement. ...”

AMR Awareness week (18-24 Nov)

See also the **extra AMR section**.

Telegraph - Fightback: scientists score series of wins in battle against superbugs

<https://www.telegraph.co.uk/global-health/science-and-disease/scientists-score-series-of-wins-in-battle-against-superbugs/>

“Recent scientific breakthroughs fuel **optimism that the pace of drug discovery is picking up again.**”

Run-up to World AIDS Day (1 Dec)

UNAIDS releases its 2025 World AIDS Day report: Overcoming disruption, transforming the AIDS response

<https://www.unaids.org/en/resources/presscentre/pressreleaseandstatementarchive/2025/november/wad-2025-report>

“**The 2025 funding crisis has thrown the AIDS response into turmoil with massive disruptions to HIV prevention and community led services, particularly for the most vulnerable.** However, the new report by UNAIDS shows evidence that **resilience, investment and innovation combined with global solidarity still offer a path to end AIDS.** ...”

PS: “**UNAIDS is working with more than 30 countries to accelerate national sustainability plans.** ...”

HPW – UNAIDS: Funding Cuts Pose ‘Perilous Risks’ for HIV Response

<https://healthpolicy-watch.news/unaids-funding-cuts-pose-perilous-risks-for-hiv-response/>

With **coverage & analysis of the new UNAIDS report.**

“**Abrupt funding cuts have resulted in “perilous risks” for the global HIV response that threaten the health and well-being of millions of people throughout the world,** according to the **2025 UNAIDS report** released on Tuesday. ... the report identifies **the most vulnerable areas as being HIV testing, prevention and care; data collection; community-led responses; services for “key populations” and human rights and gender equality.** “

PS: “**Increasing domestic financing for HIV is essential, but tricky for many countries in western and central Africa,** where public debt service is on average 5.5 times greater than public health allocations.... **However, UNAIDS estimates that it is feasible for the domestic share of HIV financing to rise from 52% in 2024 to two-thirds by 2030.** ... Twenty-six of the 61 countries reporting to UNAIDS stated they expect to increase their domestic public HIV budgets....”

“... **Meanwhile, an extraordinary session of the African Union Assembly is being convened in next month to secure support for the implementation of the African Union’s roadmap on “sustaining the AIDS response, ensuring systems strengthening and health security for the development of Africa”**”

“African leaders have also committed to strengthening local manufacturing of medical products, and the vaccine alliance, Gavi, has committed \$ 1.2 billion to the Africa Vaccine Manufacturing Accelerator initiative....”

“The report also introduces the new Global AIDS Strategy (2026–2031), to be adopted by the UNAIDS Programme Coordinating Board in December. The new strategy is “person-centred and has fewer focused targets”. It focusses on integrating HIV services into national programmes, reducing stigma, and securing sustainable financing....”

“... UNAIDS estimates that \$21.9 billion will be needed annually until 2030 to achieve global HIV targets in low- and middle-income countries....”

- See also [UN News – Global HIV response facing worst setback in decades, UNAIDS warns](#)

“The global response to HIV is facing its most serious setback in decades, UNAIDS warned on Tuesday, as abrupt funding cuts and a deteriorating human rights environment disrupt prevention and treatment services across dozens of countries.”

- And Devex - [HIV prevention services hit hardest by funding cuts, UNAIDS warns](#)

“The decline in HIV prevention services could lead to an additional 3.9 million new infections over the next five years, according to UNAIDS.”

With some more detail on **Winnie Byanyima’s press conference** at the launch of the report. (including on the rollout of Lenacapavir)

Quote: “... [Unitaid](#) and the [Gates Foundation](#) have announced deals in recent months that would bring the price of generic versions of lenacapavir to [\\$40 per year](#), the same price as daily oral PrEP. But **Byanyima said Gilead should license more companies, including in Africa and Latin America, to further bring down the price of the drug and ensure every region can produce it.** This, she said, could help drive down new infections fast and bring the world close to ending AIDS as a public health threat....”

And re China: “.... **China is also stepping up its support for countries. Last week, China [announced \\$3.49 million](#) to support HIV prevention in South Africa. Byanyima said China is engaging several other countries in similar agreements, including Zimbabwe, Lesotho, Uganda, Tanzania, and Cuba.**

“We encouraged and catalyzed this funding for a number of countries as additional support by China to developing countries, and we are providing technical support for the money to have its highest impact,” Byanyima said, adding that the countries China is supporting are those where it already has programs and “strong relationships.” That support, however, doesn’t include funding for the purchase of lenacapavir. “Lenacapavir is an American product, and the Chinese government will spend its money on products from Chinese companies. That has to be expected,” she said....”

NYT – Trump Administration Will No Longer Commemorate World AIDS Day

<https://www.nytimes.com/2025/11/26/health/trump-us-world-aids-day.html>

“The State Department warned employees not to use government funds for the occasion and to “refrain from publicly promoting World AIDS Day through any communication channels.” “

PS: **“....Employees and grantees may still “tout the work” being done through various programs “to counter this dangerous disease and other infectious diseases around the world,” the email said. And they may attend events related to the commemoration. But they should “refrain from publicly promoting World AIDS Day through any communication channels, including social media, media engagements, speeches or other public-facing messaging.”**

PS: **“World AIDS Day is when the State Department sends data to Congress from the President’s Emergency Fund for AIDS Relief, known as PEPFAR, which provides money for H.I.V. programs worldwide. The program’s budget was sharply cut back earlier this year, and the administration is reported to be planning to end it. It’s unclear whether the department still plans to send the data, as it is mandated to do, but on a different day. The department did not respond to questions about whether that was the case....”**

PS: **“The Trump administration has instructed employees and grantees not to use U.S. funds to commemorate World AIDS Day — because the observance was started by the World Health Organization.”**

Health Emergencies

Telegraph – Marburg outbreak worsens in Ethiopia as death toll rises

<https://www.telegraph.co.uk/global-health/science-and-disease/marburg-outbreak-worsens-in-ethiopia/>

“Experts warn that the outbreak’s proximity to borders with Kenya and South Sudan means that – if not contained – it could spread rapidly.”

Trump 2.0

Devex – Ex-top USAID official details wish list on health and funding fixes

https://www.devex.com/news/ex-top-usaid-official-details-wish-list-on-health-and-funding-fixes-111413?utm_term=Autofeed&utm_medium=Social&utm_source=Bluesky#Echobox=1763713705

“Bill Steiger, former USAID chief of staff in the first Trump administration, warns Congress about biosecurity threats and backs push for greater global health self-reliance.”

PS: **“.... Steiger also had a wish list for Congress, including reauthorizing the [President’s Emergency Plan for AIDS](#), or PEPFAR, and the [President’s Malaria Initiative](#). “Every program that has not received congressional authorization is vulnerable at this point, and those programs, even if the administration has said they want to continue them, need the legal basis for reauthorization,” he said. In addition, Congress should give the State Department the ability to negotiate**

bilateral compacts as part of its “America First Global Health Strategy,” which the agency’s lawyers say it currently lacks. “We’re not going to get to what the administration wants with **nonbinding MOUs**. We’re going to only get there with binding contacts,” Steiger said....”

Devex –State Dept grants \$150M to Zipline to triple African drone operations

<https://www.devex.com/news/state-dept-grants-150m-to-zipline-to-triple-african-drone-operations-110498>

“The U.S. State Department will grant up to \$150 million to drone company **Zipline to expand health supply operations in five African countries, highlighting the Trump administration's new approach to global health aid.....**”

Devex Opinion - Hopeful signs are emerging from the US global health strategy

Mark Green; <https://www.devex.com/news/hopeful-signs-are-emerging-from-the-us-global-health-strategy-111438>

“Partnerships with Gilead and Zipline signal a **shift toward enterprise-driven development, focusing on innovation, measurable outcomes, and economic growth alongside health impact.**”

Green (*administrator of the U.S. Agency for International Development in the first Trump administration*) sees **four strategic directions** emerging.

CGD (blog) - Women Have Been Disproportionately Harmed by Trump Administration Aid, Migration, and Trade Policies

C Kenny; <https://www.cgdev.org/blog/women-have-been-disproportionately-harmed-trump-administration-aid-migration-and-trade>

“...The first year of the second Trump administration has seen a broad assault on global flows of goods, services, finance, and people, with an outsize impact on low- and middle-income countries. As a side effect of some of these policies and the direct intent of others, **these actions have had a particularly large impact on women....**” Overview for aid, migration & trade policies, respectively.

Lancet (Comment) - US CDC: a public health agency in critical condition

Debra Houry et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02353-0/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02353-0/fulltext)

Including a **paragraph on the global impact**: “....Globally, the proposed elimination of CDC's Global Health Center severs the networks that help detect and contain disease outbreaks globally before they reach US shores. The CDC has for decades worked with ministries of health to strengthen the capacity of laboratory and epidemiology infrastructure and services, leading to transformative improvements in prevention, control, and treatment of HIV, tuberculosis, malaria, and other public health threats. However, these exemplary global investments might not survive the ideological and retributive fiscal and staffing policies from HHS. Without CDC scientists either embedded within or

collaborating with WHO, ministries of health, and Africa Centres for Disease Control and Prevention (Africa CDC), the long-standing technical expertise and engagement for early warning and response will be compromised. The dismantling of the US Agency for International Development (USAID) and the loss of CDC's malaria staff in Africa will affect malaria control, raising risks of imported infection and undermining decades of progress. **In this changing global health landscape, it is encouraging to see Africa CDC launch its Health Security and Sovereignty agenda.** The loss of years of experience and support from the USA in global surveillance, genomic sequencing, and emergency response is destabilising. **In this shifting environment for health security, it is likely other nations such as China will step in to this space while US influence and protection diminish, reducing the preparedness for the next pandemic threat...."**

Nature (News) - Psychedelics and immortality: Nature went to a health summit starring RFK and JD Vance

<https://www.nature.com/articles/d41586-025-03790-2>

"The Make America Healthy Again summit, attended by health secretary Robert F. Kennedy Jr and vice-president JD Vance, gave a sense of what's driving US health policy."

NYT - Doctor Critical of Vaccines Quietly Appointed as C.D.C.'s Second in Command

<https://www.nytimes.com/2025/11/25/health/cdc-ralph-lee-abraham-vaccines.html>

"During the Covid-19 pandemic, Dr. Ralph Lee Abraham promoted discredited treatments like ivermectin and, as Louisiana's surgeon general, halted the state's mass vaccination campaign."

Plos GPH – The Trump presidency: Cascading global shocks on global health

L Gostin; <https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0005385>

Review. "... Here, I document key executive actions on global health taken by the Trump administration, and the destructive impacts on global health and U.S. national interests. The executive orders on withdrawing the United States from WHO and freezing foreign aid were most consequential to global health, and will be my primary focus. While numerous executive and legislative actions profoundly impact global health (e.g., climate change, immigration, tariffs, and biomedical research), they are largely beyond this article's scope. **I conclude with proposals for using this major rupture in international health cooperation as an opportunity to construct a more resilient global health financing and governance ecosystem. Out of peril there is opportunity for new alliances, self-reliance, and resilience sans the United States—at least until the next presidential election in 2028.**"

Veza - What Africa Lost Under Trump: At least \$5 Billion. What It Got In Return: "True Chaos."

[Veza:](#)

"A CCIJ (Center for Collaborative Investigative Journalism) analysis details the depth of U.S. aid cuts to Africa. The slashed programs fight famine, shelter refugees, combat diseases. They even

promote America's national pastime, baseball. Now: "True chaos" reigns in the face of deaths and humanitarian crises. The financial toll is likely much larger....."

"And the estimate is conservative: only money that the US had committed to, but not yet delivered, was included."

Commercial determinants of health

FCTC - Global tobacco control conference concludes with decisions on environment, liability

<https://fctc.who.int/newsroom/news/item/22-11-2025-global-tobacco-control-conference-concludes-with-decisions-on-environment-liability>

(22 Nov)

"The Eleventh session of the Conference of the Parties to the WHO FCTC has concluded with a series of critical decisions on global tobacco control. A total of 160 Parties gathered from 17-22 November 2025 in Geneva to discuss global tobacco measures under the WHO FCTC – one of the most widely embraced UN treaties in history – that commits countries to ending the global tobacco epidemic. Key decisions were reached on tobacco control and the environment; increasing sustainable resources for tobacco control; forward looking tobacco control measures; and issues relating to the liability of the tobacco industry for the damage it causes...."

- Coverage & analysis via [HPW: 'Unprecedented Levels of Industry Interference' Stalls Decisions on New Tobacco Products and Pollution at UNFCTC COP11](#)

"The [Eleventh Conference of the Parties \(COP\)](#) to the WHO Framework Convention on Tobacco Control (FCTC) concluded in Geneva on Saturday with calls to member states to take stronger action on reducing the environmental harm of tobacco use and increasing corporate liability...."

"But political stand-offs between countries, along with industry interference, hindered major breakthroughs on outlawing plastic cigarette filters, as well as stronger regulation of marketing and cross-border trade in [e-cigarettes](#), flavoured tobacco and other new products...." "A proposed [ban on polluting plastic cigarette filters](#) that constitute one of the most omnipresent sources of pollution on beaches and in waterways worldwide, failed to receive delegates' support. A parallel regulation on the disclosure of tobacco product contents also failed to win sufficient backing – despite what some observers described as a "real sense of urgency in the room." Rather than an authoritative working group, delegates agreed to establish an informal consultation group, under the guidance of the WHO. ..."

"Even so, the six-day conference, November 17-22, saw the passage of decisions that more explicitly recognise the serious damage caused by the entire tobacco supply chain, from farming and manufacturing to use, including the waste produced by [electronic cigarettes](#)...."

“Among these, COP delegates called on member states to consider stronger regulatory frameworks regarding polluting tobacco products and components, as well as holding the tobacco industry legally liable for the health and environmental damage it causes.....” “Despite friction on key issues, delegates also agreed to increase state funding for domestic tobacco control programmes, and consider more new, forward-looking measures such as generational (youth) bans on cigarettes. Additionally, a decision was approved calling on parties to consider stronger legislative action to deal with criminal and civil liability related to tobacco control....”

FCTC - Global meeting on eliminating illicit trade in tobacco products opens in Geneva

<https://fctc.who.int/newsroom/news/item/24-11-2025-global-meeting-on-eliminating-illicit-trade-in-tobacco-products-opens-in-geneva>

“The Fourth Meeting of the Parties (MOP4) runs from 24 to 26 November, bringing together 71 Parties to the Protocol to Eliminate Illicit Trade in Tobacco Products – the first protocol adopted under the WHO Framework Convention on Tobacco Control (WHO FCTC).”

“The Protocol is an international treaty with the objective of eliminating all forms of illicit trade in tobacco products through a package of measures to be taken by countries acting in cooperation with each other: it is a global solution to a global problem. The theme of MOP4 is “United for justice, against illicit tobacco trade”. ”

“It is estimated that illicit trade accounts for around 11% of the global tobacco market. Its elimination could increase global tax revenues by around US\$ 47.4 billion annually....”

- Related: FCTC - [UN treaty talks conclude with calls for cooperation to tackle illicit tobacco trade](#) (26 Nov)

The Conversation - Men’s drinking harms women and children, and the impact is worst in poorer countries

L Ramsoomar; <https://theconversation.com/mens-drinking-harms-women-and-children-and-the-impact-is-worst-in-poorer-countries-269618>

“.... I’m part of a global collaborative group of health researchers who set out to explore how – and how much – men’s drinking harms women and children. Our recent research drew on three global reviews of findings from rich, poor and middle income countries....” Check out the findings.

COP 30 in Brazil: final analysis

With a bunch of overall **analyses on the outcomes**. Some analyses (like **HPW**, or the **Global Climate and Health Alliance**) paid more attention to the **climate-health nexus** as well.

Guardian (Explainer) - Compromises, voluntary measures and no mention of fossil fuels: key points from Cop30 deal

<https://www.theguardian.com/environment/2025/nov/22/roadmaps-adaptations-and-transitions-what-climate-measures-were-agreed-at-cop30>

“A deal is welcome after talks nearly collapsed but the final agreement contains small steps rather than leaps.”

The article provides **some of the key outcomes**. Or in short:

- “Perhaps most of all, while getting close to collapse, **the talks delivered a deal, showing multilateral cooperation between 194 states can work even in a world in geopolitical turmoil.**
- **Nations agreed to tripled funding for adaptation** – the money provided by rich nations and desperately needed by vulnerable countries to protect their people – but the **goal of roughly \$120bn a year was pushed back five years to 2035.**
- **Fossil fuels were not mentioned in the key final decision** – petrostates including Saudi Arabia and allies fought fiercely to keep that out.
- **A commitment to a roadmap to transition away from fossil fuels was not part of the formal deal in Belém, but Brazil backed an initiative outside the UN process,** building on plan backed by Colombia and about 90 other nations.
- There was **a similar roadmap to end deforestation,** also backed by about 90 nations. Cop30 was deliberately sited in the Amazon and **the lack of significant measures in the key Cop30 text is a disappointment.**
- However, **Brazil did launch the Tropical Forests Forever Facility, again outside the UN process, but an investment fund** that will pay nations to keep trees standing.
- **A big outcome, welcomed by civil society, was the agreement of a Just Transition Mechanism,** a plan agreed by all nations to ensure that the move to a green economy around the world takes place fairly and protects the rights of all people, including workers, women and indigenous people. **Efforts early in the talks to attach funding to it failed.**
- Pressure to address the huge gap between the emissions cuts pledged by nations and those needed to keep the overshoot of 1.5°C to a minimum ended with weaker measures than progressive nations wanted – **an “accelerator” programme to address the shortfall which will report back at next year’s Cop.”**

UN News: Belém COP30 delivers climate finance boost and a pledge to plan fossil fuel transition

<https://news.un.org/en/story/2025/11/1166433>

The **UN view**.

Excerpt: “**What was decided:** “**Finance at scale:** Mobilise \$1.3 trillion annually by 2035 for climate action. **Adaptation boost:** Double adaptation finance by 2025 and triple by 2035. **Loss and damage fund:** Operationalisation and replenishment cycles confirmed. **New initiatives:** Launch of the Global Implementation Accelerator and Belém Mission to 1.5°C to drive ambition and implementation. **Climate disinformation:** Commitment to promote information integrity and counter false narratives.” ...”

Carbon Brief - COP30: Key outcomes agreed at the UN climate talks in Belém

<https://www.carbonbrief.org/cop30-key-outcomes-agreed-at-the-un-climate-talks-in-belem/>

This (exhaustive) one is for the COP freaks :)

Guardian (analysis): Cop30's watered-down agreements will do little for an ecosystem at tipping point

<https://www.theguardian.com/environment/2025/nov/22/small-win-at-cop-on-finance-for-poor-countries-overshadowed-by-failure-on-fossil-fuels>

"Delegates made minimal headway on timetable for replacing oil and gas or on firm commitments to reducing carbon emissions."

HPW – COP30 Ends With Plans to Make More Plans, No Mention of Fossil Fuel Phase-out

<https://healthpolicy-watch.news/cop30-ends-with-plans-to-make-more-plans-no-mention-of-fossil-fuel-phase-out/>

With some **more focus on the climate-health interface**. Some excerpts:

"The UN climate summit marking the tenth anniversary of the Paris Agreement to keep global warming under 1.5 °C ended in trademark UN fashion: a text laying out next steps to speak about plans to agree to make more plans."

"The package of voluntary measures dubbed the "Global Mutirão," Portuguese for collective effort, nixed any mention of fossil fuels and failed to include a deforestation roadmap backed by over 90 nations, exposing deep fractures in global climate diplomacy. More than half of the nearly 200 nations in attendance opposed even non-binding language on oil, gas and coal phase-out despite scientific projections showing the world remains on track for 2.6 to 2.8 degrees Celsius of warming...."

"The health front scored several incremental victories. The outcome text included the first direct acknowledgement of the health benefits of mitigating emissions in a COP decision, while the Belém Health Action Plan – a voluntary policy package of best practices for adapting health systems to the climate crisis – was endorsed by about 10% of nations but received no money from governments.... The action plan also invites nations to report progress on health adaptation in their submissions to the Global Stocktake at COP33, making health adaptation part of countries' official climate progress reporting for the first time...."

PS: "For the first time, the final COP decision text formally recognised "the economic and social benefits and opportunities of climate action, including economic growth, job creation, improved energy access and security, and improved public health." The inclusion of language on health is the product of more than 20 years of health-focused assessments on the co-benefits to health of climate mitigation, including the potential to save millions of lives a year by reducing air pollution from fossil fuels, as well as health gains from more sustainable diets and access to more physical activity in greener cities...."

“The Clean Air Fund welcomed the COP30 outcome text’s acknowledgement as “a step in the right direction”, but said governments need to go further to put health at the heart of climate negotiations next year. “It is essential that adaptation and mitigation consider climate change and health,” the Clean Air Fund said. Global health leaders, including WHO Director-General Dr Tedros Adhanom Ghebreyesus, have called for health to be included in formal negotiations at future COPs.....”

Global Climate and Health Alliance - COP30 Delivers Incremental Climate Action, But Lack of Implementation Support Jeopardises Health

<https://mailchi.mp/8eaba6805830/cop30-delivers-incremental-climate-action-but-lack-of-implementation-support-jeopardises-health?e=3289726e8a>

“As the COP 30 climate summit closed today, the Global Climate and Health Alliance bemoaned governments’ failure to deliver a genuinely transformative COP, including the lack of agreed progress on the phaseout of fossil fuels, while noting some areas of progress - such as institutional architecture to support just transitions and increased adaptation finance, and an announcement from the COP president regarding a future roadmap for a just and equitable transition away from fossil fuels....”

- Related: **Arthur Wyns** – [Wrapping – and rapping – health wins and losses at COP30](#)

“While the COP30 global climate negotiations have left many disappointed at the lack of progress towards these outcomes, there were at least some wins for health, reports climate health policy expert Arthur Wyns.”

The Common Initiative (Briefing) – The COP of post-truth

https://drive.google.com/file/d/1_C30HpW5Pe7tA83oSJjeU9r5XyP2O9Th/view

Hard-hitting letter. “On the dangerous seduction of empty multilateralism (or why we need to stop performing hope while the planet burns).”

Quote: “Toxic positivity is a privilege of the comfortable. It’s available to those who can attend international summits, ... “ (etc)

Climate Change News - COP30 fails to land deal on fossil fuel transition but triples finance for climate adaptation

<https://mailchi.mp/8eaba6805830/cop30-delivers-incremental-climate-action-but-lack-of-implementation-support-jeopardises-health?e=3289726e8a>

“Instead of a global agreement to create roadmaps to shift away from fossil fuels and end deforestation, Brazil announces voluntary initiatives.”

Climate change news – Colombia seeks to speed up a “just” fossil fuel phase-out with first global conference

Climate Change News

“The **summit, co-hosted with the Netherlands**, aims to help countries work out a fair path to stop using planet-heating oil, gas and coal – a sticking point at the COP30 talks in Brazil.”

“In a sign of the slow pace of (COP30) progress, **Colombia and the Netherlands announced they would hold a separate but complementary conference on the transition away from fossil fuels for high-ambition countries next year....**”

Guardian - US, Russia and Saudi Arabia create axis of obstruction as Cop30 sputters out

Oliver Milman; <https://www.theguardian.com/environment/2025/nov/25/trump-cop30-lacks-us-climate-progress>

“Trump puts US in unflattering company as lack of representative reveals disdain for climate progress.”

Excerpt: “....Michael Jacobs, of the thinktank ODI Global and the University of Sheffield, said that the Cop30 summit revealed “an increasingly bitter conflict at the heart of global climate politics: between those who accept the scientific fact that to deal with climate change the world must wean itself off fossil fuels over the coming decades; and those who are actively resisting this in pursuit of their short-term energy interests”. The US can now be considered in the latter group, along with Saudi Arabia, the UAE and Russia, according to Jacobs. ... “Geopolitically, this is the creation of a new axis of obstruction – actively promoting fossil fuels and opposed to climate action.”

More on Planetary Health

PIK - Commentary: rising planetary risks after missed decade of action

<https://www.pik-potsdam.de/en/news/latest-news/commentary-scientists-outline-rising-planetary-risks-after-missed-decade-of-action>

“A new **commentary led by Johan Rockström, Director of the Potsdam Institute for Climate Impact Research (PIK)**, concludes that the world has missed an important decade needed to keep the **Earth system within its safe operating space**. The authors show that global pressures on climate and biosphere have continued to rise, yet also note that **stabilising the Earth system remains possible**.”

...The authors describe emerging signs of declining Earth system resilience and explain that recovering from a temporary breach of the 1.5°C limit, once it happens, will require rapid emission cuts, large-scale carbon dioxide removal, and efforts to sustain natural carbon sinks. At the same time, the analysis highlights how interacting pressures from biodiversity loss to land-use change and

freshwater stress are risks for societies. Coordinated action across energy, food, and land systems will be essential to limit further destabilisation....”

- See also [The Conversation - The world lost the climate gamble. Now it faces a dangerous new reality](#) (by J Dyke & J Rockström)

“Ten years ago the world’s leaders placed a historic bet. The 2015 Paris agreement aimed to put humanity on a path to avert dangerous climate change. A decade on, with the latest climate conference ending in Belém, Brazil, without decisive action, we can definitively say humanity has lost this bet.”

“Warming is going to exceed 1.5°C. **We are heading into “overshoot” within the next few years.** The world is going to become more turbulent and more dangerous. So, what comes after failure? Our attempt to answer that question gathered **the Earth League – an international network of scientists we work with – for a meeting in Hamburg earlier this year.** After months of intensive deliberation, its findings were published this week, with the conclusion that humanity is “living beyond limits”....”

PIK assessment on COP30 closing

<https://www.pik-potsdam.de/en/news/latest-news/pik-assessment-on-cop30-closing>

“Here is what **Johan Rockström and Ottmar Edenhofer**, the Scientific Directors of the Potsdam Institute for Climate Impact Research (PIK), have to **say about the outcome of the conference.**”

Rockström: "Ten years after Paris, **COP30 was declared to be the COP of 'truth and implementation'**. Scientifically, this was an appropriate label. But leaders gathered in Belém failed to fulfil this promise. **The 'truth' is that our only chance of 'keeping 1.5°C within reach', is to bend the global curve of emissions downward in 2026 and then reduce emissions by at least 5% per year. 'Implementation' requires concrete roadmaps to accelerate the phase out of fossil fuels and the protection of nature. We got neither.** And this happened despite a committed, science-aligned and astute Brazilian Presidency of the COP. **At this critical juncture of imminent risks, false hope is the last thing the world needs now.** Within just 5-10 years we are likely to breach 1.5°C, entering the terrain of danger, both for billions of people affected by rising weather extremes, and of the risk of crossing tipping points, among them, Earth's richest biomes - the Amazon and tropical coral reef systems. **Unfortunately, COP30 continues to add to the legacy since the Paris Agreement; to spread false hope. What the world needs is real delivery, with a credible plan and set of policies and regulations to achieve it, starting by phasing out fossil fuels in an accelerated, orderly and just way. This would be real hope.**"

HPW - Brazil's Tropical Forest Protection Fund Launches with \$6.6 Billion — Will It Work?

<https://healthpolicy-watch.news/brazils-tropical-forest-protection-fund-launches-with-6-6-billion-will-it-work/>

One of the reads of the week. Brilliant analysis. **“Brazil’s tropical forest fund aims to be the largest financial instrument of its kind. But as COP30 enters its final hours, the effort has attracted limited political support and money.”**

Some excerpts:

“The **Tropical Forest Forever Facility**, Brazilian President Luiz Inácio Lula da Silva’s [flagship initiative](#) to protect the world’s tropical forests, **reached \$6.6 billion in pledges** as COP30 entered its final hours, with Germany becoming the third nation alongside Brazil and Indonesia to commit \$1 billion to the effort. ...**The billions raised mark significant progress for the highly technical financing instrument** that Lula has championed since COP28 in Dubai, set up to pay tropical forest nations for keeping trees and their surrounding forests standing rather than cutting them down, rewarding conservation with cash instead of traditional grants. **But the president’s soaring language masked a fundamental problem: the fund remains well short of the \$25 billion target Brazil set for government investments, designed to secure investor confidence and unlock an additional \$100 billion in private financing for a total goal of \$125 billion....”**

“**Norway is the largest contributor by far, pledging \$3 billion over ten years**, nearly half the current total ... **Notably absent from the investor line-up were major economies that had previously expressed interest in supporting the fund, including China, Saudi Arabia, and the United Kingdom.** The **United States**, viewed as another possible backer under former president Joe Biden, has reversed course under Donald Trump’s administration....”

PS: “**The funding shortfall matters because the TFFF isn’t designed like traditional climate funds. It’s an investment vehicle**, functioning similarly to a large endowment, set up to generate “competitive market returns” and a “strong value proposition” for its backers based on a projected profit rate of 7.5% on its assets. **Without sufficient capital to generate significant returns, the mathematics collapse.....”**

“...The facility aims to raise \$25 billion from governments as “sponsor capital,” then leverage that to attract \$100 billion from private investors who buy bonds. The combined \$125 billion will then be invested in a global portfolio of sovereign and corporate bonds, with a particular focus on emerging market and tropical forest country bonds. ... In the scenario where the fund secures the full \$125 billion, countries would receive approximately \$4 per hectare annually for standing forest, according to World Bank calculations, provided they maintain deforestation rates below 0.5%, with heavy financial penalties applied for forest loss. ... **With \$6.6 billion instead of \$125 billion, the fund currently holds 5% of its target....”**

“That’s **less than \$3 million per tropical forest nation annually**. ... At current levels, the fund projects to pay tropical forest nations roughly 16 cents per hectare, **a 96% decrease from the World Bank’s \$4 projection at full capitalization.....** The fund’s model further relies on providing a strong financial incentive for nations currently pushing ahead with deforestation, like Bolivia, to scale back in return for money. If that money isn’t there, the incentive, and projected impact of the initiative on global deforestation rates, is weakened significantly....”

PS: “**The facility’s reception among Indigenous and forest communities has shifted dramatically since last year, tracking closely with new understanding how the financial structure actually works.** ...**“The TFFF is a mechanism for privatizing forest finance,”** it declared. “The TFFF mistakenly and deceptively considers deforestation a market failure that will be resolved by putting a price on ecosystem services to attract private investment. The ecological collapse caused by capitalism will not be solved with more capitalism.”

PS: **“The fundraising strategy on which the success of TFFF depends also heavily on something that hasn’t happened: private investors committing capital.....”**

The overall backdrop :” **...The TFFF enters a fragmented ecosystem of global development finance, from health to humanitarian aid and climate change, where even celebrated mechanisms continue to fall dramatically short of their funding targets.** The **Green Climate Fund**, launched in 2010 and posited as the primary vehicle for channeling climate finance to developing countries, raised less than \$17 billion over 15 years. The **Loss & Damage Fund**, celebrated as a landmark achievement of COP28 fought for by developing nations on the frontlines of the climate crisis they did little to cause for decades, has mobilized just \$431 million against \$724 billion annual needs. Two years after creation, it has yet to disburse any money. The **Cali Fund for biodiversity**, created at COP16 in Colombia with a target of \$500 billion, remains empty as well.....”

- And via [Devox](#): **“The model has been praised for its innovation, but it has also drawn questions about whether the incentives are enough to shift real-world economics.** As Sierra Leone’s Abdulai put it: **“Deforestation is an economic issue.** If people are cutting trees, there’s an economic reason for it.” **And the math he laid out is sobering: “The solution also has to make economic sense. If you want to pay me \$4 per hectare to protect a forest but I can make \$200 from destroying it. Which one is someone living in extreme poverty going to select?** So that is something that we need to be clear about.”

Tax Justice Network - Two negotiations, One crisis: COP30 and the UN tax convention must finally speak to each other

B Agata et al ; <https://taxjustice.net/2025/11/24/two-negotiations-one-crisis-cop30-and-the-un-tax-convention-must-finally-speak-to-each-other/>

“Last week, governments negotiated climate finance in Belém and new global tax rules in Nairobi. The coincidence of these talks happening at the same time — yet with almost no structured conversation between them — shows how fragmented the global response to climate action remains. **Climate negotiators discuss financing needs without asking where predictable public resources will come from, while tax negotiators debate revenue rules without acknowledging the rising costs of the climate crisis.”**

“Treating these as separate worlds is no longer viable. Both deal with cross-border harms and deep inequality, and both require cooperation grounded in equity and responsibility. **The world cannot afford to keep the two frameworks disconnected....”**

SRHR

HPW (Op-ed) Eliminating the “Period Tax” on Feminine Hygiene Products – A Battle For Freedom and Dignity

L Ramsammy; <https://healthpolicy-watch.news/eliminating-the-period-tax-on-feminine-hygiene-products-galvanizes-new-battle-for-freedom-and-dignity/>

“In August 2025, Guyana’s President Irfaan Ali removed all taxes and customs duties on feminine hygiene products. Now, Guyana’s Ambassador to the UN in Geneva calls on other countries to follow suit. ”

PS: Dr Leslie Ramsammy is Guyana’s Ambassador to the UN in Geneva and a former Minister of Health.

- See also HPW - [Diplomatic Efforts Are Underway to Reduce the Costs of Menstrual Products](#)

“Millions of girls miss school each month when they menstruate, as their families cannot afford sanitary pads or tampons – something that a Geneva-based diplomatic effort is seeking to address.”

“Ambassador Matthew Wilson of Barbados described improving access to menstrual as a “global moral imperative” at a meeting of diplomats this week. “[Caribbean] surveys show that one in four girls have missed school due to lot of menstrual products, and over 30% of low-income households struggle to purchase them regularly,” Wilson told the meeting, hosted by the Permanent Missions of Barbados, Canada, and Malawi to the United Nations in Geneva, the Sanitation and Hygiene Fund (SHF), and the Center for Health Diplomacy and Inclusion (CeHDI)....”

The Conversation -Africa’s hidden stillbirth crisis: new report exposes major policy and data gaps

M Kinney; <https://theconversation.com/africas-hidden-stillbirth-crisis-new-report-exposes-major-policy-and-data-gaps-268901>

Kinney is part of the **“team that led a new report called Improving Stillbirth Data Recording, Collection and Reporting in Africa. It is the first continent-wide assessment of how African countries record and use stillbirth data.”**

“The study, conducted jointly by the Africa Centres for Disease Control and Prevention, the University of Cape Town, the London School of Hygiene & Tropical Medicine and the United Nations Children’s Fund, surveyed all 55 African Union member states between 2022 and 2024, with 33 countries responding.....”

PS: **“The burden of stillbirths in Africa is staggering. Africa accounts for half of all stillbirths globally, with nearly eight times higher rates than in Europe. Even stillbirths that happen in health facilities may never make it into official statistics despite every maternity registry documenting this birth outcome....”**

ODI - Navigating the politics of backlash to sexual and reproductive health and rights

E Browne et al ; <https://odi.org/en/publications/navigating-the-politics-of-backlash-to-sexual-and-reproductive-health-and-rights/>

“Policy lessons from Kenya, Sierra Leone and The Gambia.”

“Following an **in-depth political economy analysis of three policy initiatives with significant consequences for gender equality and reproductive rights in Kenya, Sierra Leone and The Gambia**, this **policy brief** distils essential lessons for both national and international actors wanting to advance progressive reforms.”

Among the findings: “.... Local rights-based civil society organisations are key to achieving progressive policy reform and are best placed to lead and foster domestic support. International funders should invest long-term funding in civil society infrastructure. To be sustained, progressive policy reform must be underpinned by gender norm change throughout society, which requires time and long-term investment.”

Lancet GH – WHO guideline on infertility: an opportunity to reduce global health inequalities

G Mburu, P Allotey et al; [https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(25\)00227-X/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(25)00227-X/fulltext)

“In 2025, WHO issued its first guideline on diagnosis, prevention, and treatment of infertility, which is needed for several reasons....”

Human Resources for Health

BMJ GH (Commentary) – Accelerating community health worker programmes: a key priority of the Global Health Initiatives for the operationalisation of the Lusaka Agenda in Africa

N Ngongo, J Kaseya et al ; <https://gh.bmj.com/content/10/11/e017325>

“Community health workers (CHWs) are the critical elements of vibrant primary healthcare (PHC) services. CHWs have played crucial roles in strengthening PHC and responding to public health emergencies in Africa. The **CHW programme faces significant challenges** due to poor governance and coordination, lack of sustainable funding, and fragmented, siloed stakeholder approaches.”

“The Lusaka Agenda represents a strategic opportunity to harmonize stakeholder efforts and resources to ensure the scalability, impact, and sustainability of Africa’s CHW programmes. ... There is a dire need to harmonise efforts and coordination mechanisms to ensure the scalability and sustainability of CHW programmes in Africa. **According to the WHO data, there were about 1 million CHWs in Africa, just half of the number required to meet the African Heads of State and Government target of 2 million CHWs in Africa....”**

The Commentary delves into the Global Health Initiatives’ **Lusaka Agenda for strengthening CHW programmes...** “...The strategic shifts outlined in the Lusaka Agenda represent a critical opportunity to align the programme and operational efforts of the GHIs to optimise the impact and viability of CHW programmes in Africa...”

And also into the **leadership role of the Africa Centres for Disease Control and Prevention (Africa CDC) for the CHW programmes in Africa ...**

And concludes: ...the **operationalisation of the Lusaka Agenda offers GHI a unique opportunity** to come together as one team with pooled resources to facilitate the integration of CHW programmes into the national health systems, foster cross-sector collaboration and ensure consistent support for the programme's durability. **The scale-up of CHWs towards the 2 million target is a good place to start..."**

WHO Afro - Countries, experts agree on 10-year Africa health workforce agenda

<https://www.afro.who.int/news/countries-experts-agree-10-year-africa-health-workforce-agenda>

"African countries have reached consensus on the priority actions, commitments and milestones that will shape the Africa Health Workforce Agenda 2026–2035 in a major step towards transforming how the continent plans, trains and retains its health workforce. "

"Member States, professional councils, universities, development partners and technical experts gathering in Pretoria from 24 to 26 November 2025 for consultation convened by the World Health Organization (WHO) Regional Office for Africa agreed on a unified direction for the forthcoming Agenda, which will be formally endorsed and launched by Member States in 2026. "

"The shared priorities focus on strengthening governance and stewardship; modernizing and expanding health workforce education; improving employment and retention; scaling up investments through the Africa Health Workforce Investment Charter; and institutionalizing robust labour-market intelligence to guide planning and accountability."

PS: **"... Africa faces a projected shortage of 6.1 million health workers by 2030.** While the region has tripled its workforce from 1.6 million in 2013 to 5.1 million in 2022, it continues to struggle with severe mismatches between training outputs and labour market needs; outdated and theory-heavy education models; chronic underinvestment in training institutions; unemployment among newly trained health workers; and significant migration and attrition...."

Access to medicines, vaccines & other health technologies

GHF (Research report) – Beyond the Breakthrough: The Uneven Geography of mRNA Vaccine Production.

[Geneva Health Files;](#)

"...My colleague Vivek has put together this timely analysis, taking stock of the challenges and opportunities for mRNA technology in the developing world. Also find an exclusive interview with Petro Terblanche, CEO, Afrigen Biologics & Vaccines"

**GHF - "The biggest tech transfer program in the history of all medical technology":
Petro Terblanche, CEO, Afrigen Biologics And Vaccines on the mRNA Tech
Transfer Programme [INTERVIEW]**

[Geneva Health Files;](#)

Do read.

**HPW - South Africa May Be Excluded From Future US Grants for HIV Amid Political
Row**

<https://healthpolicy-watch.news/south-africa-may-be-excluded-from-future-us-grants-for-hiv-amid-political-row/>

(see also last week's IHP news) **"The United States (US) government has not sought a meeting with South Africa to discuss the resumption of its HIV grant, and it won't supply the country with the long-acting HIV prevention medication, lenacapavir, amid a deepening political row between the two countries."**

"While US Ambassadors throughout the continent have [initiated meetings](#) with African Health Ministers to discuss Memorandums of Understanding (MOU) to set out new terms for the continuation of their US President's Emergency Plan for AIDS Relief (PEPFAR) grants from April 2026, South Africa has not received such an invitation....."

PS: **"The US government and the Global Fund have bought all of Gilead's 2026 stock of lenacapavir, a twice-a-year injectable that is almost 100% successful in preventing HIV transmission...."**

"... The advocacy groups estimate that at least 10 million Africans need lenacapavir to achieve the global goal of a 90% reduction in new HIV infections by 2030, with two million of these being South Africans. ..."

"However, the US will only provide doses for 325,000 people in 2026 – an "insulting" amount in comparison to the need, said Bellinda Thibela, Health GAP's International Policy and Advocacy coordinator. "Instead of crumbs, the US should be providing millions of lenacapavir doses, to alter the course of the HIV pandemic and to repair the harms caused by their illegal and deadly cuts to HIV programmes since January," added Thibela."

"However, Brad Smith, US Senior Advisor for the Bureau of Global Health Security and Diplomacy, [told a media briefing](#) this week that Gilead's available volume in 2026 is 600,000 doses, but that the US and the Global Fund are committed to buying two million doses. "We anticipate a continued increase in demand and production capability over time to enable us to meet the two million doses sometime in mid-2027," said Smith, adding that the doses were being split 50/50 between the US and the Global Fund."

BMJ Feature - "Miraculous" HIV drug to be rolled out after overcoming aid cuts threat

<https://www.bmj.com/content/391/bmj.r2452>

“A trial of lenacapavir showed 100% protection against HIV infection. **But cuts to foreign aid and criticism over its pricing put the brakes on a worldwide rollout.** Elna Schütz asks if we’re now seeing the reprieve that advocates were hoping for.”

Excerpts: “...Despite the progress, experts remain concerned about whether the rollout of the drug will be fast enough and equitable. **Pricing, particularly in low income countries, remains a concern.**

The rumoured negotiated not-for-profit price for the Global Fund is around \$100 a person for two injections. Warren says this is high, at over double the price for Gilead’s oral PrEP and a similar price to long acting cabotegravir, an injectable on the market that is administered every month or two. He explains that cabotegravir had strong regulatory approval, but high prices and limited supplies hindered its rollout. **In a September announcement, manufacturers and partners said that generic versions of lenacapavir would likely be available at around \$40 a year in 120 low and middle income countries, beginning in 2027.** This does not include the \$15 for the compulsory initial pill regimen that has to be taken when starting or restarting a course of the drug (see box)....”

“... **The health systems to roll out the drug need to be built up or rebuilt in cases where PEPFAR cuts have hit hard.** Clinics have closed and been forced to reduce staff numbers, while programmes focusing on areas such as mother-to-child HIV transmission or HIV testing have also been cut. Sub-Saharan Africa has been particularly affected, with South Africa seeing the dismissal of around 8000 healthcare workers as a result of US aid cuts. Similar consequences have been reported around the world, from the Philippines to Ukraine. **“In some countries we’ve seen a reduction in community led interventions funded by the likes of the Global Fund, just because they’ve needed support in making sure that the health system skeleton remains intact,”** Pillay says. She points to Kenya as a concerning example. **“This idea that we are going to be able automatically to roll out lenacapavir after the infrastructure’s been decimated is magical thinking by the US administration,”** Warren says....”

UN News – Malaria vaccine price cut set to protect 7 million more children by 2030

<https://news.un.org/en/story/2025/11/1166432>

“Vaccine alliance Gavi and children’s agency UNICEF have struck a new pricing deal that will sharply cut the cost of a key malaria vaccine and make it possible to protect nearly seven million additional children by 2030, the agencies announced on Sunday.”

“Under the agreement, the price of the R21/Matrix-M vaccine will fall to \$2.99 per dose within a year – a reduction expected to save up to \$90 million. Those savings should allow countries to secure more than 30 million extra doses over the next five years.”

PS: **“The new pricing arrangement was enabled by an advance payment through the International Finance Facility for Immunisation (IFFIm), which converts long-term donor pledges into upfront funds. This gives Gavi the ability to act quickly when major market-shaping opportunities emerge.... More than 40 million malaria vaccine doses have already been delivered through Gavi-supported programmes, with 24 African countries now integrating malaria vaccination into routine immunisation.....”**

“Demand is strong: 14 countries introduced the vaccine for the first time last year, and another seven have done so in 2025.....”

“The lower price is expected to help Gavi move closer to its target of fully vaccinating 50 million additional children against malaria by the end of the decade.....”

Devex – Ozempic generics are coming. But will low-income countries benefit?

<https://www.devex.com/news/ozempic-generics-are-coming-but-will-low-income-countries-benefit-111387>

“Analysts expect an 80% drop in prices once semaglutide goes generic. But experts warn that booming demand in wealthy countries may leave diabetes patients in low- and middle-income countries behind.”

“With analysts estimating that the global market for weight-loss drugs could reach \$150 billion in the next five years, pharmaceutical companies in countries such as India and China are racing to register their own copycat versions. The entry of semaglutide generics into the market could slash prices by up to 80%, some industry experts told Devex, as well as significantly increase the available supply....”

Economist – Chinese pharma is on the cusp of going global

<https://www.economist.com/china/2025/11/23/chinese-pharma-is-on-the-cusp-of-going-global>

“Its fast-moving, cut-price drugmakers stand to make more money abroad than at home”

Conflict/War/Genocide & Health

Guardian - Rebuilding ‘human-made abyss’ in Gaza will cost at least \$70bn, UN says

<https://www.theguardian.com/world/2025/nov/25/rebuilding-human-made-abyss-gaza-un>

“Report says Israel’s operations ‘significantly undermined every pillar of survival’ and reduced the economy by 87%.”

“Israel’s war in Gaza has created a “human-made abyss”, and reconstruction is likely to cost more than \$70bn (£53bn) over several decades, the United Nations has said. The UN’s trade and development agency (Unctad) said in a report that Israel’s military operations had “significantly undermined every pillar of survival” and that the entire population of 2.3 million people faced “extreme, multidimensional impoverishment”. The report said Gaza’s economy had contracted by 87% over the course of 2023-2024, leaving its gross domestic product (GDP) per capita at just \$161, among the lowest globally.”

Amnesty International – Israel's genocide against Palestinians 'not over' despite ceasefire - new Amnesty briefing

<https://www.amnesty.org.uk/press-releases/israels-genocide-against-palestinians-not-over-despite-ceasefire-new-amnesty>

“Conditions for Palestinians in Gaza show no significant change, with no clear evidence to indicate that Israel’s intent has changed.”

Some more reports & other publications of the week

Lancet Comment - Post-separation abuse: an ignored public health crisis and preventable injustice

J Prah, L Gostin; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02205-6/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02205-6/fulltext)

“Although domestic violence is perceived to end when women leave their abusive partners, for many, separation means more insidious gender-based violence, namely post-separation abuse. Post-separation abuse occurs when legal, judicial, health, and child protection systems do not protect, and even harm, women and children. This institutional betrayal compounds the impacts of intimate partner violence on survivors and their children....”

“...In 2023, the UN Special Rapporteur on violence against women and girls found that abusers use family courts as tools to continue their abuse and coercion, discrediting mothers who are seeking to protect their children....Findings such as those from the UN Special Rapporteur on violence against women and girls unequivocally show that reforms are urgently needed to ensure judges, lawyers, health professionals, and child protection workers treat post-separation abuse as a serious crime.....”

Listing **three of these reforms.**

Miscellaneous

Plos Medicine (Editorial) - Global Burden of Disease 2023: Challenges and opportunities for a growing collaboration

Zulfiqar A. Bhutta; <https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1004838>

“The Global Burden of Disease 2023 represents the most comprehensive iteration of its kind since first reported in 1993. Despite improved health monitoring, data acquisition, and analytical methods, its expansion creates new challenges and opportunities for improving its accuracy, completeness, external validity, and policy relevance....”

UN News - Over 600 million children exposed to violence at home, UNICEF warns

<https://news.un.org/en/story/2025/11/1166454>

“More than one in four children globally – around 610 million – live with mothers who have experienced physical, emotional or sexual abuse by an intimate partner in the past year, making violence a part of their everyday lives, according to new data released by the UN Children’s Fund (UNICEF) on Tuesday.”

Guardian – Experts warn of ‘global crisis’ as number of women in prison nears one million

<https://www.theguardian.com/global-development/2025/nov/27/women-in-prison-rising-global-crisis-sexual-violence-forced-labour>

“Number of women incarcerated around the world rising at nearly three times the rate of men, with female prisoners often subjected to sexual violence and forced labour.”

“... More than 733,000 women and girls are currently incarcerated worldwide, according to the latest edition of the [World Female Imprisonment List](#). ”

Global health governance & Governance of Health

BMJ Editorial - G20 and the global south: opportunities for global health

<https://www.bmj.com/content/387/bmj.q2536>

(from 2024 but worth re-reading)

“Leadership by southern countries is focusing attention on health equity.”

Devex – China in your hands

<https://www.devex.com/news/money-matters-is-china-becoming-an-aid-superpower-110995>

“There’s a well-worn narrative that as the United States steps back from international development, China will fill the vacuum left behind. And while it’s not entirely clear yet that this is true, it does appear that China was steadily boosting aid spending, even before the recent U.S. decision to step away from many aspects of aid.”

“AidData, a research institute that provides a comprehensive mapping of China’s international financial activities, looked at well over \$1 trillion of spending, up to 2021. It found that in 2018, Chinese aid — that is, spending which would likely count as official development assistance, or ODA, if China were using the Organisation for Economic Co-operation and Development rules — [peaked at more than \\$12 billion](#). There is a major caveat here. It’s not absolutely clear how much of that was grants, and how much was loans. Given that the two are extremely difficult to

compare accurately, the Chinese aid budget might be rather less impressive than it first appears. Still, **that's only ODA spending**. China's famous **Belt and Road initiative also provided ten times as much funding** that couldn't be classified as aid, but would be counted under the more nebulous category of **"other official flows."**

PS: "Most of the money went to sub-Saharan Africa — \$13 billion, or nearly half of all ODA-like spending. South Africa topped the list because of one giant \$2.7 billion loan from the China Development Bank for the Kusile Power Plant. **Egypt, Sri Lanka, North Korea, Belarus, Cambodia, Bangladesh, and Côte d'Ivoire followed.** Transport, energy, health, and communications were the top sectors...."

- See **Devex Pro (gated)** [Is China headed to becoming the next aid superpower?](#)

"AidData's latest report shows that **\$253.1 billion of Chinese funding was spent or committed in other countries between 2018 and 2021.**"

BMJ GH – Shifting power dynamics in global health governance: a challenge and an opportunity for Asia and the Global South

N V Rao et al <https://gh.bmj.com/content/10/11/e021565>

« This commentary examines how recent events, including shifts in development aid and trust in global institutions, create both challenges and opportunities for the Global South to reshape health governance. **We identify concrete mechanisms through which Asian and Global South countries can strengthen collective health governance, including leveraging non-health multilateral forums, sharing innovations and developing new financing models.** Drawing from **successful examples across the region—from Thailand's universal health coverage to India's digital health infrastructure**—we demonstrate how South-South cooperation can drive sustainable health system strengthening. **We propose a vision for health regionalism** that begins with strengthening domestic capacity while building towards more equitable global partnerships that transcend traditional North-South dynamics."

UN News - UN presents UN80 Initiative Action Plan, setting coordinated path for system-wide reforms

<https://news.un.org/en/story/2025/11/1166429>

"The United Nations outlined how it intends to advance one of its most comprehensive system-wide reform efforts in decades, as Under-Secretary-General for Policy Guy Ryder presented the [UN80 Initiative Action Plan](#). The plan brings the Secretary-General's major UN80 reform proposals into a single, coherent structure to streamline efforts that will make the UN system deliver better."

"The plan does not introduce new proposals but sets out how the UN system intends to advance the ones already on the table: 87 actions, grouped into 31 work packages across 3 workstreams, stretching from peace operations and humanitarian response to technology, shared services and institutional mergers...."

PS: “The plan will also advance the assessments of possible mergers between [UNDP](#) and UNOPS, and [UNFPA](#) and [UN Women](#), and the path forward for [UNAIDS](#)....”

Reuters – UN children's agency to move majority of jobs out of Geneva and New York following funding cuts

[Reuters](#):

“The majority of staff jobs (70 %) at the United Nations children's agency in Geneva and New York will be relocated to cheaper locations, as the agency faces a 20% funding reduction due to global cuts in foreign aid, UNICEF said late on Wednesday last week.”

- Related: HPW - [UNICEF to Relocate Most of its Geneva Jobs to Rome](#)

PS: “Despite [funding cuts to the organization](#), approved by Congress in July, the US has remained a partner with UNICEF both as a member state and as a key donor. ...”

PS: “Gavi staff at its Geneva headquarters are understood to be anticipating a second round of redundancies after launching a transformation plan at the end of October, which announces a 33 per cent and 40 per cent reduction in full-time and non full-time roles at its secretariat over the next four years. This year, the health group has already eliminated 155 full-time jobs in Geneva after a decision to reduce its global workforce by 24 per cent.”

“UNAIDS, meanwhile, has cut about relocated all but 19 of its 127 staff at its Geneva headquarters to Nairobi as well as reducing the number of country offices from 85 to 54 and cutting about one-half of its staff worldwide to about 300.”

Munich Security Conference -Going South? Leadership on Global Public Goods

<https://securityconference.org/en/publications/munich-security-brief/leadership-global-public-goods/>

By S Eisentraut.

Global health financing

Vox Dev - Africa's domestic debt boom: New evidence from the African Debt Database

M Manger et al ; <https://voxdev.org/topic/methods-measurement/africas-domestic-debt-boom-new-evidence-african-debt-database> «

“ Africa's total public debt has risen more than fourfold since the early 2000s, but just as important as the increase in debt volumes is the shift in structure. This column uses a new open-access dataset covering more than 50,000 loans and securities issued by 54 African countries to reveal that African governments now raise more than half of their financing at home, reversing

decades of dependence on external lenders. While the rise of domestic debt markets may deepen financial systems, foster local investor bases, and enhance monetary autonomy, the authors warn that the line between financial deepening and financial repression can be thin. »

WHO Afro – Enhancing partnership for health financial hardship protection

<https://www.afro.who.int/news/enhancing-partnership-health-financial-hardship-protection>

“To strengthen health systems and help protect people from economic strain when seeking care, the World Health Organization (WHO) in the African Region and the African Union Institute for Statistics (STATAFRIC) are deepening collaboration to improve how countries measure health spending and monitor financial protection. By enhancing health data quality, this partnership is helping governments make informed decisions to ensure resources are used where they matter the most, advancing towards Universal Health Coverage (UHC)....”

« **A series of trainings organized by WHO and STATAFRIC are equipping countries with the practical skills to compile and interpret National Health Accounts (NHA) using the System of Health Accounts (SHA 2011) framework.** This global standard provides a clear picture of health spending and supports more responsive, people-centred health systems. ... **To build these skills, a three-day workshop took place in Accra, Ghana, in September 2024.** Representatives from 18 Anglophone Member States joined technical experts and international partners to explore how to harmonize health expenditure reporting and improve collaboration between national statistical offices and ministries of health...” **“Following the Accra workshop, a second sub-regional training convened in Dakar, Senegal, from 14 to 17 October 2025.** Co-organized with the World Bank, the workshop gathered experts from 25 francophone countries to strengthen skills in monitoring financial protection in health, including analysing household survey data to identify when health costs become a barrier to care.

UHC & PHC

P4H - Most Indians with Disabilities Lack Health Insurance: White Paper

<https://p4h.world/en/news/most-indians-with-disabilities-lack-health-insurance-white-paper/>

“Over 80% of Indians with disabilities lack health insurance; over half of applicants are rejected, often for their disability or pre-existing conditions. Barriers include unaffordable premiums, inaccessible platforms, and low awareness. **Experts call for urgent inclusion under Ayushman Bharat and standardizing disability coverage.”**

Pandemic preparedness & response/ Global Health Security

TWN – Overlooked Potential Users of the PABS System and Implications for Benefit-Sharing

C Rao et al ; <https://www.twn.my/title2/health.info/2025/hi251104.htm>

“The Secretariat of the World Health Organization (WHO) circulated to delegations an information document titled *Potential participants in/users of the PABS System beyond ‘participating manufacturers’*, which overlooks a wide range of actors who use pathogen-related digital sequence information to develop commercial products and generate revenue. The information document also classifies developers of VTDs as a category of users beyond “participating manufacturers”.

The WHO Secretariat prepared the document at the request of some countries during the informal session of the Intergovernmental Working Group (IGWG) that met in Geneva on 6-10 October. “

Science News – Vampire bats may have contracted H5N1 bird flu in Peru, raising worries about further spread

<https://www.science.org/content/article/vampire-bats-may-have-contracted-h5n1-bird-flu-peru-raising-worries-about-further>

“Bats could form a bridge between marine and terrestrial mammals, scientists say.”

Lancet Infectious Diseases - Strengthening global preparedness and response to arboviral disease threats: a call to action

WHO Global Arbovirus Initiative Technical Advisory Group;
[https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(25\)00686-3/abstract](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(25)00686-3/abstract)

“Arthropod-borne viruses (arboviruses), particularly those transmitted by *Aedes aegypti* and *Aedes albopictus*, are a growing global health threat. Approximately 70% of the world's population is at risk of infection from dengue, chikungunya, Zika, and yellow fever viruses, with the burden rising sharply in recent years. This increasing risk is driven by a confluence of factors, including rapid and often unplanned urbanisation, climate change, and increasing interconnectedness through global travel and trade....”

Africa CDC Launches AGARI, a Continent-Wide Genomic Data Platform to Strengthen Outbreak Response

<https://africacdc.org/news-item/africa-cdc-launches-agari-a-continent-wide-genomic-data-platform-to-strengthen-outbreak-response/>

“The Africa Centres for Disease Control and Prevention (Africa CDC) has launched an online platform that will allow researchers across the continent to share vital genomic data on disease-

causing pathogens of concern to Africa. Known as the **Africa Genome Archiving for Response and Insight (AGARI)**, the platform is the product of a partnership between Africa CDC, the African Society for Laboratory Medicine (ASLM), and Member States...”

Nature Medicine - A much-needed vaccine for Nipah virus

<https://www.nature.com/articles/d41591-025-00068-y>

“**A phase 1 trial** suggests safety, tolerability and immunogenicity of a candidate subunit vaccine against the deadly Nipah virus, for which countermeasures are urgently needed.”

Planetary health

Lancet Planetary Health – A call to action: climate leadership at the World Health Assembly

Thais Araújo Cavendish et al; [https://www.thelancet.com/journals/lanplh/article/PIIS2542-5196\(25\)00267-0/fulltext](https://www.thelancet.com/journals/lanplh/article/PIIS2542-5196(25)00267-0/fulltext)

« **Although there is a growing awareness among health professionals and health institutions regarding the causal relationship between climate change and disease, this sector still lacks political will, funding, and infrastructure to lead ambitious and equitable response policies.** The **World Health Assemblies (WHAs)**, where global health priorities are discussed annually by WHO and its 194 member states, **clearly reflect this trend. Since the adoption of the UN Framework Convention on Climate Change in 1992, only seven WHAs have addressed climate change and its impacts on human health and health systems with gaps of up to a decade.** The [table](#) summarises these WHA documents in which leadership and emergency perception in the health sector are expressed. Among these, **only six assemblies have issued decisions or resolutions on the effects of climate change on health.....”**

“**.... Key studies in global health suggest the world has faced more than the seven PHEICs declared by WHO; however, political issues and a strong focus on security prevented other public health emergencies from achieving PHEIC status. Could this be the case for the climate emergency?** ... **Recognising the severe effects of climate change on human health as a climate emergency could dramatically shift the perception and engagement of health stakeholders.** However, it is crucial to uphold transparency and participation, which are often lacking in emergency response strategies. **For the next years, WHA should seize the opportunity to elevate the leadership role of the health sector in addressing climate emergency....”**

Science – Turning point

<https://www.science.org/content/article/global-carbon-emissions-will-soon-flatten-or-decline>

“**Global greenhouse emissions will soon flatten or decline—a historic moment driven by China’s surge in renewable energy.**”

The Conversation - Climate change and inequality are connected – policies need to reflect this

A David et al; <https://theconversation.com/climate-change-and-inequality-are-connected-policies-need-to-reflect-this-269657>

« An increasingly strong case is being made to bring inequality into discussions about climate change. The logic behind this has been set out by leading international institutions such as the International Labour Organisation, the UN Environmental Programme and the Network for Greening the Financial System. All have begun to highlight the connection between climate outcomes and inequality. They are stressing that inequality should be viewed as posing systemic and macroeconomic risk....»

“In a recent summary paper we analysed how environmental policies can be designed and implemented with an inequality-reduction lens. We used examples from South Africa, Colombia, Indonesia and Mexico. As researchers in the research department of the French development agency the AFD, specialising in the analysis of inequality and the social implications of energy and economic transitions, we have seen how climate action can either narrow or deepen existing divides, depending on how policies are designed....”

“The core of the case we make is that reducing inequality should be a guiding principle in decisions on climate change....”

Lancet Planetary Health - Inclusion of wellbeing impacts of climate change: a review of literature and integrated environment–society–economy models

I Schrijvers et al; [https://www.thelancet.com/journals/lanplh/article/PIIS2542-5196\(25\)00253-0/fulltext](https://www.thelancet.com/journals/lanplh/article/PIIS2542-5196(25)00253-0/fulltext)

Review.

AIIB and Gavi Launch Report Recognizing Health and Immunization Investments as Key to Building Climate-Resilient Communities

<https://www.aiib.org/en/news-events/news/2025/aiib-gavi-launch-report-recognizing-health-immunization-investments-as-key-building-climate-resilient-communities.html>

Released during Belém’s Health Day.

- And a link: [Plos Climate - From spectacle to disaster scenario: Reimagining fictional catastrophe in The Day After Tomorrow with the current physical, political and social science of Atlantic Ocean circulation collapse](#) *(for the fans of the movie :)*

Covid

Guardian - Vote for competent leaders, not entertainers – that’s what I wish the Covid report could say

D Sridhar; <https://www.theguardian.com/commentisfree/2025/nov/21/covid-report-leaders-pandemic-political-system>

“To prevent a future pandemic we’d need agile leadership, smart decision-making, humility and trustworthiness. How does one build those into a political system?” (*Beats me too.*)

Plos GPH - Assessing WHO’s influence: A randomized conjoint experiment on vaccine endorsements in diversified global health systems

Naoko Matsumura et al;
<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0005410>

“... This study investigates the influence of World Health Organization (WHO)’s endorsements of vaccines amidst this environment. In fall 2020, we conducted a randomized conjoint experiment in Canada (832 respondents, 8,320 profiles evaluated), Japan (1,474, 14,740), and the United States (1,001, 10010), focusing on both whether and when people choose to vaccinate against COVID-19. **Our experiment randomly varied exposure to vaccine endorsement information from several prominent global health governance players, including the WHO, the Centers for Disease Control and Prevention (CDC), Oxford University, and the Gates Foundation; and, unlike previous studies, different combinations of these endorsements were used.** WHO endorsements increase individuals’ willingness to vaccinate more quickly, even when accompanied by endorsements from other credible organizations. However, the effect of WHO endorsements is not significantly stronger than that of other organizations. Notably, the impact of the WHO’s endorsement diminishes as the number of endorsements from other organizations increases. The WHO has the greatest impact when it is the first (or among the first) of many organizations to endorse a vaccine as safe and effective, and it may help inspire public confidence in less effective (but potentially lifesaving) vaccines. **Overall, our study shows that WHO endorsements significantly reduce vaccine hesitancy, but endorsements from other global actors can exert comparable effects.”**

Infectious diseases & NTDs

Science - New vapor tool fights mosquitoes by slowly releasing insecticide in homes. Will it catch on?

<https://www.science.org/content/article/new-vapor-tool-fights-mosquitoes-slowly-releasing-insecticide-homes-will-it-catch>

“World Health Organization supports “spatial repellents” to prevent malaria, but it’s unclear who will pay for them.”

“...In August, these devices, called “spatial repellents” or “spatial emanators,” became the first new malaria control tool in decades to be recommended by the World Health Organization

(WHO). Trials suggest **they also repel sandflies**, which spread a parasitic disease named leishmaniasis, **and they might work against mites**, which transmit scabies. ...”

“...Still, there are important questions about where and how the new tools will be used. Few think **they can replace insecticide-treated bed nets**, a cornerstone of malaria control, and it’s not clear **who will pay for the extra protection at a time when global health budgets are shrinking**. Countries “will have to choose carefully whether they deploy any remaining funds onto vaccines, spatial repellents, or anything else,” says Fredros Okumu, a mosquito biologist at the Ifakara Health Institute.”

PS: “...Even though another large trial for malaria, carried out in Mali between 2022 and ’24, found no effect, **the evidence was enough for WHO to issue its recommendation—with the qualifier that it’s based on “moderate evidence.”** The move opens the door for large donors such as the **Global Fund to Fight Aids, Tuberculosis and Malaria to procure spatial repellents and for countries to include them in vector control programs**. “We are excited by the **addition of this new vector control class**,” says Kate Kolaczinski, a malaria specialist at the Global Fund, but she thinks tight budgets will slow their introduction.....”

Lancet Primary Care -Advancing sustainable HIV prevention in Africa

Emily K Mwaringa et al; [https://www.thelancet.com/journals/lanprc/article/PIIS3050-5143\(25\)00081-0/fulltext](https://www.thelancet.com/journals/lanprc/article/PIIS3050-5143(25)00081-0/fulltext)

Comment on a new Lancet Primary Care study. “**The trial by Kenneth K Mugwanya and colleagues, published in The Lancet Primary Care, is a substantial and timely contribution to the literature on HIV prevention and health systems integration.** It is one of the first large-scale, pragmatic stepped-wedge cluster randomised trials **to embed oral pre-exposure prophylaxis (PrEP) delivery within routine public family planning clinics in Africa.** Whereas previous studies often depended on project-funded staff or parallel service-delivery structures, **the trial by Mugwanya and colleagues shows the feasibility of integrating PrEP into existing public health systems using local health-care providers.** ...”

HPW - Can AI Democratize the Global Fight Against Malaria?

<https://healthpolicy-watch.news/can-ai-democratize-the-global-fight-against-malaria/>

“Artificial intelligence could compress years of drug discovery into months – helping to overcome growing drug resistance to existing treatments for malaria and other vector-borne diseases. But scientists in low-income countries are often left behind. **Jeremy Burrows, Medicines for Malaria Venture (MMV) vice president, head of drug discovery, explains how a new open-access, AI-powered drug discovery tool co-developed by MMV aims to level the playing field.** ...”

Cidrap News - Some high-flying tropical mosquitoes carry disease-causing pathogens long distances, study finds

<https://www.cidrap.umn.edu/dengue/some-high-flying-tropical-mosquitoes-carry-disease-causing-pathogens-long-distances-study>

“Some high-flying tropical mosquitoes carry disease-causing pathogens long distances, study finds.”

“In the first study of its kind, mosquitoes captured high above Mali and Ghana were found to be infected with arboviruses, protozoans, and parasitic worms that cause human diseases such as dengue, malaria, and the disfiguring illness lymphatic filariasis, researchers reported yesterday in PNAS. They also note that the vectors could spread diseases many miles away....”

AMR

Cidrap News - New WHO framework aims to tackle rising resistance to HIV, STI, and hepatitis treatments

<https://www.cidrap.umn.edu/antimicrobial-stewardship/new-who-framework-aims-tackle-rising-resistance-hiv-sti-and-hepatitis>

“The World Health Organization (WHO) yesterday released a roadmap to address rising resistance to treatments for HIV, hepatitis B and C, and sexually transmitted infections (STIs). Building on the WHO's Global Action Plan on Antimicrobial Resistance, the integrated drug resistance action framework proposes a unified global approach to prevent the emergence and spread of drug resistance and reduce its impact through a people-centered approach. The document outlines strategic priorities and concrete actions across five key domains: prevention and response; monitoring and surveillance; research and innovation; laboratory capacity; and governance.”

Cidrap News - To tackle rising antibiotic resistance, GARDP aims for access

<https://www.cidrap.umn.edu/antimicrobial-stewardship/tackle-rising-antibiotic-resistance-gardp-aims-access>

“... Addressing the limited access to newer antibiotics in many parts of the world is one of the primary goals of the Global Antibiotic Research & Development Partnership (GARDP). Created in 2016 by the WHO and the Drugs for Neglected Diseases Initiative, GARDP works with drug companies and other stakeholders to accelerate the development of antibiotics for multidrug-resistant infections, promote their responsible use, and ensure access for all.”

“CIDRAP News recently spoke with Francois Franceschi, PhD, associate director of the serious bacterial infections portfolio at GARDP, about the organization's efforts to bring new antibiotics to market and ensure that they're available to all who need them....

Cidrap News - Public understanding of antibiotics is insufficient, global study finds

<https://www.cidrap.umn.edu/antimicrobial-stewardship/public-understanding-antibiotics-insufficient-global-study-finds>

“Despite the global expansion of antibiotic awareness campaigns over the past decade, the public's understanding of antibiotics remains insufficient, researchers reported last week in *Clinical Microbiology and Infection*.”

“In a **systematic review and meta-analysis**, researchers from Australia, Nigeria, and the United Kingdom identified 227 studies from 98 countries that reported the knowledge of antibiotic use and resistance among the public. They found that **73.2% of the 322,492 participants correctly recognized that antibiotics are effective in treating bacterial infections and 72.5% knew that excessive antibiotic use reduces the effectiveness of antibiotics. But only 42.1% knew that antibiotics were not effective against viruses, and that number was significantly lower in countries such as Laos (7.2%), Myanmar (11.7%), and Bangladesh (12.5%). Similarly, only 35.1% of respondents knew that antibiotics don't speed up recovery from cold and flu.** “

“The study authors note that **a systematic review conducted in 2015—the year the World Health Organization declared antimicrobial resistance (AMR) a top 10 global health threat—reported that 46.1% of the public was aware that antibiotics are ineffective against viruses, which suggests a decade of public awareness campaigns has had little impact....**”

Plos GPH - Monitoring antimicrobial resistance trends from global genomics data: amr.watch

Sophia David et al;

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0005256>

« **Whole genome sequencing (WGS) is increasingly supporting routine pathogen surveillance at local and national levels, providing comparable data that can inform on the emergence and spread of antimicrobial resistance (AMR) globally.** However, the potential for shared WGS data to guide interventions around AMR remains under-exploited, in part due to challenges in collating and transforming the growing volumes of data into timely insights. **We present an interactive platform, amr.watch (<https://amr.watch>), that enables interrogation of AMR trends from public WGS data on an ongoing basis to support research and policy.** The amr.watch platform incorporates, analyses and visualises high-quality WGS data from WHO-defined priority bacterial pathogens. ...”

NCDs

Economist – There's more to cholesterol than simply “good” or “bad”

<https://www.economist.com/science-and-technology/2025/11/25/theres-more-to-cholesterol-than-simply-good-or-bad>

“Standard health tests may miss those at most risk.” (*one for the medics among you*)

Excerpt: “....A new picture of cholesterol has been emerging in recent years, however, thanks to several strands of research over the past two decades. Medical guidelines are now being rewritten to better reflect who is at most risk of heart disease. **The standard measure of “bad” cholesterol, it turns out, fails to account for the riskiest form of it. This extra-bad cholesterol is also resistant to the usual countermeasures. Scientists are also trying to solve a mystery: why is it that “good” cholesterol appears, in many cases, to end up being bad news?** At very high levels, HDL-cholesterol

has recently been linked with higher mortality and a wide range of health problems, including heart disease and cancer. **These discoveries come from a better scientific understanding of the lipoprotein particles themselves, which turn out to come in more varieties than just LDLs and HDLs. It appears that there is a whole lipoprotein ecosystem.** And, as in a real ecosystem, the denizens have different roles. Some are more dangerous than others....”

Stat - I have long Covid. Don't call my chronic disease a 'journey'

P Swenson; <https://www.statnews.com/2025/11/25/chronic-disease-journey-long-covid/>

“I would sooner call the experience a bad trip.”

International Health - Crowding-out effect of out-of-pocket expenditure on non-communicable diseases in sub-Saharan Africa: a Nigerian case study

<https://academic.oup.com/inthealth/advance-article/doi/10.1093/inthealth/ihaf117/8328886?searchresult=1>

By Adelakun Odunyemi et al.

Stat Opinion – The definitional problems at the heart of the neurodiversity movement

J Pemment; [Stat News](#) ;

“The language opens it up to criticism. Advocates must be prepared.”

CGD (blog) - Does Lead Exposure Really Kill Five Million People Per Year? (Probably, Yes)

L Crawford; <https://www.cgdev.org/blog/does-lead-exposure-really-kill-five-million-people-year-probably-yes>

“Two years ago we did a deep dive into the evidence on [lead exposure and children's cognition](#), ultimately convincing ourselves that the evidence is causal, and what the size of the effect is. But a recent paper by [Larsen and Sánchez-Triana](#) found that most (three quarters) of the burden of lead exposure is due to effects on cardiovascular disease, rather than cognitive damage to children. They estimate 5.5 million people died in 2019 due to cardiovascular disease attributable to lead exposure. That's more people than died of HIV/AIDS and malaria combined. Just how reliable are those estimates?...”

Crawford assesses the current evidence.

Mental health & psycho-social wellbeing

NYT - Study Finds Mental Health Benefit to One-Week Social Media Break

<https://www.nytimes.com/2025/11/24/health/social-media-detox-mental-health.html>

“Young adults who engaged in a social media “detox” reported reductions in depression, anxiety and insomnia, though it was unclear how long the effects would last. Dialing down the use of social media for a week reduced symptoms of anxiety, depression and insomnia in young adults, according to [a study published on Monday](#) in the journal JAMA Network Open.”

...The **mental health benefit** seemed to come from avoiding problematic social media behaviors, like addictive use and negative social comparison, rather than a change in overall screen time, the authors said. Indeed, the participants, on average, spent slightly more time on their phones during the detox week.....

PS: “Several psychologists said the new study was of limited value because its design allowed for bias.....”

WHO - Guidance on policy and strategic actions to protect and promote mental health and well-being across government sectors

<https://www.who.int/publications/i/item/9789240114388>

“ This **new Guidance** supports governments in assessing how sector mandates, policies, and plans affect mental health, and provides practical steps to integrate mental health and well-being into the development, implementation, and evaluation of sectoral policies....”

Sexual & Reproductive health rights

HHR - The State of International Human Rights Law on Sexual and Reproductive Health: An Overview

<https://www.hhrjournal.org/2025/11/24/the-state-of-international-human-rights-law-on-sexual-and-reproductive-health-an-overview/>

By Christina Zampas and Åsa Nihlén.

O'Neill Institute - New Reports Bring Global Solutions to Bolster U.S. Lawmakers in the Fight to Protect Reproductive Freedom

<https://oneill.law.georgetown.edu/press/new-reports-bring-global-solutions-to-bolster-u-s-lawmakers-in-the-fight-to-protect-reproductive-freedom/>

“Today, the State Innovation Exchange (SiX) and the O’Neill Institute for National and Global Health, released ***Beyond Borders***, a groundbreaking report series that examines how countries around the world have successfully expanded abortion access and protected reproductive rights. The reports offer U.S.-based policymakers proven strategies to counter restrictions and treat abortion as essential health care. Designed as a catalyst for state-level policy innovation, **each Beyond Borders report synthesizes international human rights norms, public health standards, and real-world legislation, with evidence-based approaches that can be implemented in U.S policy.** Additionally, Beyond Borders situates the United States within the broader global context, revealing how far the country has fallen behind international standards and the pathways available to catch up.”

JCPH (Editorial) - Reproductive vulnerabilities: A critical perspective

L Sochas et al ; <https://journalhosting.ucalgary.ca/index.php/jcph/article/view/82279>

“In this **introduction to the Special Issue**, we reflect on **why a critical approach to the concept of vulnerability is particularly important for reproduction**. We explain how each article in the special issue draws out key **insights from critical theories of vulnerability**, including: (1) The importance of conceptualising vulnerability as created by social structures rather than as inhering, biologically or otherwise, in ‘the vulnerable population’; (2) How the violent application of reproductive norms, within and beyond the state, creates vulnerability; and (3) Reflections on how vulnerability is defined in the realm of reproduction, who shapes the category of vulnerable’, and what consequences this may have....”

Access to medicines & health technology

WHO Bulletin – Bridging the diagnostic gap in diabetes

Bianca Hemmingse et al; https://cdn.who.int/media/docs/default-source/bulletin/online-first/blt.25.293828.pdf?sfvrsn=cddd4098_3

“...**This gap reflects three major health systems challenges**: limited access to diagnostic technologies, limited familiarity of health workers with diagnostic devices and testing algorithms for diabetes, and low public awareness of diabetes....”

“...**Key actions to bridge these gaps include** implementing national health policies that address noncommunicable diseases, establishing national diabetes guidelines and protocols, ensuring the availability of a trained health workforce at all levels and providing insurance benefit packages that cover diabetes diagnosis and treatment. Policy-makers must also ensure access to insulin and related treatments necessary for the effective management of people with diabetes. Health systems must ensure the availability and affordability of high-quality diagnostic devices, medicines and related consumables (such as syringes, lancets and test strips) that are quality-assured by a regulatory agency, and that these are reliably procured and supplied to the end user. In addition, health systems should include data monitoring systems and indicators to measure performance in diabetes diagnosis and control....”

BMJ GH - The association between drug shortages and prices across 74 countries: uncovering global access inequities

<https://gh.bmj.com/content/10/11/e018960>

By S Hu et al.

BMJ (Feature) - Will Americans ever be able to afford weight loss drugs?

<https://www.bmj.com/content/391/bmj.r2384>

“Next generation weight loss drugs are prohibitively expensive for many in the US who would benefit from taking them—and may remain so, thanks to the **phenomenon of patent thickets**. **Paige Huffman** reports.”

TGH - Tracking Pharma's Progress on U.S. Onshoring Efforts to Avoid Tariffs

P Yadav et al; <https://www.thinkglobalhealth.org/article/tracking-pharmas-progress-on-u-s-onshoring>

“To avoid tariffs, drug giants committed more than \$480 billion to U.S.-based production. Two indicators gauge whether the pledges are real.”

“We assess the materiality and saliency of these declared investments—in the short to medium term—by tracking whether the announcements have translated into capital spending and demand for drug manufacturing equipment....”

Plos GPH – Understanding the acceptability of COVID-19 antigen rapid diagnostic tests: A multi-country qualitative study

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0005119>

By W S Lora et al.

BMJ GH - Availability of essential medicines for non-communicable diseases: a scoping review of challenges and opportunities

<https://gh.bmj.com/content/10/11/e019634>

By I R Joosse et al.

TWN – UNGA draft resolution on rare diseases silent on IP barriers and TRIPS flexibilities

K.M. Gopakumar; <https://www.twn.my/title2/health.info/2025/hi251105.htm>

“A draft United Nations General Assembly resolution on rare diseases is silent on the intellectual property barriers to access to treatment and the use of TRIPS flexibilities to overcome such barriers.”

“The revised draft resolution dated 7 November ... This would be the third UNGA resolution on rare diseases since 2021. The second resolution was adopted in 2023. None of these resolutions contains any operational paragraph regarding the use of TRIPS flexibilities. This is a departure from other UNGA resolutions on various health issues such as [HIV/AIDS](#), [non-communicable diseases](#) and [universal health coverage](#)...”

Human resources for health

HRH - A scoping review on medical students' international migration: trends, determinants, and implications for global health workforce planning

<https://human-resources-health.biomedcentral.com/articles/10.1186/s12960-025-01027-x>

by G T Z Ser et al.

Decolonize Global Health

Book - Decolonizing Global Health A Critical Realist Perspective

Ferdinand C Mukumbang; <https://www.routledge.com/Decolonizing-Global-Health-A-Critical-Realist-Perspective/Mukumbang/p/book/9781032700779>

“This insightful work uses a critical realist perspective to unpack the colonially informed culture, structures, and mechanisms which exist across global health institutions, offering a vision for radical change through a process of decolonization...”

BMJ GH - Embrace the tension: a decolonial reframing of Implementation Science

F Mascayano et al ; <https://gh.bmj.com/content/10/11/e021548>

“Implementation Science has largely privileged the transfer and scale-up of interventions developed in high-income settings, often sidelining local knowledges and reinforcing postcolonial hierarchies. This dominant model treats tension between global frameworks and local realities as a liability, suppressing opportunities for co-creation, equity and innovation. A decolonial reframing of the field argues that rigour cannot be separated from justice: genuine learning emerges by embracing, rather than smoothing over, the friction that arises when diverse ways of knowing and doing meet....”

Book - Epistemic Injustice: An Introduction

<https://www.routledge.com/Epistemic-Injustice-An-Introduction/McGlynn/p/book/9781032251608>

By Aidan McGlynn.

Miscellaneous

Nature Africa (Comment) - What AI can do for improving health in Africa

<https://www.nature.com/articles/d44148-025-00371-3>

“Context-specific tools offer African health systems new ways to predict, prepare, and respond to epidemics.”

“There are three areas where African countries can make real gains by investing in context-specific AI, covering early warning systems, predictive disease modelling, and targeted public health interventions....”

PS: “...Many imported AI models fail because they are trained on data that doesn’t reflect African realities. As [recent commentaries](#) have highlighted, foundational models often exclude African languages and contexts, limiting their relevance. **AI tools must be developed with local ownership using African data, guided by African institutions, and deployed with local needs in mind.**”

Jason Hickel - What is delinking?

[Jason Hickel](#);

“A crucial strategy for transformation in the 21st century.”

“The concept of delinking has gained traction recently among some political movements in the global South, including with an international conference in Mexico on this topic that took place last month. What is delinking, and how can it be achieved? Delinking was best described by the Egyptian economist Samir Amin...”

Reuters - UAE announces \$1 billion initiative to expand AI in Africa

[Reuters](#);

“The United Arab Emirates said on Saturday it will invest \$1 billion to expand AI infrastructure and AI-enabled services across Africa, with the aim of helping countries meet national development priorities. UAE Minister of State Saeed Bin Mubarak Al Hajeri announced the “AI for development initiative” at the [G20 leaders' summit](#) in Johannesburg, saying it would bring AI technology to areas such as education, healthcare, and climate adaptation.....”

- Related: [Bloomberg - UAE Targets Africa Trade for Food Security, High Growth Rates](#)

“The United Arab Emirates, sub-Saharan Africa’s biggest trade partner after China, plans to further expand commerce with the region as it seeks to bolster food security and tap into rapid growth of some African economies, a minister said. “The opportunity in Africa looks better than investing in

mature markets or markets that are decaying,” said Saeed bin Mubarak Al Hajeri, UAE minister of state at the Ministry of Foreign Affairs, where his responsibilities include advancing the country’s economic activities. **“It’s very hard for other markets to compete with African opportunities in my view.”** The UAE is among countries that have joined Africa’s major investors — European nations, China and the US — in jockeying for more access to the world’s youngest populations, reserves of critical minerals and economic growth rates that often significantly outpace those in the **developed world.** Between 2020 and 2024, the UAE invested almost \$119 billion in Africa, according to Al Hajeri. Two-way trade with the sub-Saharan region exceeded \$75 billion last year, more than triple the amount a decade ago, according to International Monetary Fund data.....”

Guardian - Jakarta overtakes Tokyo as world’s most populous city, according to UN

<https://www.theguardian.com/world/2025/nov/27/jakarta-overtakes-tokyo-most-populous-city-world>

“The rankings were changed after the UN used new criteria to give a more accurate picture of the rapid urbanisation driving the growth of megacities.”

“The Indonesian capital is home to 42 million people, according to an estimate by the [population](#) division of the **UN Department of Economic and Social Affairs in its [World Urbanisation Prospects 2025](#) report** published this month. Jakarta is **followed by the Bangladeshi capital Dhaka with 37 million people. With a population of 33 million, Tokyo** – defined in the study as a megalopolis that includes three neighbouring prefectures – **slipped to third place.** That contrasts dramatically with the UN’s previous report in 2018, which placed the Japanese capital top with a population of 37 million.....” **“The shift in rankings is the result of new methodology that is more consistent in the way it categorises cities, towns and rural areas,** according to UN officials.”

Papers & reports

Book - Seeing Politics: Film, Visual Method, and International Relations

S Harman; <https://www.mqup.ca/Books/S/Seeing-Politics2>

“Pushing the boundaries of how we do research, how we communicate research, and what counts as scholarship in world politics.”

International Journal for Equity in Health - Conceptualising hardship areas in Sub-Saharan Africa: a scoping review

Caroline M. N. Auma et al ; <https://equityhealthj.biomedcentral.com/articles/10.1186/s12939-025-02694-x>

« Many national development strategies are implemented at the subnational administrative level, serving as critical units for service delivery. **Some subnational levels remain underserved and face significant obstacles to achieving equitable development.** In Sub-Saharan Africa, underserved regions are often called **hardship areas;** however, there is no clarity on how such areas are defined across various contexts. Therefore, **this scoping review aimed to delineate the definitions of**

hardship areas across countries in Sub-Saharan Africa and develop a unified typology of their features....”

Conflict & Health - Resilient health systems appraisal model. whole-of-system approach to health system resilience in fragile contexts: a best-fit framework synthesis

M E Ibrahim, K Blanchet ; <https://link.springer.com/article/10.1186/s13031-025-00735-4>

BMJ GH - Governing health systems with a gender lens

David Clarke et al; https://gh.bmj.com/content/8/Suppl_5/e022547

BMJ GH - Governance in practice: building national capacity for stewardship beyond the SDGs

David Clarke; https://gh.bmj.com/content/8/Suppl_5/e022481

PS: Both articles are part of the **BMJ GH supplement WHO: Governance of the Private Health Sector.**

Lancet Correspondence on upcoming Lancet Commission on disability and health

Including authors’ reply: [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)02202-0/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)02202-0/fulltext) (by H Kuper et al)

Reacting to two letters.

Tweets (via X & Bluesky)

M Kavanagh

“ **Important, complex day on AIDS, TB, Malaria. Those saying Global Fund is dead=wrong. US surprise \$4.6b pledge, total \$11.34b. South Africa, India, New Zealand, Cote D'Ivoire, foundations increase. BUT still billions short of what's needed. France, EC, Japan missing in action. Complex.... »**

World Health Summit

“**By 2035, the defining shift in global health will be mainstreamed 'resilience returns', where governments and partners treat health spending as a strategic investment that safeguards stability, growth, and peace.**” - Carsten Schicker, CEO, World Health Summit In his latest [interview](#) Carsten outlined a future where climate-smart care, sustained pandemic preparedness, and cross-sector co-financing models become the global norm, all powered by stronger evidence and collaboration. At the World Health Summit, we’re committed to catalyzing this transition.”

Fatima Hassan

Quote in a [Vox](#) article: “That **geopolitical pushback by the Trump administration against South Africa has now basically made its way into a public health strategy**,” said Fatima Hassan, a human rights lawyer who heads Health Justice Initiative in Cape Town, South Africa. She said that **lenacapavir has become a kind of diplomatic carrot — and stick**. Friendly, compliant governments, like Eswatini, have received early shipments, whereas South Africa or Nigeria — countries that have fallen out of favor with Trump — seem to have received the short end of the stick.”

Adam Kucharski

“The **default pandemic strategy for many countries** does now seem to be “Play it by ear then lockdown and wait for a vaccine”.”

SDGCounting

“**UNICEF’s State of the World’s Children 2025** shows **more than 400M children living in poverty**, often missing basic needs like food or sanitation. Essential reading for SDG1 and SDG10.”