

# IHP newsletter 862: AI summary – Kicking off the Global Health year

## Introduction and Featured Article

The global health community enters 2026 amidst significant geopolitical turbulence, described by Kristof Decoster as a "world on fire". The year kicks off with pivotal discussions in Geneva regarding **Pathogen Access and Benefit Sharing (PABS)**, the **158th WHO Executive Board (EB158)** meeting, and the World Economic Forum in Davos. A significant highlight is the launch of the **Lancet Commission on 21st Century Global Threats to Health**, which seeks to forecast the most costly global problems over the next 75 years.

In the **Featured Article**, **Gorik Ooms** examines the "**America First Global Health Strategy**" as a lesson in the consequences of a "might is right" approach to governance. Ooms argues that while the COVID-19 pandemic highlighted the need for reciprocity in international cooperation, the current US administration has instead opted for **transactional bilateralism**. By withdrawing from the WHO and the PABS negotiations, the US has pressured 14 African nations into agreements that prioritize American access to pathogen data and specimens over equitable benefit sharing. This shift suggests a return to a **unipolar regime** where economic and political power dictates health security, leaving Europe and other high-income regions to potentially "get a taste of their own medicine" regarding vaccine access and information hoarding.

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## Highlights of the week

### Run-up to WHO's Executive Board meeting (2-7 Feb)

The upcoming EB158 session faces critical questions regarding the **US withdrawal from the WHO**, specifically the legal implications of the US failing to pay membership dues for the past year. Legal officers note that under a 1948 agreement, a one-year notice and full payment are required for withdrawal. Financially, the WHO is expected to struggle with its **2026-27 programme budget**, as many easily accessible funding sources have been exhausted. Member states are urged to honour their commitments to increased assessed contributions, particularly as gaps remain in staffing and support from partners like Gavi.

### Run-up to Davos

The **Global Risks Report 2026** identifies **geoeconomic confrontation** as the top short-term global risk. While economic downturns and inflation have surged in priority, the report emphasizes that **environmental risks**, such as extreme weather and biodiversity loss, remain the most severe threats over a ten-year horizon. Experts warn that only 1% of respondents anticipate a "calm" global outlook.

### Bilateral health agreements US-African countries & America First Global Health strategy

The US has signed bilateral co-operation agreements with **14 African countries**, including Kenya, Rwanda, and Nigeria, trading aid for rapid disease information. These MOUs are characterized by **tight pathogen-sharing terms** and opportunities for US companies to support supply chains. Critics argue these deals represent an "extraction and transaction" model that pays scant attention to saving lives, instead prioritizing US interests. However, some observers note that the US Congress has shown a fissure with the administration by continuing to back **Gavi** with a \$300 million allocation.

### **Reimagining global health, international cooperation, multilateralism, development...**

A fundamental reimagining of the global economy is proposed, moving away from the "myth of growth" toward an "**economy of care**" that views prosperity as health. Scholars warn that **climate change is destabilising governance**, allowing health-harming corporations to capitalise on systemic weaknesses. Additionally, Bill Gates promotes "**optimism with footnotes**," citing AI-driven innovation as a reason for hope, though he acknowledges deep polarisation.

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

The **Gates Foundation** has committed to an historic **\$9 billion annual payout** as part of a plan to close by 2045, focusing on maternal and child health and infectious diseases. Meanwhile, research into the "Gates effect" suggests a "**crowding-in**" phenomenon, where other donors increase funding in areas where the foundation is active. In the US, a bipartisan **\$50 billion foreign assistance deal** was struck, restoring some funding for the Global Fund and Gavi despite administration proposals for deeper cuts.

### **Global tax justice/reform, debt crisis, fiscal space, ...**

Discussions regarding a **UN Tax Convention** reveal a divide, with the Global North resisting and the Global South showing uneven engagement. The World Bank reports that **one-quarter of developing countries** are poorer now than in 2019. In Africa, the rise of **stablecoins** (digital currency) poses a risk of "dollarisation," potentially weakening monetary sovereignty and driving capital flight.

### **UHC & PHC**

Habib Benzian critiques the latest WHO report on **Universal Health Coverage (UHC)** for "optimism-washing"—framing stalled progress as positive change to preserve institutional routines. Bibliometric reviews of **Primary Health Care (PHC)** research show that while output has grown, it remains heavily concentrated in high-income nations, necessitating a shift toward locally driven research agendas in LMICs.

### **Human Resources for Health**

Specialists in LMICs often fail to align with local health needs, and there is a documented **scarcity of surgeons, anaesthetists, and psychiatrists**. Conversely, there is a growing case for integrating **community health workers (CHWs)** into the health systems of high-income countries to address ageing populations and workforce shortages. In Africa, the **Health Workforce Agenda 2035** aims to address chronic shortages across the continent.

### **Trump 2.0**

The US CDC's global health work remains in jeopardy following staff cuts and program closures. Furthermore, changes to the **US vaccine schedule** and comments by administration allies suggest a

shift toward "individual autonomy" that downplays scientific expertise and could lead to lawsuits against manufacturers. Experts worry this could undermine vaccine confidence globally.

### **PPPR (Pandemic Prevention, Preparedness, and Response)**

Negotiations for the **PABS system** continue, though US bilateral deals may conflict with international efforts to treat pathogen sharing and benefits as equals. **CEPI** is funding Phase 3 trials for **Moderna's mRNA pandemic influenza vaccine**, with a commitment to allocate 20% of capacity to LMICs. Additionally, scientists remain concerned about the global spread of **bird flu**.

### **Mpox & More on Health Emergencies**

The **Africa CDC** is advancing the "MpOx Study in Africa" (MOSA) to find effective antiviral treatments. Regarding **Ebola**, experts argue for the routine preventive vaccination of healthcare providers in prone regions as a core occupational health intervention.

### **NCDs & commercial determinants of health**

The WHO is urging governments to implement **health taxes on sugary drinks and alcohol**, noting that these products are becoming cheaper in real terms while health systems face mounting pressure from preventable diseases. Currently, wine remains untaxed in at least 25 countries, primarily in Europe.

### **Mental Health**

**Youth suicide** is now the third leading cause of death among young people, with 150,000 deaths annually, mostly in LMICs. Prevention strategies must look beyond mental illness to address underlying **social determinants**.

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

There is an urgent call to **reimagine medical R&D** to reach neglected patients, as market-based systems fail to deliver diagnostics and treatments for public health needs. **Unitaid** is investing \$31 million to widen access to the HIV prevention drug **lenacapavir** in South Africa and Zambia through "unorthodox channels" like pharmacies and hair salons.

### **Decolonize Global Health**

The discourse on becoming a **decolonial scholar** continues, with calls for virtual debates between major global health organisations to move the agenda forward.

### **Planetary Health**

Data confirms that **2025 was the third-hottest year on record**, leading scientists to declare the Paris Agreement's 1.5°C limit "dead in the water". A "systems reset" is proposed, positioning **nature as the foundation** of economies and society. While coal power generation has fallen in China and India for the first time since the 1970s, the world's richest 1% have already used their "fair share" of emissions for 2026.

### **Conflict/War & health**

The war in **Gaza** has led to a **41% fall in births**, with reports alleging reproductive violence and a deliberate dismantling of health services for Palestinians.

### **More reports & papers of the week**

A randomized trial in Kenya and Uganda suggests that **fractional dosing** of the yellow fever vaccine, while effective in adults, does not meet non-inferiority criteria for **infants**, who should continue to receive standard doses.

### **Miscellaneous**

The rise of **AI chatbots** like ChatGPT and Claude for health advice presents both an opportunity for access and a risk of harm, as these tools are not yet validated for consumer health questions. Finally, the **Spotlight Initiative** highlights breakthroughs in tackling gender-based violence, emphasizing the need to put women and girls at the heart of every decision.