

IHP news 799 : On FOMO & the 2024 World Health Summit

(18 October 2024)

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,

Since Sunday, as the **annual World Health Summit** in Berlin was kicking off, I've been suffering from a **severe bout of FOMO**. Sadly, I couldn't make it this year, and virtual participation in some of the sessions (*there's more in professional IHP life than participating in a summit :)*) couldn't quite make up for that. Nevertheless, in this newsletter, we obviously focus on this year's WHS – mostly compiling coverage & analysis from elsewhere. Under the motto "**Building Trust for a Healthier World**", participants aimed for a healthier future for all. On the agenda, [among others](#): **Pandemic threats and responses, mpox, health equity, climate change and health, artificial intelligence, antibiotic resistance and financing global health.**

Against that overall backdrop, let me just bring up a few things that caught my attention this week in this week's intro, based on the fairly limited amount of (chunks of) WHS sessions and events I was able to follow from afar.

The **opening event** on Sunday - rather different from the usual opening plenaries - felt a bit cringe, at least on stage. It was clear (WHS president) [Axel Pries](#) was a bit out of his comfort zone there (*knowing a thing or two about comfort zones, I sympathized with him*). To make matters worse, though, on Youtube, the translator (*I suspect AI was involved*) turned him consistently into '**Axel Priest**' (*still, good the tool didn't hallucinate him all the way into 'Axl Rose' 😊*)

On a more serious note, I appreciated **Tedros' wisdom at this opening event**. He clearly knows what the horrors of war feel and smell like, based on his own childhood. And argued, correctly and very timely, "**The best medicine is peace!**". On X he added, "*I hope next year's @WorldHealthSmt theme will be peace. We cannot talk about health alone. There is no health without peace.*" "*#WHS2024. Thinking of and praying for all of those affected by war and conflict today. My brothers and sisters in Sudan, the Middle East, Ukraine, and many other regions of the world.*" Later in the week, at a WHO press briefing, he was equally vocal on polio vaccinations in Gaza – '[What's the Point Without Peace](#)'?

Getting such a strong hint from the WHO boss himself, it's a great pity the World Health Summit organizers (including the related- and newly branded - **academic network**, the [WHS Academic Alliance](#)) didn't find space in any of their press releases to say something along the lines of Tedros on the brutality of ongoing wars. **Just acknowledging that "all lives have equal value"**, as should come natural for a Global Health Community, would have already been sufficient in such a statement. Apparently that wasn't possible. In spite of the overall theme of the Summit – Building trust for a healthier world.

Speaking of which, another poignant Tedros quote from the opening referred to the overall theme of this Summit: “... **But we must also make sure that when we seek the trust of others, we are ourselves trustworthy. We cannot assume or expect trust; we must earn it....**” Although, from what we hear, various speakers did mention the ongoing war horrors in an explicit way in WHS sessions, by and large, the WHS organizers have missed an opportunity to rebuild trust in Global Health - from this angle at least. (PS: A personal low was when **Bill Gates**, during his speech at the ‘Signature event’ on Monday suddenly mentioned the **polio case in Gaza**, as if it came out of nowhere)

We clearly pay plenty of attention to the [Signature event](#) of this WHS in this newsletter, which managed to **raise 1 billion for WHO** (much of it “new” money). Looks like WHO has now also realized there’s little our top leaders like more than looking morally good at these glitzy ‘signature’/replenishment events. And nobody trumps Ursula when it comes to this :) Gates also said a few interesting things, among others calling WHO ‘his best investment ever’.

We end with a short reflection on another highlight of this year’s WHS: **the launch of the Lancet Commission [Global health 2050: the path to halving premature death by mid-century](#)**. We haven’t had the chance yet to read the Commission in detail (*we’ll make up for that this weekend*), but it certainly looks like a very impressive and insightful Commission - ànd a clear improvement over the (rather notorious) “Grand Convergence” one from some years ago 😊.

One caveat perhaps. While I do agree with their assessment that **pandemics are no longer rare** (unfortunately) – in line with what the [Global Preparedness Monitoring Board says in its latest report](#), also launched at the WHS, I still feel the **Commissioners underestimate the planetary emergency** (*and the fact that we no longer live on the fairly stable planet on which mankind has been thriving*). Hope the next iteration will start from the ‘red alert’ [insights](#) of J Rockström et al.

I do get why **Angela Chang** (one of the authors, and also a panelist at the [final plenary](#) moderated by Richard Horton), stressed “*Doubling down on past health investments, focusing resources on a narrow set of conditions, scaling up financing and developing new technologies can continue to have an enormous impact despite the headwinds.*” Hoping that by showing ‘it can be done in health’, other sectors might follow perhaps. Or in the words of another panelist: “*In spite of the headwinds, health investment remains one of the most effective strategies for improving both individual and societal outcomes.*” I’m afraid though that the current state of the planet warrants full attention – ànd should thus be top priority for all, including for the Global Health community. Some of the suggestions they make in the report (like on removing fossil fuel subsidies) certainly go in the right direction. But it’s not enough. I personally can’t see ‘progressive universalism’ materialize in many countries on a planet [crossing catastrophic tipping points](#) ...

And with that, the AI translator tool on Youtube, noticing Pries again on stage, let me know “***The Walt had summit has come to a close!***” 😊

Enjoy your reading.

Kristof Decoster

Featured Article

Fighting substandard and falsified medicines with rapid screening technologies ... at the World Health Summit

[Raffaella Ravinetto](#) (ITM)

The World Health Summit (WHS) has been there for a while, but the edition of 2024 was *my* first one: I joined the more than 3,500 participants from 140 countries, squeezed in the JV Marriott in Berlin, and tried my best to navigate the different sessions. Sometimes I got stranded in front of an already-full room or an “invitation-only” event. But other times, I attended stimulating sessions, met old friends, and enjoyed great incidental conversations with like-minded people.

Nonetheless, my personal top-moment was the [workshop](#) on *Fighting substandard and falsified (SF) medicines with rapid screening technologies*, held on the last day and last timeslot of the Summit. It was organized and chaired by professor Lutz Heide of Tuebingen University. I had the privilege to be one of the speakers, together with Rutendo Kuwana, the WHO team lead for incidents with SF medicines, Richard Neci Cizungu of the [Ecumenical Pharmaceutical Network](#) (EPN), professor Eliangiringa Kaale of the Muhimbili University of Health and Allied Sciences (Tanzania) and Celine Caillet and Gesa Gnegel of the [Infectious Diseases Data Observatory](#) (IDDO).

The ostensible technicality of some interventions should not overshadow the relevance of this topic for global health. Indeed, [substandard and falsified medical products](#), which before the pandemic were estimated to represent [about 10% of all medicines available in low- and middle-income countries](#), cause direct but often undetected health harm (such as therapeutic failure and even direct toxicity). Moreover, they [contribute to antimicrobial resistance \(AMR\), erode trust in medicines, and inflate the costs sustained by households and health systems](#).

Preventing the avoidable health harm caused by SF medicines looks like an obvious ethical imperative, even if like for other ethical imperatives it is not always supported by an unequivocal political will – to put it mildly.

If they are serious about protecting all lives, however, governments, donors and policy makers should first of all invest in **prevention** of SF medicines, by strengthening the national and regional regulatory capacities, and by protecting the integrity of supply chains. But what if SF medicines do reach the market? Well, these products should be identified as soon as possible, to allow a timely and adequate **response** in order to minimize the number of those harmed, and to design measures to prevent similar incidents in the future. This is **detection**, which is where rapid screening technologies come into play. These tools allow to [identify the active and/or non-active ingredients of medicines in the field](#). They may be used for [the initial screening of medicines' quality in routine surveillance](#), or for the field investigation of specific incidents (such as the frequent and deadly [syrups contamination with diethylene and ethylene glycol](#)). In research, they are part of standardised quality surveys, through which [researchers investigate the prevalence of SF medicines in a given region, and inform policy makers for further action](#).

In the workshop, speakers discussed the current “state of the art”, including the opportunities and limitations of existing and forthcoming technologies. They also shared their experiences with using

them. The presentations were followed by a lively exchange with the audience, who in turn shared their own experiences with SF medicines, and joined the panel's call for sustained and comprehensive support to the ongoing effort toward *universal access toward quality-assured and safe medicines*.

Yes, you read that correctly: *universal access*.

As pharmaceutical regulation and oversight, as well as sanctions against pharmaceutical crimes, are necessary but not sufficient, they should be embedded in a local and global ecosystem in which quality-assured essential medicines are made available in a timely way, and accessible and affordable to all those in need. As make no mistake, [lack of access to 'good' medicines will inevitably create room for SF medicines](#).

We hope to have contributed to increased awareness at this year's World Health Summit (and beyond) of the link between quality of medicines and access to them. By the way, the new [Lancet 2050 Commission](#) mentions the need of "*directing a substantial and increasing fraction of budget transfers towards making available and affordable the specific drugs, vaccines, diagnostics, and other commodities required for control of the 15 priority conditions*". All these health technologies should be available, affordable and quality assured, for achieving health and equity in health for all.

Highlights of the week

As mentioned in the intro, **we start this newsletter with a few World Health Summit related sections**, (1) one on the '**signature event**' (re the WHO investment round, on Monday evening), (2) then a **section with all the other WHS related news we could retrieve** (from a distance, though...) – including among others a **new GPMB report**. And then (3) a WHS section dedicated to the **launch of the important new Lancet Commission** also mentioned above.

World Health Summit's "signature event": Investment round WHO

WHO - US\$ 1 billion in new and reaffirmed funding commitments announced for WHO's ongoing Investment Round

<https://www.who.int/news/item/14-10-2024-usd-1-billion-in-new-and-reaffirmed-funding-commitments-announced-for-who-s-ongoing-investment-round>

Press release WHO after Monday's "Signature event" in Berlin.

"In a powerful demonstration of high-level support, the World Health Organization (WHO) today received nearly US\$ 700 million in new funding commitments from European countries, foundations and others, and another US\$ 300 million in reaffirmed commitments. Announced at the WHO Investment Round Signature Event at the World Health Summit in Berlin hosted by

Germany, France, and Norway, the commitments highlighted the urgent need for investments in the Organization's mission to improve health outcomes worldwide."

Re **WHO's Fourteenth General Programme of Work 2025-2028**.

PS: "...The event marked a milestone in the Investment Round engagement process which will culminate at next month's G20 leaders' Summit, chaired by Brazilian President Lula da Silva. "

HPW –WHO Secures \$1 Billion at First European Investment Round

<https://healthpolicy-watch.news/who-secures-1-billion-at-first-european-investment-round/>

With excellent coverage & analysis. Must-read.

"The **World Health Organization secured \$1 billion in pledges at a landmark fundraising event in Berlin on Monday**, kickstarting a major campaign by the UN agency to overhaul its funding model and enhance its ability to tackle global health emergencies. The billion-dollar total includes **\$700 million in new pledges from European nations and philanthropies at the World Health Summit**. The remaining **\$300 million comes from previous commitments** by the European Union and African Union." "...For **WHO, long plagued by financial uncertainty, this funding marks a first step toward sustainability** as the agency – and the world – faces overlapping health threats from conflicts, poverty, pandemics, noncommunicable diseases, antimicrobial resistance, and climate change."

PS: "**The \$1 billion, however, is just the start. WHO aims to raise \$7.4 billion by next May's World Health Assembly** to address the budget gap in its **\$11.1 billion strategy for 2025-28, known as the General Programme of Work 14 (GPW-14)**. This **four-year plan could save over 40 million lives** through progress on health-related Sustainable Development Goals, stronger health systems, and enhanced emergency responses, WHO figures project. "

PS: "**Major donors yet to commit:** The "investment rounds" format aims to foster competition among nations, encouraging increased stakes in the agency's operations. Several key European players, including **Spain, the United Kingdom and France, have yet to make commitments**, indicating they will announce their contributions later this year."

"**Further WHO funding appeals are planned in Asia, the Middle East and the Americas. Potential donors from Australia, Japan and South Korea to oil-rich Gulf states are expected to help the organization edge closer to its \$7.4 billion goal.** Behind Monday's success, concerns loom about the potential impact of the US elections on contributions from Washington, traditionally one of WHO's largest donors..."

"...**Germany led Monday's pledges with \$360 million, followed by the European Union with \$250 million, Norway with \$100 million, and Ireland with \$30 million.** The combined unrestricted funds from Germany and Norway alone surpassed WHO's entire 2022-2023 budget for self-directed initiatives addressing urgent global health priorities...."

Project Syndicate - Investing in the WHO Will Yield Outsize Returns

G Brown; <https://www.project-syndicate.org/commentary/world-health-organization-needs-flexible-long-term-financing-by-gordon-brown-2024-10?>

“Amid climate disruptions, pandemics, and population aging, the World Health Organization’s \$7.1 billion fundraising campaign **could save 40 million lives over the next four years**. Some of the world’s poorest countries have already made significant financial commitments, and now their wealthier counterparts must step up.”

Also with some info on what would be paid for (in the WHO programme of work), if fully replenished.

Links:

- **World Health Summit news - [World Health Summit 2024: One billion dollars for the WHO](#)**
Also with a few quotes from Scholz, Gates,
- **[Wellcome announces US\\$25mn for climate and health as part of US\\$50mn commitment to World Health Organisation](#)**

“A further US\$6mn will support the World Meteorological Organisation to strengthen provision of climate information for health decision making.”

World Health Summit Berlin (13-15 October) – Other general coverage/reports/news/analysis....

More or less chronologically. But without any intention of being ‘exhaustive’, clearly.

- PS: For all recordings of the WHS sessions, see Youtube:

<https://www.youtube.com/WorldHealthSummit>

HPW- World Health Summit Hosts Inaugural WHO ‘Investment Round’ Aimed at European Member States

<https://healthpolicy-watch.news/world-health-summit-hosts-inaugural-who-investment-round-aimed-at-european-member-states/>

Analysis & curtain raiser on the World Health summit, as it was starting.

A few chunks:

“The World Health Summit, one of the world’s largest annual global health events, is set to host a flagship World Health Organization “investment round” Monday for European member states and

donors – in a fresh attempt to recruit fresh finance for the resource-strapped UN organisation, which needs to raise another \$7 billion to fund its \$11.1 billion four-year strategic plan (General Programme of Work), approved in May 2024.”

“This year’s World Health Summit, 13-15 October, taking place here under the theme of “Trust for a Healthier World” brings together several thousand global health leaders and influencers, academics and civil society groups in over **60 sessions on topics ranging from pandemic preparedness and response to AI; health and climate and health in conflict.** But the investment round is also sure to be the most significant outcomes of this year’s WHS and testimony to its **expanding partnership with WHO** – moving beyond talk about global health to a ‘moment’ that can put the world’s leading global health agency on a more stable financial footing.”

“The publicly broadcast event will also include a high-profile array of actors, including German Chancellor Olaf Scholz, Billionaire health philanthropist Bill Gates and Wellcome Trust CEO John-Arne Røttingen, and European Ministers of Health from France, Germany, Greece, Norway and Switzerland. The aim is to recruit more long-term, flexible funding commitments from leading European member states, philanthropies and foundations, said WHO Assistant Director General **Catarina Boehme, in an interview with Health Policy Watch Sunday evening.** A German national herself, Boehme was Tedros’ chief of staff before he asked her to lead the new funding initiative. **The effort aims to find new formulas for voluntary funding critical for filling the chronic budget shortfalls left by member states’ regular assessed contributions.** In recent decades, member state fees have covered only 20%-30% of WHO’s regular budget. Following a 2022 World Health Assembly decision, assessed contributions are now set to be incrementally increased to meet 50% of WHO’s budget requirements by 2030. But that still leaves a big gap to fill.”

PS: “... While the Global Fund “replenishment drives” have seen heads of state share the stage with rock stars to lend visibility and hype to a global pledging moment, WHO is working through its potential donors region by region. Its focus is on broadening the base of member states who top up their “assessed” contributions, as well as changing the culture of giving to foster long-term funding commitments with fewer strings attached.”

PS: “ In his opening remarks Sunday evening, WHO Director General Dr Tedros Adhanom Ghebreyesus, linked the fund-raising drive to the conference theme of “trust”, saying that building trust between WHO and its member state partners is critical to improving the organization’s credible response to fast-evolving disease outbreaks as well as conflict-driven emergencies – which are featuring ever more prominently in the organization’s work.”

WHS Academic Alliance (formerly known as the M8 Alliance)

<https://www.worldhealthsummit.org/whs-academic-alliance.html>

“The “WHS Academic Alliance” (formerly M8 Alliance) is the academic network of the World Health Summit. It currently consists of around **30 members worldwide**, including the InterAcademy Partnership (IAP), which represents the national academies of medicine and science in more than 100 countries.”

Quote: “**World Health Summit President Axel R. Pries.** says: **“The renaming to WHS Academic Alliance signals three key developments:** The Alliance now includes 30 leading institutions worldwide, it represents academic institutions with both medical and public health programs, and it

serves as the central academic network of the World Health Summit, working with political and societal actors to develop innovative solutions for the most pressing health issues."

Recorded livestream Virchow prize (on Saturday)

<https://www.youtube.com/watch?v=m2bYbrYza40>

As you recall, **this year's Virchow prize** was won by **Lucy Gilson & J Rockström**.

See also an **Alliance press statement** - [Prof. Lucy Gilson recognized with 2024 Virchow Prize](#)

- Related **tweet Brian L Wong**:

" On the eve of #WHS2024, it is wonderful to be back at the annual **@virchowprize ceremony this evening in celebration of the lifetime achievements of this year's laureates, @Lucy_Gilson & @jrockstrom**, for their holistic & systems-based approach safeguarding human and planetary health. #VirchowPrize2024 #HealthForAll"

Day 1 – via the WHS newsletter: Daily News

https://www2.worldhealthsummit.org/fileadmin/user_upload/4_Documents/4.16_2024/4.16.1_Press_Releases/World_Health_Summit_Press_Release_October_13_2024_English_.pdf

A few quotes from Day one: "**Federal Minister of Health Karl Lauterbach** emphasized the **importance of speaking with one voice**: "For us, the brokers of scientific knowledge, we have to speak the same language." "

"**Jeremy Farrar**, Chief Scientist of the World Health Organization (WHO) **called for consistent and sustained efforts to build trust, highlighting its fragile nature**: "Trust is also built in years and can be lost in an instant. You don't build trust on a Tuesday when you want it. You build trust by providing good things for people, every Monday, every Tuesday, every Wednesday and not just in a crisis."

New (annual) GPMB (Global Preparedness Monitoring) report

https://hq_who_departmentofcommunications.cmail20.com/t/d-e-eukdydl-ikudkhluul-t/

(14 Oct) Cfr **WHO press statement**.

"**New risks raise pandemic threat on a global scale: Recent outbreaks of Marburg virus, Mpox and the latest strain of avian influenza (H5N1) are a stark reminder of the world's vulnerability to pandemics. ... A plethora of risks increase the likelihood of new pandemics according to a new report from the Global Preparedness Monitoring Board (GPMB). The report, launched at the 15th World Health Summit in Berlin, outlines 15 key drivers of pandemic risk, categorized into five distinct groups: social, technological, environmental, economic, and political.**"

“... To effectively protect themselves, **all nations must strengthen their health systems, prioritize social protection, and ensure that essential health services are available to all communities, particularly the most vulnerable and disadvantaged.** GDP alone is no measure of resilience to a pandemic. ... **Preparedness should incorporate strategies spanning across the human, animal, and environmental health interfaces.** The report calls for **increased collaboration across sectors** to mitigate risks associated with pandemics, recognizing that the health of one sector is intricately linked to the health of others.....

- The Report: [The Changing Face of Pandemic Risk - 2024 report](#)
- Coverage via HPW – [Human Behaviour Drives Pandemics – And Rebuilding Trust is Essential](#)

“**The four riskiest human behaviours** involve our **global mobility, agricultural and farming practices, mis- and disinformation and a lack of trust** – in science, in governments and between countries – according to the GPMB.”

PS:” **Weak pandemic agreement poses threat:** Phumaphi told the **media briefing** that the **release of the report had been timed to coincide with what might be the last meeting of the International Negotiating Body (INB) drafting the pandemic agreement,** set for the first two weeks of November. “We are aware of the direction that the negotiations are taking, and what we are concerned about is that this direction is actually going to fuel the spread of the next pandemic,” said Phumaphi. She described reports that the agreement’s commitment to equity had been watered down, as “a serious threat to our readiness”. “

PS: “**The report advocates three measures to counter pandemic threats: “adapt, protect and connect”.** GPMB member **Prof Ilona Kickbusch** told the summit that, with **adapt,** the board wants countries to assess their pandemic risk drivers, involving all sectors of society. The key to **protection** is strong primary health care, equity, social protection for the most vulnerable, and boosting international cooperation, added Kickbusch, who is chair of the Global Health Center at the Graduate Institute of International and development studies in Geneva. “**Connect**” relates to international cooperation and intersectoral cooperation, supported by dedicated funding. But it also relates to digital connection – which has helped with the spread of information but also fueled disinformation.”

- More coverage via The Telegraph – [Why the next pandemic may ‘catch us napping’ despite all we’ve learned from Covid](#)

“The GPMB, an independent body convened by the Director-General of the World Health Organisation and the President of the World Bank, arrived at **three critical recommendations for governments and other organisations focusing on pandemic planning.** The first is to **prioritise risk profiles and assessments that account for a broad range of factors** including those like conflict or climate change that drive up the risk of new epidemics emerging, or those that will impact the world’s ability to respond such as digital connectivity and biomedical innovation. World leaders must also **prioritise equity in their preparedness plans,** making sure they “address the specific and basic needs of vulnerable populations,” in particular, access to “medical countermeasures” like vaccines or treatments. Finally, the GPMB called for **collaboration between different sectors to be strengthened.**”

Also with some more detail on the “four key risks”.

WHO Youth Council releases bold call for a healthier world

<https://www.who.int/news/item/14-10-2024-who-youth-council-releases-bold-call-for-a-healthier-world>

“The [WHO Youth Council](#) has launched its first [Youth Declaration on Creating Healthy Societies](#), with a range of calls to action informed and developed by young people from around the world and geared towards empowering youth to play a central role in creating healthier and safer societies for all....The Declaration was launched today during the [World Health Summit](#) taking place in Berlin. It outlines **10 calls for action that place youth at the centre of co-creating healthier societies globally, and explaining what is needed for this to succeed. ...**”

The world’s first Global Oxygen Strategic Framework and Investment Case calls for US\$ 4 billion to expand access to lifesaving medical oxygen in low- and middle-income countries

[UNITAID](#)

“An investment of US\$ 4 billion in the most affected countries could increase oxygen access in low- and middle-income countries (LMICs) by 25%, benefiting an additional 24 million patients and saving 860 000 lives, including 331 000 children under five – 89 000 of them newborns. Investment in oxygen systems can be highly cost-effective and could deliver significant economic gains – with each dollar invested leading to an estimated return of US\$ 21. The [Global Oxygen Alliance \(GO₂AL\)](#), a collaborative of 20 leading global health organizations and civil society groups, has commissioned and launched an ambitious new Global Oxygen Strategic Framework and Investment Case to expand access to medical oxygen in low-resource settings.”

Guardian Opinion - The essential ingredient of any vaccination programme? Women

Sania Nishtar and Svenja Schulze; [Guardian](#);

“We call on leaders meeting at the World Health Summit to help remove all gender-related barriers to immunisation against diseases such as polio.”

“... Look at polio – a highly infectious disease caused by the poliovirus, which can result in disability, paralysis or death. **In most countries, vaccinators are predominantly women, and yet women may face barriers in delivering vaccine services due to sexual harassment and violence, unsafe working conditions, poor or irregular pay and heavy workload.** These factors must all be taken into account when planning and implementing vaccination programmes as, done right, they expand access substantially. In a nutshell: **if we want to eradicate polio, we must identify and overcome gender-related barriers.**”

“... This is why we, both global health and gender champions of the GPEI, call for more women in leadership roles to push crucial gender-transformative actions.”

Devex CheckUp: Show us the money! Global health funding dominates World Health Summit

<https://www.devex.com/news/devex-checkup-show-us-the-money-global-health-funding-dominates-world-health-summit-108548>

“Global health funding dominates discussions at the World Health Summit.”

- See also [Devex- WHO raises nearly \\$700M, but global health funding worries persist](#)

Important analysis, also coming back on a **session on Sunday** (re GAVI & GF). **“At the World Health Summit, many of the leading international agencies and multilaterals arrived looking to shore up their fundraising efforts. But donors warn there is not enough money to go around.”**

“The WHO fundraiser, which also had Norway and France as hosts, was the featured event in a conference that has seen multiple asks for resources. That includes from organizations like [Gavi](#), [the Vaccine Alliance](#) and the [Global Fund to Fight AIDS, Tuberculosis and Malaria](#), even as speaker after speaker has acknowledged that funds for global health are slipping.”

“After decades of expanding, funding for global health is now contracting,” Bill Gates, the billionaire head of the [Gates Foundation](#), warned during the pledging session. “That really challenges us, and we really need to make the case that ideally, over time, as there’s flexibility, these budgets go back to the increases we saw before.” His organization has so far [pledged \\$42 million](#) to WHO’s investment round, part of the roughly \$3 billion the agency has secured following the Berlin event.”

“... WHO officials weren’t the only ones who arrived in Berlin looking for funding. [Gavi](#) and the [Global Fund](#) co-hosted a panel on Sunday in which the moderator explicitly asked the two organizations to make their case to funders. [Gavi is already](#) in the midst of a replenishment round, with a goal of raising \$9 billion. The Global Fund will start its own replenishment next year.”

““The world has never been in this situation,” [Gavi CEO Sania Nishtar](#) acknowledged at the start of the panel. “Donors have competing priorities and fiscal restraints.” Even as she emphasized the lives and money that vaccines can save by preventing illness, Nishtar also pointed out how Gavi is working to conserve resources by working in closer collaboration with the Global Fund.”

“... For his part, [Global Fund Executive Director Peter Sands](#) acknowledged the need to innovate in order to accelerate advances and curb spending. But even as he decried efforts to pit organizations scrambling for money against each other, he also pointed out the benefits of donating to the [Global Fund](#), which offers a “kind of nimbleness and ability to do things that are difficult to do if you are a member-state organization.””

Quote from [Niels Annen](#), the parliamentary state secretary for Germany’s Ministry of Economic Cooperation and Development, also on the panel: “... Even as he lauded their impact and pushed back against calls from within Germany to [curb spending on international efforts](#), he also made clear that there is probably not going to be enough money from traditional donors to go around. He pointed to the need for more private capital if all of these organizations and agencies are going to reach their fundraising goals.”

World Health Summit 2024: „Setting the course for global healthcare“

https://www2.worldhealthsummit.org/fileadmin/user_upload/4_Documents/4.16_2024/4.16.1_Press_Releases/World_Health_Summit_Press_Release_October_15_2024_English_.pdf

Final press release. With focus on day 3.

K Bertram (blog) - Health is politicized. What does this mean?

<https://katribertram.wordpress.com/2024/10/16/health-is-politicized-what-does-this-mean/>

Katri Bertram focuses here on her highlight session of the WHS, related to the politicization of health (Chatham House rules). With **four messages**.

GHF – Missive from Berlin: World Health Summit 2024

P Patnaik; [Geneva Health Files](#);

Priti Patnaik was in Berlin this week for the World Health Summit. She **spoke and participated at two sessions** – both of which were closed doors conducted under Chatham House rules.

Some chunks from her report (from Thursday morning):

“... I was happy to be at the World Health Summit in Berlin this week – a really interesting conference that not only showcases global health, but also reveals the nature of this industrial complex. Such an event presents the latest trends, but is also to an extent, a veritable barometer for the field. It attracts the political leaders, philanthropists, corporate types, lobbyists, but also students, committed activists, patient groups and some media folks. What this looks like is a zillion, simultaneous, intersecting conversations. (“Wait, are we talking about global health or climate change? Oh, but that is where the funding is going.”) ... The WHS does hold up a mirror to the goings-on in global health - the power play orchestrated by pledged dollars. It is an indicator for rising private power (Big Tech is Big in global health), shifting government priorities, latest preferred flavors from the funders, and the politics....”

“The Pandemic Treaty May Have Begun As A Political Project, Doesn’t Have To End As One”

“... At a closed door session on October 13, 2024, (Pandemic Agreement Negotiations: Key Insights Gained: A Critical Review of Multilateral Negotiations in Global Health), I was asked to share my perspectives on some of these questions and themes:

“... Whether the discussions and negotiations on the pandemic treaty are going in the right direction? Key challenges: It depends on whether one sees the glass half full or half empty. Progress has been made undoubtedly, but important and tough issues remain to be resolved....”

Re THE POLITICS: Surely the worsening geopolitical climate is adding to an already complex negotiation. In addition to geopolitics, there is also the changing nature of political realities across swathes of countries. In general there is a retreat from globalism – in country after country. Authoritarian leaders often play to the domestic constituency using international forums such as the WHO to serve their narratives....

... **THE RISK OF THE LACK OF AMBITION:** “In my personal opinion, **the biggest challenge is the risk that countries would lack adequate ambition, and settle for the lowest common denominator on what such a treaty can achieve.** So I feel that political expediency to rush through and finish off this process is a big challenge.....”

Re **DISINFORMATION:** “... **The other challenge, that I observe as a journalist, is of course disinformation.** I also see governments being on the back foot when it comes to taking bold measures on disinformation – also in relation to the pandemic treaty. Governments are beginning to sound apologetic – in the sense that – “we cannot be too bold because we will invite the ire of the right wing on the pandemic treaty.” I don’t fully understand these concerns.....”

“**Finally, the lack of trust is a big problem.** The anger about vaccine inequities during COVID-19 is very real. Experts have said that **there is an under-appreciation of the “depth of the distrust and anger.”**”

Re **power dynamics:** “... **There is a failure to recognize that there has been a material change on the ground. So by this I mean that while power remains with the powerful, but the power is no longer uncontested....**”

Patnaik then goes on, listing some of the **potential structural and procedural changes to improve the INB negotiations.**

PS: “... **Is there a risk of losing political momentum?** How can it be ensured that the commitment for the negotiations remains high? I **do not see a big risk in the potential loss of political momentum** given the **deep commercial interests in the outcomes of these negotiations.....**”

WHO - Parliamentarians Unite in Berlin to Sign Global Statement Supporting the WHO Pandemic Agreement

<https://www.who.int/news/item/16-10-2024-parliamentarians-unite-in-berlin-to-sign-global-statement-supporting-the-who-pandemic-agreement/>

“**Parliamentarians from across the globe gathered at the UNITE Global Summit in Berlin to sign a statement in support of the World Health Organization Pandemic Agreement.** The statement, signed by the President of UNITE, members of its board, and parliamentarians around the world, marks a significant commitment from parliamentarians to strengthen pandemic preparedness, response, and equitable access to health.... ”

- And a few more snippets via [Devex check-up](#) :

“**The Pasteur Network [launched a three-year project](#) to boost research at **the intersection of climate change and health.** The project, which received a **\$5 million investment from the Institute of Philanthropy and [The Rockefeller Foundation](#),** will create a **fellowship for climate-health technical experts.** It will also help build out **three exemplar sites — in Brazil, Senegal, and Vietnam** — to help guide regional-specific initiatives.”**

“**The [United Nations Population Fund](#) also introduced its first [WomenX Collective hub](#) in Berlin.** The WomenX Collective initiative seeks to raise \$100 million in catalytic funding to develop a **network of centers that specialize in women’s health,** particularly sexual and reproductive health and rights. A second hub in Nairobi is set to launch next year....”

WHS – Launch of Lancet Commission: Global health 2050: the path to halving premature death by mid-century

This new Lancet Commission was **launched on Tuesday**, at the WHS.

The Lancet Commission on Investing in Health

[Lancet Commission](#);

On the **background** of this new Commission:

“Prompted by the 20th anniversary of the 1993 World Development Report, a Lancet Commission revisited the case for investment in health and developed a new framework to achieve dramatic health gains by 2035. Published in 2013, the report laid out opportunities for national governments and the international community. “ Update: “...Rising geopolitical tensions, growing nationalist populism, climate change, and the COVID-19 pandemic have all slowed health progress. Global Health 2050, a new report by the Lancet Commission on Investing in Health, shows that focused health investments could drive dramatic improvements in human welfare by the middle of the century. By 2050, countries could reduce by 50% the probability of premature death from 2019 levels. The new report makes the case better than ever for the value of investing in health for reducing mortality and morbidity, alleviating poverty, growing economies, and improving human welfare.”

- **Lancet Commission - [Global health 2050: the path to halving premature death by mid-century](#) (by Dean T Jamison, L Summers, G Yamey et al)**

“In Global Health 2050, the Lancet Commission on Investing in Health concludes that dramatic improvements in human welfare are achievable by mid-century with focused health investments. By 2050, countries that choose to do so could reduce by 50% the probability of premature death in their populations—ie, the probability of dying before age 70 years—from the levels in 2019. We call this goal 50 by 50. The interventions that enable achieving the goal of 50 by 50 should also reduce morbidity and disability at all ages....”

Some excerpts:

“...To achieve the 50-by-50 goal, action focusing on 15 priority conditions is required. “

“...Packaging interventions into 19 modules (including a childhood immunisation module and a module on prevention and low-cost widely available treatments for cardiovascular disease) should help to address the 15 priority conditions....”

“...In many countries seeking reform, standard mechanisms of blanket budget transfers from ministries of finance to ministries of health have failed to successfully reorient systems towards priority interventions that improve health. This problem could be addressed by directing a substantial and increasing fraction of budget transfers towards making available and affordable the specific drugs, vaccines, diagnostics, and other commodities required for control of the 15

priority conditions. Making drugs available and affordable will typically require four complementary components:....”

“...In addition to these country-level actions, we recommend enhanced commitment from the development assistance community. Development assistance should focus on two broad purposes. The first is the provision of direct financial and technical support to countries with the least resources to help them to develop health systems to better control diseases. The second is the financing of global public goods, including reducing the development and spread of antimicrobial resistance, preventing and responding to pandemics, identifying and spreading best practices, and developing and deploying new health technologies. For both of these purposes, focusing efforts on the 15 priority conditions would best contribute to achieving a 50% reduction in the probability of premature death by 2050. “

Do certainly also check out also **“Trends likely to shape global health, 2024–50”**

And: **“... We call for a reset of the UHC and health-systems-strengthening agendas.** We recommend that national governments maintain their focus on public financing of a core set of interventions that are fully prepaid and available to everyone, starting with the highest value for money interventions (ie, progressive universalism), irrespective of location or financing scheme, and with accompanying social protection programmes. **In this section of the Commission, we present a modular approach to health-systems strengthening that would enable building out from an initial focus on the 50-by-50 goal to allow for movement towards more comprehensive UHC over time.”**

Re **pandemic risk:** ...Table 13 summarises Madhav and colleagues' results with four points on the exceedance probability function, expressed as annual risks. Their simulations point to a more than 6% probability of a pandemic within 12 months of their projections involving a million or more deaths, and a 3% probability of a pandemic involving 25 million or more deaths (table 13). **They also suggest a greater than 20% chance in the next 10 years of a pandemic that kills at least 25 million people (equivalent to the number of deaths associated with COVID-19; table 13).** It is useful to think of these results as conveying that, **on average, there would be 2.5 million pandemic-related deaths per year (with no deaths in most years). Of these deaths, 1.6 million would be expected to be from an influenza pandemic and 0.9 million from a coronavirus pandemic.** To place the predicted 2.5 million deaths per year in context, it is roughly the same number of deaths that are occurring annually from HIV/AIDS, tuberculosis, and malaria combined (appendix pp 20–22), and much higher than the number of annual climate change deaths projected in even very pessimistic scenarios in coming decades (appendix pp 95–97).....”

Also check out **Part 7: Accelerating progress via taxation** in detail.

“In this part, we argue that complementary fiscal, regulatory, and information interventions could play a crucial role in accelerating progress towards the goal of 50 by 50. **The most important of these interventions is raising taxes on tobacco.”....”** But they also argue for the **removal of subsidies for fossil fuels, taxation of unhealthy food and drinks, ...**

“In this Commission, we have reached seven conclusions.”

- PS: If you have little time do read either:

The Executive summary or this neat (4 pager) [Policy Brief](#)

- **Related Lancet Comment** – [Investing in the future of global health](#) (A Davis, JA Rottingen et al)

“We wish to amplify ten important implications of this report.”

- Great coverage via [HPW – World Can Halve Premature Deaths by 2050, Lancet Commission Reports](#)

With **coverage of some key messages** of the Commission, as well as of the **final plenary** moderated by Horton.

“...**The 15 priority conditions**, selected from over 17,000 internationally recognized health diagnoses, **account for approximately 80% of the life expectancy gap between most regions and the North Atlantic**, defined in the report as North America and Europe. These conditions account for 86% of the gap between China and the North Atlantic, and 74% between sub-Saharan Africa and the North Atlantic. **“There’s a 22-year gap in life expectancy between Sub-Saharan Africa and the North Atlantic**, Angela Chang explained. **“Close to 80% of this gap can be explained by these 15 priority conditions, and over half of the difference can be attributed to eight infectious and maternal health conditions.”**”

“**If the global goal is met, the average premature mortality rate worldwide would fall to about 15%, matching levels currently seen in Europe and North America—today’s global benchmark.** Achieving this would mean dramatic improvements for billions, especially in low- and middle-income countries. **In Sub-Saharan Africa, the worst-performing region, premature mortality sits at 52%.”**”

And Seth Berkley, also on the panel: **“The important thing is that each one of these reports, including this one, says the case is better than ever for investing in health, and we need to keep talking about that, particularly at a time when the headwinds are so strong,”** Berkley emphasizes. ... **... The latest report continues this tradition, reaffirming that health investment remains one of the most effective strategies for improving both individual and societal outcomes.”**

More on Global Health Governance

NYT - Russia’s Latest Target in Africa: U.S.-Funded Anti-Malaria Programs

<https://www.nytimes.com/2024/10/14/world/africa/russia-africa-disinformation-malaria-.html?smid=tw-share>

“**Scientists fighting the spread of infectious diseases on the continent have been targeted online by pro-Russian activists, part of an effort to spread fear and mistrust of the West.”**”

“**...The scientists sifting through thousands of genetically modified mosquito larvae in a laboratory in Burkina Faso were trying to stop the spread of malaria, one of the biggest killers on the African**”

continent. **But in the pro-Russian propaganda telling of their work, the scientists, helped by funding from the Bill & Melinda Gates Foundation, were not protecting local people against malaria, they were infecting them.**"

"..... posts are seen as **only one element in a recent pro-Russian disinformation operation that is targeting U.S.-funded health care programs in Africa.** The attacks come at a time when [ambitious initiatives and vaccines](#) are being rolled out on a continent shaken by several epidemics, including a [deadly outbreak of mpox](#). **The apparent aim is to undermine public trust and bolster Russia's steady attempt to weaken Western interests in Africa,** according to U.S. and European officials....."

Devex – Tripling down

<https://www.devex.com/news/devex-newswire-amid-the-rubble-of-gaza-sparks-of-rebuilding-108544>

"Another U.S. agency is hopping on the localization bandwagon. The [U.S. President's Malaria Initiative](#) has set out [ambitious targets to provide more funding directly to local organizations](#) and countries while increasing the volume of health commodities it procures from Africa."

"... Among PMI's immediate goals is to **triple the annual funding it channels to local organizations,** including through bilateral agreements, **by the end of 2026.** It's a far cry from current numbers, although the baseline has been growing steadily in recent years. In **2023, PMI directed roughly \$24 million — 3.5% of its overall funding — to local organizations and governments.** That was triple the percentage of funding that went to local groups in 2020, and it **plans to increase that to at least 10% by 2026...."**

Stat – Atul Gawande on the problem that's even 'bigger' than health care

<https://www.statnews.com/2024/10/17/atul-gawande-longevity-usaid-haven/>

"The celebrated surgeon and 'Being Mortal' author says trust in government has declined globally."

"Trust in public health agencies is built on trust in government. What we see is that there are enormously varying levels of trust that have declined in governments around the world," said Gawande, speaking Thursday at the 2024 STAT Summit in Boston. **"That is in many ways a bigger problem than health care.""**

Lancet GH (Viewpoint) - Machines matter too: including biomedical engineering partnerships in global health initiatives

Tolulope Kehinde, et al; [https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(24\)00294-8/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(24)00294-8/fulltext)

"...Much of this attention has focused on bolstering clinical and research expertise through the expansion of clinical training programmes and research resources. However, **despite the crucial role of equipment, including medical devices, in safe clinical care, comparatively little attention has been paid to sustainably bridging the biomedical and technical gaps that exist in global health.** Although closing these gaps with locally driven solutions is the goal, the reality in many settings is

that partnerships between institutions in high-income countries and low-income and middle-income countries currently remain necessary. Thus, **this Viewpoint provides guidelines conscious to biomedical engineering for institutions looking to expand or begin global health initiatives with the Partners In Health Five S's—staff, stuff, space, systems, and social support—framework for health systems strengthening as a guide.** We focus first on initiatives involving staff, stuff, and space, encouraging institutions to ask, listen, and enable, through a set of questions and actionable recommendations....”

G7 Health Ministers’ meeting in Ancona, Italy (9-11 October)

G7 Health Ministers’ Communiqué

<https://www.g7italy.it/wp-content/uploads/G7-Health-Ministers-Communique.pdf>

Judging from this Communiqué, more a **run-of-the-mill Health Ministers’ meeting.** But do have a look for yourself. With the first chapter on the global health architecture & PPPR. Chapter 3 on One Health.

Marburg outbreak in Rwanda

So far, seems to be moving in the right direction. Fingers crossed.

See **Africa CDC’s media briefing (17 October)**, coverage via HPW - [Rwanda’s Marburg Outbreak Wanes](#)

“Rwanda appears to have its Marburg virus outbreak under control with no new cases reported in the past three days in Rwanda....”

“Since declaring the Marburg outbreak three weeks ago, Rwanda has confirmed 62 cases, of which 15 have died, 38 have recovered and nine cases are still receiving treatment with the majority improving, said **Health Minister Dr Sabin Nsanzimana** on Thursday. “The case fatality rate overall is 24% and we’ve vaccinated 856 people....”

WHO advises against any travel and trade restrictions with Rwanda in the context of the ongoing Marburg virus disease (MVD) outbreak

[https://www.who.int/news-room/articles-detail/who-advises-against-any-travel-and-trade-restrictions-with-rwanda-in-the-context-of-the-ongoing-marburg-virus-disease-\(mvd\)-outbreak](https://www.who.int/news-room/articles-detail/who-advises-against-any-travel-and-trade-restrictions-with-rwanda-in-the-context-of-the-ongoing-marburg-virus-disease-(mvd)-outbreak)

(10 Oct).

Science - Debate erupts about how to deploy experimental Marburg drugs and vaccines in Rwanda

<https://www.science.org/content/article/debate-erupts-about-how-deploy-experimental-marburg-drugs-and-vaccines-rwanda>

“Rwandan government decides against a randomized vaccine trial recommended by WHO.”

“...Yesterday, the World Health Organization (WHO) announced a [clinical trial for treatments of Marburg virus disease had launched in Rwanda](#), which is going through the third biggest outbreak of the fatal disease ever recorded. **The randomized, controlled trial, the first of its kind, will test the efficacy of the antiviral drug remdesivir and a monoclonal antibody against Marburg. But Rwanda has rejected a similarly designed study for an experimental vaccine, produced by the Sabin Vaccine Institute, a U.S. nonprofit. Instead, it is offering those shots to all health care workers at risk of Marburg, as well as everyone who has been in contact with known Marburg cases—an approach that may give more people a chance of protection but, in contrast to a randomized, controlled trial, can’t provide solid efficacy data.** The government wanted to “**move fast to protect the front-line workers,**” says Yvan Butera, minister of state in Rwanda’s Ministry of Health....”

Cidrap News - Marburg treatment trials launch in Rwanda

<https://www.cidrap.umn.edu/marburg/marburg-treatment-trials-launch-rwanda>

“Rwandan scientists and partners from the World Health Organization (WHO) have launched the world’s first clinical trials for Marburg virus disease treatment. ... **Matshidiso Moeti, MBBS, head of the WHO Africa regional office, said on X today that the clinical trial will test the efficacy and safety of remdesivir as well as MBP091, a monoclonal antibody that targets Marburg virus.** The drug was developed by [Mapp Biopharmaceutical](#) with support from the Biomedical Advanced Research and Development Authority (BARDA);...”

Cidrap News - More Marburg vaccine arrives in Rwanda as outbreak numbers slow

<https://www.cidrap.umn.edu/marburg/more-marburg-vaccine-arrives-rwanda-outbreak-numbers-slow>

(14 October) “**The Sabin Vaccine Institute has delivered 1,000 more doses of its investigational Marburg virus vaccine to Rwanda, following an initial shipment of 700 doses.** In an [update](#) yesterday, Rwanda’s health ministry said 669 vaccine doses have already been administered.”

WHO - Marburg virus disease strategic preparedness and response plan for Rwanda

<https://www.who.int/publications/m/item/marburg-virus-disease-global-strategic-preparedness-and-response-plan-for-rwanda>

For Oct-Dec 2024. **Budget estimate of USD 11 million.**

Link:

- [Lancet Letter - First Marburg virus outbreak in Rwanda: urgent actions needed](#) (O Uwishema et al)

Mpox emergency

- Update via [Pandemic Action Network](#) :

“The [WHO mpox dashboard](#) (as of Oct. 16) reported 8,540 confirmed cases and 33 deaths — over 1,000 new cases since last week — in 18 African countries. [Zambia](#) and [Zimbabwe](#) reported their first mpox cases (clade information is not yet available).....”

- And via **Africa CDC** (briefing from yesterday, coverage via HPW) - [Mpox Continues to Spread](#) (17 Octà

“...mpox continues to spread – now affecting 18 countries with 3051 new cases in the past “**Mpox is not under control,**” warned **Africa CDC Director-General Dr Jean Kaseya**. Despite calling a **continental meeting in April** to warn countries of the risk, **cases have risen exponentially:** from slightly under 6,000 then to 42,438 suspected mpox cases at present – although only 8,113 have been clinically confirmed... “

“...**A rapid test to diagnose mpox is in the pipeline and will transform the testing landscape,** said Kaseya.....”

“**Kaseya flagged the threat to internally displaced people (IDP), particularly in the Democratic Republic of Congo (DRC), and prisoners** – both groups characterised by close contact.”

“**DRC vaccination plan includes MSM, transgender people:** The DRC’s vaccination campaign started two weeks ago in three provinces – North Kivu, South Kivu and Tshopo – and is “moving well”, said Kaseya, who hails from DRC. The country’s plan includes men who have sex with men (MSM) and sex workers, as mpox can be sexually transmitted.”

“... **Kaseya said that early messaging about mpox Clade 1B only being associated with sexual transmission was wrong** – as was the failure to talk about MSM as the main mode of transmission in the 2022 outbreak....”

- And via **Cidrap News** - [Deaths top 1,000 in Africa’s mpox outbreak](#)

Also re Africa CDC’s media briefing of Thursday: “**Over the past week, Africa’s surge of new mpox cases continued, and the region passed a grim marker, with fatal cases passing 1,000 for the year amid several worrying developments,** including spread to new countries and in crowded settings that include prisons and refugee camps.”

“... So far, **vaccination has started in the DRC and Rwanda**, Kaseya said. **Nigeria expects to begin its campaign on October 22....** ... **Across the broader region, only four countries have vaccination plans**, a step that paves the way for countries to receive doses, he said. They include the DRC, Nigeria, Rwanda, and the Central African Republic. South Africa has a draft vaccination plan, and Ivory Coast’s plan is in the development stage.””

Reuters - WHO approves Bavarian Nordic's mpox vaccine for adolescents

<https://www.reuters.com/business/healthcare-pharmaceuticals/who-approves-bavarian-nordics-mpox-vaccine-adolescents-2024-10-14/>

“**The World Health Organization said on Monday it had approved Bavarian Nordic's mpox vaccine for adolescents aged 12 to 17 years**, an age group considered especially vulnerable to outbreaks of the disease that has triggered global concern. The WHO said in a statement that it gave the Jynneos vaccine prequalification for adolescents on Oct. 8.....”

Africa CDC - Two-Dose Strategy and Targeted Interventions Drive Mpox Campaign

<https://africacdc.org/news-item/two-dose-strategy-and-targeted-interventions-drive-mpox-campaign/>

(11 Oct) Re last week’s Africa CDC media briefing. “The Mpox vaccination campaign in the Democratic Republic of the Congo (DRC) began on October 4, with **Africa CDC Director General Dr Jean Kaseya emphasising the importance of two doses**. While a single dose provides over 50% protection, Dr Kaseya stated: “We don’t want to compromise the health of our people.””

“The vaccination campaign was launched in Goma, the eastern city hardest hit by the outbreak. Meanwhile, Mpox cases continue to rise, with **Ghana becoming the 16th country to report a case in the current outbreak**. Across the affected countries, **significant gaps remain in surveillance and testing, with testing and case positivity rates at 47% and 43%, respectively**. “Some countries report suspected cases, but without testing, we can’t confirm them or classify outbreaks,” said Dr Kaseya. **Contract tracing is another challenge: “We aim to trace 90% of contacts but have only reached around 4%, reflecting the performance of our surveillance systems.”**

“Speaking during his **weekly media briefing on Mpox**, Dr Kaseya also revealed that **the fight against Mpox has surpassed and almost doubled its \$600m funding goal** envisaged in the continental response plan.....”

Plos GPH - Mpox: Neglect has led to a more dangerous virus now spreading across borders, harming and killing people. Leaders must take action to stop mpox now

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0003714>

By C McNab, E Torreele, M Dybul, H Clark et al.

“...mpox is an ever-growing regional health crisis in Africa, and without urgent action to stop the epidemics when and where they occur, it will continue to spread across borders and continents.”

With a number of calls to action.

- And a link: **WHO Afro - [Nigeria Receives Malaria Vaccines Ahead of Roll Out](#)** (17 Oct)

AMR

WHO - New WHO report presents progress in G7 countries in tackling antibiotic pipeline crisis

<https://www.who.int/news/item/14-10-2024-new-who-report-presents-progress-in-g7-countries-in-tackling-antibiotic-pipeline-crisis>

(14 Oct) “The **World Health Organization (WHO)**, in partnership with the **[Global AMR Research and Development \(R&D\) Hub](#)**, has released a new report for **G7 Finance and Health Ministers** detailing progress on incentivizing the development of new antibacterial treatments. It highlights the urgent need for innovative strategies to enhance research and preserve access to essential antibiotics.”

- Related **[Cidrap News link: Report highlights progress in efforts to incentivize antibiotic R&D](#)**

“A new report calls attention to some of the progress that’s been made over the past year to incentivize antibiotic development while emphasizing how much more work there is to be done. The **report**, published this week by the World Health Organization in partnership with the Global Antimicrobial Resistance Research & Development (R&D) Hub, notes that **since 2017, public and philanthropic investments in antibiotic R&D have reached \$13.75 billion, led by contributions from G7 countries and the European Union (EU).”**

Lancet World Report – Research focus: GARDP

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)02308-0/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)02308-0/fulltext)

“The Global Antibiotic Research and Development Partnership aims to stimulate research for much-needed new antibiotics. Talha Burki reports.”

Among others, on its **2024-2028 strategy**. And hurdles.

More on PPPR

Devex - The Pandemic Fund considers an emergency financing model

<https://www.devex.com/news/the-pandemic-fund-considers-an-emergency-financing-model-108572>

“The Pandemic Fund managed to quickly get funding in place to assist with the global mpox response. **Will it use that experience to create a new funding mechanism?**”

“**The Pandemic Fund’s board is considering adopting an emergency finance facility or window, when it meets today and tomorrow.** The facility “would involve a **much more simplified process to deal with such situations if we don’t have ongoing proposals,**” Priya Basu, executive head of the [Pandemic Fund](#) Secretariat, told Devex. She said the board wants “to think about how to get better prepared for other future outbreaks.” “

“**It is not certain that the board will adopt the approach or, if it does, what the model might look like.** Basu said it might result in a fast-track procedure that is introduced with a specific window to mount a targeted response to an outbreak. There would also be **certain triggers to identify when it is appropriate to open that window.** That might be the declaration of a PHEIC — a public health emergency of international concern — by WHO. It might also take into account the [WHO’s system for grading emergencies.](#)”

PS: “**There have been several reasons the secretariat has approached the possibility of introducing an emergency fund with caution,** she said, beginning with not wanting to replicate the work of other organizations or financing facilities. She said the secretariat wants the “pandemic fund's resources to be complementary and catalytic and galvanizing change and allowing existing institutions that are engaged in the space to be able to do more and do it quickly.” The fund has also been questioned about whether this would push it more into the realm of response, pulling focus from its other commitments to improving pandemic prevention and preparedness.....”

PS: “**The ability to offer emergency funding will depend on the fund’s capacity to raise funds.** The secretariat is currently [in the middle of an effort](#) to raise an additional \$2 billion in financing on top of the \$2 billion that was initially raised to launch the fund. The additional funding might also give the facility the opportunity to think about other additional mechanisms, Basu said, including targeted windows for proposals on specific themes or funding windows dedicated to specific countries.”

Cholera

Lancet Editorial - Cholera: a pandemic ignored

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)02305-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)02305-5/fulltext)

“**The seventh pandemic of cholera—an easily preventable and treatable disease—has claimed millions of lives since 1961,** driven by the El Tor biotype. **In January, 2023, WHO classified the most recent global cholera resurgence as a grade 3 emergency—**an event requiring a major to maximal response. More than 500 000 cases were subsequently reported in 2023—with the highest counts in Afghanistan, Haiti, and the Democratic Republic of the Congo—resulting in 4007 deaths, a 71% increase in deaths from the previous year. **Yet the disease continues to be neglected in health agendas and on the political stage. How can such a pandemic have been left to persist for so long?**”

The failure to implement effective water, sanitation, and hygiene (WASH) practices lies at the core of this neglect.....” “...There have been further **failures in providing cholera vaccination and treatment** to those who need it.....” “However, cholera's resurgence transcends mere technical

failures. It is **deeply entrenched in the broader systemic issues of war, climate change, and social inequities....**”

The editorial concludes: “The resurgence of cholera presents a dire threat to health. **The [Global Task Force on Cholera Control](#) aims to reduce cholera deaths by 90% from 2015 levels by 2030, a goal that is increasingly unlikely without immediate and coordinated action.** Cholera's high mortality rate and devastating wider impacts have been too long neglected, most likely because of the people and countries it most affects. **Technical interventions are vital, but at its heart, cholera is a disease driven by conflict, displacement, and extreme poverty. Unless we attend to those root causes, cholera will continue to thrive.**”

Polio

Reuters - More time and money needed to wipe out polio, global group says

[Reuters](#);

“The Global Polio Eradication Initiative (GPEI) needs more funds and has pushed back by three years its target to officially wipe out all forms of the disease, officials said on Thursday. The coalition now hopes to declare an end to both the wild virus and the vaccine-derived variant by 2027 and 2029, respectively, compared with a previous deadline of 2026 for both forms.”

Also with **some quotes from Chris Elias, chair of the polio oversight board at GPEI and head of global development at the Bill & Melinda Gates Foundation.** The Gates Foundation is one of the partners in the GPEI alongside the World Health Organization.

“...In an interview with Reuters, Elias said the initiative still hoped to interrupt transmission of the wild form of polio next year, but would then need to wait two years to check there were no new cases before officially declaring the disease wiped out....”

Lancet Letter - Polio eradication: 25 years overdue, US\$25 billion overrun

N Hirschhorn et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)01913-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)01913-5/fulltext)

“The Global Polio Eradication Initiative has lost its way in terms of polio eradication by focusing on eliminating the poliovirus with mass rounds of the oral poliovirus vaccine (OPV). The result has been the spread of vaccine-derived polio to dozens of countries. **To reach and sustain zero incidence of both wild and vaccine-derived polio, the only sure way is to do what all successful nations have done: to use the Salk inactivated poliovirus vaccine (IPV).** Continued use of OPV has resulted in continuing disease, even as the wild virus continues to spread....”

Authors recommend **a number of steps** of what needs to be done.

More on Global health financing, global tax justice & debt crisis

CGD (blog) - 2024–2025 Replenishment Traffic Jam Redux: Are Donors Getting into Gear?

J M Keller et al ; <https://www.cgdev.org/blog/2024-2025-replenishment-traffic-jam-redux-are-donors-getting-gear>

“... With replenishment season well underway, the traffic jam is fast emerging: in the next six months, four institutions—IDA, Gavi, the World Health Organization (WHO), and the Pandemic Fund—will account for half of that amount (approximately \$48 billion). But amidst news of several donors [cutting aid budgets](#) and competing demands on the same constrained pots of resources, prospects for a successful fundraising cycle now look grim. The traffic jam also raises fundamental questions about the structural soundness and long-term viability of the current concessional finance architecture. The current moment calls for a radically new way of thinking about the system.”

“To advance this rethink, we are excited to [publish a new interactive dataset](#) which shows donor pledges and contributions to the 13 major funds, spanning concessional multilateral development bank (MDB) funds, health funds, and climate funds, **going back to 2000.**”

“The historical data reveal several important trends which we hope you’ll explore yourself. Here are our **five stand-out takeaways.....**”

- See also Scidev.net - [Global aid funds face fundraising ‘traffic jam’](#)

Also coming back on the CGD report – in which authors call “a **“replenishment traffic jam”**, whereby **different institutions are lining up for a share of the same limited basket of resources amid [aid](#) budget cuts in several countries.**”

Al Jazeera - Poorest countries in worst financial shape since 2006, World Bank says

<https://www.aljazeera.com/economy/2024/10/14/poorest-countries-in-worst-financial-shape-since-two-thousand-six-world-bank-says>

“Low-income countries still poorer than they were before the COVID-19 pandemic, report finds.”

“The world’s 26 poorest countries are deeper in debt than at any time since 2006 and increasingly vulnerable to natural disasters and other shocks, the World Bank has said. The poorest economies are worse off today than they were before the COVID-19 pandemic, even though the rest of the world has largely recovered, the Washington, DC-based lender said in a **report released on Sunday.**”

PS: “At a time when much of the world simply backed away from the poorest countries, IDA [International Development Association] **has been their main lifeline,**” said Indermit Gill, the World Bank Group’s chief economist and senior vice president for development economics.”

FT - Letter: G20 must step up aid to world's poorest countries

Daron Acemoglu, J Stiglitz and a number of other top economists;
<https://www.ft.com/content/c3aa9ed7-126a-4b76-a65d-c9330518b8cd>

“ The world’s poorest countries are in a development crisis and need greater access to affordable financing . IDA, the World Bank’s concessional financing facility for these countries, has a proven track record for providing this support and its upcoming replenishment is a moment for the international community to match their stated concern with a stepped-up financial contribution. We urge finance ministers of the G20 countries to lead this effort and increase contributions to the 21st replenishment of the International Development Association (IDA21). IDA has served the world’s poorest countries for over 60 years, but it has never been more vital.”

“...we call on G20 members to increase their contributions in IDA21 by at least 20 per cent, which would enable IDA to maintain its annual financing commitments.”

- Related – via [Pandemic Action Network](#):

“The [Economic Development Assembly](#) (Oct. 9-10), hosted by Global Citizen and Bridgewater Associates, brought heads of state, business leaders, and civil society together to discuss how to strengthen Africa’s equitable and sustainable growth, including through the upcoming World Bank International Development Association (IDA) 21 replenishment. Through the [Abidjan Accord](#) — [signed by 100+ leaders and organizations](#) including PAN and RANA — the Assembly called for G20 countries to increase their contributions to IDA and meet the US\$120 billion fundraising goal by December 2024.”

Bloomberg - IMF Moves to Ease Billions in Penalty Fees for Biggest Borrowers

https://www.bloomberg.com/news/articles/2024-10-11/imf-moves-to-ease-billions-in-penalty-fees-for-biggest-borrowers?utm_source=website&utm_medium=share&utm_campaign=twitter

“Decision provides relief to Argentina, Ecuador, Egypt, Ukraine. Decision by board in Washington follows months-long review.”

Devex - Poor countries' debt repayments are twice what they get in climate finance

<https://www.devex.com/news/poor-countries-debt-repayments-are-twice-what-they-get-in-climate-finance-108559>

“Debt-laden low-income countries risk "defaulting on development" as soaring debt repayments hamper their ability to invest in resilience to withstand climate shocks, analyses show.”

“A growing number of climate-vulnerable countries risk “defaulting on their development and climate goals” as debt repayments soar and dwarf the support they receive to address climate change, according to a pair of analyses published this week.”

“The world’s poorest and most climate-vulnerable countries are collectively spending twice as much paying creditors to service their debts as they receive in climate finance. That’s the finding of an [analysis](#) by the think-tank [International Institute for Environment and Development](#), or IIED, which examined the latest available data from the [World Bank](#) and the [Organisation for Economic Co-operation and Development](#) for 58 countries that the United Nations classifies as least developed or small island developing states.”

“... [a separate analysis of African countries’ debt published this week by the DRGR Project](#) ... found that African countries’ debt levels have increased by 240% between 2008 and 2022 due to external shocks, including climate impacts. Half of African nations are now spending more on paying back interests than on their public health budget, the DRGR Project warned....”

How to tax billionaires

T Piketty; <https://www.lemonde.fr/blog/piketty/2024/10/15/how-to-tax-billionaires/>

“The tax debates currently underway in France and the discussions planned for the 2024 G20 summit demonstrate that the issue of tax justice and the taxation of billionaires is not about to disappear from the public debate. There’s a simple reason for this: the sums amassed by the world’s wealthiest individuals over the last few decades are quite simply gigantic. **Those who consider this a secondary or symbolic issue should take a look at the numbers. ...**”

“... Yet some people continue to reject this debate, and their arguments need to be carefully examined....” Piketty then goes into **four of these arguments**.

Bretton Woods Observer – new issue

<https://www.brettonwoodsproject.org/publications/autumn-2024/>

Some reads ahead of **the annual IMF/World Bank meetings (21-26 October)**.

Check out among others:

- [The lost call for international financial architecture reform in the G20](#)

“On the 50th anniversary of the UN General Assembly Resolution on the establishment of the New International Economic Order and amid escalating global crises and threats to the multilateral order, **civil society must galvanise to pressure the G20 to support substantive reform to the international financial architecture at the Fourth Financing for Development Conference in 2025.**”

- [Project 2025 takes on the World Bank and IMF – harbinger of an uncertain new era of geopolitics?](#)

“**US conservative blueprint for second Trump term calls for US to withdraw from World Bank and IMF; Call comes amid shrinking aid flows from G7 governments overall and tepid progress on governance reforms at Bank and Fund.**”

- [New World Bank Corporate Scorecard: overlooking client priorities and ignoring development impact](#)

Eurodad - Reflections ahead of the 2024 Annual Meetings: is a “Future-Ready” World Bank Group just another buzzword?

M J Romero et al; [Eurodad](#);

“One year ago, at the time of the Annual Meetings in Marrakech, WBG President Ajay Banga said “I don’t subscribe easily to buzzwords about how to do things”. This was in response to CSO concerns about the use of the ‘cascade approach’ to development – a phrase coined by the WBG seven years ago. In plainer English it means the WBG seeks to leverage private finance in support of development and climate projects. Today, ahead of the 2024 Annual Meetings, which mark the 80th anniversary of the institution, the World Bank Group says it aims “to create a future-ready World Bank Group.” This sounds like yet another buzzword to us.”

Among others with an update on **The Private Sector Lab**.

UHC & PHC

Lancet Comment - Strengthening primary health care in a changing climate

Andy Haines et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)02193-7/abstract](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)02193-7/abstract)

“... Building bridges between primary health care (PHC) and climate-resilient health systems is important in this context. WHO's Fourteenth Global Programme of Work (GPW), which was approved after the World Health Assembly (WHA) resolution on Climate Change and Health was adopted in May, 2024, will guide WHO's activities between 2025 and 2028. The imperative to strengthen PHC features prominently in the Fourteenth GPW as a requirement for the achievement of universal health coverage (UHC). About 90% of 218 interventions deemed essential for UHC are delivered through interventions in PHC settings. Thus, effective PHC is key to strengthening the resilience of health systems to prepare for, respond to, and recover from climate-driven disasters, such as storms, floods, heatwaves, and droughts. PHC involvement in the implementation of specific adaptation actions, such as early warning systems for extreme heat and infectious disease outbreaks, is also important....”

“...The framework includes ten components that provide the basis for a climate-resilient health system, founded on the six WHO health system building blocks (leadership and governance, service delivery, health system financing, health workforce, medical products, vaccines and technologies, and health information systems). The components reflect the need for improved emergency preparedness, integrated risk monitoring and surveillance systems, vulnerability assessments, and climate-resilient technologies and infrastructure. The [WHO Alliance for Transformative Action on Climate and Health](#) brings together member states to advance this agenda. There are several priority actions that can support rapid progress....” Read which ones.

The Lancet Global Health Commission on People-Centered Care for Universal Health Coverage appoints commissioners and a board of advisers

<https://primarycare.hms.harvard.edu/news/lancet-global-health-commission-people-centered-care-universal-health-coverage-appoints>

Check out their profiles.

SRHR

WHO urges expansion of lifesaving midwifery care for women and babies

<https://www.who.int/news/item/16-10-2024-who-urges-expansion-of-lifesaving-midwifery-care-for-women-and-babies>

“Strengthening midwives’ role in maternity and newborn care services would save millions of lives each year while significantly enhancing women’s overall experience of care, according to a new publication released today by the World Health Organization (WHO) and partners.”

“The publication, [Transitioning to midwifery models of care: A global position paper](#), outlines the **benefits and key components of midwifery care models**, where midwives serve, within broader teams, as the main healthcare provider for women and babies during pregnancy, childbirth and the postnatal period. **Recent modelling shows that universal access to midwifery care could avert more than 60% of all maternal and newborn deaths and stillbirths – amounting to 4.3 million lives saved annually by 2035 – and that even a more modest 10% increase in coverage could save 1.3 million lives each year....”**

Lancet GH Comment – Maternal near misses: need for solid metrics and estimates

[Maternal near misses: need for solid metrics and estimates](#) (by Kapila Jayaratne et al)

Comment in the new Lancet GH November issue, linked to a new study.

“...To reduce maternal deaths, it is important to explore the potential for ending preventable maternal mortality by addressing maternal near miss (MNM) morbidity. To study MNM, the quantification of the risk of severe maternal morbidity is a prerequisite. In *The Lancet Global Health*, Ursula Gazeley and colleagues emphasise the need for more comparable measures of maternal morbidity....”

- The Lancet GH study: [The lifetime risk of maternal near miss morbidity in Asia, Africa, the Middle East, and Latin America: a cross-country systematic analysis](#) (by U Gazeley et al)

“.....The lifetime risk of MNM (LTR-MNM) quantifies the probability that a female individual aged 15 years will have an MNM before age 50 years, given current mortality and fertility rates. We compare the LTR-MNM globally to reveal inequities in the cumulative burden of severe maternal morbidity across the reproductive life course....”

- Coverage via **BMJ News** - [Maternal health: Research shows global inequities in risks across a woman's life](#)

“ One in 20 women across seven sub-Saharan African countries are at risk of death because of complications during pregnancy or childbirth, a study has found. The international study of the lifetime risk of maternal “near miss” morbidity in Asia, Africa, the Middle East, and Latin America by researchers from the London School of Hygiene and Tropical Medicine, published in the Lancet Global Health, **also found the highest risk of a maternal near miss across a lifetime was one in six in Guatemala...**”

NCDs : Global week for Action on NCDs (15-22 October)

<https://www.devex.com/news/sponsored/opinion-we-need-new-investment-strategies-for-ncd-financing-108498>

It's the **Global Week for Action on NCDs**, spearheaded by the NCD Alliance.

Commercial Determinants of Health

UNU-IIGH announces Independent Expert Group on Corporate Accountability

<https://unu.edu/iigh/news/unu-iigh-announces-independent-expert-group-corporate-accountability>

“The group will critically evaluate voluntary corporate performance indexes as a mechanism for monitoring the behaviour and impact of TNCs on health.”

“... Two prominent examples are the **Access to Medicines Index (AtMI)** and the **Global Access to Nutrition Index (GAtNI)** which assess and measure the contribution of pharmaceutical and food corporations towards improving access to medicines and healthy foods, respectively. **In recent work, UNU-IIGH has conducted detailed analyses of these two indexes, including how they are governed and managed.** While noting that these indexes provide some useful monitoring of corporate policies and behaviour and have some positive influence on corporate policies and behaviour, **these analyses find that they are also characterised by significant weaknesses and limitations including having gaps in what they monitor and measure** (e.g. both indexes avoid assessing and measuring corporate financial conduct, including tax abuse). Our analyses of AtMI and GAtNI (soon to be published) **also question whether these indexes have had any real impact on improving access to medicines and healthy food, and suggest that they may paradoxically reinforce the power and profitability of the biggest TNCs in the pharmaceutical and food sectors while weakening efforts to ensure more effective regulation of corporate conduct and behaviour.** “

“We are therefore pleased to announce that we have convened an Independent Expert Group (IEG) on Corporate Accountability to critically evaluate the use of indexes such as AtMI and GAtNI, and

to consider alternative approaches, models, and mechanisms for holding powerful pharmaceutical and food companies accountable. “

World Food Day (16 Oct)

Oxfam (report) – Food wars

<https://www.oxfamamerica.org/explore/research-publications/food-wars-conflict-hunger-and-globalization-2022-2023/>

“Most wars of the late 20th and early 21st centuries have been “food wars”: food and hunger were used as weapons, food and food-related water and energy infrastructure were damaged intentionally or incidentally, and food insecurity persisted as a legacy of conflict destructiveness. Frequently, food insecurity, in turn, is a trigger or underlying cause of conflict. **This paper analyzes 54 active conflict, refugee-hosting, and conflict legacy countries with populations in 2023 facing “crisis-level” acute food insecurity, i.e., at Integrated Food Security Phase Classification (IPC) 3 or higher....”**

HPW - Chile Provides a Convincing Case for Mandatory Warning Labels on Processed Food

L S Taillie; <https://healthpolicy-watch.news/chile-provides-a-convincing-case-for-mandatory-warning-labels-on-processed-food/>

*“This **World Food Day** (16 October), Chile provides solid evidence that **mandatory warning labels that target products with high salt, sugar, saturated fat and calories** have reduced consumers’ appetite for unhealthy products.”*

Mental health & wellbeing

Public Services International - "It is time to prioritise mental health in the workplace"

Baba Aye; <https://publicservices.international/resources/news/it-is-time-to-prioritise-mental-health-in-the-workplace?id=15428&lang=en>

“ **the mental health of these workers, who deliver public services to us all, across all sectors have been severely undermined over the past decades by work-related stress, psychosocial risk factors and the impact of neoliberal social-economic policies on us as workers.** That is precisely why **prioritising mental health in the workplace must take into account the need for fundamental changes that put people over profit in both the workplace and the broader society.** ... It becomes clear that increasing precarity of work, especially in the public sectors which used to boast of job security in many a country, is enough to undermine the mental health and wellbeing of workers.

When this interacts with psychosocial risks factors and hazards, it becomes an explosive situation which must concretely be addressed with a keen sense of urgency.....”

“... PSI commissioned its **Public Services International Research Unit (PSIRU)** based at the **University of Greenwich** to conduct a study on **Mental Health and Public Sector Healthcare**, with international case studies, last year.... Its findings established that: **“there is a relationship between the increases in mental health problems and work-related stress in the healthcare workforce globally and the imposition of neoliberal policies, as seen through public sector reforms, privatisation, cuts in public spending and the under-investment in public services. These reforms lead to reductions in real pay and deteriorating working conditions, problems of recruitment and retention of public sector workers, which then affect the quality of public services.”**”

Access to medicines, vaccines & other health technologies

HPW - Update on the mRNA Technology Transfer Programme

MPP & WHO - <https://healthpolicy-watch.news/update-on-the-mrna-technology-transfer-programme/>

*“A recent [article published by HPW](#) based on research by **Matthew Herder and Ximena Benavides** made several criticisms and observations about the mRNA programme. **HPW asked the mRNA co-leaders, the MPP and WHO, to respond to the issues raised and this is their response.** “*

Re establishment & structure, governance, knowledge sharing and empowerment of LMIC partners, Role of WHO and MPP in supporting the Programme, Licensing and intellectual property (IP) strategies, Technology transfer and capacity building, sustaining the program...

PS: On the latter (sustaining the programme):

“Currently, the Programme is funded until 2026. While additional funding is required to complete the year, the goal is to complete the transfer of technology to the majority of partners by that time. **The Programme coordinators are working with partners to develop sustainable business models and explore new funding sources to ensure operations can continue beyond 2026.** A major part of this sustainability strategy is the **creation of R&D consortia focused on developing vaccines for diseases relevant to LMICs.** These consortia bring together Programme Partners, companies, research centers, and universities to collaborate on the development of vaccines and therapeutics using the mRNA platform. **So far, four consortia have been established in Southeast Asia,** working to develop preventive mRNA vaccines against dengue, Plasmodium Vivax malaria and human hand, foot and mouth disease and a therapeutic human papillomavirus mRNA vaccine. ...”

Devex - Regional vaccine and drug production is coming. Can it survive?

A Green; https://www.devex.com/news/regional-vaccine-and-drug-production-is-coming-can-it-survive-108536?utm_source=twitter&utm_medium=social&utm_campaign=devex_social_icons

“Building local capacity to manufacture drugs, vaccines, and health products is not enough. Officials must work to ensure there is actually a sustainable market for the products that are produced.”

PS: “.... In sub-Saharan Africa, for instance, three manufacturers should soon be in a position to manufacture vaccines at scale within the next five years, the [Africa Centre for Disease Control and Prevention](#)’s Dr. Abebe Genetu Bayih told attendees at this year’s [World Health Summit](#) in Berlin. But as these regions inch closer to securing production capacity, Abebe and other officials are now busy ensuring that these new facilities will actually be able to sustain themselves once they launch.....”

NYT - Why Two Million Children May Starve in Africa

[NYT](#):

“Supplies of a highly nutritious treatment are running out, according to UNICEF.”

“Nearly two million children may die of malnutrition because a product used to treat the condition is in short supply, the United Nations Children’s Fund said on Monday. Four countries — Mali, Nigeria, Niger and Chad — have exhausted their supplies of the peanut-based, high-nutrient product, called ready-to-use therapeutic food, or are on the brink of doing so. Another eight nations, including South Sudan, the Democratic Republic of Congo and Uganda, could run out by mid-2025.”

PS: “UNICEF relies on ready-to-use therapeutic food to treat children with severe wasting. Other organizations use similar products to help children at less serious stages of malnutrition. Children may need the food, along with medical care, for up to eight weeks before they are beyond danger. UNICEF estimated that in 2023, the food reached about 73 percent of the children in need and averted the deaths of 1.2 million children younger than 5.....”

PS: “ But war, civil conflicts, climate change and economic crises that have derailed global supply chains have all contributed to hunger emergencies, as have prolonged droughts and floods in the Sahel region of Africa.”

“Since 2022, UNICEF has raised about \$933 million to support its malnutrition programs. It is now calling for donations of \$165 million to refresh supplies of R.U.T.F., in addition to a \$100 million donation that the United States recently made.”

MSF Access- Too many children with TB are neither tested nor treated, with many countries failing at the first hurdle: updating policy guidelines in line with WHO recommendations

<https://msfaccess.org/msf-calls-urgent-action-governments-and-donors-are-failing-children-tb>

“A new report released today by Médecins Sans Frontières/Doctors Without Borders (MSF) shows that children with tuberculosis (TB) continue to be left behind in the global effort to end the disease. The report, **TACTIC: Test, Avoid, Cure TB in Children**, surveyed TB policy guidelines in 14 countries* with a high burden of TB, revealing that many countries lag behind in aligning their national TB policies with the latest guidelines from the World Health Organization (WHO).....”

SCMP - Chinese pharmaceutical firms expand to Africa under 'health silk road'

<https://www.scmp.com/news/china/diplomacy/article/3282304/chinese-pharmaceutical-firms-expand-africa-under-health-silk-road>

“China’s medical sector giants are setting up African factories in search of new markets in belt and road countries.”

PS: “... President Xi Jinping promised during the [Forum on China-Africa Cooperation \(FOCAC\) summit](#) last month that Beijing would promote pharmaceutical production and the medical equipment industry in Africa, including access to active pharmaceutical ingredients, through co-investment by Chinese and African private sector players.....”

War and health

Lancet Letter - The system is working as intended

S El-Solh et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)02181-0/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)02181-0/fulltext)

“We read with dismay Richard Horton's recent Offline piece. Rather than illustrating the forces driving the genocide in Palestine, Horton blames eroded compassion and the loss of humanity. The perpetrators are not mentioned, thus obscuring root causes and disempowering readers.....”

“... As critical scholars of global health, we know that the system Horton describes is working exactly as intended. We live under capitalism, an economic structure that uses colonialism to its benefit to maintain the economic and political inequality needed to extract resources for capital. Although Horton dismays that the system is suddenly failing, a historical analysis shows that colonial violence has always been essential to capitalism. The international community of Geneva that Horton so fondly describes is a global health elite, which has often been complicit in this current status quo. We agree with Ghada Al-Jadba that this genocide has made us all question the concept of humanity. However, Horton's conclusion that this genocide is due to a sudden loss of shared humanity does not hold.... Horton asks why this mass slaughter is being permitted by the international community. We answer: it is being actively enabled by those whose financial and political interests lie in violence, and permitted by many in the global health elite who are content to turn a blind eye....”

HPW - Gaza Polio Vaccinations: 'What's the Point Without Peace' – Tedros

<https://healthpolicy-watch.news/gaza-polio-vaccinations-whats-the-point-without-peace-tedros/>

From WHO’s media briefing on Wednesday. **“Two days into the second round of vaccinating children against polio in Gaza, World Health Organization’s (WHO) Director-General Dr Tedros Adhanom Ghebreyesus made an urgent appeal for a political solution to the war.** “People we have saved today or vaccinated today, end up being killed tomorrow, so what’s the point?” Tedros asked at a media briefing on Wednesday. “The level of destruction, especially in Gaza, is just unbelievable. I don’t know if [Gaza] can be inhabitable. More than 70% of its infrastructure is gone. **So I don’t think**

aid is the issue. To be honest, the focus should be on addressing the conflict politically and focusing on bringing peace.”

“The WHO and UNICEF are in ongoing negotiations with Israeli authorities for “area-specific humanitarian pauses” to enable the polio vaccination campaign, said WHO’s Gaza representative Dr Rik Peeperkorn.....”

Second round of polio vaccination in the Gaza Strip aims to vaccinate over half a million children

<https://polioeradication.org/news/second-round-of-polio-vaccination-in-the-gaza-strip-aims-to-vaccinate-over-half-a-million-children/>

The second round of an emergency polio vaccination campaign **started on 14 October** in Gaza, to vaccinate an estimated 591 700 children under ten years of age with a second dose of the novel oral polio vaccine type 2 (nOPV2) vaccine.

UN News- Over 1.8 million in Gaza face extreme hunger

<https://news.un.org/en/story/2024/10/1155836>

“More than 1.8 million Palestinians in Gaza are experiencing “extremely critical” levels of hunger, with 70 per cent of crop fields destroyed and livelihoods decimated during the ongoing Israeli military offensive, a **UN-backed food security assessment released on Thursday** has revealed.”

UN News - Gaza: School set for polio vaccine campaign hit in deadly strike, says UNRWA

<https://news.un.org/en/story/2024/10/1155671>

“A second round of polio vaccinations for thousands of children began in central Gaza on Monday despite **reported strikes on a school-turned-shelter in Nuseirat and a hospital courtyard in Deir Al-Balah where “multiple tents” were set ablaze as people slept.** At the school that was hit in Nuseirat, 22 people were reportedly killed. **The facility had been intended for use as a polio vaccination site on Monday.**”

People’s Health Dispatch - Israel’s attacks on healthcare in Lebanon echo devastation in Gaza

<https://peoplesdispatch.org/2024/10/03/israels-attacks-on-healthcare-in-lebanon-echo-devastation-in-gaza/?ref=peoples-health-dispatch.ghost.io>

“As Israel broadens its invasion, **health systems in both Gaza and Lebanon are under attack**, facing mounting threats and destruction.”

- Related: [WHO –Attacks on hospitals and health workers jeopardize provision of health in Lebanon](#)

UN News - Lebanon: Cholera fears for communities uprooted by war

<https://news.un.org/en/story/2024/10/1155816>

“The UN health agency has warned that a first case of highly infectious cholera virus has been detected in northern Lebanon, raising fears that those displaced by Israeli bombardment may already be at risk from the potentially deadly disease.”

- See also WHO - [WHO in Lebanon working to stop cholera spread amid conflict](#) (17 Oct)

And a link:

Lancet Letter - [Resurgence of cholera amidst ongoing war in Sudan](#)

Planetary Health

Lancet Comment - Why medical products must not be excluded from the Global Plastics Treaty

A Street et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)02254-2/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)02254-2/fulltext)

“**These plastics save lives.**” In April, 2024, posters bearing this slogan without any organisation or company logo were displayed inside hotels in **Ottawa, Canada** (figure) and on billboard trucks around the **main venue of the Fourth Intergovernmental Negotiating Committee (INC-4) to develop a legally binding instrument on plastic pollution**. These **negotiations on a Global Plastics Treaty, expected to be finalised at INC-5 in Busan, South Korea from Nov 25 to Dec 1, 2024, include a proposed blanket exemption of plastic products for medical and health uses and responses to public health emergencies from all proposed binding provisions in the Treaty**. The draft document states: “[The instrument* does not apply to the following applications and[/or] substances: a. [Medical and health use;] b. [Emergency response to public health incidents and natural disasters;]]”.....”

Authors don’t quite agree with that and conclude: The industries and states who would benefit most from blanket exemption of medical products from Treaty provisions, most prominently the **petrochemical industry, are those pushing the “plastics saves lives” mantra hardest**. Efforts to undermine the precautionary principle and describe health-related harms of plastics as “not well understood” should be resisted and a consistent message about the health risks from plastics included in the Treaty. **Country delegations and organisations involved in the Treaty negotiations must ensure vested commercial interests do not exert influence over an important participatory summit for human and environmental health in Busan in November. This means ensuring plastic products for medical and public health uses are not given a free pass in the final text of the Global Plastics Treaty.**”

Guardian - About 80% of countries fail to submit plans to preserve nature ahead of global summit

<https://www.theguardian.com/environment/2024/oct/15/about-80-percent-countries-fail-submit-plans-preserve-nature-ahead-cop16-aoe>

“More than 80% of countries have failed to submit plans to meet a UN agreement to halt the destruction of Earth’s ecosystems, new analysis has found.”

“Nearly two years ago, the world [struck a once-in-a-decade deal](#) in Montreal, Canada, that included **targets to protect 30% of land and sea for nature, reform billions of dollars on environmentally harmful subsidies and slash pesticide usage**. Countries committed to submit their plans for meeting the agreement before the [biodiversity Cop16](#) in Cali, Colombia, which begins this month – but only 25 countries have done so....”

- Related: **Climate Change News (17 Oct) - [COP16 confronts “huge” challenge of protecting 30% of world’s land and sea](#)**

Climate Overshoot Commission (Policy Paper) - Reducing the Health Risks of Climate Overshoot

https://www.overshootcommission.org/files/ugd/0c3b70_1ac33b2c4ea844dea6d93324ce9d8a90.pdf

Also launched in Berlin this week.

Key messages: “1. Increase funding and financial support at the necessary scale for health-climate action via national and international agendas, to reach those most affected and most vulnerable. 2. Prioritize immediate and substantial emission reductions, phase out fossil fuels and scale up carbon removal. 3. Implement expansive and well-financed adaptation measures, including for health systems. 4. Conduct careful research on the health impacts of solar radiation modification (SRM) technology, while maintaining a moratorium on implementation.”

Ethiopia Ministry of Health, Gavi, UNICEF and WHO launch Health Facility Solar Electrification (HFSE) initiative to enhance primary health care services

<https://www.gavi.org/news/media-room/ethiopia-ministry-health-gavi-unicef-and-who-launch-hfse>

From late last week. “300 remote health care facilities across Ethiopia will be powered with solar energy, benefiting an estimated 6.7 million people; **Backed by Gavi funding, this new initiative aims to build climate-resilient health systems, while also boosting vaccine storage capacity**; The programme – which supports the Ethiopia Ministry of Health’s goal to solar power over 1,000 health care facilities and enhance maternal, infant and post-natal care in underserved areas – will be **implemented by the Ministry of Health, UNICEF and WHO.**”

“...In response to the urgent demand for reliable energy in health care facilities, **the Ethiopia Ministry of Health, Gavi, the Vaccine Alliance (Gavi), UNICEF and WHO today officially launched**

the Health Facility Solar Electrification (HFSE) initiative. This new initiative, which is part of a broader US\$ 35 million programme funded by Gavi, aims to significantly reduce greenhouse gas emissions, increase access to immunization, and broaden primary health care services.”

Recourse - The IMF is still advising damaging austerity and continued fossil fuel production, in spite of promises of IMF climate action, data shows

<https://re-course.org/newsupdates/imf-climate-action-report/>

“**The IMF is using climate change to justify austerity measures in many of its current loan programs,** a [new report](#) from international organisation Recourse, published with Alternative Law Collective, ACJCE and MENA Fem revealed today.”

Lancet – Offline: Rethinking the human costs of climate change

R Horton; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)02260-8/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)02260-8/fulltext)

Starting from a quote of Srinath Reddy, **Horton wonders why we seem to be losing the argument about the importance of a growing climate emergency.** And argues **part of the reason may lie in the way we marshal evidence about the harmful effects of climate change.**

“.... **using mortality data alone, the climate crisis appears to be just one of many health challenges facing the world this century, and maybe not the worst.** Such a conclusion would be a serious mistake. **Climate change is an entirely different category of emergency compared with any other global health threat. Why? First, these estimates do not take account of tipping points**—moments when small changes become sufficiently self-perpetuating to cause larger, more significant, and more dangerous changes.... These tipping points are conveniently forgotten in climate modelling and policy making.” And “**second, mortality is a very blunt measure.**”. Read why.

He concludes:” **death is only one, and not necessarily the best, measure of how a changing climate will shape human life. We need broader planetary metrics of climate's impact.** A flourishing human life is not only about the biological me. It also depends on a flourishing world in all of its astonishing diversity. Let us take account of that diversity when we assess the threats to our future.”

Some more reports

World Bank (report) - Poverty, Prosperity, and Planet Report: Pathways Out of the Polycrisis

<https://www.worldbank.org/en/publication/poverty-prosperity-and-planet>

“**The World Bank Group has set a clear mission: ending poverty and boosting shared prosperity on a livable planet.** This report offers the **first post-pandemic assessment of global progress toward these interlinked goals, and explores potential pathways out of today's polycrisis** - an environment where multiple and interconnected challenges are impacting the world simultaneously. The report's

messages are presented around progress in terms of the goals, pathways to move forward, and priorities depending on where countries stand on the interlinked goals.”

Main messages: **8-pager**.

- Related **tweet Max Lawson**: “Powerful finding from the new World Bank Poverty, Prosperity and Planet report- **if countries reduced inequality by just 2% each year, then we could end extreme poverty in 20 years, as opposed to 60 years if inequality remains at today's high levels.**”

UN News - Two billion women without access to social protection

<https://news.un.org/en/story/2024/10/1155701>

“A UN Women report reveals that policies ranging from cash benefits to healthcare and pensions are not being extended to enough women and girls, leaving them more vulnerable to poverty worldwide.”

“As the world prepares to mark the [International Day for the Eradication of Poverty](#) on 17 October, [UN Women](#) released a report highlighting the widening gender gap in social protection. The report reveals that **an alarming two billion women and girls are without access to any form of social protection**. Despite some progress since 2015, **gender disparities in social protection coverage have widened** in most developing regions, suggesting that recent gains have disproportionately benefitted men.”

Guardian - Global water crisis leaves half of world food production at risk in next 25 years

<https://www.theguardian.com/environment/2024/oct/16/global-water-crisis-food-production-at-risk>

“Landmark review says urgent action needed to conserve resources and save ecosystems that supply fresh water.”

“More than half the world’s food production will be at risk of failure within the next 25 years as a rapidly accelerating water crisis grips the planet, unless urgent action is taken to conserve water resources and end the destruction of the ecosystems on which our fresh water depends, experts have warned in a landmark review.”

“Half the world’s population already faces water scarcity, and that number is set to rise as the climate crisis worsens, according to **a report from the [Global Commission on the Economics of Water](#) published on Thursday**. Demand for fresh water will outstrip supply by 40% by the end of the decade, because the world’s water systems are being put under “unprecedented stress”, the report found.”

“The commission found that governments and experts have vastly underestimated the amount of water needed for people to have decent lives. While 50 to 100 litres a day are required for each

person's health and hygiene, in fact people require about 4,000 litres a day in order to have adequate nutrition and a dignified life. For most regions, that volume cannot be achieved locally, so people are dependent on trade – in food, clothing and consumer goods – to meet their needs.”

With **5 main takeaways of the report.**

Qatar-WHO partnership leaves legacy for safer, healthier mega-sporting events

<https://www.who.int/news/item/16-10-2024-qatar-who-partnership-leaves-legacy-for-safer--healthier-mega-sporting-events>

“New report provides learnings and blueprint for leveraging sports as drivers of health.”

“Capturing and building on the experiences of the FIFA World Cup Qatar 2022, the State of Qatar and World Health Organization today launched a new report providing lessons learned and recommendations for staging healthy and safe mega and grassroots sporting events around the world. The report, titled *Changing the Game: Strengthening Health and Well-Being through Sport Events*, is the product of the 3-year Sport for Health partnership established in 2021 by Qatar and WHO, in collaboration with FIFA and Qatar’s Supreme Committee for Delivery and Legacy, to deliver and ensure the legacy of a healthy and safe FIFA World Cup Qatar 2022. It was launched during a Ministerial event titled *Strengthening Health and Well-being Through Sport Events*, held in Doha during the ongoing 71st WHO Eastern Mediterranean Regional Committee.”

“...Dr Tedros Adhanom Ghebreyesus, WHO Director-General, said the new report demonstrated the power of sports – and sporting events – to empower people to lead healthier lives, physically and mentally.”

Miscellaneous

UN News - Political leaders must champion human rights amid global crises

<https://news.un.org/en/interview/2024/10/1155806>

“The UN’s top human rights official has told *UN News* that it’s not human rights themselves that are in crisis – but rather their implementation coupled with a lack of firm political leadership to make sure the rights of all are respected. “ “... Mr. Türk underscored the critical role of human rights mechanisms, including the Human Rights Council, Special Rapporteurs as well as his office, OHCHR, in ensuring that the perpetrators of violations and abuses are held to account....”

Scientific American - What Gives You Hope for Health Equity?

<https://www.scientificamerican.com/article/health-experts-share-what-gives-them-hope-for-improving-equity/>

“Health experts share what gives them hope for improving health for all.” Among others, M Pai & S Abimbola.

Guardian - Negative stereotypes in international media cost Africa £3.2bn a year – report

<https://www.theguardian.com/global-development/2024/oct/17/media-stereotypes-africa-higher-interest-report-payments-on-sovereign-debt>

“Focus on conflict, corruption and poverty heightens perception of risk, raising interest on sovereign debt, authors say.”

“Africa loses up to £3.2bn yearly in inflated interest payments on sovereign debt due to persistent negative stereotypes that dominate international media coverage of the continent, according to [a new report](#). Research by consultants [Africa Practice](#) and the advocacy non-profit [Africa No Filter](#) suggests that media portrayals, especially during elections when global coverage is heightened, focus disproportionately on conflict, corruption, poverty, disease and poor leadership, widening disparities between perceived and actual risks of investing in the continent, and creating a monolithic view of Africa.....”

Lancet - To keep health as a unifying force, we must put resources into tackling health misinformation and disinformation

Jessamy Bagenal et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)02245-1/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)02245-1/fulltext)

“... in recent years health has been the subject of unprecedented polarisation, begging the question: is health no longer a unifying force, but a dividing one? Some would say that there is ample evidence to answer yes to this question and that one cause of this inversion is misinformation and disinformation (although both words refer to types of wrong or false information, only disinformation is created and spread with intent to deceive)....”

“...The scientific literature on health-related online misinformation and disinformation is still nascent, but major themes can be drawn. ..”

Authors conclude: “... **At The Lancet Group, we have set up a working group to understand and tackle misinformation and disinformation surrounding our journals' content.** Our efforts focus on interventions such as anticipating misrepresentation during the editorial process, warding off false information in communications, and fine-tuning social media monitoring to respond to cases quickly. At an individual level, health remains a unifying force; our humanity is predicated on our collective ability to protect and enhance the lives of the next generation and each other. To achieve this, health institutions and journals have a responsibility to be agile, responsive, and accurate platforms of information and to combat misinformation and disinformation wherever possible.”

Global health events

WHO Alliance - Strengthening knowledge systems in Africa

<https://ahpsr.who.int/newsroom/news/item/14-10-2024-strengthening-knowledge-systems-in-africa>

“ [Recent literature](#) shows that the dominant paradigms of knowledge translation, integration and brokering [still continue](#) to focus efforts on individuals instead of institutions; research generation instead of the political economy of evidence and knowledge; and that the scholarship from low- and middle-income countries remains lean. To help break down these false dichotomies, **the Alliance is promoting a shift in its approach to strengthening in-country knowledge ecosystems.** In mid-September, we kicked off a new initiative, [Partnerships for stronger knowledge systems in Africa \(KNOSA\)](#) at an inception workshop held from 18-21 September in Addis Ababa, Ethiopia. The workshop **brought together teams from Ethiopia, Kenya, Somalia and Uganda** to share approaches, refine workplans, and co-create a theory of change of how to monitor and measure systems change.....”

HPW - Long-Acting Injections Against HIV Dominate at Prevention Conference

<https://healthpolicy-watch.news/long-acting-injections-against-hiv-dominate-at-prevention-conference/>

Coverage of the **Research for Prevention (R4P)** conference in Peru.

“... **Lenacapavir, the long-acting anti-HIV injectable administered just twice a year, took centre stage at the fifth HIV Research for Prevention Conference (HIVR4P) held last week.** However, **several other important studies were also unveiled**, including an injectable that combines contraception and HIV protection, results from a three-month vaginal ring, and real-world findings from Zambia’s rollout of long-acting injectable cabotegravir.”

- Link: [UNAIDS – New long-acting HIV prevention options for women and girls in an era of choice](#)
- Related: [BMJ Opinion - Lenacapavir: a giant step forward in HIV prevention—but a missed opportunity for achieving equity and access](#)

Related tweet by one of the authors, G Yamey: *“In a new Opinion piece in @bmj.com, Shingai Machingaidze & I examine Gilead’s lenacapavir global access plan. We argue the plan missed the opportunity to boost local manufacturing in sub-Saharan Africa AND it misses out middle-income countries with a high HIV incidence.”*

New Humanitarian - Why the Grand Bargain’s future hinges on accountability

<https://www.thenewhumanitarian.org/news/2024/10/15/why-grand-bargain-future-hinges-accountability>

“.... Call it **Grand Bargain 3.0.** Signatories to the humanitarian reform package known as the **Grand Bargain meet in Geneva this week** to figure out how to move forward on long-stalled promises. **The annual meeting is the first since the sector’s once-sprawling reform agenda was [slimmed down](#) to a version 3.0 last year,** focused on improving support for locally led response, quality funding, and accountability to people who use aid.....”

Devex - Temporary eclipse of the SUN

<https://www.devex.com/news/devex-newswire-amid-the-rubble-of-gaza-sparks-of-rebuilding-108544>

On another postponed meeting due to Marburg.

“Another major conference has been rescheduled due to the deadly Marburg virus. The Scaling Up Nutrition Movement Global Gathering set to be held next month in Kigali, Rwanda, has been postponed to next year due to the Marburg outbreak in the region.”

“... In a statement last week, SUN Movement Coordinator Afshan Khan [cited](#) the **“health and safety” of participants as the reason for delaying the event.** **This year’s event, with the theme “NutritiON: Power the Change,”** was set to bring together nearly 1,000 people from 66 countries, representing civil society organizations, the private sector, and high-level government leaders. **It was timed to encourage political and financial commitments ahead of another major event, the Nutrition for Growth Summit, which is set for March 2025 in Paris.”**

Global health governance & Governance of Health

Nature (World View) - The UN needs a new mission: get stuff done

P Singer; <https://www.nature.com/articles/d41586-024-03333-1>

“The United Nations has just listed more things the world needs to accomplish. It should be asking why it hasn’t reached its current goals.”

International Political Sociology - Establishing the Health Governance of Flows: Authority Performances and Expertise at the International Sanitary Conference of 1892

Luis Aue; <https://academic.oup.com/ips/article/18/4/olae037/7810809?login=false>

“At the 1892 International Sanitary Conference in Venice, experts established international health politics as governing the flows of people, traffic, and information. This focus has remained ingrained in current health politics and shaped the international response to the COVID-19 pandemic. This paper focuses on the micropolitics among these experts to understand the emergence of such governance expertise. **Contributing to the history of international relations, I show how the notion of international health politics as governing flows—rather than targeting ill health with global sanitary reform—became established in the late nineteenth century.....”**

Devex - Pro Insider: UNOCHA’s new chief, and a comedy of errors

<https://www.devex.com/news/pro-insider-unocha-s-new-chief-and-a-comedy-of-errors-108499>

“The U.N. relief chief post goes to a British man — unsurprisingly.”

“the U.N. finally has a new relief chief, more than three months since the previous postholder Martin Griffiths [stepped down](#). And it’s bad news for those who’d been holding out hope that the job might go to someone other than a British man. Griffiths is being replaced by Tom Fletcher, who is currently principal of Hertford College, Oxford, but who previously served as the U.K.’s ambassador to Lebanon and as a foreign and development policy adviser to the U.K. government.....”

Devex - Europe wants ‘recognition’ for its aid to Africa

<https://www.devex.com/news/europe-wants-recognition-for-its-aid-to-africa-108503>

(gated) **““Sometimes you get the impression that everything that the EU does is taken for granted,” Josep Borrell, the EU’s foreign affairs chief, said last year.”**

“If she had her time again, the outgoing boss of the [European Commission](#)’s development department says she would focus more on telling people in Africa how much the European Union and its member states give in foreign aid. Jutta Urpilainen said in a [video](#) interview with the [Center for Global Development](#) think tank, released on Oct. 9, that communication was a challenge from the beginning of her mandate in 2019. “Taking into account how much funding we provide to our partners in the Global South, and the fact that we are still the biggest [official development assistance] provider in the world, I think we have not been able to communicate about it enough — or I would say, so strongly, as I hoped,” she said.

- More detail via Devex Newswire - [Does European aid have an image problem?](#)

TGH - The United States Targets Cervical Cancer and Lead Exposure

D Fidler; <https://www.thinkglobalhealth.org/article/united-states-targets-cervical-cancer-and-lead-exposure>

“The Biden administration launched efforts to reduce cervical cancer and lead exposure that could have brief policy lives.”

“... In September, the U.S. government announced global health projects that take aim at cervical cancer and lead exposure. The [Quad Cancer Moonshot Initiative](#) and the [Partnership for a Lead-Free Future](#) are noteworthy additions to the U.S. global health portfolio.....”

“... As with any new policy, the success of the initiatives will be assessed down the road. The road, however, could be short if Donald Trump wins the presidential election in November. It could be shortest for the Quad initiative [with focus on the Indo-Pacific] because of how concerns raised by U.S. political conservatives about vaccinations against the sexually transmitted [human papillomavirus](#) (HPV), which can cause cervical cancer, intersect with conservative perspectives on U.S. foreign policy on global health.”

Global health financing

Devex - Pan-African Transform Health Fund surpassed goal, raised \$111 million

<https://www.devex.com/news/pan-african-transform-health-fund-surpassed-goal-raised-111-million-108518>

(gated) See also a previous IHP newsletter. **“The blended finance fund aims to invest in high-impact businesses providing private health care solutions across the continent. They aimed to raise \$100 million.”**

“The Transform Health Fund, a Pan-African blended finance investment vehicle, reached its final investment close at \$111 million — which is \$11 million over its target. The fund aims to invest in high-impact businesses providing private health care solutions across the continent, reaching underserved populations....”

Devex op-ed - Opinion: How the world funds global health is starting to look outdated

B Simons; <https://www.devex.com/news/opinion-how-the-world-funds-global-health-is-starting-to-look-outdated-108478>

“The global health financing gap is widening, and the replenishments model is no longer sufficient to meet these growing needs.”

Arguing (1) Private sector participation is long overdue (*“Global health institutions have not fully explored this private capital financing path. If global health funds are serious about closing the financing gap — estimated at over \$66 billion for Africa alone — they must find innovative ways to engage private investors. This would involve borrowing from private markets and paying back through well-designed treasury operations, similar to how development banks operate.”* And (2) **“Funds targeting specific disease burdens is an outdated approach”**. ...”

Devex - Opinion: We’re looking for ideas to Improve women’s health

<https://www.devex.com/news/sponsored/opinion-we-re-looking-for-ideas-to-improve-women-s-health-108534>

“Pivotal, founded by Melinda French Gates, just launched a \$250 million open call to organizations working to improve the mental and physical health of women and families. In this opinion piece, Pivotal's Chief Strategy Officer Haven Ley unpacks the aims of the call.”

CGD (Working paper) - China and the Common Framework: Understanding the Motives behind Debt Relief Provision to Low-Income Countries

D Grigorian et al; <https://www.cgdev.org/publication/china-and-common-framework-understanding-motives-behind-debt-relief-provision-low>

« The paper discusses five hypotheses that may potentially explain China’s behavior within the G20 Common Framework, the main vehicle for low-income country sovereign debt restructuring....”

UHC & PHC

HP&P - The political economy of national health insurance schemes: evidence from Zambia

<https://academic.oup.com/heapol/advance-article/doi/10.1093/heapol/czae094/7822267?searchresult=1>

By Doris Osei Afriyie et al.

Plos One - Health outcome convergence and the roles of public health financing and governance in Africa

<https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0312089#>

By A E N Mouteyica et al. “...this paper examines the progress of African countries in reducing intra-country health outcome disparities between 2000 and 2019. In other words, **the paper investigates the convergence hypothesis in health outcome using a panel data from 40 African countries...**

Devex Newswire: What is Khushi Baby, the app transforming rural health in India?

<https://www.devex.com/news/devex-newswire-what-is-khushi-baby-the-app-transforming-rural-health-in-india-108550>

“**The app is a critical tool for rural health care**, providing timely insights that ensure patients don’t slip through the cracks.”

Pandemic preparedness & response/ Global Health Security

Stat – Is it time to freak out about bird flu?

H Branswell; <https://www.statnews.com/2024/10/16/bird-flu-pandemic-overall-risk-low-continued-h5n1-outbreak-dairy-cattle-worrisome/>

“The answer is not as straightforward as one might like.”

“So is this freak-out time? Or is the fact that this virus still hasn’t cracked the code for easy access to human respiratory systems a sign that it may not have what it takes to do so? The answer, I’m

afraid, is not comforting. Science currently has no way of knowing all the changes H5N1 would need to undergo to trigger a pandemic, or whether it is capable of making that leap. **The truth is, when it comes to this virus, we're in scientific limbo."**

"Since the outbreak was first detected in late March, the Centers for Disease Control and Prevention has declared, over and over again, that it deems the risk to people who aren't working with cows to be low. The troika of United Nations agencies that monitor H5N1 closely — the World Health Organization, the World Organization for Animal Health, and the Food and Agriculture Organization — shares that opinion. Between the lines of both assessments, though, are words public health authorities rarely volunteer but will acknowledge if pushed. As best they can tell, the risk now is low. But things could change, and if they do, the time it takes to transition from low risk to high risk may be dizzyingly brief."

"... The world's leading flu scientists recently met in Brisbane, Australia, for a key flu conference that is held once every two years, Options for the Control of Influenza. As you might expect, there was a lot of discussion — some on the program, some in the hallways — of the H5N1 outbreak in U.S. dairy cattle. But even there, among the best minds on influenza in the world, there was no clarity about the risk the situation poses, said Malik Peiris, chair of virology at the University of Hong Kong's School of Public Health. No one Peiris heard or spoke to suggested that H5N1 could never gain the ability to transmit easily from person-to-person. But likewise, no one appeared confident that widespread human-to-human transmission of this virus is inevitable or even highly likely, he said. There was agreement, however, around at least one notion: Letting this virus continue to spread unchecked in cows is profoundly unwise. "

JCPH - The proposed WHO Pandemic Agreement: Ambitious progress or business as usual?

Alan Petersen; <https://journalhosting.ucalgary.ca/index.php/jcph/article/view/80000>

"...This editorial considers: how has the Agreement progressed to date? And will it adequately prepare societies to tackle future pandemics?"

Petersen concludes: **"....In short, for various reasons, the proposed Pandemic Agreement will likely fall short of what is required for societies to tackle future pandemics, especially during a period of defined crisis when resource-rich countries will work to advance their own interests and those of Big Pharma.** The Agreement itself, as currently framed, will do little to address entrenched problems with the WHO and the decline of the authority once bestowed on it and other supranational organisations in the current fractured global political order, which is marked by deeply polarised views on many issues and the social media-driven infodemic, which authorities struggled to control from the beginning of the COVID-19 pandemic. As this event showed, pandemic responses produce winners and losers with the priorities of wealthy nations and corporations tending to work against international solidarity (see, e.g. Shaw 2024). With growing nationalism and authoritarianism and the radical reshaping of the global order, modernist certainties that have underpinned efforts to support the public's health, including the power and influence of authorities such as WHO and UN, have been severely tested...."

Global Policy - Preparing for pandemics needs a dose of public health and a booster of “complex thought” (Errare humanum est, perseverare diabolicum)

<https://onlinelibrary.wiley.com/doi/10.1111/1758-5899.13449>

By Elisabeth Paul, Garrett W. Brown, David Bell, Valéry Ridde & Joachim Sturmberg.

Brownstone institute - When Models and Reality Clash: A Review of Predictions of Epidemic and Pandemic Mortality

<https://brownstone.org/articles/when-models-and-reality-clash-a-review-of-predictions-of-epidemic-and-pandemic-mortality/>

(see also a previous IHP newsletter issue). By the **REPPARE project (G W Brown et al) at the University of Leeds.**

“...Since early in the Covid-19 outbreak, and indeed some years before, there has been an increased international public health emphasis on the risk of outbreaks and **pandemics**. While this may seem incongruous in light of the overall steady global reduction in infectious disease mortality over the past 30 years, **the concern has led to requests for unprecedented funding and a major reorientation of several international health agencies.** A report published in 2024 by the REPPARE project at the University of Leeds, *Rational Policy Over Panic*, demonstrated that the risk had been misrepresented in the reports of several key international agencies involved in pandemic prevention, preparedness, and response (PPPR) policy development. A significant reason was a failure to consider advances in health care and technological advances to detect and record disease outbreaks....”

Quote: “...Based on predictions including the one discussed here, **the equivalent of nearly 50% of pre-Covid ODA is proposed for pandemic preparation and response. This will reduce essential interventions elsewhere.”**

Planetary health

Chatham House (Explainer) - What is COP29 and why is it important?

R Townend; <https://www.chathamhouse.org/2024/10/what-cop29-and-why-it-important>

In-depth analysis of the key issues at stake. **“The COP29 summit will see negotiators try to agree how to finance the climate action the world urgently needs.”**

CGD (blog) - Climate and Development in Three Charts: An Update

J Beynon et al ; <https://www.cgdev.org/blog/climate-and-development-three-charts-update>

“Here, we revisit three key questions, considering the most recent evidence: Which countries are most affected by climate change? Which countries have emitted the most greenhouse gases historically? And which countries are the biggest emitters today?”

“On those most hurt by climate change, our analysis shows that income losses in low-income countries which can be attributed to climate impacts are about five times larger than those in high-income countries. **Regarding emissions**, we show that while developed countries have indeed produced most CO₂ emissions since 1850, “developing” countries are now responsible for the majority of *all* greenhouse gases emitted since then, and are responsible for most of today’s emissions however measured. But this hides very wide variation between developing countries: the share of emissions from low-income countries remains tiny. **We argue, at least in the context of climate negotiations, that a binary distinction between developed and developing countries is no longer helpful.”**

FT - The magic pony of private finance fails to fund the global green transition

A Beattie; <https://www.ft.com/content/481dc5c3-5239-44f8-919e-f6246532cee1>

“It’s unrealistic to imagine investors will massively increase their contribution to developing-country infrastructure.”

“By now it’s a well-established pattern. A bright-eyed new World Bank president, the current one being the former Mastercard CEO Ajay Banga, comes in promising to leverage judicious injections of public money to unlock the vast reserves of private sector cash itching to invest in infrastructure in developing countries. The plan is hailed as a bold new market-led approach to helping poor countries get rich. **And then it doesn’t really happen....”**

“The challenge of getting private finance to build infrastructure is even now more acute because of the green transition to renewable energy and low-carbon technologies. Traditionally generous donor countries — the UK, France, Norway — are cutting aid budgets. **Instead, they often concentrate on “development finance institutions” (DFIs)** such as the UK’s British International Investment company. **By far the largest DFI is the World Bank’s International Finance Corporation (IFC).** The DFIs lend or take equity stakes in businesses in developing countries and aim to “crowd in” private capital. **The results have been consistently disappointing.** A forthcoming book by the former World Bank economist James Leigland on the rise and fall of public-private partnerships (PPP) notes that **private contributions to developing-country infrastructure projects peaked at a low level in 2012** — with only 10 per cent going to the lowest-income nations — **and have fallen since.”**

PS: **“... more fundamentally, official lenders and governments should be more realistic about what private finance can achieve in infrastructure.** It’s somewhat ironic that the UK in particular has been so keen to push PPP in developing countries, since Britain’s own experiences in the area have not exactly been joyful....”

Guardian (Analysis) - Lula and Petro have the chance of a lifetime to save the Amazon. Can they unite idealism and realpolitik to pull it off?

<https://www.theguardian.com/environment/2024/oct/16/lula-and-petro-have-chance-of-lifetime-to-save-amazon-can-they-unite-idealism-realpolitik-to-pull-it-off-cop16-aoe>

“The South American leaders are in the spotlight as they prepare to host this week’s Cop16 biodiversity summit, November’s G20 meeting and next year’s Cop30 climate summit..”

G20 - Brasil creates a billion-dollar fund for tropical forest preservation

<https://www.g20.org/en/news/brasil-creates-a-billion-dollar-fund-for-tropical-forest-preservation>

“The tropical forest fund was launched during the G20 in Brasil and will be operational at COP 30, which will hold its presidency in 2025. The Tropical Forest Finance Facility (TFFF) will have funds reverted to the preservation and mitigation of the impacts of climate change, with an expected funding of 125 billion dollars (approximately BRL 700 billion).....”

Guardian - Fungi could be given same status as flora and fauna under conservation plan

https://www.theguardian.com/environment/2024/oct/16/fungi-status-boost-conservation-cop16-uk-chile-biodiversity-plan?CMP=share_btn_url

“Exclusive: proposal to Cop16 could see ‘funga’ get global legal consideration distinct from flora and fauna.”

“A new era of mycelial conservation could begin this month when the UK and Chile propose that fungi should be placed alongside animals and plants as a separate realm for environmental protection. Mushrooms, mould, mildew, yeast and lichen would all receive elevated status under the plan, which will be submitted to the UN convention on biological diversity (CBD) during the Cop16 meeting in Cali, Colombia, which opens on 21 October.....”

Barron’s - Almost 40% Of World Bank's Recent Climate Funds Unaccounted For: Oxfam

<https://www.barrons.com/news/almost-40-of-world-bank-s-recent-climate-funds-unaccounted-for-oxfam-3b985301>

“Close to 40 percent of World Bank climate financing over the past seven years is currently unaccounted for, Oxfam said in a new report published Wednesday, blaming poor record-keeping. An Oxfam audit of the development lender's climate finance portfolio between 2017 and 2023 found that as much as \$41 billion in climate finance could not be” found "between the time projects were approved and when they closed.”

Devex Newswire: Biodiversity is priceless — or is it?

<https://www.devex.com/news/devex-newswire-biodiversity-is-priceless-or-is-it-108562>

“Inside the plan to establish a biodiversity credits market, with talks to be had at next week's COP 16.”

“... **The United Nations Development Programme’s Biodiversity Credit Alliance** says that a **biodiversity market is in the “early stages of being established.”** This knowledge-sharing platform is backed by 470 public sector groups, private companies, Indigenous groups, and local communities. EarthAcre, for example, is one of a few dozen companies that works to quantify a region’s biodiversity, sell it to companies, and channel funds back down to the individuals who can maintain and restore it.”

“It all sounds good in theory (as most things do) but **how do you place a numerical value on nature? Similar to carbon credits, the biggest challenge will be measuring the impact and instilling trust in the integrity of the credit.** **“This can’t become an offset market,”** Marcos Neto, UNDP’s assistant secretary-general and director of policy, tells my colleague Jesse Chase-Lubitz. “CO2 is CO2 anywhere in the world, but a species in my hometown in the Amazon is not going to be offset by a species somewhere else. Each species has its own value, its own ecosystem, and its own relationship with Indigenous peoples.” “

“Biodiversity credit markets will be a subject of discussion at the U.N. Biodiversity Conference, or COP 16, in Colombia, which begins Monday. But it remains to be seen if such a market is ready for prime time, or if it’s only an abstract concept — for now....”

Global banks want to monetise biodiversity

<https://www.theedgesingapore.com/news/sustainability/global-banks-want-monetise-biodiversity>

“Some of the world’s biggest banks are about to gather for talks, with the goal of monetising a theme that until now has left much of Wall Street drawing blanks: nature and biodiversity.”

“JPMorgan Chase & Co. and Standard Chartered are among lenders sending representatives for the first time to the United Nations’ COP16 biodiversity summit, which starts next week in the Colombian city of Cali. Other banks that plan to send staff include Citigroup, Bank of America, HSBC Holdings and Deutsche Bank.”

“The sudden interest in a theme that’s long been deemed too obscure and niche for Wall Street comes as banks and asset managers increasingly look to biodiversity as a new incubator for financial engineering....”

Guardian - Fossil fuels could become cheaper and more abundant, says IEA

<https://www.theguardian.com/environment/2024/oct/16/fossil-fuels-could-become-cheaper-and-more-abundant-says-iea>

“International Energy Agency says transition to clean energy means there will be a surplus of oil, gas and coal.”

“The world’s energy watchdog has signalled a new energy era in which countries have access to more oil, gas and coal than needed to fuel their economic growth, leading to lower prices for households and businesses. The Paris-based agency’s **influential annual outlook report** found that energy consumers could expect some “breathing space” from recent spikes in global oil and gas

prices triggered by geopolitical upheavals because investment in new fossil fuel projects has outpaced the world's demand."

"Fatih Birol, the executive director of the IEA, said the report confirms its prediction that the world's fossil fuel consumption will [peak before 2030 and fall into permanent decline](#) as climate policies take effect. But continuing investment in fossil fuel projects will spell **falling market prices for oil and gas**, the IEA added...."

Climate Home News - Despite solar surge, world off track for COP28 renewable energy target

<https://www.climatechangenews.com/2024/10/11/despite-solar-surge-world-off-track-for-cop28-renewable-energy-target/>

See also last week's IHP news. "Current plans will only deliver half of the growth needed to hit a global target of tripling renewables by 2030, IRENA warns."

Environmental Research letters - Climate change mitigation policy for planetary health equity? An automated content analysis of countries' nationally determined contribution reports

Megan Arthur, S Friel et al; <https://iopscience.iop.org/article/10.1088/1748-9326/ad7edf>

"This study examines the extent to which national governments discuss the social determinants of planetary health equity (SDPHE) within their Nationally Determined Contribution reports (NDCs) to the UN Framework Convention on Climate Change. This is assessed relative to the frequency of discussion of economic factors and health outcomes, and how this varies between countries based on political, economic, and environmental factors."

Guardian - Tax on Europe's frequent flyers could raise €64bn a year – study

<https://www.theguardian.com/world/2024/oct/17/tax-on-europes-frequent-flyers-could-raise-64bn-a-year-study>

"Levy rising by €100 for each return flight after the first in a year could cut emissions by 21%, report says."

"A "jet-setter" tax on Europe's frequent flyers could slow global heating and raise €64bn (£54bn) a year at no extra cost to most people, a [report](#) has found."

"Carbon pollution pumped out of planes could fall by 21% if people were made to pay more for each extra flight they take beyond the first return trip, according to **analysis from the New Economics Foundation (NEF) and partner organisations**. Just over half the benefits in a given year would come from the 5% of people who fly the most, while 72% of people would escape fees by flying once or not at all....."

The BMJ's annual climate & health issue

<https://www.bmj.com/content/387/8444>

This year the issue is focused on **knowledge & leadership**.

Guardian - Europe's medical schools to give more training on diseases linked to climate crisis

<https://www.theguardian.com/global-development/2024/oct/14/european-network-climate-health-education-medical-schools-diseases-students-dengue-malaria-heatstroke>

“New climate network will teach trainee doctors more about heatstroke, dengue and malaria and role of global warming in health.”

“Mosquito-borne diseases such as dengue and malaria will become a bigger part of the curriculum at medical schools across Europe in the face of the climate crisis. Future doctors will also have more training on how to recognise and treat heatstroke, and be expected to take the climate impact of treatments such as inhalers for asthma into account, medical school leaders said, announcing the formation of the **European Network on Climate & Health Education (Enche)**. Led by the University of Glasgow, 25 medical schools from countries including the UK, Belgium and France will integrate lessons on climate into their education of more than 10,000 students.....”

PS: “... The **World Health Organization (WHO)** is supporting the initiative, along with private pharmaceutical and healthcare businesses, including AstraZeneca, Bupa, GSK, Novartis, Novo Nordisk, Roche and Sanofi, as members of the Sustainable Markets Initiative **Health Systems Task Force**, a public-private collaboration working on the decarbonisation of healthcare. Enche will be a regional hub of the **Global Consortium on Climate and Health Education (GCCHE)** at Columbia University school of public health in New York.....”

Guardian - Trees and land absorbed almost no CO2 last year. Is nature's carbon sink failing?

<https://www.theguardian.com/environment/2024/oct/14/nature-carbon-sink-collapse-global-heating-models-emissions-targets-evidence-aoe>

Analysis. **“The sudden collapse of carbon sinks was not factored into climate models – and could rapidly accelerate global heating.”**

BMJ - Healthcare leadership for a climate resilient future

K Hayhoe et al; <https://www.bmj.com/content/387/bmj.q2159>

Including this (*rather remarkable* 😊) paragraph: “ Finally, **the health insurance industry has an essential role to play, particularly in countries without universal healthcare. As extreme weather events, new disease patterns, and mental health problems linked with climate change become more common, insurance companies must tackle these emerging challenges. A recent report**

identifies **key steps for insurers**, including building understanding of climate health impacts and developing new insurance products that respond to these risks ... In addition to helping people adapt to climate risks, the report advised that insurance companies can also widen their coverage to include climate influenced diseases such as dengue and mental health conditions exacerbated by extreme heat and pollution....”

- The report: [BCG – How Insurers Can Take On the Climate-Driven Health Crisis](#)

Preprint – Improving an Integrative Framework of Health System Resilience and Climate Change: Lessons from Bangladesh and Haiti

V Ridde et al ; <https://eartharxiv.org/repository/view/7847/>

“...The ClimHB conceptual framework, developed in 2019, integrates two influential models: the Levesque model of healthcare access and DFID's resilience framework. Designed to study health system resilience in response to climate-induced events, the ClimHB framework uniquely positions the population as an active participant on the demand side, complementing the supply side of health services and providers. **Characterised by three core dimensions – exposure, sensitivity, and adaptive capacity** – this dual focus on demand and supply, and their interactions emphasises the dynamic interplay between both sides in shaping health system resilience. **A workshop utilising framework analysis, and the World Café method refined the ClimHB framework by integrating empirical evidence from Haiti and Bangladesh, alongside insights from a literature review...**”

Lancet – Climate crisis, cities, and health

M J Nieuwenhuijsen; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)01934-2/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)01934-2/fulltext)

“...In this Lecture, I provide an overview of potential climate action measures at the nexus of urban planning, environment, climate, and health to achieve climate neutral, liveable, and healthy cities.”

Covid

Science Insider - Missing immune cells may explain why COVID-19 vaccine protection quickly wanes

<https://www.science.org/content/article/missing-immune-cells-may-explain-why-covid-19-vaccine-protection-quickly-wanes>

“New insights on what stimulates long-lived antibody production could spur better vaccines.”

BMJ Feature – Are covid-19 tests still working?

<https://www.bmj.com/content/387/bmj.q2070>

“Nearly five years after the pandemic started, Marianne Guenot investigates whether current antigenic tests still work against the mutated virus.”

Mpox

Scientific American - How the Mpox Response Has Learned from History

<https://www.scientificamerican.com/article/the-mpox-response-has-learned-from-hiv-aids-history/>

“Tools and networks that have helped control HIV/AIDS are now working against mpox.”

Infectious diseases & NTDs

Science - Why did an obscure virus explode in Latin America? New study offers clues

<https://www.science.org/content/article/why-did-obscure-virus-explode-latin-america-new-study-offers-clues>

“Major genetic changes may have made the Oropouche more virulent, researchers say.”

“... A paper published by *The Lancet Infectious Diseases* today offers some answers. It shows the currently circulating strain of the Oropouche virus replicates far better in cell cultures than an older strain did—suggesting it may do better in humans as well. The data also suggest the current strain is different enough from earlier ones that people infected a decade ago have almost no immunity against today’s version. “This is not a new virus,” but it seems to “replicate faster, replicate better, and be more virulent,” says virologist William De Souza of the University of Kentucky, the last author on the study.”

“Other scientists, however, say changing conditions—including climate change, deforestation, and increased human mobility—may be aiding the spread. “It’s too speculative to say that it’s only the virus that was responsible for the current situation,” says virologist Felipe Gomes Naveca of the Oswaldo Cruz Foundation (Fiocruz), an author on a paper accepted for publication by *The Lancet Infectious Diseases*—and [posted as a preprint](#)—that argues certain kinds of farming could be aiding Oropouche’s spread....”

Cidrap news – New polio cases recorded in 4 countries

<https://www.cidrap.umn.edu/polio/new-polio-cases-recorded-4-countries>

“Four countries have new polio cases this week, including Pakistan with four more wild poliovirus type 1 (WPV1) cases and Angola, Nigeria, and South Sudan with vaccine-derived cases, according to the weekly report from the Global Polio Eradication Initiative (GPEI)....”

AMR

Globalization & Health - AMR and Sustainable Development Goals: at a crossroads

Bilal Aslam et al; <https://globalizationandhealth.biomedcentral.com/articles/10.1186/s12992-024-01046-8>

Review.

NCDs

Guardian - New cervical cancer treatment regime 'cuts risk of dying from disease by 40%'

<https://www.theguardian.com/society/2024/oct/14/new-cervical-cancer-treatment-regime-cuts-risk-dying>

"Process tested in patients over 10-year period involves short course of chemotherapy before chemoradiation."

"Doctors are hailing a "remarkable" new treatment regime for cervical cancer that reduces the risk of dying by 40%, in the biggest advance against the disease in 25 years. Cervical cancer is the fourth most common cancer in women globally, with about 660,000 new cases and 350,000 deaths every year, according to the World Health Organization. ... Their findings have been [published in the Lancet](#)...."

Plos GPH - A global snapshot on health systems capacity for detection, monitoring, and management of acute kidney injury: A multinational study from the ISN-GKHA

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0003823>

By Marina Wainstein et al.

Social & commercial determinants of health

Plos Editorial - Manufactured meals: The challenges of ultraprocessed foods

Alexandra Tosun (on behalf of the PLOS Medicine Editors);
<https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1004477>

- Related: [Plos Med Perspective – Ultraprocessed food \(UPF\), health, and mechanistic uncertainty: What should we be advising the public to do about UPFs?](#) (Eric Robinson et al)

“In this perspective, we discuss why current mechanistic uncertainty on ultraprocessed foods (UPFs) and health acts as a major challenge to providing informed dietary guidelines and public advice on UPFs. Based on the balance of current evidence, we do not believe it is appropriate to be advising consumers to avoid all UPFs and we await further evidence to inform consumer guidance on the need to limit consumption of specific foods based on their degree or type of processing.”

Plos GPH - Urban public space initiatives and health in Africa: A mixed-methods systematic review

T Meelan et al;

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0003709>

“Public space initiatives (PSIs) in African cities can significantly promote health and social well-being, yet their implementation and impact are unknown across the continent. There is a substantial gap in literature on PSIs in African countries, with most studies concentrated in wealthier cities and lacking comprehensive assessments of long-term health impacts. The objective of this study was to synthesise evidence on the typology, location, features, and outcomes of these initiatives as well as the guiding principles that underlie their design and implementation...”

Mental health & psycho-social wellbeing

Global Public Health - Oral health primary preventive interventions for individuals with serious mental illness in low- and middle-income nations: Scoping review

<https://www.tandfonline.com/doi/full/10.1080/17441692.2024.2408597?src=>

Review article by A Sharma et al.

Sexual & Reproductive health rights

Global Health Action - Examining priorities and investments made through the Global Financing Facility for maternal and newborn health: a sub-analysis on quality

Meghan Bruce Kumar et al ;

<https://www.tandfonline.com/doi/full/10.1080/16549716.2024.2406486?src=exp-la>

“...This study examines whether the rhetoric of increasing coverage together with quality has informed investment strategies in MNH through a secondary analysis of 25 GFF documents from 11 African countries.....”

Global Health: Science & Practice - Family Planning, Reproductive Health, and Progress Toward the Sustainable Development Goals: Reflections and Directions on the 30th Anniversary of the International Conference on Population and Development

Shyami de Silva et al ; <https://www.ghspjournal.org/content/early/2024/10/11/GHSP-D-24-00127>

« **On the 30th anniversary of the watershed International Conference on Population and Development, we reflect on recent influential shifts impacting family planning (FP) and the growing evidence base on the importance of investing in FP. We describe the U.S. Agency for International Development’s (USAID) Pathways to Progress for Sexual and Reproductive Health, 2024–2030, a forward-leaning framework that guides USAID’s family planning and reproductive health programs to help realize a world where ongoing improvements to sexual and reproductive health (SRH) contribute to longer, healthier, and more prosperous lives for all. We also delineate the 3 evidence-based pathways to achieve that vision that operate at individual, systems, and societal levels.....”**

Access to medicines & health technology

Trop Medicine & Infectious Disease - Alternative Pharmaceutical Innovation Models in Competitive Markets: A Collaborative Approach to Develop a Novel Drug for Hepatitis C

M Viera, S Moon et al; <https://www.mdpi.com/2414-6366/9/10/233>

“**Alternative innovation models have emerged to address failures of the traditional pharmaceutical system, particularly for diseases where market incentives do not attract sufficient research and development efforts. However, the feasibility of such models for diseases with significant markets is not well-established. This article analyses the development of a novel drug (ravidasvir) for the treatment of hepatitis C, a highly profitable market.....”**

With 2 key findings : 1. Yes, non-commercial R&D can successfully develop new medicines for highly profitable indications. 2. But developers need to have resources and plans to counteract gloves-off competitive moves by for-profit firms that can undermine their projects.”

BMJ GH - Access to medicines among asylum seekers, refugees and undocumented migrants across the migratory cycle in Europe: a scoping review

<https://gh.bmj.com/content/9/10/e015790>

by Saleh Aljadeeah et al.

Guardian- Weight-loss drug firm accused of prioritising profits after halting insulin pen production

<https://www.theguardian.com/global-development/2024/oct/16/weight-loss-drug-firm-novo-nordisk-insulin-pen-production>

“Novo Nordisk’s decision will force people in developing countries to use outdated glass vials and syringes, warn campaigners.”

People’s Health Dispatch - Patent law changes in Indonesia may hinder access to life-changing medicines

<https://peoplesdispatch.org/2024/10/11/patent-law-changes-in-indonesia-may-hinder-access-to-life-changing-medicines/?ref=peoples-health-dispatch.ghost.io>

“Indonesia’s new patent law has raised alarm over potential barriers to accessing life-saving medicines.”

Human resources for health

CGDP (Community Health Delivery Partnership) - Report - Investing in Community Health Workers to advance Primary Health Care: Advancing Rights, Protections, and Health Systems Integration.

<https://www.communityhealthdeliverypartnership.org/documents/investing-chws-rights-protections-and-systems-integration>

“Community health workers are pivotal to advancing primary health care. They contribute to prevention, preparation, and response to pandemics and other emergencies, and create more equitable and resilient health systems. **This paper presents data focused on critical, fundamental elements that must be in place for the effective integration of community health workers into the health system and recognition in policies and legal frameworks.**”

Lancet GH - Global radiotherapy demands and corresponding radiotherapy-professional workforce requirements in 2022 and predicted to 2050: a population-based study

Hongcheng Zhu et al; [https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(24\)00355-3/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(24)00355-3/fulltext)

Among the findings: “... In 2022, there were an estimated 20·0 million new cancer diagnoses, with approximately 10·0 million new patients needing radiotherapy at an estimated use rate of 50% and 12·8 million at an estimated use rate of 64%. In 2050, GLOBOCAN 2022 data indicated 33·1 million new cancer diagnoses, with 16·5 million new patients needing radiotherapy at an estimated use rate of 50% and 21·2 million at an estimated use rate of 64%. **These findings indicate an absolute**

increase of 8.4 million individuals requiring radiotherapy from 2022 to 2050 at an estimated use rate of 64%; at an estimated use rate of 50%, the absolute increase would be 6.5 million individuals. Asia was estimated to have the highest radiotherapy demand in 2050 (11 119 478 [52.6%] of 21 161 603 people with cancer), followed by Europe (3 564 316 [16.8%]), North America (2 546 826 [12.0%]), Latin America and the Caribbean (1 837 608 [8.7%]), Africa (1 799 348 [8.5%]), and Oceania (294 026 [1.4%]). We estimated that the global radiotherapy workforce in 2022 needed 51 111 radiation oncologists, 28 395 medical physicists, and 85 184 radiation therapists and 84 646 radiation oncologists, 47 026 medical physicists, and 141 077 radiation therapists in 2050. We estimated that the largest proportion of the radiotherapy workforce in 2050 would be in upper-middle-income countries (101 912 [38.8%] of 262 624 global radiotherapy professionals)."

Decolonize Global Health

Devex - New laboratory aims to expand microbiome research in Africa

<https://www.devex.com/news/new-laboratory-aims-to-expand-microbiome-research-in-africa-108468>

"African researchers are aiming to localize research on microbiomes to create health solutions for the continent's population. One area of focus will be reproductive health."

"A new laboratory opened at the [University of Cape Town](#) to accelerate research on African microbiomes. This new effort, called the [Microbial Interactions Laboratory](#), has brought together seven research teams studying different elements of the human microbiome. They're exploring the lung microbiome's link to acquiring pneumonia and tuberculosis; the vaginal microbiome's link to a woman becoming infected with HIV and experiencing adverse birth outcomes; and the gut microbiome's link with common gastrointestinal disorders like bowel disease, as well as neurological disorders including autism and depression. And the ways the gut microbiome impacts the body's metabolism of medicines. There will also be efforts to set up an African biobank to facilitate local fecal microbiome transplants, which can help establish healthy bacteria in lower intestines, and a vaginal biobank to facilitate local whole vaginal microbiome transplants for women in Africa...."

".... The new Microbial Interactions Laboratory is hosted and funded by the University of Cape Town's Institute of Infectious Disease and Molecular Medicine, or IDM, with infrastructure support coming from national funding. [Wellcome's](#) Centre for Infectious Diseases Research in Africa, or CIDRI-Africa, donated major equipment to the lab and it received funds from the [Gates Foundation](#) to facilitate studies...."

IJHPM _ Confronting the Colonial Roots of Global Health Inequities in Gaza;
Comment on "The Rhetoric of Decolonizing Global Health Fails to Address the
Reality of Settler Colonialism: Gaza as a Case in Point"

https://www.ijhpm.com/jufile?ar_sfile=74061

By Guido Veronese, Ashraf Kagee, Yasser Abu Jamei.

Conflict/War & Health

Global MPI 2024 report

<https://ophi.org.uk/global-mpi/2024>

The 2024 global Multidimensional Poverty Index (MPI).

- Coverage via UN News - [Nearly half the world's 1.1 billion poor live in conflict settings](#)

“ More than a billion people worldwide live in acute poverty and 40 per cent are in countries exposed to violent conflict, according to a UN-backed study published on Thursday. The finding comes in the latest update to the global Multidimensional Poverty Index (MPI), jointly published by the UN Development Programme (UNDP) and the Oxford Poverty and Human Development Initiative (OPHI) at the University of Oxford in the United Kingdom.....”

WHO - New joint health system review highlights opportunities for strengthening health care services for refugees and migrant communities in Uganda.

<https://www.who.int/news/item/16-10-2024-9789240098824>

“....A new report on “*Refugee and Migrant Health System Review: Challenges and Opportunities for Long-term Health System Strengthening in Uganda*” calls for a holistic approach to fortifying Uganda’s health system. The report underscores the importance of enhancing health worker capacities, improving access to essential medical resources, and fostering stronger stakeholders’ coordination. Together, these efforts aim to create a more resilient and inclusive health system that serves refugees, migrants, and host communities, while laying the foundation for long-term sustainability.” “ The report is a result of collaborative efforts between the Uganda’s Ministry of Health (MoH) and the World Health Organization (WHO), in partnership with the United Nations High Commissioner for Refugees (UNHCR), and the International Organization for Migration (IOM). ...”

Miscellaneous

IPS - World Told Act Now or Face 136 Years of Hunger, Report Warns

https://www.ipsnews.net/2024/10/world-told-act-now-or-face-136-years-of-hunger-report-warns/#google_vignette

“High levels of hunger will continue for another 136 years in many developing countries, according to a new report assessing global hunger.”

“The report, the 2024 Global Hunger Index (GHI), paints a grim picture, predicting that global hunger levels will remain high for another century. If more progress is not made to end hunger, it will continue to reverse many development gains. The report blames the combined crises of

conflict, climate change, high food prices and mounting debt, all of which are denying billions of people the right to adequate food. ...”

“Hunger Here To Stay: Published by **Concern Worldwide** and **Welthungerhilfe**, on October 10, 2024, the GHI reveals that **at least 64 countries are unlikely to reach low hunger levels until 2160 if the current pace of change continues.....”**

CGD - Three Reasons Why AI May Widen Global Inequality

P Schellekens et al; <https://www.cgdev.org/blog/three-reasons-why-ai-may-widen-global-inequality>

On the bigger, and far-less explored, concern that **AI could amplify inequality between nations.**

“...This blog highlights a third risk: AI deployment. While AI may fuel within-country inequality, it could also slow or reverse the gains made in reducing between-country inequality, as the ability to harness AI’s benefits or mitigate its disruption varies widely across nations. Without targeted policy interventions, AI may deepen the global divide, advancing richer nations while leaving poorer ones further behind, hindering progress towards the Sustainable Development Goals.....”

Devex - Vulnerabilities are getting in the way of transition to clean cooking

<https://www.devex.com/news/vulnerabilities-are-getting-in-the-way-of-transition-to-clean-cooking-108543>

“A USAID report from India found that communities are open and willing to switch to clean cooking but are often unable to afford it for long periods of time.”

FT - Demis Hassabis’s drug discovery start-up accelerates spending to ‘solve’ diseases

[Demis Hassabis’s drug discovery start-up accelerates spending to ‘solve’ diseases](https://www.ft.com/content/demis-hassabis-drug-discovery-start-up-accelerates-spending-to-solve-diseases)

“Losses widen at Isomorphic Labs, as new Nobel Prize winner pushes forward with effort to use AI in healthcare.”

“Isomorphic Labs, the drug discovery start-up led by Sir Demis Hassabis, has accelerated spending on staff and research, as the new Nobel Prize winner expands an ambitious push to “solve” diseases. The London-based group, **spun off from Google DeepMind**, the technology giant’s artificial intelligence arm, has reported that losses widened to £60mn in 2023, its first full year of operations. Losses were £17mn a year earlier.....”

“... The spending is a signal of Hassabis’s growing focus on Isomorphic Labs, which aims to accelerate drug discovery through the use of AI and commercialising technology developed by DeepMind.....”

Foreign Affairs - The Age of Depopulation

N Eberstadt; <https://www.foreignaffairs.com/world/age-depopulation-surviving-world-gone-gray-nicholas-eberstadt>

In-depth analysis. “Surviving a World Gone Gray”.

“Although few yet see it coming, humans are about to enter a new era of history. Call it “the age of depopulation.” For the first time since the Black Death in the 1300s, the planetary population will decline. But whereas the last implosion was caused by a deadly disease borne by fleas, the coming one will be entirely due to choices made by people. With birthrates plummeting, more and more societies are heading into an era of pervasive and indefinite depopulation, one that will eventually encompass the whole planet. What lies ahead is a world made up of shrinking and aging societies. Net mortality—when a society experiences more deaths than births—will likewise become the new norm. Driven by an unrelenting collapse in fertility, family structures and living arrangements heretofore imagined only in science fiction novels will become commonplace, unremarkable features of everyday life. **Future government policy, regardless of its ambition, will not stave off depopulation. The shrinking of the world’s population is all but inevitable. Societies will have fewer workers, entrepreneurs, and innovators—and more people dependent on care and assistance. The problems this dynamic raises, however, are not necessarily tantamount to a catastrophe. Depopulation is not a grave sentence; rather, it is a difficult new context, one in which countries can still find ways to thrive. Governments must prepare their societies now to meet the social and economic challenges of an aging and depopulating world....”** Read what Eberstadt suggests.

BMJ Editorial - Artificial intelligence and global health equity

<https://www.bmj.com/content/387/bmj.q2194>

“Regulation and monitoring are needed to prevent harmful bias in AI tools.”

Stat - Chasing CAR-T, biotech finds its next gold rush in autoimmune disease

<https://www.statnews.com/2024/10/14/biotech-car-t-autoimmune-disease/>

“Venture capitalists are plowing money into drug development in the field.”

Papers & reports

Lancet Global Health – November issue

<https://www.thelancet.com/journals/langlo/issue/current>

Start with the [Editorial: Fixing the system to end violence against women](#)

“In November 2023, we published a [study](#) reporting that, at a global level, the pervasive issue of intimate partner violence (IPV), one of the most common types of violence against women, was beginning to decline. However, the trend was not universal and indeed, 2024 has not felt like a good year for progress on violence against women. In the past few months alone, we have seen horrifying examples from around the world: the cases of Gisèle Pelicot in France, Rebecca Cheptegei in Kenya, and the unnamed doctor raped and murdered in her own workplace in India....”

A few other reads (that didn't appear early online yet):

- Lancet GH – [Impact of the 100 days mission for vaccines on COVID-19: a mathematical modelling study](#)

“ **The 100 Days Mission** aims to develop and make available a new vaccine against a future pathogen with pandemic potential within 100 days of that pathogen threat being recognised. **We assessed the value of this mission by estimating the impact that it could have had on the COVID-19 pandemic....**”

Related: Imperial - [Imperial modelling shows 100 Days Mission could have saved 8 million lives](#)

- Lancet GH – [Rapid surveys on violence against women in crisis contexts: decision-making guidance based on the UN Women Rapid Gender Assessment surveys on violence against women during COVID-19](#) (by Raphaëlle Rafin et al).

Tweets (via X & Bluesky)

Fifa Rahman

“Olaf Scholz stated this week that they will continue weapons supply to Israel. Germany has also stated that Greta Thunberg is potentially dangerous due to her activism on Palestine. I don't understand why people are still going to the World Health Summit. These are the same people who won't go to conferences in Kampala/Dubai/Beijing for human rights violations. Is it only brown human rights violations that you don't like? If you are walking in your privilege, please think about the lack of privilege that Palestinians have. Every day as Israel snipes their children.”

“Glad to hear people have been raising Gaza at the World Health Summit in explicit terms. Support for war crimes cannot be washed away through global health financing.”

D Barrett

“**For the first time, the World Health Summit will convene a session entirely focused on health equity for persons with disabilities:** a game-changer to accelerate progress towards global health goals “

M Kavanagh

“**My wish: Funding for a @WHO political hub to go w/the epidemic intelligence hub.** @DrTedros clearly articulates misinformation spread on #PandemicAccord, sovereignty at #WHS2024. But he has few tools to address an active political strategy using WHO to attack internationalism.”

“The @TheGPMB new report launched at #WHS2024 gives a new potential mantra “**adapt, connect, protect**” ... pushes us away from a biomedical dominated understanding of what it means to be “**prepared**” which is interesting.”