

IHP news 810 : A Brave New “transactional” World

(17 January 2025)

The weekly International Health Policies (IHP) newsletter is an initiative of the Health Policy unit at the Institute of Tropical Medicine in Antwerp, Belgium.

Dear Colleagues,

As we’re about to enter a Brave New World (officially on 20 January), these days euphemistically labelled a **‘transactional world’** (which presumably also includes a [transactional approach to multilateralism](#) from “you-know-who”), readers of this newsletter at least might vaguely remember that the **SDG agenda ‘deadline’** is now only 6 years away. Over here, in the EU, however, these days, talk is much more about how “we only have 5 (max 7 years) left in order to defend ourselves from Putin”. As a result, focus is very much on how we have to boost defense budgets - and **‘fast & furious’** moreover. Nevertheless, as the latest (2025) **World Economic Forum’s [Global Risks report](#)** makes clear, although ‘escalating armed conflict’ comes right on top as the most urgent threat, **global risks are multiple, huge, complex and getting worse every year.**

With that in mind, **a few suggestions for Davos men & women** (whom I largely hold responsible for the current global mess) getting together next week to prepare for the **‘Intelligent Age’** - and especially the European leaders (plus global health bigshots present).

Yes, I (reluctantly) agree in the EU we have to boost defense. Under the current circumstances, it’s unfortunately necessary. However – explicitly **cap it**. If you can’t “defend” the EU from Putin aggression (and continue to support Ukraine till a fair peace agreement) by spending 3 % (max) of your GDP (EU average), I think you’re doing something wrong. If there’s anything capitalism promises to do (often a blatant lie though), it’s to make things ‘efficient’ – so make it happen. Then communicate that hard ‘cap’ clearly to public opinion, and to Putin (while also conveying that this is about “defense” – I admit NATO doesn’t always get that right...).

Even more important, though, if Davos participants really want to **‘Collaborate for the Intelligent Age’** (as compared to heading for an [ever bigger abyss](#) ...) I do hope our leaders go thoroughly through the many great ideas and suggestions expressed in: (1) **Piketty & Sandel’s [new book on equality](#)** (as covered in a Guardian editorial which might ring a bell among frequent readers of this intro - [The Guardian view on globalisation and its discontents: how the left was left behind](#)); (2) a **Global Policy Forum briefing** ahead of the next FfD conference in Sevilla, [More and better development financing](#); and (3) (certainly the global health leaders present in Davos), also **Daniel Reidpath’s terrific blog, [Farewell Global Health](#)** – all while keeping in mind Johan Rockström’s warning from last week, [hitting 1.5°C was a “stark warning sign.”](#) And then start doing what leaders should do, even more so in our ‘Brave New World’: implementing many of these great suggestions to make this a fairer & more sustainable world. As everything is connected (and ‘bloody’ urgent, given that on so many fronts we have already started a vicious cycle).

There will be no ‘security’ whatsoever for (European or other) citizens if you only boost defense (*more likely, you won’t even manage to boost defense budgets for political reasons in many countries long before, if you fail to tackle inequality*) . Or – for the global health bigwigs - if you think a bit more “PPP’- ing” is going to cut it. The **WEF’s Global Risks [report](#)** itself shows ‘**inequality’ is the key node** (see p. 9), while also having plenty of ‘planetary health’ concerns sky-high on the agenda, already the next ten years. Let’s hope that sooner rather than later, boosting defense budgets won’t be necessary anymore. As it’s a tragic waste of resources - and human lives (soon after, usually). Last but not least, something tells me that a crucial part of the answer to our global political conundrum also lies in Priti Patnaik’s (GHF) analysis of earlier this week, on [Feminist Health Diplomacy](#)...

But for the time being, yes, do **brace yourself for ‘2025’** - while enjoying [every glimmer of hope](#), trying [to build](#) on it.

Enjoy your reading.

Kristof Decoster

Featured Article

Finding Peace in Global Health Spaces (and beyond)

Soe Yu Naing (EV4GH 2024)

“The best medicine is peace. There is no health without peace, and there is no peace without health.” These words by Dr. Tedros, Director-General of the World Health Organization (WHO), echoed in my mind during the annual World Health Summit (WHS) in Berlin in 2024. As he spoke about WHO’s humanitarian efforts in Sudan, Ukraine, Gaza, and Lebanon, I couldn’t help but wonder: why not Myanmar?

This was my first time attending such a high-level global health event, and it felt even more significant because I had the opportunity to join the launch of the [first Youth Declaration on Creating Healthy Societies](#) by the WHO Youth Council. The invitation-only, closed-door event was filled with eloquent speeches, ambitious goals, and some reflections on youth’s role in global health. Yet, I noticed the absence of youth voices from conflict zones.

That morning, I had promised myself that I would bring our story to the table on behalf of my people from Myanmar. I spoke about the displaced youth, medical professionals learning to use guns in the jungle to resist the military, and the cessation of formal education for over three years since the coup. [The first call to action in the declaration](#) was about ensuring access, equity, and inclusion in health and education, so it felt right and necessary to share Myanmar’s story. It was very special to meet Dr. Tedros, and I got to personally urge him not to forget Myanmar, though I’m not sure if he will remember, given that he meets hundreds of important people daily.

The WHS taking place in Berlin is special. The city’s history of division and reunification after the fall of the Wall in 1989 symbolizes collective resilience and hope. At the same time, the irony of Berlin’s

Light Festival celebrating freedom was not lost on me, knowing that freedom remains a distant dream for so many around the world.

Two weeks later, I traveled to Nagasaki to participate in the [Emerging Voices for Global Health \(EV4GH\)](#) 2024 venture. Over two intense weeks, we bonded through long days, countless group activities, and deep conversations ranging from the challenges post-colonial nations face in adopting Western democratic values to Japan's post-World War II narrative.

The most impactful experience was visiting the Nagasaki Atomic Bomb Museum. It was heavy, as expected, but it also filled me with immense gratitude to witness this history firsthand. Years earlier, while studying the psychological impacts of the Hiroshima and Nagasaki bombings, I could only imagine the devastation. Seeing it in person, my chest tightened, but I also discovered something profound: the story of Dr. Takashi Nagai.

Finding peace through Dr. Takashi Nagai

Dr. Nagai, a Japanese physician and survivor of the atomic bomb, left a lasting legacy in post-war Nagasaki. After losing his wife in the bombing, he raised his two children and dedicated himself to relief efforts. His writings, including *The Bells of Nagasaki* and *Leaving These Children Behind*, documented the horrors of war and championed the pursuit of peace. His detailed medical report on the bombing's aftermath became one of the first records of its kind.

Dr. Nagai's story moved me deeply. I visited his home, Nyokodo ("Love Your Neighbor as Yourself"), and his memorial museum. Despite battling leukemia, he continued writing, sketching, and advocating for peace. He penned the words "peace forever" in Japanese and shared them with the world, receiving visits from figures like Helen Keller and a special envoy from the Pope. Dr. Nagai was even named Nagasaki's first honorary citizen before passing in 1951.

As I walked through his memorial, I reflected on one of his profound quotes:

"It is a cowardly man who starts struggles and wars. The person of love is the person of 'bravery' who does not bear arms. The person who does not bear arms does not fight. In other words, he or she is the person of 'peace.'" (From "Peace Tower")

That visit was transformative. Dr. Nagai's story restored a sense of hope and optimism in me, an antidote to the contagious pessimism that had taken root since Myanmar's military coup in 2021.

Emerging Voice

This renewed sense of hope accompanied me to [HSR 2024](#), the global health systems research symposium, which was an overwhelming mix of perspectives. Some participants walked their talk, others repeated the same issues, and some seemed oblivious to the world's realities. Yet, through it all, I found my voice emerging, particularly alongside fellow EV4GH participants from Myanmar who continue to persevere under military dictatorship, as well as those from Egypt and Palestine. Their resilience reminded me why our voices matter.

In these global spaces, I've often questioned my role: How can I stay accountable? How can I remain grounded when discussions about vaccine equity feel disconnected from the reality of people buying falsified COVID-19 vaccines in Myanmar? Most importantly, how do we restore peace?

For the first time in four years, I found peace in Nagasaki. Dr. Takashi Nagai's life taught me the power of "loving others as we love ourselves." As he believed, even small acts can ripple outward, creating lasting change, just as little drops of water form a mighty ocean. To me, this is what being an Emerging Voice means: using our voices to amplify peace.

Peace is the best medicine

As I was finalizing this article, Israel and Hamas reached a – very fragile - Gaza ceasefire agreement. Let's hope this glimmer of hope indeed materializes in the days to come, and leads to a lasting peace to ensure a better life and improved health for those affected. Globally, challenges are equally huge. WHO [reports](#) that 305 million people globally are currently in urgent need of humanitarian assistance. Yesterday, WHO launched its [Health Emergency Appeal](#) for 2025 to protect the lives of the most vulnerable in the most challenging circumstances. Peace will remain paramount for effective, life-saving health interventions.

As I continue to find peace, I wish for 2025 to unite us in peace and empower us to celebrate our differences.

Highlights of the week

Global Health calendar 2025

<https://www.globalhealthhub.de/de/news/detail/global-health-events-2025>

Always nice to know what's coming up. The **Most Important International Global Health Events 2025** according to the German Global Health Hub.

Trump & Global Health

FT - Trump's second term threatens US leadership on global health

<https://www.ft.com/content/0362f2dc-75f5-4f33-aba3-1080be05d541>

"Wellbeing of billions could be hit if administration cuts funding and spurns scientific best practice."

Overview of **likely (dire) implications on global health actors, initiatives**, ... eg: ""Death warrant" for WHO-brokered #pandemic preparedness treaty" ?

And some quotes:

"...**John-Arne Røttingen, chief executive of Wellcome Trust**, one of the largest foundations funding health research, said: "US health leaders bring tremendous technical expertise, leadership and

influence and their potential loss from the world stage would have catastrophic implications, leaving the US and global health weaker as a result.”

“**Experts are also concerned that the second Trump administration will spurn scientific best practice, spreading disinformation globally.** They cite Trump’s nomination of Robert F Kennedy Jr, a prominent anti-vaccine campaigner, as health and human services secretary. **Discouraging vaccination campaigns would threaten “millions of lives worldwide”**, said **Peter Maybarduk**, access to medicines director at Public Citizen, a US-based consumer advocacy group. “Disinformation could roll back one of humanity’s chief accomplishments of the past 100 years.”

“... **Bjørn Lomborg, president of the Copenhagen Consensus Centre think-tank, has urged Trump’s health team to focus on “smarter spending” to improve the effectiveness of US aid.** Improved care for newborns and mothers was one area where targeted spending could make a big difference, he said. About 2.3mn children a year die in their first month and 300,000 mothers die in childbirth each year, according to UN figures....”

“... **if the US does cut health funding, it is not obvious who will fill the gap.** Lawrence **Gostin, professor of global health at Georgetown Law,** said European leaders had told him that neither the EU nor individual countries were likely to step up. The prospect of China dominating global bodies could worry Trump, but **Beijing also remained “ambivalent” about agencies such as the WHO,** argued Jeremy Youde, a political scientist at Portland State University. Gostin said “China has a very different idea of global health and multilateralism than the US”. **The Gates Foundation, a major force in global health and the WHO’s second largest funder, has not yet promised to increase its donations....”**

KFF - Potential Health Policy Administrative Actions in the Second Trump Administration

<https://www.kff.org/potential-health-policy-administrative-actions-in-the-second-trump-administration/>

“This is a **quick guide to potential health policy administrative actions under the incoming Trump administration** based on campaign positions and statements by President-elect Trump, President Trump’s record during his first administration, and expected actions that would reverse or modify regulations or guidance issued by the Biden administration...”

HPW – If US pulls out of WHO, will other member states step up?

[Health Policy Watch](#);

“If the United States withdraws from the World Health Organization (WHO) when Donald Trump assumes the presidency next week (20 January), **will other member states – particularly China – step up to safeguard global health?**” Not likely, it seems. And neither is it going to come from EU countries. Some excerpts:

“**US is by far largest donor:** The **WHO’s budget for the two-year 2024-2025 period is \$6.83 billion, made up of assessed and voluntary contributions.** Assessed contributions are the mandatory membership fees calculated by the UN, based largely on countries’ gross domestic product

(GDP). Of all the 196 WHO member states, the US is by far the largest funder. It is due to pay over \$261 million in “assessed contributions” during 2024/5. ...” (and that’s just assessed contributions)

Re China: “... Chinese President Xi Jinping boasted this week that his country has \$1 trillion trade surplus, so China is better positioned than most other members to step up to fill the gaping hole the US withdrawal will leave. **But China has shown little interest in supporting global health multilateralism. Its interactions at the WHO are muted and lack initiative.** In negotiations for a pandemic agreement, for example, the Chinese representatives have situated themselves with those advocating for equity but seldom offer any suggestions. Instead, China prefers bilateral agreements which enable it to wield direct influence over the countries it assists....”

“... **Europe is also unlikely to come to the aid of the WHO.** The region is preoccupied with, and financially stretched by, Russia’s war in Ukraine. With Trump’s threat to end US military assistance to Ukraine, the EU may be forced to increase its financial support.In addition, key European nations that have supported multilateralism in the past now have right-wing parties within government intent on slashing foreign aid, namely Croatia, the Czech Republic, Finland, Hungary, Italy, the Netherlands and Slovakia. In virtually all other European countries, support for rightwing parties has grown considerably – most notably in Germany, Austria, France and Portugal. **The EU has thus neither the means nor the will to cough up more for global health....”**

- Related link: **blog by D Reidpath - [US Withdrawal from WHO](#)**

CGD (blog) - Looking Back, Looking Ahead: Trends in US Multilateral Funding and What Trump’s Second Term Could Mean for Future Spending

J Hurley et al ; <https://www.cgdev.org/blog/looking-back-looking-ahead-trends-us-multilateral-funding-and-what-trumps-second-term-could>

Some more speculation, based on trends from Trump 1.0. With **three predictions.**

CGD - Trump’s Election Gives the UK a Clear Global Health Mission: Champion Family Planning and Reproductive Rights

K Klemperer et al ; <https://www.cgdev.org/blog/trumps-election-gives-uk-clear-global-health-mission-champion-family-planning-and-reproductive>

“... if past is prologue, the new (US) administration will seek to significantly roll back support for sexual and reproductive health and rights (SRHR) globally. **A retreat by the United States— previously the largest funder of family planning and reproductive health (FP/RH; see Figure 1)— would have devastating impacts on women and girls around the world unless another donor steps in to fill the void. The UK could seize the opportunity to become a global leader in championing SRHR.**”

“**SRHR is a high-impact investment, representing good value for money for UK development spend. There is also a strong strategic case for the UK to step in:** it has a uniquely robust record as a long-time supporter of SRHR; the topic spans Minister Dodds’s dual brief of women and equalities and development; and championing SRHR is well aligned with Labour’s “missions” of health and

economic prosperity. **With appropriate investments, the UK could play a pivotal role by leading a global coalition to monitor and strategically support SRHR, with a focus on family planning....”**

A few additional excerpts:

“... The UK alone does not have sufficient resources or influence to replace the US’s involvement; however, it can generate transformative impact in the following ways: **1. Strengthen the global coalition of SRHR champions:** The UK should lead a global coalition of countries who believe in the importance of SRHR or value the wider principles of upholding multilateralism and country autonomy. Private philanthropies will also have an important role to play. Especially in recent years, they have been substantial providers of family planning disbursements: the Bill and Melinda Gates Foundation and Susan T. Buffett Foundation gave a combined USD 850 million in 2022. Melinda French Gates, who last year announced that she would be giving USD 1 billion to women’s causes and gender equity over the next two years (including USD 250 million to improve women’s health globally), could be an especially powerful voice....”

“... 3. Shift to catalytic bilateral support for countries, including advocacy: Since it will be infeasible to fill the whole gap left by the US, UK financial assistance should be strategically targeted. Because family planning is a core health system function, and highly cost-effective, **the UK and allies should support countries to use domestic financing where possible, in line with the New Compact and Lusaka Agenda...**”

Devex – World Bank under Trump: What’s next for US influence and funding?

[Devex](#)

Recommended analysis. “Personnel will be key to determining policy, and much is still unknown, but **experts say to expect a transactional, conditional relationship with the global lender.**”

Devex – Marco Rubio sails through nomination hearing for US secretary of state

<https://www.devex.com/news/marco-rubio-sails-through-nomination-hearing-for-us-secretary-of-state-109041>

“He expressed skepticism about international organizations and outlined his test for evaluating programs or funding: Will it make the U.S. safer, stronger, or more prosperous?”

Re international organisations: “During his first term, Trump withdrew the U.S. from several U.N. organizations, including UNESCO, the World Health Organization, and the U.N. Human Rights Council. Rubio was asked about his approach to international organizations — and the risks of the U.S. leaving and giving adversaries a void to step into. **“I am not against multilateral organizations so long as that, or any foreign arrangement we have, serves the national interest of the United States,”** Rubio said, adding that no foreign entity or multilateral or international organization should have veto power over U.S. national security interests....” **“Each of these [organizations] will require a serious examination as we work through and a justification to Congress about why we're no longer funding it or we're no longer participating,”** he said.

Re Africa: "... In the past, U.S. engagement has heavily focused on counterterrorism, and while that remains important, he said other priorities should be pursued as well. **He said one issue that doesn't get enough attention is malaria, which "is not simply a health crisis, or a humanitarian crisis it has deep economic implications."**

HHR - Preparing for Human Rights Challenges in Global Health

B M Meier et al ; <https://www.hhrjournal.org/2025/01/16/preparing-for-human-rights-challenges-in-global-health/>

"The 2024 US election campaign offered divergent approaches to US leadership in global health, with former President Trump campaigning on a platform that would undermine human rights, reject public health, and abandon international institutions. **The challenges presented by the incoming Trump administration raise an imperative for renewed human rights advocacy in global health.**"

More on Global Health Governance & Financing

HPW - WHO Africa to Decide on New Regional Director Process Following Shock Death of Candidate

<https://healthpolicy-watch.news/who-africa-to-decide-on-new-regional-director-process-following-shock-death-of-candidate/>

"**The World Health Organization's (WHO) Africa regional committee meets on Tuesday (14 January) to decide on the process for nominating a new regional director following the [shock death](#) of Dr Faustine Ndugulile.** The sole focus of Tuesday's [special virtual meeting](#) of the WHO Africa region is to work out how the next regional director, who serves for five years, should be chosen."

"... **The regional meeting needs to decide whether it will re-open nominations for the position, hold new elections based on the three remaining candidates or simply choose the runner-up as the next regional director.** According to the WHO's [Constitution](#), regional committees "shall adopt their own rules of procedure (Article 49)". Meanwhile, Article 52 stipulates: "The head of the regional office shall be the Regional Director appointed by the Board in agreement with the regional committee." "

PS: "However, **the WHO did comment on questions related to the likely process or whether the incumbent, Dr Matshidiso Moeti, will remain in the position until the new candidate is appointed.** Moeti has served two terms (10 years) as regional director and is not eligible for re-election. **The remaining three candidates have all worked for the WHO in various capacities.** Socé Fall is currently Director of the Department of Control of Neglected Tropical Diseases at WHO headquarters in Geneva. Mihigo is the vaccine alliance, Gavi's Senior Director of Programmatic and Strategic Engagement with the African Union and Africa CDC, but has also worked for WHO Africa. Sambo is the WHO Representative to The Democratic Republic of the Congo."

- For the decision on the way forward, see [WHO Afro](#)

Devex - What's in store for WHO in 2025?

J Ravelo; <https://www.devex.com/news/what-s-in-store-for-who-in-2025-108993>

Absolute must-read!! **“2025 promises to be a busy year for the U.N. health agency as it tries to raise more funding, implement an ambitious new program of work, and rally member states to complete the pandemic agreement by May.”**

“... 2025 promises to be equally busy if not more so for the United Nations health agency as it implements an ambitious new program of work while rallying member states to get the pandemic agreement to the finish line by May. **WHO is also working on some initiatives, such as accelerating universal health coverage together with the World Bank and Japan**, according to Catharina Boehme, assistant director-general for external relations and governance at WHO. **She expects there will be a “huge initiative” on that to launch in the first half of 2025.**”

“Like many global development organizations, however, **budget uncertainties plague the agency.** Experts said the biggest challenge confronting WHO — yet again this year — will be resources...”

“...**A key focus of the agency in 2025 is the implementation of its 14th program of work, GPW14**, which experts said is more ambitious than ever. The agency is expanding its work on health systems and global health security to tackle modern challenges — that require working across different sectors — such as climate change, mental health, and addressing the social determinants of health. **WHO is also revising its targets under this new program of work, from its triple billion targets to 5 billion people benefitting from universal health care without financial hardship, 7 billion people better protected from health emergencies and 6 billion people with better health and well-being....”**

“...**[the organization is currently 90% funded](#) — but that assumes U.S. funding will come through.** Experts tell me the funding impact of a potential U.S. withdrawal shouldn't be immediate since the process takes 12 months. **But the president also has a lot of discretion on what he wants to do with WHO funding....”**

“**Fundraising, including efforts focused on philanthropy, will remain a key priority for WHO throughout the year.** For the **investment round**, which ends in May, Davos and an Asian philanthropy summit in Singapore will be key milestones ahead, Boehme said....”

PS: “...**Peter Yeo**, senior vice president at the [United Nations Foundation](#), tells me that **one important issue in 2025 and beyond that should prompt the new U.S. administration to engage with WHO is who will be the next WHO director-general.** Current chief Tedros Adhanom Ghebreyesus will see his term end in 2027, so the race to succeed him has likely already begun. “The question is, how should the U.S. best position itself to influence who the next leader of the World Health Organization is going to be?” Yeo tells me. **“Clearly, the U.S. continuing to strongly engage with the WHO, and meeting its financial obligations to WHO, is essential to ensuring that the U.S. has a strong voice and role in selecting the next head [of the agency].”**”

Tim France (on LinkedIn)- Evolving focus of the WHO Global Programme of Work: Part 1: WHO over the past 20 years

<https://www.linkedin.com/pulse/evolving-focus-who-global-programme-work-tim-france-jhlke/?trackingId=AHumW1p1hv1q3wp44%2BGOUg%3D%3D>

“The WHO Global Programme of Work has undergone significant shifts in focus over the past two decades, moving from addressing gaps in global health to a more proactive approach emphasizing leadership, strategic alignment with the Sustainable Development Goals (SDGs), and a focus on measurable impact in countries. The overall evolution from GPW 11 to GPW 14 reflects a growing recognition of the need for a holistic, results-oriented, and country-centric approach to global health challenges.....”

Stay tuned for part 2: *“ As the GPW continues to evolve, it is helpful to look back at some key global health milestones over the past 20 years that led to the strategic shifts we see in the current GPW and consider how they have shaped the direction of the organization. I'll do that in **Part 2 of this mini-series of articles.**”*

Reuters - Anti-AIDS program in peril after US finds nurses in Mozambique provided abortions

[Reuters](#);

“ The flagship U.S. aid program on HIV/AIDS is in jeopardy, a senior Republican warned on Thursday, after U.S. officials said four nurses in Mozambique performed abortions that are banned under the multibillion-dollar program that has saved millions of lives globally. Service providers that get funding through the President's Emergency Plan for AIDS Relief (PEPFAR) are barred from providing abortion services under rules against U.S. foreign assistance being used for abortion-related activities, but the program has still faced criticism from anti-abortion Republicans.”

“A review of service providers in Mozambique - where abortion is legal - found that four nurses performed a total of 21 abortions since January 2021, said three U.S. officials who briefed members of Congress on the matter on Thursday in a bid to show transparency and demonstrate that measures to ensure compliance with the ban on abortions were working. The officials said it was the first time a PEPFAR-funded provider had been found to have provided an abortion in the program's 20-year history....”

- See also Devex - [Sen. James Risch holding \\$1B in PEPFAR funding](#)

“ In addition to freezing the funding, Sen. Risch has asked for an investigation into whether PEPFAR is supporting abortions. “

“United States Sen. James Risch, chairman of the Senate Foreign Relations Committee, is preventing about \$1 billion in funding for the [President’s Emergency Plan for AIDS Relief](#), the massive U.S. program to combat HIV and AIDS, from being spent. Risch said at a hearing on Wednesday that he had put a hold on the funding in September and would not release it until he was confident that PEPFAR dollars were not going to support abortions abroad.....”

Politico Pro - Global HIV program director to return to the CDC

<https://subscriber.politicopro.com/article/2025/01/global-hiv-program-director-to-return-to-the-cdc-00198555>

“Dr. John Nkengasong led the President’s Emergency Plan for AIDS Relief for President Joe Biden.”

Devex - In 2025, global development’s new era begins

R Kumar; <https://www.devex.com/news/in-2025-global-development-s-new-era-begins-109022>

Re ‘Old Aid’ & ‘New Aid’ (at least according to Raj Kumar). But an interesting read.

Raj Kumar also summarizes this ‘paradigm shift’ in a [\(Devex\) Special edition - 2025 predictions from Devex’s editor-in-chief](#)

“Devex President and Editor-in-Chief Raj Kumar shares his predictions for global development this year.” With 5 in particular: **1. ODA has peaked; 2. Bilateral aid agencies will become humanitarian agencies; 3. MDBs and DFIs will take the lead on development; 4. UN agencies lose out; 5. Philanthropy develops a new strategy** (ps: “...Here’s a staggering figure: \$10 trillion is now held by just 500 people globally....”)

PS: Kumar’s “paradigm shift” doesn’t seem to include fair taxation of the 500 people.

Blog - Farewell global health

Daniel Reidpath; <https://www.papyruswalk.com/2024/12/farewell-global-health/>

Brilliant analysis and one of the reads of the week. **“Global health is fundamentally about shared, universal values—the human rights-based framework.** These values underpin the very concept of the ‘global’ of global health, distinguishing it from the technical, disease-control focus of the old “international health.” Technical solutions, while vital, are merely tools to realise the foundational rights that ensure equity and dignity in health. Without this the normative values-based approach of equity and rights, decisions about who receives care risk being driven by wealth, political alignment, or cultural affinity. It will destroy global health. **The AIDS crisis marked a pivotal shift, marking the beginning of global health.** Through advocacy and international cooperation it reframed health as a universal right. Yet this hard-won progress has been in decline for the past 20 years and faces existential threats. A second Trump administration promises deeper erosion of multilateralism, international aid, and rights-based approaches. **Health will become a geopolitical bargaining chip in a transactional world of nationalist posturing—its moral foundation stripped away.** As authoritarianism rises and equity erodes, **global health is on life support: reaffirm universal rights or surrender to a transactional, fragmented future.”**

CGD (blog) - Are Multilateral Development Banks Working as a System in Fragile and Conflict-Affected Situations?

K Echebarria; <https://www.cgdev.org/blog/are-multilateral-development-banks-working-system-fragile-and-conflict-affected-situations>

Blog related to a new CGD policy paper - [Multilateral Development Banks in Fragile and Conflict-Affected Situations: Overview of Key Policy, Financial, and Operational Issues](#)

“This paper presents an overview of significant policy, financial, and operational challenges encountered by multilateral development banks (MDBs) in fragile and conflict-affected situations (FCS). The data indicates that **MDBs have increased their involvement in financing FCS compared to bilateral and other multilateral donors, with the World Bank playing the most significant role.** This is explained by **financial and operational comparative advantages inherent in the MDB business model**, despite their implicit biases and constraints. The paper reviews the strategies and framework documents adopted by MDBs to address FCS as a distinct development challenge, highlighting the complexity of translating knowledge advancements and lessons learned into operational categories and clear priorities. It also examines how MDBs are placed regarding the recommendations of the "peace-humanitarian-development nexus," which is central to the international consensus for addressing FCS. The evolution of the financial capacities of MDBs and the criteria for resource allocation in response to the needs of FCS are analyzed. The paper concludes by posing a set of questions that MDBs and their shareholders should consider as they develop reforms to meet FCS-specific requirements and strengthen performance and outcomes.”

Global Policy - What can the Fourth International Conference on Financing for Development achieve?

<https://www.globalpolicy.org/en/publication/more-and-better-development-financing>

Very nice briefing (12-pager) “**The Fourth International Conference on Financing for Development (FfD4) will take place in Seville in June 2025.** This is against the backdrop of massive delays in the implementation of the 2030 Agenda, not least due to deficits in development financing. **The Sustainable Development Goal (SDG) financing gap, which was estimated at US\$ 2.5 trillion in 2015, has not been closed or reduced over the last decade. Instead, it has grown to over US\$ 4 trillion annually.** In addition, the decade since the adoption of the final declaration of the Third International Conference on Development – the Addis Ababa Action Agenda (AAAA) – has been characterized by **multiple crises: the COVID-19 pandemic, the growing climate crisis, a global sovereign debt crisis and escalating conflicts.** There is no end in sight to the worsening crises. Expectations are high that the FfD4 conference will produce concrete results against this difficult backdrop.”

“**For this briefing paper, various analyses by experts and position papers by stakeholders in the FfD process were scrutinized.** As a summary, the central challenges of the FfD process are outlined, along with practical action options that can be considered and adopted at the Sevilla conference.”

Coming up: Davos 2025 (20-24 January)

To watch sessions next week: see <https://www.weforum.org/meetings/world-economic-forum-annual-meeting-2025/>

With among others (livestreamed): **Investing in Women's Health (21 Jan)**; **A long term cure for HIV (21 Jan)**; **New Development Actors for the 21st century (21 Jan)**; **Health and Prevention through Prosperity (22 Jan)**; **Cracking the code of Digital Health (22 Jan)**; **Action on AMR (23 Jan)**; **When Climate Redefines Health (23 Jan)**...

PS: we also already flag **'Financing Climate and Health: solutions for a faster response'** (21 Jan- not livestreamed though). With new data from an analysis mapping international climate & health solutions.

WEF - A Call for Collaboration in the Intelligent Age: World Economic Forum Annual Meeting 2025

<https://www.weforum.org/press/2025/01/a-call-for-collaboration-in-the-intelligent-age-world-economic-forum-annual-meeting-2025/>

Official press release (14 Jan).

"...To respond to the dynamic global context, **the 55th Annual Meeting of the World Economic Forum will convene under the theme, Collaboration for the Intelligent Age**. Discussions will focus on **five core, interconnected pillars**, each critical for a sustainable, inclusive and prosperous future. Reimagining Growth will explore new opportunities for economic growth, including through technology-driven innovation. Industries in the Intelligent Age will examine how business can navigate technological shifts and new industry dynamics. Investing in People will address the need for workforce development, reskilling and creating jobs in emerging sectors. Safeguarding the Planet will focus on scaling climate and nature solutions and advancing decarbonization efforts. Rebuilding Trust will work to foster global cooperation and resilience in an increasingly fragmented world....."

- **Tim France** nicely set the scene on LinkedIn: **"Has there ever been a year when the optics of ass-kissing and ingratiation at the Davos summit posed a greater threat to the credibility of global health and sustainable development organizations? Think I'll have to avoid my news feed for the duration....."**

Guardian - Escalating armed conflict is most urgent threat for world in 2025, say global leaders

<https://www.theguardian.com/business/2025/jan/15/escalating-armed-conflict-is-most-urgent-threat-for-world-in-2025-say-global-leaders>

With coverage of the new WEF **Global Risks (2025)** report.

“Global leaders have said that escalating armed conflict is the most urgent threat in 2025 but the climate emergency is expected to cause the greatest concern over the next decade, according to the World Economic Forum.”

“... When global leaders were asked to look further ahead and identify the greatest risks facing the world over the next decade, **four of their top 10 responses related to the climate crisis....** Extreme weather events was the option chosen most often, followed by biodiversity loss, “critical changes to Earth systems”, and natural resource shortages.....”

PS: “... Two concerns related to technological innovation came next on the list of threats: “misinformation and disinformation”, followed by “adverse outcomes of AI technologies”.....”

Via [HPW](#): “...**Misinformation and disinformation** remain the top short-term risks for the second consecutive year, posing risks to “societal cohesion and governance by eroding trust and exacerbating divisions within and between nations”.”

- Check out the **Global Risks 2025 Report**: <https://www.weforum.org/publications/global-risks-report-2025/>

“The world faces "declining optimism" especially in light of deepening geopolitical and geoeconomic tensions according to the @WEF Global Risks Report 2025.” *(yeah, tell me about it)*

Related comment **Katri Bertram** (via LinkedIn):

“As in 2024, the annual [World Economic Forum](#) risk report does *NOT* include pandemics, epidemics, or any other health threats in its top 10 risks (short-term nor long-term). And as last year, this should be a real wake-up moment for the global health community that our data- and evidence-based messaging, warnings, and flags of outbreaks is not getting through. Something in our narrative, advocacy and communication has to change. The reality is: despite a global COVID-19 pandemic, health has fully dropped off the agenda.”

Davos 2025: The Intelligent Age is here — but what does it mean?

<https://www.hanwha.com/newsroom/news/feature-stories/davos-2025-the-intelligent-age-is-here-but-what-does-it-mean.do>

“Coined by the World Economic Forum (WEF) in 2024, the Intelligent Age marks a transformative chapter in history, driven by rapid advancements in artificial intelligence (AI), quantum computing, and blockchain, and characteristics like entirely autonomous systems, personalized AI experiences, and smart sustainability solutions. This new era follows the emergence of Internet of Things (IoT), automation, and digital transformation during the Fourth Industrial Revolution (4IR), but **the Intelligent Age represents far more than just another industrial shift. Once deemed things of the distant future, many of the large-scale technological innovations that drive it are already revolutionizing most of the industries that shape our lives. But as with any new era, rapid innovation presents a set of unique challenges that makes global cooperation more important than ever. “**

Global Justice Now (report) - Democracy at risk in Davos: new report exposes big tech lobbying and political interference

<https://www.globaljustice.org.uk/resource/democracy-at-risk-in-davos-new-report-exposes-big-tech-lobbying-and-political-interference/>

Re a new report: “ **World Economic Forum: Reining in the Extreme Power and Influence of the Tech Billionaires.** Featuring new research from [LobbyControl](#), and jointly published between [LobbyControl](#), [Balanced Economy Project](#), and Global Justice Now, this report is released to coincide with the annual gathering of the super-rich and political decision-makers in Davos. It highlights the excessive influence of corporations and their owners on the democratic process and calls for action.”

Among the findings: “... **Just five partners of the @wef control 11% of global GDP amounting to €11.91 TRILLION** - more than 168 countries’ national incomes combined....”

- And a link: **WEF** - [Buzzwords and phrases you might hear at Davos 2025](#)

Pandemic Agreement negotiations (& other PPPR news)

To resume after WHO’s EB meeting, I believe. In the meantime, some more analyses:

Journal of Critical Public Health - Coloniality and imperialism cannot be ignored in analysing the negotiations around the proposed pandemic agreement

D Legge & T Cossich; <https://journalhosting.ucalgary.ca/index.php/icph/article/view/80278>

“**In his editorial** on the negotiations for a pandemic agreement, **Petersen (2024)** notes that while some provisions have been endorsed by the International Negotiating Body (INB), others remain contested. He questions, with good reason, whether the negotiations will yield more equitable and effective arrangements for pandemic prevention and response. **In this response we argue that the continuing expression of colonial arrogance in global health governance provides important contextual framing regarding vaccine hoarding and of the conflicts over the proposed pandemic agreement and that exploration of this would have added to the usefulness of the editorial.**”

GHF - Perspectives on Feminist Health Diplomacy

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

“**In this edition, we bring you an analysis of feminist health diplomacy. I wanted to explore what feminist health diplomacy is, and what it should be.** For this story we spoke to several former and current health diplomats. The topic also assumes greater significance in light of the forthcoming challenges in the politics and practice around sexual and reproductive health in many countries in the world, including the United States. We understand **feminist approaches** in general, as efforts towards social, political, economic equality of all genders. **For the purposes of this story, the discussion centers around the role of women and their leadership in health diplomacy.**”

One quote perhaps “..... Typically, many health issues have been negotiated by women. But, according to some, the COVID-19 pandemic changed this. A woman diplomat from a developed country told us that negotiating global health matters has assumed a security dimension. “A lot more men have been dominating global health negotiations since the pandemic. Because this concerns global health security. I think the balance has shifted the other way, it has shifted the tone, because we are negotiating hard law, a treaty...,” the diplomat said pointing to the coveted nature of these historic negotiations.”

But more in general, a very interesting read and so warmly recommended!

TGH - Preparing for Disease X

M P Fallah, J Kaseya et al ; <https://www.thinkglobalhealth.org/article/preparing-disease-x>

“A recent outbreak in Democratic Republic of Congo underscores the need to prepare for future pandemics.”

“ Three interventions are therefore needed to enhance preparedness for such an event. (1) Strengthen primary health-care systems, the health-care workforce, and surveillance for effective infection prevention and control (2) Strengthen infectious disease tracking systems (3) Use military personnel to manage pandemic outbreaks effectively...”

Health Emergencies

WHO launches US\$ 1.5 billion Health Emergency Appeal to tackle unprecedented global health crises

<https://www.who.int/news/item/16-01-2025-who-launches-us-1.5-billion-health-emergency-appeal-to-tackle-unprecedented-global-health-crises>

“Conflict, climate change, epidemics, and displacement are converging to create an unparalleled global health crisis, with 305 million people in urgent need of humanitarian assistance in 2025. In response, the World Health Organization (WHO) is calling for US\$ 1.5 billion for its [2025 Health Emergency Appeal \(HEA\)](#), to support life-saving health interventions worldwide. The appeal, launched today by WHO Director-General, Dr Tedros Adhanom Ghebreyesus, outlines the critical priorities and resources needed to address 42 ongoing health emergencies, including 17 Grade 3 crises – the most severe emergencies requiring the highest level of response....”

“The Appeal highlights four key challenges facing the world currently: climate change, conflict, displacement and disease outbreaks....”

PS: “... In 2024, [funding for the health sector in humanitarian responses met only 40 percent of identified needs](#), forcing difficult decisions about who could be reached.”

Devex - Health emergencies are on the rise, says Africa CDC

<https://www.devex.com/news/health-emergencies-are-on-the-rise-says-africa-cdc-109070>

“Last year, the **leading killer was cholera and measles.**”

“**Health emergencies are on the rise in Africa, according to the [Africa Centres for Disease Control and Prevention](#).** Last year, there were 213 public health outbreaks that the pan-African public health agency was monitoring, which is up from 166 in 2023....”

PS: “**Mpox, which has gotten [much of Africa CDC’s attention](#) over the past year, was fourth** in terms of suspected cases and **third in reported deaths.**”

Bird flu

Guardian - Age of the panzootic: scientists warn of more devastating diseases jumping between species

<https://www.theguardian.com/environment/2025/jan/15/age-of-the-panzootic-scientists-warn-of-more-devastating-diseases-jumping-between-species-aoe>

“**Experts believe H5N1 bird flu belongs in a growing category of infectious diseases that can cause pandemics across many species.** But there are ways to reduce the risks....”

“**This ability to infect, spread between, and kill such a wide range of creatures** has prompted some scientists to call H5N1 a “**panzootic**”: **an epidemic that leaps species barriers and can devastate diverse animal populations, posing a threat to humans too.** As shrinking habitats, biodiversity loss and intensified farming create perfect incubators for infectious diseases to jump from one species to another, some scientists say panzootics could become one of the era’s defining threats to human health and security. **Panzootic means “all” and “animals”**”

Telegraph - Mild H5N1 cases have been perplexing scientists – now they might have an answer

<https://www.telegraph.co.uk/global-health/science-and-disease/why-mild-h5n1-bird-flu-cases-have-been-perplexing-scientist/>

“The variant circulating in America appears to be less lethal and **could be triggering different responses from the immune system.**”

“... **A new study published in the journal *Emerging Microbes & Infectious Diseases* has found that older and newer strains of H5N1 could be triggering different responses from the immune system.....**”

Mpox

HPW - Sierra Leone Reports First Mpox Cases as Democratic Republic of Congo Accelerates Vaccine Drive

<https://healthpolicy-watch.news/sierra-leone-reports-first-mpox-cases-as-democratic-republic-of-congo-accelerates-vaccine-drive/>

Update state of affairs via **Africa CDC press briefing on Thursday**. “A new mpox outbreak in Sierra Leone and a rising case toll across Africa are fueling urgent calls for stronger containment efforts, even as the Democratic Republic of Congo finally speeds up its mpox vaccine drive and Rwanda’s swift response to Marburg suggests a model for epidemic control.”

“The outbreak in Sierra Leone adds to the growing burden of mpox across the continent. Dr Jean Kaseya, Director-General of Africa CDC, described the situation as a major public health emergency and urged governments to intensify containment efforts. **“We are seeing a sharp increase in cases compared to 2023, and this remains a significant threat to public health in Africa,”** Kaseya said in a press briefing on Thursday....”

PS: **DRC has improved vaccine deployment and is shifting to community-based vaccine strategy** – Kaseya.

WHO - Multi-country outbreak of mpox, External situation report #45

<https://www.who.int/publications/m/item/multi-country-outbreak-of-mpox--external-situation-report--45--11-january-2025>

(11 January) **“The outbreak of clade Ib monkeypox virus (MPXV) continues predominantly in the Democratic Republic of the Congo, Burundi and Uganda, with new travel-related cases identified in previously unaffected countries....”**

- PS: [Mpox: WHO Health Emergency Appeal 2025](#) (16 Jan) Funding requirement: US\$ 81.2 MILLION.

Africa CDC - Enrollment Starts in Africa CDC-LED Mpox Therapeutic Study (MOSA)

<https://africacdc.org/news-item/enrollment-starts-in-africa-cdc-led-mpox-therapeutic-study-mosa/>

“Africa CDC’s support for the MOSA, a pan-African randomized platform adaptive trial for the MpOx Study, adding to the initial EU funding, has enabled the enrollment of the first patients at Mbandaka Hospital in Equateur Province, Democratic Republic of Congo (DRC). These patients have been randomized in this pivotal clinical trial, marking a critical step in addressing the Mpox health threat. As Clade Ib cases emerge outside Africa and Clade I and II cases continue to be reported across the continent, Africa CDC, INRB, and PANTHER are leading efforts to test promising therapeutic options to combat this persistent health threat....”

Marburg

Guardian - Suspected outbreak of deadly Marburg virus disease kills eight in Tanzania

<https://www.theguardian.com/global-development/2025/jan/15/suspected-outbreak-of-deadly-marburg-virus-disease-kills-eight-in-tanzania>

“A suspected outbreak of [Marburg virus disease \(MVD\)](#) in Tanzania has killed eight people and poses a high risk to the country and its neighbours, global health leaders have said.”

“The [World Health Organization \(WHO\)](#) said nine suspected cases of the Ebola-like virus had been reported as of 11 January, in two districts of the Kagera region in the north of the country, including the eight deaths. **While the global risk from the outbreak is considered low, officials said the risk in Tanzania and the region was considered high. **Kagera borders Rwanda, Burundi and Uganda, with significant cross-border movement of people**, and the WHO said there was “the potential for spread into neighbouring countries”.**

- [WHO - Outbreak of suspected Marburg Virus Disease - United Republic of Tanzania](#)

“On 13 January 2025, WHO informed its Member States and IHR State Parties of an outbreak of suspected Marburg Virus Disease (MVD) in the Kagera region of the United Republic of Tanzania using our secure web-based platform—the Event Information Site (EIS)...”

PS: **The outbreak in Rwanda, which shares a border with Tanzania's Kagera region, infected 66 people and killed 15 before it was declared over on December 20.**

- See also Devex - [Suspected outbreak of Marburg reported in transit hub in Tanzania](#)

“There’s a suspected outbreak of the deadly Marburg disease in a high transit area of Tanzania, raising the risk of regional spread.”

“...If confirmed, this would be Tanzania’s second Marburg outbreak. The East African country experienced its first Marburg outbreak in the Bukoba district in the Kagera region in March 2023, which lasted nearly two months with nine cases and six deaths.... .. **Concern about regional spillover is heightened in this case because Kagera is a transit hub with significant cross-border movement of people between Tanzania, Rwanda, Uganda, Burundi, and the Democratic Republic of Congo.** Some of the suspected cases are in districts near international borders...”

PS: Tanzania Health Minister Jenista Mhagama [pushed back](#) - claiming all laboratory results were [negative for Marburg virus](#).

- In other Marburg related news, via [Politico](#):

“Rwandan authorities and an international epidemic preparedness organization (i.e. CEPI) are launching a study into the human body’s response to the Marburg virus.”

“Rwandans who recovered from the virus and their close contacts will be invited to participate in the two-year study into the body’s response to the virus. Rwanda Biomedical Centre will lead the study and the Coalition for Epidemic Preparedness Innovations, an international partnership, will fund it. Researchers will analyze participants’ blood samples to identify their immune response to the

virus, which will help them develop Marburg vaccines and treatments. CEPI hopes the study findings could also improve clinical care for the deadly disease the virus causes....”

Long Covid

Devex - Fatigue and fog: Navigating Nigeria’s long COVID crisis

Paul Adepoju; <https://www.devex.com/news/fatigue-and-fog-navigating-nigeria-s-long-covid-crisis-109035>

“The COVID-19 pandemic may have subsided, but the battle is far from over for millions. In the shadows of recovery lies a **new epidemic: long COVID, a silent storm reshaping lives, economies, and health care systems worldwide.**”

Excerpt: “... Beyond the medical challenges, cultural perceptions pose significant hurdles. In many Nigerian communities, the symptoms of long COVID are dismissed as laziness or weakness. This stigma discourages patients from seeking care and isolates them from their support networks. Mez believes that public health campaigns could be pivotal in shifting these narratives. “We’ve seen this before with conditions like epilepsy and mental health disorders,” he said. “Awareness can dismantle stigma.” **Meanwhile, the health care system itself struggles under the weight of its existing burdens. Nigeria’s public health sector is already overstretched, dealing with endemic diseases such as malaria, tuberculosis, and HIV. Adding long-COVID care to this list, Akase said, feels almost insurmountable....”**

- Related **Science Editorial** (by WHO’s M Van Kerkhove): [Don’t pretend COVID-19 didn’t happen](#)

Polio

Lancet Comment - The long last mile in global poliovirus eradication: what should Pakistan do?

Zulfiqar A Bhutta; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)00007-8/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)00007-8/fulltext)

Bhutta concludes: “... Given these contextual realities, persevering with the same decades-old strategy for poliovirus eradication in Pakistan and expecting different results is risky for global poliomyelitis eradication. It is time for Pakistan to review its entire poliovirus and routine immunisation strategy and significantly improve programme performance for both. Peacebuilding efforts and restoration of political stability in all restive regions of Khyber Pakhtunkhwa and Baluchistan and vaccinations of mobile populations (ie, people who move across provinces for a variety of reasons including seasonal workers) will be crucial to global poliomyelitis eradication and must be actively pursued....”

Lancet Diabetes & Endocrinology Commission on the Definition and Diagnosis of clinical obesity

Lancet Diabetes & Endocrinology - Definition and diagnostic criteria of clinical obesity

<https://www.thelancet.com/commissions/clinical-obesity>

“Despite evidence that some people with excess adiposity have ill health due to obesity, obesity is generally considered a harbinger of other diseases, not a disease in itself. The idea of obesity as a disease remains therefore highly controversial. In addition, current BMI-based measures of obesity can both underestimate and overestimate adiposity and provide inadequate information about health at the individual level. **This Commission sought to define clinical obesity as a condition of illness that, akin to the notion of chronic disease in other medical specialties, directly results from the effect of excess adiposity on the function of organs and tissues.** The specific **aim of the Commission** was to establish objective criteria for disease diagnosis, aiding clinical decision making and prioritisation of therapeutic interventions and public health strategies.”

This was major news on Wednesday, so below **some key coverage and analysis** (*though of course, all of you will read the entire Commission itself 😊*)

FT - Obesity experts call for overhaul of diagnoses and warn on use of BMI as tool

<https://www.ft.com/content/945b0da7-40b4-4f7d-889d-44dc73f3dc1a>

“Surge in chronic disease triggers a search for ways to improve treatment access for millions of people at risk.”

“A growing crisis in obesity levels demands that diagnosis be radically overhauled to improve help for patients who have already been made ill by the condition, according to an international commission backed by leading medical bodies. Reclassifying obesity into “pre-clinical” and “clinical” types should improve access to treatment for millions of people most at risk of serious conditions such as irreversible organ damage, the review says. **The more than doubling of global obesity rates in 30 years has triggered an urgent search for better diagnostic tools than the numerical body mass index, which offers little insight into the health damage caused by the condition.** The sharp rise in obesity has piled costs on health systems and driven huge demand for weight-loss drugs such as Ozempic, Wegovy and Mounjaro. **The booming market is projected to reach at least \$80bn in sales by 2030.** But many obesity patients do not receive treatment, such as surgery to make the stomach smaller, because they do not fit existing BMI-based criteria, said Professor Francesco Rubino, who led the work by the Lancet diabetes and endocrinology commission....”

“BMI — a calculation based on height and weight — can both underestimate and overestimate body fat, the commission said in a paper published in *The Lancet* on Tuesday. A very muscular person may be obese by the BMI definition because they are heavy, for example. **The commission, which included 58 medical experts, focuses instead on identifying those suffering observable**

obesity-related health problems rather than simply a risk of them. It defines **clinical obesity** as a “chronic, systemic illness characterised by alterations in the function of tissues, organs, the entire individual or a combination thereof”, because of excess body fat. The commission recommends initially assessing obesity status using additional indicative measures such as waist-to-height ratios, or technological tools that measure fat concentration such as X-rays and responses to electric current. Clinical obesity would then be diagnosed based on a list of criteria including measures of breathing, heart and liver functions. **The work has been endorsed by 76 organisations, including scientific societies and patient advocacy groups, that span the Americas, Europe, Asia, the Middle East and Africa....”**

Guardian coverage: Call to overhaul obesity diagnoses amid fears of over-reliance on BMI

<https://www.theguardian.com/society/2025/jan/14/call-to-overhaul-obesity-diagnoses-amid-fears-of-over-reliance-on-bmi>

“Call to overhaul obesity diagnoses amid **fears of over-reliance on BMI.**”

“Lancet commission’s report calls for global shake-up and **suggests looking at measures such as waist-to-height ratios and ill-health symptoms....”**

Science Insider - Is obesity a disease? Not always, new expert report says

<https://www.science.org/content/article/obesity-disease-not-always-new-expert-report-says>

“A more scientific definition of obesity should guide decisions about weight loss treatment, researchers argue.”

See also Stat - [Beyond BMI: New report reframes obesity as a spectrum of illness, not just a risk factor](#) “Lancet commission downplays BMI and calls for ‘preclinical’ and ‘clinical’ categories of obesity.”

- And a related analysis in [the Guardian - Reframing obesity may end the diagnosis debate, but the health challenges remain](#)

Among others hinting at the **Commercial Determinants of Health** (without using the term):
“**Assessment of the condition could face overhaul, but governments, companies and communities still have work to do.**”

“... **First, they are proposing a more accurate way to diagnose obesity.** Instead of relying only on BMI, they say other measures must also be used, such as waist circumference, waist-to-hip ratio or waist-to-height ratio – an important change, because people can store excess body fat in different areas of the body. Some may store it around their waist or their organs, such as the liver or the heart. This is associated with a higher health risk compared with when excess fat is stored just beneath the skin in the arms, legs or in other body areas. Health professionals should also now look for signs and symptoms of ill health in the patient caused by excess body fat, the experts said.
Second, a shake-up of how the condition is classified is being proposed, with two new categories:

clinical obesity and pre-clinical obesity. The changes aim to help reduce stigma and improve patient management. Those diagnosed with clinical obesity could be offered weight-loss drugs, while those with pre-clinical obesity could be offered advice to become healthier and avoid getting heavier.”

“However, **while the proposals may help end the debate over diagnosis, the larger challenge – curbing obesity – remains.** Measures such as eating more healthily and slowly, becoming more active, getting better sleep, managing stress and limiting screen time, can help people reduce their risk of developing obesity. But **it would be unwise to think people can rely on education and willpower alone. Governments, companies and communities must also do much more to help people overcome or avoid obesity.** That includes promoting active travel so people can rely less on cars, cracking down on junk food advertising, and tackling destructive food environments saturated with unhealthy food choices.”

More on NCDs

Lancet Comment - Global and European landscape of major hypertension guidelines

Cian P McCarthy et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)02795-8/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)02795-8/fulltext)

“Elevated blood pressure is the most important risk factor for cardiovascular disease. Numerous clinical practice guidelines for blood pressure coexist, emanating from European, North American, Asian, and global medical societies. These blood pressure guidelines are scrutinised for their differences, with the focus typically on how they deviate. Little attention is given to why they differ. **The 2024 European Society of Cardiology (ESC) guidelines create an opportunity to take a fresh look at the current landscape of major hypertension guidelines, emphasising the potential reasons these guidelines differ and whether these reasons matter to clinicians and patients.** To this end, we consider hypertension definitions and blood pressure treatment thresholds and targets in the 2024 ESC guidelines,¹ the 2023 European Society of Hypertension (ESH) guidelines, and the 2017 American guidelines. ...”

Authors conclude: “Although harmonised blood pressure guidelines is a laudable goal, it is also necessary that production policies are harmonised according to best practice for guideline generation. Such efforts should also consider that guidelines are not mandates and that choice and flexibility in recommendations has the potential to support implementation. Until then, improving blood pressure control is a major global need and is the uniform goal of all blood pressure guidelines.”

Lancet Oncology (Policy Review) - Integrating cancer into crisis: a global vision for action from WHO and partners

R Casolino et al ; [https://www.thelancet.com/journals/lanonc/article/PIIS1470-2045\(24\)00522-9/fulltext](https://www.thelancet.com/journals/lanonc/article/PIIS1470-2045(24)00522-9/fulltext)

« **More than a billion people live in fragile, conflict-affected, and vulnerable settings requiring humanitarian support, where cancer is a substantial health issue.** Despite its substantial effect on

populations, cancer care remains underprioritised in emergency preparedness and response frameworks and humanitarian operational planning. This Policy Review summarises the perspectives and actionable recommendations from the First Global High-Level Technical Meeting on Non-communicable Diseases in Humanitarian Settings, with a focus on cancer. The paper highlights the challenges of providing cancer care in fragile, conflict-affected, and vulnerable settings and proposes a comprehensive roadmap to address both immediate and long-term needs of patients with cancer living in these settings. **Key solutions** include: integrating the cancer care continuum into national preparedness and response plans to enhance health-care system resilience; integrating cancer into humanitarian responses efforts; addressing the specific needs of paediatric patients with cancer; improving cancer intelligence and surveillance systems; and developing strategies to navigate the logistical and financial challenges of providing cancer care during crises. **Additionally, the paper outlines practical actions and next steps for international cooperation needed to drive a shift in global health priorities and elevate cancer in the global health security agenda...**"

Health Policy - Scaling up integrated care for chronic diseases in Belgium: A process evaluation

Josefien van Olmen, Monika Martens et al;

<https://www.sciencedirect.com/science/article/pii/S0168851024002537>

"Few integrated care studies elaborate how interventions are brought to wider scale. **The SCUBY project** developed interventions for **scale-up of an Integrated Care Package (ICP) for two common diseases** - type 2 diabetes and hypertension-, comprising evidence-based roadmaps and policy dialogues. **This paper's aim is to report on the process evaluation of the ICP scale-up in Belgium...."**

Check out the findings.

"UHC"

Bloomberg - Patients Detained, Denied Care at Hospitals Funded by World Bank

[Bloomberg](#);

(gated) "Billions of taxpayer dollars invested in for-profit facilities from Africa to Asia were supposed to improve access to healthcare. But stories of abuses have piled up."

Quote: "**The " @IFC 's failure to take action against health facilities that benefit from IFC funds and yet detain patients who are unable to pay the hefty bills is failing Ugandans,**" said Angella Kasule Nabwowe, executive director of the Initiative for Social and Economic Rights, a human rights organization in Kampala. "**Why should IFC money go to private entities that are charging hefty fees, arbitrarily detaining patients and causing them trauma?"**"

- Related Oxfam reaction – [Oxfam reaction to Bloomberg investigation into patients detained and denied care at hospitals funded by the World Bank](#) (16 Jan)

“In response to the publication today of Bloomberg’s investigation into human rights abuses alleged to have been committed in private hospitals funded by the World Bank Group’s International Finance Corporation (IFC) and development finance institutions (DFIs) run by rich country governments....”

Planetary Health

Nature (News) - Earth breaches 1.5 °C climate limit for the first time: what does it mean?

<https://www.nature.com/articles/d41586-025-00010-9>

“The threshold has been exceeded for only one year so far, but **humanity is nearing the end of what many thought was a ‘safe zone’ as climate change worsens.**”

Science Insider - Over the past 2 years, Earth got hotter faster than ever before

<https://www.science.org/content/article/over-past-2-years-earth-got-hotter-faster-ever>

“El Niño and declining reflectivity brought a warming surge.”

“**the spike over the past 2 years was the sharpest in modern history....** It caught many climate scientists by surprise, surpassing what would be expected just from increasing greenhouse gases. A **host of explanations has emerged**, some familiar—an El Niño in the Pacific Ocean—and some worrying and enigmatic, including what appears to be a decadeslong decline in cloud cover. **The fear is warming could be accelerating faster than expected, owing to a poorly understood feedback in the climate system.....**”

Guardian - Economic growth could fall 50% over 20 years from climate shocks, say actuaries

<https://www.theguardian.com/environment/2025/jan/16/economic-growth-could-fall-50-over-20-years-from-climate-shocks-say-actuaries>

“**Global economic growth could plummet by 50% between 2070 and 2090 from the catastrophic shocks of climate change unless immediate action by political leaders is taken to decarbonise and restore nature, according to a new report.**”

“The stark **warning from risk management experts the [Institute and Faculty of Actuaries](#) (IFoA) hugely increases the estimate of risk to global economic wellbeing from climate change impacts** such as fires, flooding, droughts, temperature rises and nature breakdown. **In a report with scientists at the University of Exeter**, published on Thursday, the IFoA, which uses maths and statistics to analyse financial risk for businesses and governments, called for accelerated action by political leaders to tackle the climate crisis....”

PS: “... Sandy Trust, the lead author of the report, said there was no realistic plan in place to avoid this scenario. He said **economic predictions, which estimate that damages from global heating would be as low as 2% of global economic production for a 3C rise in global average surface temperature, were inaccurate and were blinding political leaders to the risks of their policies.**”

“... The **report, named Planetary Solvency** – finding our balance with nature, criticises the dominant economic theory used by governments in the UK, US and across the developed world, which focuses on what humans can take from the planet to create growth for themselves and fails to take into account the real risks from nature degradation to societies and economies. **The report called for a paradigm shift by political leaders, civil servants and governments to tackle global heating....**”

TGH - Regaining Momentum on Climate and Health

Arthur Wyns; <https://www.thinkglobalhealth.org/article/regaining-momentum-climate-and-health>

“This year could mark a turning point for efforts to address the global health impacts of climate change.”

“... To regain some of the political momentum lost in 2024, policymakers will need to explore ways to strengthen public support for action on climate change and global health. ...”

“... The global health community has suggested that **the health argument for climate action** could help build more bipartisan support for cutting emissions. This argument points to the ways in which climate change shapes people's personal health and well-being—and that of their children and grandchildren—while highlighting the positive health effects of climate action, such as through lowering air pollution. “

“... Health is increasingly visible in global climate debates and on many countries' climate agendas. This year, the climate change and global health agendas will continue to move closer together in important ways, including in the areas of extreme heat and air pollution and as part of government efforts to develop new climate plans in 2025. In 2025, global initiatives such as the **Global Heat Health Information Network** and the **Early Warnings for All** initiative will scale up their work, and a growing number of cities are developing **heat-health action plans**. The World Health Organization (WHO) will be hosting a second **global conference** on air pollution and health in Colombia in March, exploring additional policy solutions to tackle air pollution. The next round of national climate plans—known as nationally determined contributions (NDCs) to the Paris Agreement—are due in early 2025 and will detail countries' intended climate actions through 2035. The WHO recently published **guidance** detailing how countries can integrate health into their climate plans. “

Wyns concludes: “Global health's growing prominence in climate policy and diplomacy arrives just as the scale, frequency, and cost of climate-related health threats have grown exponentially. The health argument exposes the cost of climate inaction by emphasizing lived experiences and pointing to the lost lives and livelihoods resulting from decades of climate denial and delay. As the world confronts the growing health threats of climate change, the question now is whether the health argument for climate action can galvanize the necessary public and political support to get countries back on track. “

BMJ Opinion - What “dose” of anxiety is needed to awaken transformative action on climate change?

Colin D Butler et al ; <https://www.bmj.com/content/388/bmj.q2584>

“... Against this backdrop of climate injustice at the political level, we believe that anxiety experienced by many younger people about the climate is not only justified but encouraging. Even though awareness of danger is inherently painful, and risks burnout and alienation from the apparently unconcerned majority. ...”

Authors conclude: “... We understand that the capacity of young people (and idealists of any age) to implement their visions for a fairer world, in which greenhouse gas emissions are static, if not falling, is limited. However, some people who are currently young will not only retain their idealism, but eventually acquire influence over policy. A mass movement, led by the young, but which also involved scientists eventually ended US involvement in the Vietnam War. Fridays for Future, the six year old climate movement launched by Greta Thunberg, is also led by young people and has been very successful in mobilising millions around the world, putting climate protection on the global political agenda and changing consumer behaviour in countries such as Germany where it is linked to citizens eating less meat and taking fewer flights. Furthermore, **the movement has astutely shifted its focus to advocating for socially viable climate policies**, a move consistent with Pihkala’s suggestion that **climate activists frame their message as “hope in the midst of tragedy,”** and ensuring its relevance and appeal to a widening audience in a post-pandemic politically turbulent era.”

BMJ GH (blog) - Health is the new Global Plastics Treaty Battleground

R Stringer; <https://blogs.bmj.com/bmjgh/2025/01/12/health-is-the-new-global-plastics-treaty-battleground/>

“In November, international delegates to INC-5, the international negotiating committee for a Global Plastics Treaty (GPT) held in Busan, South Korea, failed to agree on a legally binding United Nations treaty on plastic pollution. The main fault lines lie between countries supporting an ambitious treaty, including a cap on plastic production, and a minority seeking to focus the treaty provisions on waste management and voluntary measures. **At INC-5, health emerged as a key battleground for disputes over the scope and power of the Treaty.** The draft text discussed in Busan included a **dedicated article focused on the health impact of plastic pollution: Article 19.**”

“Several countries propose a strengthening of obligations in Article 19 to prevent and mitigate health risks from plastic pollution, for example by setting targets for reducing exposure. **However, others proposed weak language** that ‘encourages’ states to prevent health risks rather than supporting binding commitments, or oppose the inclusion of a dedicated article on health altogether. ...”

Decolonize Global Health

Guardian - 'It's about solidarity, not charity': the Oxfam chief seeking to decolonise the aid sector

<https://www.theguardian.com/global-development/2025/jan/13/its-about-solidarity-not-charity-the-oxfam-chief-seeking-to-decolonise-the-aid-sector>

"Halima Begum outlines her vision for what she sees as a 'broken model', with more power over spending given directly to the affected communities." Excerpts:

"The outdated, elite-dominated international charity sector needs to hand over the money and power to those in the global south for whom aid is intended, says the head of Oxfam GB, Halima Begum. The current aid system is broken, Begum says, and can only be fixed by decolonising, shifting the centre of control away from rich countries with colonial legacies to the developing countries." " "Begum, who took up the chief executive role just over a year ago, says that **within five years Oxfam will be spending more of its money on the ground where it is needed, and allowing more decision making by local civil society groups and communities...."**

"... While there have been pledges to make aid more effective through localisation – which would empower local non-governmental organisations (NGOs) – Begum believes there has been little effort to enact a real change. She also believes that simply localising aid by asking local NGOs to implement the projects of international donors is not enough – decolonisation should be a more ambitious effort to transfer power away from richer countries with a colonial legacy...."

"... Begum believes that alongside ensuring a greater share of aid money is channelled directly to developing countries, there needs to be a new model on how to spend it that puts the power in the hands of local actors – and not just local charities or the country offices of international organisations, which are often run by the privileged. Begum proposes that, instead, a possible combining of civil society groups and stakeholders with experience, who are rooted in the areas they work in, would make decisions on how aid money is used...."

PS: **"INGOs might want to commit, say, 20 to 30% of unrestricted funding directly to communities, particularly, in my opinion, women's rights organisations who have a really comprehensive knowledge of local development needs. That way money is not passing from the donor country to the INGO offices in, say, Nairobi before it reaches the recipient, but going directly to the local partners."**

"... Oxfam plans to increase the amount of funding going to the global south from its present 60% to 70%. UK-based international teams would have to adapt, possibly by shifting away from direct involvement in international projects towards lobbying on issues such as the climate crisis and human rights. INGOs that do decolonise can push for systemic change on issues such as debt cancellation, so developing countries can spend more on public services instead of servicing debt to foreign governments, banks and corporations. Begum says a significant shift in approach is needed to accept that even where fundraising is done in richer countries, decisions on how money is spent would be made elsewhere...."

Global Hunger

Guardian - Nobel prize winners call for urgent 'moonshot' effort to avert global hunger catastrophe

<https://www.theguardian.com/global-development/2025/jan/14/nobel-world-food-prize-laureates-global-hunger-open-letter-food-production>

"More than 150 Nobel and World Food prize laureates have [signed an open letter](#) calling for "moonshot" efforts to ramp up food production before an impending world hunger catastrophe. The coalition of some of the world's greatest living thinkers called for urgent action to prioritise research and technology to solve the "tragic mismatch of global food supply and demand"....."

- Related: Devex – [150 Nobel and World Food Prize winners call for food security 'moonshot'](#)

"The world is "not even close" to increasing food production at a pace to feed a global population that will add another 1.5 billion by 2050. Promising research to avoid a crisis needs urgent investment, they write."

Conflict/war & health

HPW - WHO Welcomes Israel-Hamas Ceasefire Deal Amidst Jitters that Accord Will Indeed Take Effect Sunday

<https://healthpolicy-watch.news/who-welcomes-israel-hamas-ceasefire-deal-amidst-jitters-that-first-phase-will-really-take-effect-sunday/>

"WHO and other UN and international relief agencies heartily welcomed Wednesday's announcement of a long-awaited Israeli-Hamas ceasefire. Israelis and Palestinians, meanwhile, began an anxious countdown, hoping that the agreement would indeed take effect as planned Sunday – even as Israel and Hamas traded accusations Thursday that the other was trying to torpedo the accord."

"Wednesday's announcement of a ceasefire and hostage release deal between Israel and Hamas is, of course, wonderful and long overdue news," said Tedros on Thursday, at the launch of [WHO's 2025 Health Emergency Appeal, for \\$1.5 billion dollars](#). ..."

Guardian - 2024 witnessed 'absolute failure' of west to lead fight for human rights, says watchdog

<https://www.theguardian.com/law/2025/jan/17/2024-witnessed-absolute-failure-of-west-to-lead-fight-for-human-rights-says-watchdog>

“Leading democracies have stood by while allies have committed atrocities or supported perpetrators, Human Rights Watch chief says ahead of annual World Report.”

“Tirana Hassan lambasted western capitals for their double standards over the course of 2024 and what she said was the abdication of their claim to leadership on global human rights. Speaking to the Guardian ahead of the launch of HRW’s annual country-by-country [World Report](#) on Friday, the HRW executive director said the failures of the US and its western European allies were particularly marked over Gaza, where arming of Israel continued unaffected by widespread evidence of war crimes; and in Sudan, where international institutions largely stood by while atrocities were committed and a western ally, the United Arab Emirates (UAE), armed the principal perpetrator, the Rapid Support Forces.....”

- The new HRW Annual report: <https://www.hrw.org/world-report/2025>

NYT - Estimated Gaza Toll May Have Missed 25,000 Deaths, Study Says

<https://www.nytimes.com/2025/01/14/health/gaza-death-toll.html>

As already reported in last week’s IHP news. **“Analysis found that more than 64,000 Palestinians may have been killed by traumatic injury in the first nine months of the war.”**

“Deaths from bombs and other traumatic injuries during the first nine months of the war in Gaza may have been underestimated by more than 40 percent, according to [a new analysis published in The Lancet](#). The peer-reviewed statistical analysis, led by epidemiologists at the London School of Hygiene and Tropical Medicine, used modeling in an effort to provide an objective third-party estimate of casualties. The United Nations has relied on the figure from the Hamas-led Ministry of Health, which it says has been largely accurate, but which Israel criticizes as inflated. But the new analysis suggests the Hamas health ministry tally is a significant undercount...”

“... The estimate in the analysis corresponds to 2.9 percent of Gaza’s prewar population having been killed by traumatic injury, or one in 35 inhabitants. The analysis did not account for other war-related casualties such as deaths from malnutrition, water-borne illness or the breakdown of the health system as the conflict progressed. The study found that 59 percent of the dead were women, children and people over the age of 65. It did not establish what share of the reported dead were combatants. If the estimated level of underreporting of deaths through June 2024 is extrapolated out to October 2024, the total Gazan casualty figure in the first year of the war would exceed 70,000.....”

“... The analysis uses a statistical method called capture-recapture analysis, which has been used to estimate casualties in other conflicts, including civil wars in Colombia and Sudan.”

Tim Schwab - Is philanthropy profiting from genocide?

<https://timschwab.substack.com/p/is-philanthropy-profiting-from-genocide>

“The Gates Foundation’s endowment has invested \$16 billion in companies that divestment campaigns link to Israeli occupation, displacement and ethnic cleansing in Gaza.”

PS: “For the Gates Foundation, it is difficult to overstate the importance, or power, of its investment activities—which are arguably far more impactful than its philanthropic giving. In the foundation’s most recent, public-facing financial records, from 2023, **the foundation reports generating more than \$11 billion in investment income. That’s almost twice the sum of money the foundation gave away in charitable grants the same year, \$6 billion.**” “It’s worth re-reading this: in 2023, the Gates Foundation, which supposedly is in the business of giving money away, generated almost twice as much investment income as it donated in charitable grants.”

Schwab: “**The \$16 billion question: Isn’t it time that we confront the Gates Foundation, and its peers, with a simple question: should humanitarian bodies be positioning their endowments to generate investment income from genocide?**”

Guardian - Civilian casualties of explosive weapons at highest level in more than a decade

<https://www.theguardian.com/world/2025/jan/14/civilian-casualties-of-explosive-weapons-at-highest-level-in-more-than-a-decade>

“**Civilian casualties from bombing or other explosive violence have reached their highest level globally in more than a decade, an annual study has concluded,** reflecting the intense bombing of [Gaza](#) and [Lebanon](#) and the ongoing war in Ukraine.”

“**Action on Armed Violence (AOAV), a monitoring group,** said 61,353 non-combatants had been killed or wounded during 2024, **an increase of 67% on last year,** previously [the largest amount it had counted since it began its survey in 2010.](#) Israeli military action accounted for 55% of the total number of civilians recorded as killed or wounded during the year at 33,910, while Russian attacks in [Ukraine](#) were the seconded highest cause of death or injury at 19% (11,693)....”

World Bank partners with WHO and UNICEF to boost health care access for 8 million people in Sudan

<https://www.emro.who.int/sdn/sudan-news/world-bank-partners-with-who-and-unicef-to-boost-health-care-access-for-8-million-people-in-sudan.html>

“ World Bank, the World Health Organization (WHO) and the United Nations Children’s Fund (UNICEF) signed a US\$ 82 million agreement to improve access to critical health services for more than 8 million vulnerable people across Sudan and strengthen the health system in the country....”

- Link: World Bank - [World Bank Approves \\$182 Million to Enhance Health and Safety Nets in Sudan](#)

Telegraph - Drones now behind significant proportion of aid worker deaths, research shows

<https://www.telegraph.co.uk/global-health/terror-and-security/drone-attacks-blamed-for-rise-in-humanitarian-deaths-in-con/>

“Drone attacks are responsible for an increasing share of deaths among humanitarian workers and are disrupting vital aid work in conflict zones, research has shown.”

“In 2024, 53 healthcare workers and 16 aid workers were killed in drone strikes, an increase of more than 70 per cent on the previous year, according to **a report by Insecurity Insight**. The report, which **documents the use of armed drones in conflict zones around the world**, is one of the first to focus on the impact the weapons are having on humanitarian efforts.....”

“While **fatalities from drone attacks only account for a small share of the overall humanitarian death toll** – preliminary data from 2024 indicates that 292 aid workers and 870 health workers were killed in total – **the report’s authors said the sharp rise in drone-related deaths reflects a major shift in the nature of warfare.....”**

New Humanitarian - In Myanmar, healthcare and disease prevention are neglected casualties of war

<https://www.thenewhumanitarian.org/news-feature/2025/01/15/myanmar-healthcare-and-disease-prevention-are-neglected-casualties-war>

“Myanmar alone could be responsible for reversing progress on malaria in Africa and globally.”

Children’s Health

UN News - New era of crisis for children, as global conflicts intensify and inequality worsens

<https://news.un.org/en/story/2025/01/1158771>

“The world is entering a new era of crisis for children; climate change, inequality and conflict are disrupting their lives and limiting their futures, an authoritative study from the UN Children’s Fund (UNICEF) has warned.”

“At the beginning of each year, UNICEF looks ahead to the risks that children are likely to face and suggests ways to reduce the potential harm. **The latest [report](#), *Prospects for Children 2025: Building Resilient Systems for Children’s Futures*, demands strengthening national systems that are designed to mitigate the impacts of crises on children and ensure they have access to the support they need. Here is a **breakdown of the main trends to look out for in 2025....”****

Access to medicines, vaccines & other health technologies

Lancet Comment - The time for regionalised vaccine manufacturing has arrived

V Dzau, R Hatchett, J Kaseya et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)00050-9/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)00050-9/fulltext)

Comment by the [Regionalized Vaccine Manufacturing Collaborative](#).

“... **The shift to regionalised vaccine manufacturing is already underway and will not stop.** Recent commitments by international and regional bodies, as well as financing and technical support organisations, show regions and stakeholders are not only acknowledging the need for regionalised vaccine manufacturing but are also setting out concrete strategies, policies, and investments that empower regions to sustainably produce the vaccines they need to address regional health priorities ...”

“... **The journey to sustainable regionalised vaccine manufacturing—alongside an evolving global vaccine ecosystem—is likely to be a multi-decade effort.** However, if political leaders do not tackle the most urgent priorities for regionalised vaccine manufacturing soon, political and financial challenges may leave regions and the world even worse off in a new disease outbreak. Investments in strengthening and expanding facilities for regionalised vaccine manufacturing and decisions to undertake regional pooled procurement are both necessary, but much more is required. **A concerted, coordinated, and aligned effort to accelerate progress is needed.**

The [Regionalized Vaccine Manufacturing Collaborative](#) (RVMC) is an initiative set up to catalyse the growing momentum for a regionalised approach to vaccine manufacturing. As its **Executive Committee and Secretariat**, we are committed to supporting this crucial shift towards regionalised vaccine manufacturing through global and regional collaborations, data-driven decision making, and advancing effective platforms to align investors. **The RVMC will launch its full vision for regionalised vaccine manufacturing in April, 2025 and set out a more detailed analysis of what it will take to build and sustain strong and healthy regional vaccine manufacturing ecosystems.....”**

To advance regionalised vaccine manufacturing, we propose three near-term priorities.

- As a reminder (from the RVMC website): “In 2022, the World Economic Forum (WEF), the US National Academies of Medicine (NAM), and the Coalition of Epidemic Preparedness Innovations (CEPI) joined forces to launch RVMC, with the backing of a diverse coalition of partners. After a successful incubation period at the World Economic Forum, the RVMC Secretariat is now hosted by CEPI.....”

~~Optimal Health Policy Early Market Access Vehicle~~

UNITAID (blog) - UNITAID’s Early Market Access Vehicle – an innovative demand-driven model to catalyze introduction of new optimal health products in LMICs

A Osigbesan et al; [UNITAID](#);

For more info, see the full article in Health Policy Open - [The early market access vehicle – An innovative demand-driven model to](#)

“...An EMAV entails a conditional purchase commitment to the manufacturer for a defined quantity of selected products in exchange for a set of access commitments, required to facilitate equitable access in the target markets. EMAVs are designed to link catalytic donations to pathways for sustainable access. Unitaid, in collaboration with its partners, has leveraged the EMAV to introduce two innovative health products in a number of LMICs. ...”

WEF (blog) - Are lower- and middle-income countries ready for the roll-out of anti-obesity medications?

S Rickwood et al; <https://www.weforum.org/stories/2025/01/anti-obesity-medication-lower-middle-income-countries/>

“The growing range of anti-obesity medications could help stem the rise of non-communicable diseases in lower- and middle-income countries. Health systems will need to secure equitable access to such drugs and ensure they are used in tandem with wider public-health programmes. The lessons learned by wealthier countries implementing anti-obesity medications provide insights to potentially inform their future use in other geographies.”

Miscellaneous

Devex - Why skin bleaching is a public health concern

<https://www.devex.com/news/why-skin-bleaching-is-a-public-health-concern-109008>

“The World Health Organization warns that skin bleaching has become a public health concern as products pose grave health dangers to users due to the presence of agents such as mercury and hydroquinone.”

“It is a **major health concern in Africa, Asia, and the Caribbean.** In the Middle East, skin toning is most common in Jordan where about over [60% of women](#) bleach their skin. In Africa, WHO estimated that [40% of women](#) bleach their skin.”

Lancet Editorial - Health in the age of disinformation

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(25\)00094-7/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)00094-7/fulltext)

Excerpt: **“....Understanding and changing the narratives that negatively influence health decisions as [emotional determinants of health](#) is essential.** Rather than just simplifying complex facts, governments and science communicators must strive to ensure that public health messaging is relevant to the individual; to not only provide accurate information but also foster an environment of trust and understanding, and to acknowledge areas of uncertainty and unknowns. **The medical community has a key role too, through commentary, research, and advocacy. [The Lancet is committed to supporting these efforts](#) by proactively addressing and, if possible, preventing misinformation and disinformation stemming from our publications.** Misinformation and disinformation can no longer be viewed simply as an academic nuisance, but rather they are a **societal threat.** Only if we recognise that threat and act proportionately can we respond to the danger and combat the tide of misinformation and disinformation that has the potential to seriously undermine public health.”

UN News –It’s not censorship to stop hateful online content, insists UN rights chief

<https://news.un.org/en/story/2025/01/1158886>

“Social media posts inciting hate and division have “real world consequences” and there is a responsibility to regulate content, the UN High Commissioner for Human Rights, insisted on Friday, following Meta’s decision to end its fact-checking programme in the United States.”

Ps: **“When asked about the impact of Meta’s recent decisions on the social media policy of the United Nations, a UN spokesperson in Geneva emphasized that the global organization continually monitors and evaluates the online space. “It remains crucial for us to be present with fact-based information,” said Michele Zaccheo, Chief of TV, Radio and Webcast. He added that the UN remained committed to providing evidence-based information on social media platforms. The World Health Organization (WHO) also reaffirmed its commitment to providing quality, science-based health information, maintaining a presence across various online platforms.”**

Project Syndicate – Social Media as It Should Be

R Berjon; <https://www.project-syndicate.org/commentary/open-social-media-bluesky-model-of-public-protocols-by-robin-berjon-2025-01>

Robert Berjon explains how the Bluesky model could restore the original promise of the internet.

“...Infrastructure may be privately provided, but it can be properly governed only by its stakeholders – openly and democratically. For this reason, we must all set our minds on building institutions that can govern a new, truly social digital infrastructure. That is why I have joined other technology and governance experts to **launch the Atlas Project, a foundation whose mission is to establish open, independent social-media governance, and to foster a rich ecosystem of new applications on top of the shared “AT Protocol.”** Our goal is to become a countervailing force that can durably support social media operated in the public interest. Our launch is accompanied by the release of an [open letter](#) signed by high-profile Bluesky users such as the actor Mark Ruffalo and renowned figures in technology and academia such as Wikipedia founder Jimmy Wales and [Shoshana Zuboff.](#)”

From the **Letter:** “...Bluesky is an opportunity to shake up the status quo. They have built scaffolding for a new kind of social web. One where we all have more say, choice and control. But **it will take independent funding and governance to turn Bluesky’s underlying tech—the AT Protocol—into something more powerful than a single app. We want to create an entire ecosystem of interconnected apps and different companies that have people’s interests at heart.** Free Our Feeds will build a new, independent foundation to help make that happen....”

Science -Why the ‘Ferrari of viruses’ is surging through the Northern Hemisphere

<https://www.science.org/content/article/why-ferrari-viruses-surging-through-northern-hemisphere>

“Norovirus, which causes explosive diarrhea and vomiting, may be on the rise because of an antibody-dodging variant and post–COVID-19 socializing.” *(I suspect ‘Ferrari’ refers to the hidden Michael Schumacher in you when you need to go to the loo due to this virus 😊)*

Global health governance & Governance of Health

Devex - Shock rise in UK aid budget eases fears of fresh cuts

<https://www.devex.com/news/shock-rise-in-uk-aid-budget-eases-fears-of-fresh-cuts-109029>

“FCDO receives a sudden £540 million top-up, averting the embarrassment of a 17-year low in spending on overseas programs.”

Devex – Scoop: EU wants development staff in regional hubs, not delegations

<https://www.devex.com/news/scoop-eu-wants-development-staff-in-regional-hubs-not-delegations-109063>

(gated) “Development experts could be pulled out of some countries entirely in **the search for budget efficiencies and strategic focus.**”

“The European Union wants to consolidate management of its foreign aid into 18 regional hubs and may pull all development experts from some countries in a move staff unions say could diminish Europe’s global role and make its work less effective. An internal EU staff document, “Revamping the Delegation Network,” seen by Devex, argues that the **current system of development experts working in “cooperation sections” in 100 EU delegations is “not fit for the purpose”** of implementing the bloc’s fledgling “[Global Gateway](#)” investment strategy....”

Devex Pro - Salvation or sellout? EU aid in spotlight over export credits

<https://www.devex.com/news/salvation-or-sellout-eu-aid-in-spotlight-over-export-credits-109003>

(gated) “**The agencies are poised to play a bigger role in EU development** — but are they an innovative way to boost investments in lower-income countries or a neocolonial return to tied aid?”

“Here’s a three-word phrase you’re likely to hear a lot in the coming year: **Export credit agencies.** They’re a **key part of the European Commission’s plan to “take [the] [Global Gateway](#) [strategy] to the next level,”** [according to](#) its president, Ursula von der Leyen — **a way of “aligning” development finance and the private sector to beat China in the global investment race.** However, **to critics, the plan is evidence of the European Union’s neocolonial path in its relations with the global south** — raising worrying questions about aid money wrongly used to underwrite domestic firms, secret practices, and broken promises to pull out of fossil fuel projects.”

“... So **what are ECAs?** These agencies insure or guarantee risky cross-border trade deals, usually benefiting the exporting country. Despite having no formal development mandate, **EU ECAs directed over €31 billion to lower-income countries** from 2015 to 2020, **sometimes qualifying as official development assistance under OECD rules.** **While there’s no EU-wide ECA (yet), von der Leyen wants them at the heart of EU development efforts, alongside public banks and private sector players.** Recent pilot projects include **vaccine manufacturing in Ghana** and electric buses in Costa Rica. **The goal? Mobilize ECAs to secure raw materials** and boost EU competitiveness, à la China.”

“However, **EU law says development aid must serve development goals**, not domestic exporters. Critics argue the “Global Gateway” initiative risks turning aid into corporate subsidies. **And aid can’t act as an export credit without violating WTO rules** — but the EU is exploring “information exchange” and joint projects that walk a fine line....”

HERA - Bridging health system gaps: Key findings from Kenya’s Gavi HSS Evaluation

<https://www.hera.eu/news/bridging-health-system-gaps-key-findings-kenya-gavi-hss-evaluation>

“In recent years, Kenya has made significant strides in reducing childhood morbidity and mortality from vaccine-preventable diseases. A key contributor to this progress has been the **Gavi Health System Strengthening (HSS) support grant**, which aimed to enhance immunization systems across the country. **In 2024, hera, in collaboration with ICRH-Kenya, was commissioned by UNICEF to conduct a summative evaluation of the Gavi HSS programme to assess its relevance, effectiveness, and impact. .”** Check out the findings.

Wellcome Annual Report 2024

https://wellcome.org/reports/wellcome-annual-report?utm_source=&utm_medium=o-wellcome&utm_campaign=bluesky&utm_content=

“Find out about Wellcome’s impact in 2023/24, with commentaries from our Chair and Director, reports on what we did last year and reviews of our finances and investments. “

- Related: **The Times** (gated) [What lessons can one glean from Wellcome's Investment thinking](#)

“Wellcome has mastered the difficult art of both paying out huge amounts of cash for research, while still growing the portfolio for future generations.”

Devex - How Samantha Power performed a delicate balancing act as USAID chief

<https://www.devex.com/news/how-samantha-power-performed-a-delicate-balancing-act-as-usaid-chief-109032>

“In one of her last interviews before leaving office, **Power spoke with Devex about her tenure at USAID, and how she navigated the push-and-pull of changing narratives, priorities, and processes at the multibillion-dollar agency.**”

“..... **the agency is likely to be put under the microscope in a Republican-controlled government led by a president notoriously skeptical of foreign aid.** There is some hope, however, that Donald Trump may find geostrategic value in offering the world an alternative to China’s aid model....”

“While Power says U.S. soft power can advance national interests, whether it’s preventing wars or gaining new economic partners, she **warned about boiling assistance down to a self-serving transaction.** “**Development and humanitarian work that gets entirely instrumentalized really does**

risk becoming so transactional and just bounded, in a way, by shorter-term considerations,” she said. “And if you think about the kind of lasting impacts that USAID and development generally have achieved, it’s always a long game.” ...”

CGD (blog) - German Parties’ Vision for Development Policy: 2025 Federal Elections

S Klingebiel et al; <https://www.cgdev.org/blog/german-parties-vision-development-policy-2025-federal-elections>

“This blog examines answers to this question in the different manifestos, and what they might tell us about the future direction of the German development policy. It also explores where parties stand on the potential merger of the Foreign Office (AA) and the Federal Ministry for Economic Cooperation and Development (BMZ), an [issue](#) that has gained prominence in recent months. ...”

PS: I assume that the way things stand, you’ll mainly want to check the **CDU/CSU (Merz) plans...**

- Related: [Position Paper of the Global Health Hub Germany's Steering Committee for the German federal elections 2025](#)

“For the early federal elections on 23 February 2025, the steering committee of the Global Health Hub Germany has published a **Position paper** that formulates key recommendations for the future German government's global health policy.” (two-pager)

Global health financing

BMJ GH - Evolution and effectiveness of bilateral and multilateral development assistance for health: a mixed-methods review of trends and strategic shifts (1990–2022)

S Xie et al; <https://gh.bmj.com/content/10/1/e017818>

Among the findings: “The DAH has predominantly focused on HIV/AIDS and maternal and child health. Despite the increasing global burden of non-communicable diseases (NCDs), the proportion of DAH allocated to NCDs remained low, increasing only from 1% in 1990 to 2% in 2022. Similarly, the overall funding for health system strengthening decreased from 19% in 1990 to 7% in 2022. Major contributors to DAH included the USA, the UK and the Bill & Melinda Gates Foundation. While associations between DAH and improvements in certain health outcomes were observed, establishing causality is challenging due to multiple influencing factors. The COVID-19 pandemic underscored the importance of robust health systems. However, DAH allocation did not show any substantial shift towards health system strengthening during this period. ...”

Authors call for adjusting DAH allocation to increase support for NCDs and health system strengthening, prioritising evidence-based interventions and enhancing funding transparency and alignment with recipient needs.

Joep Lange Institute - WHO Investment Round: Significant Step Towards Sustainable and Predictable Funding

<https://www.joeplangeinstitute.org/health-diplomacy/who-investment-round-significant-step-towards-sustainable-and-predictable-funding/>

From a while ago, but perhaps good to read again, ahead of the WHO EB meeting.

“...A deeper analysis reveals notable results and offers key insights into the success of future resource mobilisation efforts in 2025 and the advancement of new, sustainable funding models for WHO and other global health initiatives....”

PS: With five takeaways for WHO and global health financing.

UHC & PHC

P4H - Progress in universal health in the Americas

<https://p4h.world/en/news/progress-in-universal-health-in-the-americas/>

“PAHO’s new report explores unmet healthcare needs, essential service coverage, and financial protection in the Americas. It examines access barriers, economic impacts, and policy gaps, highlighting primary health care’s crucial role in advancing equitable, universal health systems.”

BMJ GH - Reducing fragmentation of primary healthcare financing for more equitable, people-centred primary healthcare

Agnes Gatome-Munyua, Susan Sparkes, Cheryl Cashin et al;

<https://gh.bmj.com/content/10/1/e015088?rss=1>

“Despite primary healthcare (PHC) being recognised in global declarations—Alma Ata in 1978 and Astana in 2018—and prioritised in national health strategies, **chronic under-resourcing of PHC persists in most low-income and middle-income countries**. More public spending is needed for PHC, but macrofiscal and political constraints often limit the ability of governments to allocate more public resources to PHC. **Under-resourcing has been compounded by fragmented and rigid funding flows**, which are inefficient and may erode equity, quality of care and public trust in PHC. **This article explores the drivers of fragmentation in PHC financing—low public spending, which results in over-reliance on external sources to fund critical health interventions, and the proliferation of new financing schemes that do not take a system-wide view or adhere to the principles of universality**. It then highlights some of the **possible consequences of this fragmentation** for the efficiency, equity and effectiveness of service delivery.”

“Four countries—Argentina, Burkina Faso, Indonesia and Tanzania—are used to illustrate practical steps that may be taken to minimise the consequences of fragmentation in PHC financing: (1) consolidating multiple coverage schemes, (2) avoiding further fragmentation, (3) harmonising health purchasing functions and (4) streamlining funding flows to the provider level. **The country examples reveal lessons for policy-makers grappling with the consequences of fragmented PHC financing**.

The paper concludes with a research agenda to generate additional evidence on what works to address fragmentation.”

BMJ GH (blog) - To succeed, Kenya should learn from other social health insurance reforms.

J Lakin & G Wachira; <https://blogs.bmj.com/bmjgh/2025/01/14/to-succeed-kenya-should-learn-from-other-social-health-insurance-reforms/>

“Kenya has recently taken a major step towards Universal Health Coverage (UHC) by introducing the [Social Health Insurance Fund](#) (SHIF). SHIF replaces the National Hospital Insurance Fund and is intended to provide more comprehensive access and coverage. While social health insurance can help countries attain UHC, international experience suggests that implementing such reforms is fraught. **Here, we summarize concerns elaborated in [a new paper](#), drawing lessons from past experiences both within the Kenyan context and beyond. Our goal is to highlight areas that need further reflection if social health insurance (SHI) is to succeed in Kenya....”**

SS&M - Sick of Debt: How over-indebtedness is hampering health in rural Cambodia.

<https://www.sciencedirect.com/science/article/pii/S0277953625000073>

by D Iskander et al.

International Health - Large multimodal models: boon or burden for low- and middle-income countries

Rohit Malpani, Keymanthri Moodley; <https://academic.oup.com/inthealth/advance-article/doi/10.1093/inthealth/ihae073/7950353?searchresult=1>

“Large multimodal models, a type of generative artificial intelligence (AI), could contribute to wider government efforts to achieve universal health coverage if ethical challenges are proactively addressed during the design and deployment of these AI technologies. **The World Health Organization has published new guidance to highlight the risks and benefits of large multimodal models and recommendations to effectively govern this technology.** Can the application of artificial intelligence (AI) for health contribute to the broader efforts of governments of low- and middle-income countries (LMICs) to attain universal health coverage? This will depend in part on who participates in the design and development of AI, the rationale and intended beneficiaries and how AI applications are deployed and commercialized. These are **several of the themes that the World Health Organization (WHO), through an expert group on the ethics and governance of AI for health, has tackled in new guidance on the emerging use of large multimodal models (LMMs) in health.** Other themes discussed in the guidance include the explainability of LMMs, liability regimes and the international governance of LMMs....”

SSM Health Systems – The role of UHC in secondary prevention: a case study of Ghana’s national health insurance scheme and early-onset hypertension

<https://www.sciencedirect.com/science/article/pii/S2949856225000054>

By S Owusu Achiaw et al.

Pandemic preparedness & response/ Global Health Security

SSM Health Systems - How can health systems better prepare for the next pandemic? A qualitative study of lessons learned from the COVID-19 response in Nigeria

<https://www.sciencedirect.com/science/article/pii/S2949856225000042>

By C C Okeke et al.

Journal of Law, Medicine & Ethics - Strengthening Global Health Security Under the Biden-Harris Administration

Loyce Pace & Susan C Kim; [Journal of Law, Medicine and Ethics](#);

“**Global health security in the Biden-Harris Administration** has been a dynamic area of engagement, starting with the COVID-19 response, to strengthening and reforming the World Health Organization, to bolstering regional partnerships, and securing financing for pandemic preparedness. Sustained commitment to bilateral, regional, and multilateral cooperation will ensure that the United States stands ready to address any future health challenges.”

BMJ - Keep it in the ground: climate change could prompt the reemergence of zombie pathogens

<https://www.bmj.com/content/388/bmj.r46>

“We must resolve how thawing of permafrost as a result of climate change could resurface pathogens with the potential to infect humans, writes **Kris A Murray**.”

Nature Reviews Biodiversity - Pathogens and planetary change

Colin J Carlson et al ; [Nature Reviews Biodiversity](#) ;

Review article.

First author summarizes (on LinkedIn) : “ew research - published in the inaugural issue of Nature Reviews Biodiversity - shows how climate change, biodiversity loss, and pandemics are part of a single polycrisis. Unfortunately, there are no silver bullets; to make it through the century, we'll need all four: 1. Biosurveillance (always); 2. Targeted One Health interventions (sometimes); 3. Global action on climate change, biodiversity loss, and their causes (as much as we can). 4. Improvements in pandemic preparedness and response (no matter what).”

“If you take one thing away from our paper, I hope it's this: **there's no safe path through the Pandemicene without action on environmental protection, sustainable development, and health system strengthening.**”

Planetary health

Guardian - Wildfires drive record leap in global level of climate-heating CO2

<https://www.theguardian.com/environment/2025/jan/17/wildfires-drive-record-leap-in-global-level-of-climate-heating-co2>

“Data for 2024 shows humanity is moving yet deeper into a dangerous world of supercharged extreme weather.”

“**The CO2 level at the Mauna Loa observatory in Hawaii jumped by 3.6 parts per million (ppm) to 427ppm**, far above the 280ppm level before the large-scale burning of fossil fuels sparked the climate crisis. **The 3.6ppm CO2 rise in 2024 was double the 1.8ppm level consistent with a path to net zero emissions and limiting global heating to 1.5C**, Betts said. It was also above the Met Office prediction for 2024 of 2.8ppm, probably the result of emissions from wildfires reaching Mauna Loa...”

FT - Top financial watchdog warns climate change set to trigger market panics

[FT](#);

“**Basel-based FSB** says damage caused by floods, droughts and fires threatens broader pullback in lending.”

IFC - Interview with Estelle Willie, Director of Health Policy at The Rockefeller Foundation

<https://www.ifc.org/en/interviews/2024/interview-with-estelle-willie>

“**To build resilient health systems, governments must plan through a climate lens, says Estelle Willie, Director of Health Policy at The Rockefeller Foundation.** The Foundation works closely with the public sector and multilateral health organizations to integrate climate change into their agendas. **In an interview with IFC**, Willie explains how they are helping communities address extreme weather events, identifying and testing potential solutions, and bringing in private partners to scale them....”

Reuters - Exclusive: Investor climate group suspends activities after BlackRock exit

<https://www.reuters.com/sustainability/sustainable-finance-reporting/investor-climate-group-suspends-activities-after-blackrock-exit-2025-01-13/>

“ A flagship coalition aimed at aligning the asset management industry with global climate goals said it was suspending its activities on Monday, days after BlackRock, the world's biggest investor, left amid a political backlash in the United States. ... BlackRock, which manages some \$11.5 trillion in assets, [left the Net-Zero Asset Managers\(NZAM\) initiative](#) on Jan. 9 citing confusion over its climate efforts and legal inquiries from public officials.....”

“... The group counted more than 325 signatories managing more than \$57.5 trillion in assets as members, according to its website as of last week, before the departure of BlackRock. In a letter to its members first reported by Reuters, the partner groups which help manage the NZAM said they had decided to conduct a review of its activities. "Recent developments in the U.S. and different regulatory and client expectations in investors' respective jurisdictions have led to NZAM launching a review of the initiative to ensure NZAM remains fit for purpose in the new global context.....”

- See also [the Guardian – Major banks are abandoning their climate alliance en masse. So much for 'woke capital'](#)

“The scope of the Cop26 net zero banking alliance may have been limited, but the exodus of six US banks signifies a seismic political shift.”

- Related: Geneva Solutions - [ILO warns of climate strains on workers as corporations drop ESG goals](#)

Reuters - Projected air travel growth runs counter to climate goals, study says

<https://www.reuters.com/business/aerospace-defense/projected-air-travel-growth-runs-counter-climate-goals-study-says-2025-01-12/>

“The number of air passengers is projected to more than double by 2050, causing surging fuel demand and undermining the aviation industry's steps to reduce its emissions, a study from climate advocacy group Transport and Environment showed on Monday. As aviation industry leaders meet in Dublin this week at an annual finance conference where many plane sales are expected, the Brussels-based group called for the European Union to implement measures to limit the sector's growth.”

“... Monday's report said fuel use by the industry was forecast to rise by 59% by 2050 from 2019 levels as passenger numbers increase.....”

IJHPM - Ambition With Uncertainty: Exploring Policy-Makers' Perspectives on Pathways to Net Zero Healthcare

A Bhopal, Ole Norheim et al ; https://www.ijhpm.com/article_4695.html

“...This study investigates how civil servants leading the development and implementation of national net zero healthcare strategies conceptualise the responsibility of health systems to cut emissions and describe potential trade-offs along the way.....”

Nature Reviews Earth & Environment - Hydroclimate volatility on a warming Earth

D L Swain et al ; <https://www.nature.com/articles/s43017-024-00624-z>

« **Hydroclimate volatility** refers to sudden, large and/or frequent transitions between very dry and very wet conditions. **In this Review, we examine how hydroclimate volatility is anticipated to evolve with anthropogenic warming.** Using a metric of ‘hydroclimate whiplash’ based on the Standardized Precipitation Evapotranspiration Index, global-averaged subseasonal (3-month) and interannual (12-month) whiplash have increased by 31–66% and 8–31%, respectively, since the mid-twentieth century. Further increases are anticipated with ongoing warming, including subseasonal increases of 113% and interannual increases of 52% over land areas with 3 °C of warming; **these changes are largest at high latitudes and from northern Africa eastward into South Asia.** Extensive evidence links these increases primarily to thermodynamics, namely the rising water-vapour-holding capacity and potential evaporative demand of the atmosphere.....”

A recent example: **the torrential rain and flooding in East Africa following years of drought**, which destroyed thousands of hectares of crops and displaced more than 2 million people from their homes.

- Related **tweets by Kelly Hereid:**

“Excellent new review from ... on one of the most useful organizing concepts I've run across for understanding climate impacts on extreme events - **the "expanding atmospheric sponge"** ... When you wring out a bigger wet sponge, you produce more water - the "wet gets wetter" view of climate change driving increases in extreme precip. But if the sponge is dry, it can absorb more - from the soil, from vegetation, driving drought and fire.”

See also **Guardian coverage** - [Climate 'whiplash' events increasing exponentially around world](#)

ODI - Finding innovative ways to adapt to our heating planet

<https://www.ids.ac.uk/news/finding-innovative-ways-to-adapt-to-our-heating-planet/>

“Extreme heat events are increasing in frequency and intensity across the globe and **urgent research is underway to investigate how to manage and limit the negative effects of heat on health, especially in communities most at risk.** ... **Wellcome has funded nine research projects focused on “Heat adaptation: evaluating interventions to help manage health effects of heat” in 11 low- or middle-income countries (LMICs) from 2024 to 2030.** The projects will test interventions to manage heat-related health risks in real world settings. Research teams seek to test and evaluate a new or existing heat adaptation interventions with the potential to change policy and/or practice in LMICs.”

“As part of this global effort, the Institute of Development Studies (IDS) is leading the [HeatNexus Network Support Programme](#), which will accompany the nine HeatNexus research projects, supporting them as they plan and deliver their projects using a participatory and reflective approach....”

Review of International Political Economy - Lost principles of a ‘sustainable developmentalism’

Baptiste Albertone; <https://www.tandfonline.com/doi/full/10.1080/09692290.2024.2447735>

“This article discusses the advent, in the 1970s and early 1980s, of a critical turn in **developmentalist thinking**. This ideational shift was defined by the aspiration of classical development scholars to identify the conditions of possibility for ecologically sustainable and emancipatory forms of development in the periphery. Notably, it resulted in the formulation of Ignacy Sachs’s **concept of *eco-development***—i.e. the **developmentalist precursor to the notion of sustainable development**. **More than a simple effort to add an environmental dimension to development theory, *eco-development* expressed the search for *another development, endogenous rather than mimetic, and oriented towards human needs***. As such, it converged with the attempts of other major figures of classical development theory, such as Raúl Prebisch and Celso Furtado, to radically reconsider, over the same period, the nature of the transformations needed in the periphery. **These contributions, however, have largely been forgotten**, and their potential for critically thinking about development in the Anthropocene remains untapped. **This article recovers the main conceptual innovations of this moment of theoretical transformation and argues that they formed the foundations of a *sustainable developmentalism*: an approach to sustainable development *from and for* the global periphery.”**

Nature News – Air pollution and brain damage: what the science says

<https://www.nature.com/articles/d41586-025-00053-y>

“Epidemiological studies have linked dirty air to dementia and other brain disorders. **Now researchers are trying to determine how pollutants do their damage, and how much harm they cause.**”

Climate Change News - In a major reversal, the World Bank is backing mega dams

<https://www.climatechangenews.com/2025/01/14/in-a-major-reversal-the-world-bank-is-backing-mega-dams/>

“Despite opposition, the bank has approved the first of five big dam projects expected to get its support in the coming months.”

Science (Perspective) – The growing threat of multiyear droughts

<https://www.science.org/doi/10.1126/science.adu7419>

“Understanding and monitoring ecological responses is important as **droughts last longer.**”

Infectious diseases & NTDs

Lancet Infectious Diseases - Quantifying Plasmodium vivax radical cure efficacy: a modelling study integrating clinical trial data and transmission dynamics

[https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(24\)00689-3/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(24)00689-3/fulltext)

- Related Lancet Infectious Diseases Comment: [Efficacy of 8-aminoquinolines for Plasmodium vivax malaria radical cure: only one part of the problem](#)

“It became clear after the last call for malaria elimination in 2007 that *Plasmodium vivax* malaria would be a substantial bottleneck because of many evolutive advantages of this parasite, such as the early development of peripheral gametocytes and the development of relapsing hypnozoites. Despite being less lethal than *Plasmodium falciparum*, *P vivax* represents a considerable burden of debilitating febrile diseases in most tropical areas. **In *The Lancet Infectious Diseases*, Constanze Ciavarella and colleagues report the results of a modelling study in which they calibrate a novel *P vivax* Recurrence Model to estimate the hypnozoitocidal efficacy of different regimens of primaquine and tafenoquine, the two licensed 8-aminoquinolines for *P vivax* malaria radical cure....”**

Journal of Global Health -Health system and environmental factors affecting global progress towards achieving End TB targets between 2015 and 2020

Haileab Fekadu Wolde et al;

<https://jogh.org/2025/jogh-15-04004>

“Health system and environmental factors play a significant role in achieving the World Health Organization (WHO) End Tuberculosis (TB) targets. However, quantitative measures are scarce or non-existent at a global level. **We aimed to measure the progress made towards meeting the global End TB milestones from 2015 to 2020 and identify health system and environmental factors contributing to the success.”**

Conclusions: “... **Weak health systems were identified as major barriers to achieving the End TB milestones in most high-burden countries.** Hence, **strengthening health systems with a special focus on TB financing, service delivery, and access to medicine in these countries** should be prioritised to achieve global TB mortality reduction targets. Countries should follow WHO’s air quality guidelines and rapidly reduce carbon dioxide and other greenhouse gas emissions to mitigate the impact of environmental factors.”

Lancet GH - Estimating the epidemiological and economic impact of providing nutritional care for tuberculosis-affected households across India: a modelling study

Christopher Finn McQuaid, P et al;

[https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(24\)00505-9/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(24)00505-9/fulltext)

- Related **Lancet GH Comment** [Strengthening nutritional care to end tuberculosis in India](#) (by Nandini Sharma)

Science Insider - AI could help develop cheaper, faster, and more effective snake antivenoms

<https://www.science.org/content/article/ai-could-help-develop-cheaper-faster-and-more-effective-snake-antivenoms>

“Antivenoms, the gold standard of care, are produced much as they were 100 years ago: by injecting animals with venoms, then collecting and purifying the antibodies they make. Today in *Nature*, researchers report promising results with another strategy that could prove faster, cheaper, and more effective—synthetic antivenoms created with help from artificial intelligence (AI)....” “..... The new study used small proteins called “binders,” designed by the AI program [RFdiffusion](#). The AI, developed by [Nobel laureate David Baker and colleagues](#) at the University of Washington, creates novel protein structures to fit particular specifications—in this case, to bind to a particular venom toxin. “....”

- See also [the Telegraph – AI designs ‘breakthrough’ snakebite treatment that could turbocharge antivenom development](#)

“... the study, [published in Nature on January 15](#), is exciting because it shows how the AI-driven design of proteins can dramatically accelerate the development of new therapies....”

AMR

Lancet (Review) - Multidrug-resistant Gram-negative bacterial infections

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)02081-6/abstract](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)02081-6/abstract)

“Multidrug-resistant Gram-negative bacterial infections cause significant morbidity and mortality globally. These pathogens easily acquire antimicrobial resistance (AMR), further highlighting their clinical significance. Third-generation cephalosporin-resistant and carbapenem-resistant Enterobacterales (eg, *Escherichia coli* and *Klebsiella* spp), multidrug-resistant *Pseudomonas aeruginosa*, and carbapenem-resistant *Acinetobacter baumannii* are the most problematic and have been identified as priority pathogens. In response, several new diagnostic technologies aimed at rapidly detecting AMR have been developed, including biochemical, molecular, genomic, and proteomic techniques. The last decade has also seen the licensing of multiple antibiotics that have changed the treatment landscape for these challenging infections.”

People’s Dispatch - Wars are fueling the rise of resistant superbugs in the Global South

<https://peoplesdispatch.org/2025/01/06/wars-are-fueling-the-rise-of-resistant-superbugs-in-the-global-south/?ref=peoples-health-dispatch.ghost.io>

“Antimicrobial resistance, a full-fledged global health crisis, is compounded by the devastating impact of war and armed conflicts.” With quotes from **Nicoletta Dentico**.

NCDs

Stat - Will the MAHA movement include alcohol among its targets?

<https://www.statnews.com/2025/01/14/maha-movement-alcohol-making-raw-milk-safer-mornings-rounds/>

“Alcohol isn’t yet on MAHA’s list of food and beverage ills.”

“If Robert F. Kennedy Jr. is confirmed as health secretary, he’ll be handed control over a broad range of issues. He and his allies in the **“Make America Healthy Again”** movement **already have some targets in mind, including products, policies, foods, and drinks that they believe are worsening the nation’s health. But alcohol** — which carries similar health risks to those of ultra-processed foods — **is not yet on the list.....”**

Nature Reviews neurology - Dementia is a neglected noncommunicable disease and leading cause of death

Lewis Arthurton et al; <https://www.nature.com/articles/s41582-024-01051-w>

“**Dementia is largely excluded from discussion of noncommunicable diseases**, which limits its inclusion in health policies and allocation of resources — yet it is already a leading cause of mortality and its effects are set to increase. **Alzheimer’s Disease International calls for changes in policies to address the effects of dementia now and in the future.....”**

Lancet - Radiotherapy toxicities: mechanisms, management, and future directions

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)02319-5/abstract](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)02319-5/abstract)

“...In this Review, we summarise common mechanisms driving acute and long-term side-effects and discuss monitoring strategies for radiotherapy survivors. We explore ways to mitigate toxic effects through novel technologies and proper patient selection and counselling. Additionally, we address policies and management strategies to minimise the severity and impact of toxicity during and after treatment. Finally, we examine the potential advantages of emerging technologies and innovative approaches to improve conformity, accuracy, and minimise off-target effects.”

New Survey Finds Women Are Skipping Their OB/GYN Exams, Increasing Risks for Cervical Cancer

<https://news.bd.com/2025-01-09-New-Survey-Finds-Women-Are-Skipping-Their-OB-GYN-Exams,-Increasing-Risks-for-Cervical-Cancer>

“Women Are Seeking More Convenience and Less Discomfort in Testing Options.” Focus on the US.

“Franklin Lakes ... a leading global medical technology company, today announced the results of a new survey, revealing that 72% of women in the United States have delayed having a gynecology visit, with many highlighting the need for greater convenience, comfort and ease for this critical cervical cancer screening process....”

Social & commercial determinants of health

Nature Food - Regulatory responses to ultra-processed foods are skewed towards behaviour change and not food system transformation

T Northcott et al; <https://www.nature.com/articles/s43016-024-01101-y>

by T Northcott et al.

International Journal of social determinants of health & health services - A Systematic Review of Evaluated Labor Market Initiatives Addressing Precarious Employment: Findings and Public Health Implications

<https://journals.sagepub.com/doi/full/10.1177/27551938241310120>

By V Gunn et al.

Mental health & psycho-social wellbeing

Guardian - Scientists find hundreds more genetic risk factors for depression

<https://www.theguardian.com/society/2025/jan/14/scientists-find-hundreds-more-genetic-risk-factors-for-depression>

“Wider sample used data from across 29 countries and 5m people, with a quarter from non-European ancestries.”

“... **An international team of researchers, led by the University of Edinburgh and King’s College London**, studied anonymised genetic data from more than 5 million people in 29 countries, with one in four from non-European ancestries. ... The [study](#), published in the journal *Cell*, found 700 variations in the genetic code of individuals linked to the development of depression, almost half of which had never been associated with the condition before....”

Sexual & Reproductive health rights

Plos Climate - A scoping review of natural disasters, environmental hazards, and maternal health: Are all potential outcomes accounted for in conceptual frameworks?

C Schulte et al; <https://journals.plos.org/climate/article?id=10.1371/journal.pclm.0000558>

Re the Natural disasters, Environmental hazards, and Maternal Outcomes (**NEMO**) framework.

Telegraph - An invisible threat lurking in the water is slowly destroying these women's lives

<https://www.telegraph.co.uk/global-health/women-and-girls/bangladesh-salination-pollution-reproductive-health/>

“Increased levels of a simple chemical is having disastrous health effects for those living in Bangladesh’s sprawling river deltas.”

“... With the **salt concentration in Bangladesh’s rivers increasing year on year**, the odds for women like Rupa are getting worse. **Average daily salt intake is now more than three times World Health Organization (WHO) recommended levels**, according to some samples. Researchers also found an unusually high prevalence of pre-eclampsia and high blood pressure among pregnant women in the region.....”

Guardian - I was crying, there was no anaesthesia’: the fight for legal and safe abortion in Nigeria

<https://www.theguardian.com/global-development/2025/jan/13/abortion-rights-nigeria-sexual-violence-women>

“In a country where thousands die every year from unsafe procedures, and rape is shockingly high, campaigners must overcome strict laws and religious beliefs, as well as misinformation and stigma.”

BMJ Opinion - Total criminalisation of abortion is a threat to sexual and reproductive health in Brazil

<https://www.bmj.com/content/388/bmj.r52>

“The proposed constitutional amendment would be a massive setback for reproductive rights and health in Brazil, write Michelle Fernandez, Luísa Fernandes, and Melania de Amorim.”

Global Health: Science & Practice - No Matter When or Where: Addressing the Need for Continuous Family Planning Services During Shocks and Stressors

Sarah Rich et al;

<https://www.ghspjournal.org/content/12/6/e2400124>

“Global progress on meeting family planning needs is **threatened by worsening, intersecting crises. We call on global, national, and local partners to strengthen emergency preparedness to facilitate continuous family planning services, no matter when or where they are needed**, to support sexual and reproductive health.”

Neonatal and child health

BBC - Could a mango-flavoured pill end intestinal worms?

<https://www.bbc.com/news/articles/cwy17n3zgero>

“A new tablet being developed to cure intestinal worms has shown promising results in trials and could help eradicate the parasitic infection, which affects about 1.5 billion people globally, researchers say....” “The mango-flavoured pill is a combination of two existing anti-parasitic drugs that, used together, appear more effective in getting rid of worms....”

“These worms are caught through contact with food or water that has been infected by soil contaminated with worm eggs and infections cause severe gastrointestinal symptoms, malnutrition and anaemia. **Researchers say the pill could help overcome any future drug resistance problems and better manage the disease on a large scale.** The **parasites, also known as soil-transmitted helminths (STHs), include whipworm and hookworm** and are endemic in many developing countries where hygiene levels are poor. Many of those affected are children and there is no preventative treatment other than better sanitation....”

“**According a study, called "ALIVE", published in the Lancet**, this new pill could help countries most affected reach goals set by the [World Health Organization](#) to eliminate the diseases. **It would be taken as a fixed-dose of either one single pill or three tablets over consecutive days.**

Researchers from eight European and African institutions say it would be a simple way to cure large numbers of people in mass treatment programmes....”

Access to medicines & health technology

Wired - The King of Ozempic Is Scared as Hell

<https://www.wired.com/story/novo-nordisk-king-of-ozempic-scared-as-hell/>

“Now that **Novo Nordisk** is the world’s weight-loss juggernaut, will it have to betray its first patients—type 1 diabetics?”

Plos GPH - Ending vaccine hegemony: Rethinking foreign aid in global health responses

S Tegala et al; <https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0004177>

With **two concrete suggestions**.

“... To replace transactional donation arrangements, **we propose that the global health community restructure vaccine delivery in two ways. First, HICs should reallocate the bulk of their aid from vaccine donations to foreign direct investment (FDI) in LICs’ vaccine infrastructure.** The **second strategy** regards **international stakeholders increasingly supporting South-South collaborations to strengthen vaccine development and manufacturing in the Global South.** The hub-and-spoke model has previously helped equitize COVID-19 vaccine distribution by empowering African scientific capacity and it may guide this paradigm shift as well. With the current crisis, a central hub, such as an mRNA vaccine facility, could rapidly develop new mpox vaccine technology (as well as future vaccine developments) and distribute it to various regional spokes across Africa...”

- And a link: [PAHO, Argentina, Pfizer, and Sinergium drive local production of 20-valent pneumococcal vaccine for Latin America and the Caribbean](#)

Human resources for health

Lancet Regional Health Americas - Intersectionality in the Healthcare and Scientific Workforces

[Lancet Regional Health Americas](#);

“Diverse scientific and healthcare workforces promote advancement in human health, fostering innovation and equitable access to quality care. Yet efforts to enhance diverse perspectives overlook how intersecting identities and contextual factors shape individual experiences and opportunities. Intersectionality provides a valuable framework for enhancing these efforts by addressing the complex ways in which multiple marginalised identities interact, shaping experiences and opportunities that reflect systems of oppression and privilege. **This three-paper Series examines issues related to intersectionality, health, and the scientific and healthcare workforces**, including the effect on inclusion, career advancements, health research and innovation systems, and the ultimate impacts on patient and population outcomes. **Concepts for applying the intersectional framework in regional contexts, particularly in the Americas, are explored.**”

Decolonize Global Health

Among others, with more **book reviews of Seye Abimbola’s recent book.**

Dr. Soumyadeep Bhaumik (Book Review) : The Foreign Gaze and the 'triangle of people' in global health.

<https://soumyadeepbhaumik.com/2025/01/10/book-review-the-foreign-gaze-and-the-triangle-of-people-in-global-health/>

A nice review as well. "...This triangle (of people) has three nodes : **devotees, critical admirers, and detractors....**" That is: of Seye's work.

Lancet Infectious Diseases (Mediawatch) - Engaging pose and gaze in global health research

B Adikhari et al ; [https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(25\)00012-X/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(25)00012-X/fulltext)

PS: "... One of the key ideas in the book is that "helping is reciprocal, not charity", with global health work requiring mutual liberation rather than one-sided interventions. **Abimbola critiques the dominance of performance-based financing in global health, arguing that it serves as a backdoor strategy for decentralized governance but is often undermined by the foreign gaze's preference for simple interventions.** Reflecting on his own experience in Nigeria's National Primary Health Care Development agency (2013), he recalls how his suggestions for a more community-based approach to health governance were sidelined in favor of external, short-term solutions (gaze)...."

The Collective - Where is The Spider in Global Health's Web? Confronting Colonial Matrix of Power

by Jin-Hwan Kim and Park Seohwa; [The Collective.](#)

"Despite growing mainstream recognition that contemporary health inequalities stem from the colonial world order, actual changes remain elusive" say Park Seohwa and Collective Member Jin-Hwan Kim. They **offer their reflections on the South Korean case.**" (and thus re its colonial history with Japan)

International Journal for Equity in Health - Solidarity and its decoloniality in global health ethics

A K Fayemi, B Pratt et al ; <https://equityhealthj.biomedcentral.com/articles/10.1186/s12939-025-02380-y>

"Solidarity is one of the emerging values in global health ethics, and a few pieces of bioethics literature link it to decoloniality. However, conceptions of solidarity in global health ethics are influenced primarily by Western perspectives, thus suggesting the decolonial needs to include non-Western perspectives. **This article explores a decolonial interpretation of solidarity to enrich our understanding of solidarity. It employs a palaver approach, typical of African (Yorùbá) relational culture, in developing a conception of solidarity grounded in a beehive metaphor.** Through a decolonial methodological approach, this article posits that a beehive metaphor allegorically symbolises solidarity..."

Miscellaneous

TGH- Health Disinformation Grows in Latin America

A Boscan; <https://www.thinkglobalhealth.org/article/health-disinformation-grows-latin-america>

“As social platforms forgo fact-checking, trolls are fueling disinformation and eroding trust in media.”

Devex – African countries adopt new 10-year agriculture strategy

<https://www.devex.com/news/african-countries-adopt-new-10-year-agriculture-strategy-109042>

“The **Kampala Declaration**, a **10-year strategy adopted at an AU summit**, shifts Africa’s agricultural policy to focus on sustainable and inclusive agrifood systems, setting ambitious goals for resilience, investment, and governance by 2035.”

« **The Kampala Declaration and its associated action plan commit to increasing the continent’s agricultural output by 45% by 2035, by adopting sustainable agricultural practices** that will meet the needs of a rapidly growing population. The **declaration was adopted during an African Union summit held in Kampala, Uganda, late last week**. It marks a significant shift in Africa’s agricultural policy from a narrow focus on agricultural sector growth to a broader framework centered on building sustainable and resilient agrifood systems.....”

Science – “Identity politics” is economic policy

<https://www.science.org/doi/10.1126/science.adu9409>

By R Pande.

Papers & reports

WEF (White Paper) - Better Together: Building a Global Health Network Economy through Data Collaboration

<https://www.weforum.org/publications/better-together-building-a-global-health-network-economy-through-data-collaboration/>

“**This white paper presents a vision for a global health data network economy**, offering a transformative approach to address healthcare challenges through collaboration and innovation. It explores the critical enablers for health data collaboration and the success stories and strategies needed to create impactful, scalable solutions in healthcare.”

“... Unlocking the power of health data requires a coordinated effort among stakeholders globally. Under the **Digital Healthcare Transformation Initiative**, the World Economic Forum and Capgemini

are developing a global platform to drive greater health data collaboration via practical steps to build a comprehensive data environment and implement impactful data exchanges and applications....”

Tweets (via X, LinkedIn & Bluesky)

Kalypso Chalkidou

Re <https://www.africa.com/investing-in-african-health-tech-can-transform-health-systems-heres-how/> :

“Large purchasers who fund health in Africa, such as donors, governments, and big pharma, often overlook local tech-enabled innovations and fail to see their potential in solving health system challenges. “