What does Global Health Governance look like? - In a dry season awaiting rain even as people rain on their parade

Climate change in terms of the natural environment is top-of-the-mind recall for everyone today. What often isn't is the climate of intolerance festering in our midst. This is the focus of our newsletter this March week, bookended by last month's Black History month and this month's Women's Day. And that reference about dry season refers to all the funding that is sought by global health initiatives this year and the challenges they face in getting it. And the line of « dry season awaiting rain » is borrowed from poet T.S.Eliot's Wasteland. And yes, I have resisted the temptation of titling global health governance as a wasteland though it does feel a lot so as our newsletter shows.

We begin with an analysis of the systemic injustice in the global health environment, with a specific focus on racism, colonialism and gender inequity, the last of which we also cover in another article about how women go missing in global health governance high-level positions. Both these articles are translated from our French counterpart, "Observateur du Fonds Mondial" (OFM).

Worldwide, it has often been the courts or the legislature, which marginalized groups look to for recourse when their rights are impinged in countries that profess to practise democracy. The US Congress and US Senate had a long and bruising face-off with conservative vested interests before PEPFAR was granted its funding renewal. Ghana's President tried to delay a key piece of legislation before his hand was forced. For the rest, sometimes, the last resort option is the WHO, because of its more representative structure. But here, too, it had to postpone key decisions as conservative groups and countries once again

questioned its mandate to do so. What was common to all these fractious friction was sexual and reproductive rights, including the right to abortion and LGBTQI rights, both of which cover the realm of bodily autonomy. We cover all of this in an article on homophobia and Ghana's continued criminalization of LGBTQI rights (translated from our French counterpart, "Observateur du Fonds Mondial" (OFM)) and our article on Global Health Governance challenges also points out why representation matters.

And since we are on the subject of representation, we are also trying to introduce other regions in our newsletter. So, we present the Global Fund's Eastern Mediterranean region's meeting and its discussions around financial sustainability during transition.

Trying to widen the circle of influence on global health governance, the Lusaka Agenda 2023 is yet another attempt to realign multilateral entities to be more inclusive. While laudatory, we try and look into its details to see what the contours of its implementation actually portend. It is translated from our French counterpart, "Observateur du Fonds Mondial" (OFM).

And then we have Dr. Anuja Jayaraman from India speaking on what getting more women into research entails and what she sees as the future public health challenge. We hope to get more women from other domains and decision-making levels in the coming issues. If any of you know anyone you'd like to see featured in our Everyday is Women's Day interview, or if you'd like to give a first=person account, you're welcome to write in.

And any thoughts about which aspect in the global health initiative sector you'd like to see covered in our newsletter are always welcome and we'd really appreciate suggestions on who can pen an article on it! Anyone who wishes to voluntarily contribute as a guest columnist and provide an incisive analysis or first-person account of what is happening at micro or macro levels in the field of global health interventions is also welcome. Any feedback and suggestions in French, Spanish, English can be sent to Ida Hakizinka ida.hakizinka@aidspan.org and/or in English to madhuri@aidspan.org

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