



ASTMH Committee on Global Health (ACGH)

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ASTMH AND ACGH MEMBERS AT THE WHO WORLD HEALTH ASSEMBLY

ASTMH at the WHO World Health Assembly By Jamie Bay Nishi, Chief Executive Officer, ASTMH

ASTMH participated in the World Health Organization (WHO) 79th World Health Assembly (WHA) in Geneva through past President Dr. Daniel Bausch and ASTMH partners Global Health Technologies Coalition and the Global Health Council. Dr. Bausch was particularly engaged in several closed-door meetings, consultations, and responses to media inquiries related to the Ebola outbreak. On the formal agenda, the Pathogen Access and Benefit Sharing (PABS) Annex—a critical component of the WHO Pandemic Agreement adopted at last year's WHA—malaria and NTDs were priority items that we followed closely, with lots of dialogue emphasizing the importance of innovation, regional coordination, and local manufacturing in advancing disease elimination efforts.

Regarding the PABS, Member States agreed to extend negotiations for another year, recognizing that additional time is necessary to finalize this complex legal and technical framework.

A side event convened by WHO, the African Union, the Drugs for Neglected Diseases initiative, and other partners, brought together health ministers to highlight the importance of cross-border coordination and integrated regional strategies for malaria and NTD elimination. Discussions focused particularly on the need for stronger collaboration across surveillance, treatment access, and public health response systems.

Medicines for Malaria Venture and partners hosted a high-level discussion examining how innovation and regional manufacturing capacity could help revitalize malaria elimination efforts across Africa. The event explored strategies for moving from malaria control toward sustainable elimination while addressing emerging biological threats, including drug resistance. Speakers emphasized the need to align political commitments, financing, innovation, and manufacturing strategies to sustain progress toward a malaria-free future.

Other notable topics on the formal agenda included the adoption of the Global Action Plan on Antimicrobial Resistance (GAP-AMR), WHO and African Medicines Agency's announcement of a new framework to strengthen product regulation and access, and negotiations around WHO reform and the evolving global health architecture. Also, notably, member states voted to suspend the voting rights of the United States at WHA in 2027 if approximately \$280 million in outstanding assessed contributions for 2024–2025 remain unpaid.



ACGH Member Attends the WHO World Health Assembly

Dr. Elizabeth Collins attended the following WHO WHA events and more, inside and outside of the United Nations (UN) Palais de Nations/Palace of Nations, to advocate for global health issues affecting children. She hopes that several members will also attend in 2027.

Opening Remarks by Tedros Adhanom Ghebreyesus

The WHO 79th World Health Assembly kicked off with [remarks](#) by the WHO Director-General Dr. Tedros, full of inspirational highlights and foreshadowing of the week and year to come. The day prior to the WHA, Dr. Tedros had declared a public health emergency of international concern over the Ebola outbreak in the Democratic Republic of the Congo, and the week prior had coordinated the international response to the hantavirus outbreak with Spain and the WHO for

disembarkation and repatriation of the passengers aboard the cruise ship MV Hondius. [Read more news](#) and follow continuous [WHO updates](#). Last year, the WHO [Pandemic Agreement](#) was adopted, and this year the focus was to try to adopt the Pathogen Access and Benefit Sharing system ([PABS Annex](#)) to bring equity to information sharing during future epidemics, but negotiations continue.

The HIV Endgame: Can the World Deliver on Lenacapavir?

with Michel Joly, Gilead Sciences; Mitchell Warren, AVAC; Rhonda Igweta, EGPAF; Devex

Most exciting was the discussion about lenacapavir, an HIV medication that is injected twice a year to prevent HIV, or to treat HIV after an initial several days of oral medication is taken along with other anti-retroviral medications. Two injections per year prevented HIV in 99% of patients, despite being sexually active, or even when getting pregnant. [Rollout](#) of the new drug has been scheduled around the globe from 2025–2028. It is not officially approved for pediatric use, but clinical trials are actively underway.

Beyond Access: Rethinking Partnerships for Health System Resilience

with Ministry of Health-Ghana; Ali Besri, Pfizer/Accord for a Healthier World; Devex

Low- and middle-income countries (LMIC) are bearing the majority of the burden of disease, but only 15% of the funding for them. To address this, Pfizer launched the Accord for a Healthier World in 2022. They believe that any medication available in the U.S. should be available to all people, so they offer the medications they produce to the countries where they have global rights, but only 19 of the 45 eligible countries are currently participating. This involves hundreds of medications, for cancer and more. Each individual government identifies the priorities for their nation. [Sign up](#) to receive information.

The Self-Care Revolution: From Consumer Habit to Policy Priority

with Gabriel Torres-Brown, Kenvue; Alan Robbins, EVP Partnerships; Devex

A recurrent theme at the WHA was “self-care”, which the WHO defines as “the ability and possibility for individuals to care for their own health with or without a health care professional”. “Self-care” is not “self-help”. Because there has been less time and resources in recent years for doctors, healthcare providers, and pharmacists to provide information to help patients, self-care has been an important first step in healthcare.

For every \$1 spent in self-care, \$7 of value is obtained. Families are accustomed to treating family members with over-the-counter medications for fever, electrolyte solutions for diarrhea or dehydration, etc., and self-care also includes things such as mouthwash to prevent oral disease, sunscreen to avoid skin cancer, and exercise to prevent cardiovascular disease or to maintain mobility. Self-care needs to continue and expand to include much more, including drugs, devices, and diagnostics, especially in regions with shortages of healthcare workers, where self-care is necessary to achieve health.

If one sees a healthcare provider for some of these issues that could have been prevented, that is stealing the time away from someone else who needs the health worker’s care. Currently, the most-used resource for self-care information is social media; however it is trusted less than physicians and community health workers, so the medical field will need to produce increasing amounts of accessible reliable information about self-care to fill the “trust-gap” and improve health globally. We have a shared responsibility to encourage self-care.

What Will Global Health Look Like in the Future?

A hot topic at the Assembly was the creation of a joint process to support reforms of the global health architecture (GHA). The WHO has called for an overhaul of the interacting global health systems by stakeholders (UN Member State governments, UN Agencies, international financial institutions, global health initiatives (GAVI, Pandemic Fund, Global Fund to Fight AIDS, TB, & Malaria, etc.), regional organizations, academia, technical experts, philanthropy organizations, advocacy groups, private sector, civic society, community organizations) and insists that WHO itself does not need to be in charge of such reforms or leadership, but could simply “host” a global health system, which would be run by the United Nations (UN) Member States “in a joint inclusive, transparent, time-bound, resource effective and efficient process”.

The goal would be to streamline current disparate services, reduce duplication, and increase efficiency and impact of evidence-based programs, helping low- and middle-income countries (LMIC) especially. On May 22nd, the World Health Assembly decided to establish a joint process led by Member States, hosted by WHO and with global health partners to support such reforms. WHO and others have called for reform in the past, but this seems different because they have tied it to the UN80 Initiative which, in the 80th year of the UN, is building a simpler, more effective coherent UN system that delivers for people and the planet amidst shrinking resources and rising needs. Read recent [publications](#) and [editorials](#) about the reformation.

The Next WHO Director-General

And, of course, there was buzz about who would be the next WHO Director-General when the election takes place at next year’s WHO 80th WHA to start after Dr. Tedros completes his second term in August 2027. [Read about potential Director-General candidates](#) and [opinions](#) on them.

Most Recent ACGH Webinar: Understanding Today's Evolving Bio-threat Landscape



The ASTMH Committee on Global Health (ACGH) Western Pacific Regional Webinar recently featured Professor Raina MacIntyre, Professor of Global Biosecurity at the University of New South Wales (UNSW), Sydney, Australia. Her presentation, "Dark Winter: Current Bio-threat Landscape," explored the increasingly complex challenges facing global health security in an interconnected world.

Drawing on her expertise in infectious diseases and biosecurity, Professor MacIntyre discussed the evolving bio-threat landscape, including naturally occurring and potentially unnatural outbreaks, dual-use research, emerging infectious diseases, and the growing need to recognize unusual epidemic patterns at an early stage.

"Preparing for tomorrow's bio-threats requires more than scientific innovation – it demands early detection, collaboration, and coordinated global action."

A central message of the webinar was the importance of epidemic intelligence—the ability to detect, interpret, and respond rapidly to signals of emerging public health threats. The discussion also emphasized the value of stronger collaboration between public health, research, security, and policy communities to improve preparedness for future biological threats. As scientific advances continue to reshape both opportunities and risks, the webinar encouraged participants to consider how innovation, surveillance, and multidisciplinary collaboration will be essential to strengthening global biosecurity and protecting population health. The webinar given on June 11 is now available to view on [GoTropMED](#) for one year for ASTMH members.

ACGH Webinar Spotlight: Missed the session? Look out for a summary and key takeaways in our next newsletter.

Diagnostics for Malaria Surveillance: HRP2/3 Deletions, RDT Field Performance and Future Tools

Accurate and reliable malaria diagnosis is essential for effective surveillance and becomes increasingly important as countries progress towards elimination. However, biological, technical, and operational factors can affect malaria rapid diagnostic test (RDT) performance, including *Plasmodium falciparum* histidine-rich protein (HRP2/HRP3) gene deletions, low-density infections, and differences between expected and real-world field performance.

The APMEN TechTalk on Diagnostics for Malaria Surveillance explored these issues, bringing together emerging diagnostic evidence and practical considerations for national malaria control programmes as they assess whether existing tools remain appropriate and consider alternative or future diagnostic approaches.

The session was jointly organised by the ASTMH Committee on Global Health (ACGH) and the APMEN Surveillance and Response Working Group (SRWG).

ACGH LEADERSHIP SPOTLIGHT

Meet Members of the ACGH Executive Council

Margarita Silio, MD

Dr. Maggie Silio's parents were immigrants from Cuba. She was born in New York, and her first language was Spanish, but she is bilingual. She is a pediatric infectious disease specialist who has been practicing for over 30 years. She has a dual appointment at the Tulane School of Medicine and the Celia Scott Weatherhead School of Public Health and Tropical Medicine at Tulane University. Her areas of research and expertise are in HIV, tuberculosis, and immunizations. She is the pediatrician for the Office of Public Health Tuberculosis Clinic in New Orleans. She is also very involved in teaching Master of Public Health (MPH) students, medical students, pediatrics residents, and pediatric infectious diseases fellows. For the past several years, she has been travelling to Sierra Leone to develop and teach a 3-week intensive course on Diagnostic Methods in Microbiology. She taught the Masters of Public Health Students from N'Jala University in Bo and has travelled with Tulane MPH students who will take the class with the MPH students from N'Jala. She is very excited about this program and expects it to be a success.



Shabina Ariff, MBBS, FCPS Pediatrics/Neonatology

Dr. Shabina Ariff is a Professor of Pediatrics and Child Health at Aga Khan University, Pakistan, and holds the Husein Lalji Dewraj Endowed Professorship. A neonatologist and public health expert with over 20 years of experience, she has received multiple awards including the CDC's Charles C. Shepard Science Award and AKU's Research Award by His Highness the Aga Khan. Dr. Ariff has played a leading role in shaping national and global maternal, newborn, and child health (MNCH) policies through her work with WHO STAGE, WHO guideline panels, and the Child Health Task Force. Her research focuses on neonatal infections, nutrition, Kangaroo Mother Care (KMC), breastfeeding, and health system innovation. She has led major scientific studies and contributed to evidence synthesis around maternal and newborn health globally and has authored over 150 peer-reviewed publications. She serves as a mentor to many young scientists and clinicians at a national and global level.

Meet the Newest Members of the ACGH Executive Council

Quique Bassat, MD, MSc, PhD

Pediatrician, Clinical Epidemiologist, Scientific Director of ISGlobal

Dr. Quique Bassat has dedicated much of his career to improving child health through research in malaria and other life-threatening pediatric infections. His work spans Mozambique, Morocco, Brazil, and other low- and middle-income settings, where he combines epidemiological research with innovative technologies to improve diagnosis and better understand causes of mortality among vulnerable populations. His passion for global health lies in generating evidence that improves care for those who need it most.



Kathleen Condon, MD, MPH

Pediatric Infectious Diseases Fellow, Tulane University

Dr. Kathleen Condon's journey into global health began as a Peace Corps volunteer teaching biology in Mozambique. Since then, she has remained actively engaged in global health through women's health initiatives and research capacity strengthening. She believes global health offers invaluable opportunities to learn from diverse communities while building equitable partnerships that improve health outcomes worldwide. She is now the ACGH Councilor for Trainees.

Grace Murilla, BSc, MSc, PhD

Biochemist, Pharmacologist, Global Health Leader

Professor Grace Murilla has devoted over four decades to advancing research on neglected tropical diseases using a One Health approach. Her work spans biomedical research, institutional leadership, scientific innovation, policy development, and capacity strengthening across Africa. Beyond her scientific contributions, she has mentored generations of researchers, led multinational collaborations, and championed stronger health systems through evidence-based policy and research. Her enduring commitment to mentorship, innovation, and collaborative science continues to shape the future of global health across the continent.





Association of *Schistosoma haematobium* Infection with Decreased Pregnancy: A Prospective Cohort Study

By Sheridan F Bowers, Jane K Maganga, Loyce Mhango, Peter Shigella, Crispin Mukerebe, Humphrey D Mazigo, Govert J van Dam, Danielle de Jong, Pytsje T Hoekstra, Paul L Corstjens, Saidi H Kapiga, W Evan Secor, Myung Hee Lee, **Jennifer A Downs**, John M Changalucha. Clinical Infectious Diseases, 2026.

RESEARCH SUMMARY

A prospective cohort study of 245 women in Tanzania found that women who had active *Schistosoma haematobium* infection at any point during the study had a 52% lower rate of becoming pregnant than women who remained uninfected. Female genital schistosomiasis affects millions of girls and women in Africa, yet its potential reproductive health consequences remain underrecognized. These findings underscore the need for further research into the reproductive health effects of this neglected tropical disease and whether they can be prevented or reversed with treatment. [Click here to read the publication](#)

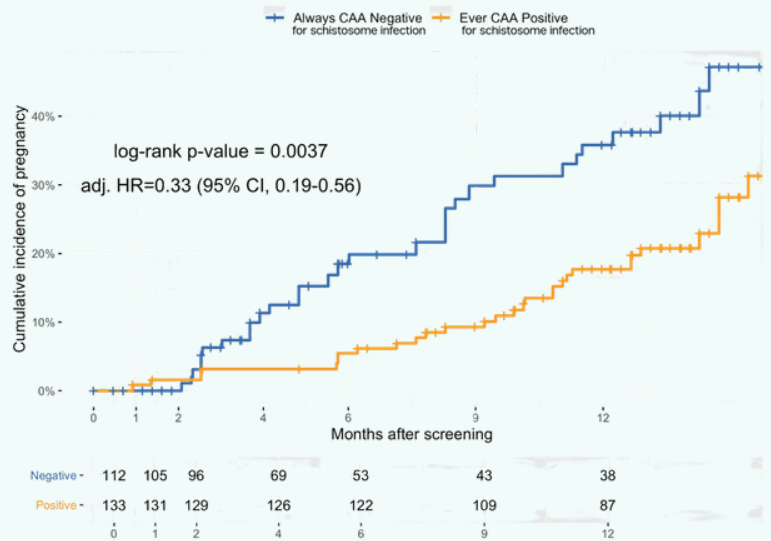


Figure: Kaplan-Meier curve indicating cumulative incidence of pregnancy, adjusted with inverse probability weights, for women who were always negative for schistosome infection throughout the study (blue) versus women who ever had schistosome infection during the study (yellow). From Bowers et al, Clin Infect Dis 2026.

Are you an ACGH member with a recent research paper publication?

We want to highlight your research in the next newsletter.

Go to <https://www.astmh.org/subgroups/acgh>, then click on Membership, and drop down to Forums for Members & Subgroups, then log-in; then under My Sections, drop down to access ACGH. Post a link to your research paper, a pdf, and a photo on the ACGH Forum page.

Announcements



ASTMH Annual Meeting

TropMed26

November 18-22, 2026

Gaylord National Harbor, MD, USA
(adjacent to Washington, DC)

Advancing
Science for
Tropical
Medicine
and Health

Register for the ASTMH Annual Meeting at <https://www.astmh.org/annual-meeting>

Could YOU make a BETTER NEWSLETTER?

Join us on the ACGH Communications, Advocacy, & Policy Subcommittee. Video conference calls are every 3rd Friday of the month at 11 or 12 Eastern Time (ET). Members who are creative, want to contribute to the newsletter for a 3-year term, and will participate actively each month, please sign up [here](#).

Are you creative and business-minded?

Have you joined the Pre-Meeting Course Subcommittee as a Chair or member yet? We need volunteers to conceptualize and organize the ACGH Pre-Meeting Course application, due approximately in February each year. The course will occur the day prior to the 2027 ASTMH Annual Meeting in Denver, Colorado, and the goal is to educate ASTMH members to ensure fulfilling participation. Creative, interested, and productive individuals with valuable ideas are welcome. Link to sign up for this and other ACGH Subcommittees/activities.

ASTMH Committee on Global Health

**ACGH Communications, Advocacy & Policy (CAP) Subcommittee
Newsletter Team**

Mary Funmilayo Oni, PharmD - CAP Chair, Newsletter Co-Editor
Jolly Thomas, MBBS candidate - Newsletter Co-Editor
Elizabeth Collins, MD, MPH, DTM - Sr. Newsletter Editor
Maggie Silio, MD - ACGH Executive Committee Liaison
Hidenori Takahashi, PhD - Regional Representative, Western Pacific
David Oluwatimilehin Adetula, BSc, BDS - Subcommittee Member

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