In a week that is always jam packed, this year’s 74th session of the U.N. General Assembly included more high-level meetings than usual with five summits on: the environment, universal health coverage, sustainable development, financing for development, and priorities for small island countries. The meeting brought 200 world leaders to New York City, including U.S. President Donald Trump, Indian Prime Minister Narendra Modi and German Chancellor Angela Merkel, and featured a bonanza of side events (600!), a tsunami of reports, and a snarl of traffic amid sweltering summer weather.

**Vital Strategies** was tracking developments related to critical health issues throughout the week, and working to ensure that the “best buys” for health and **our policy priorities** receive the attention they deserve.

Here are eight takeaways, with more detailed descriptions below:

1. **Tobacco Industry’s Efforts to Rebrand as “Good Guys” Still Falling Flat**
2. **Innovative Health Care Financing Ideas Stay on the Sidelines**
3. **New Urgency on Climate but Little Action from the Biggest Polluters**
4. **Momentum for Universal Health Coverage Grows with U.N. Declaration**
5. **Health Data is Getting its Day in the Sun...**
6. **…While Women’s Health and Reproductive Rights Are Pushed Back into the Shadows**
7. **Financing Common Goods for Health Wins as Best New Idea**
8. **Missing in Action: Ending the Global Shortfall of Health Workers**

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**Our tweet-length roundup?**

We can celebrate modest progress, but targets, commitments and accountability in key areas are needed to deliver on the most pressing needs in public health. Mark the report card: **Much Promise, More Effort Required.**
**Tobacco Industry’s Efforts to Rebrand as “Good Guys” Still Falling Flat**

André Calantzopoulos, CEO of Phillip Morris International, was an opening speaker at the Concordia Annual Summit, a high-profile side event organized each year that focuses on public-private partnerships. Concordia was another stop in Big Tobacco’s continued global PR effort to convince the world that they are now good guys because they are selling products that are “less harmful” than conventional cigarettes. **But their efforts are falling flat** as their well-funded PR machine runs up against reality. As the week unfolded, international visitors saw widespread coverage of the U.S. epidemic of teen vaping, with more than 1,000 people sickened and at least 18 dead from vaping-related conditions—and this is giving impetus to countries to implement strict regulations on e-cigarettes and heat-not-burn products.

As of this writing, several dozen countries have now closed their markets to e-cigarettes; most notably, India recently banned production, import and sale of e-cigarettes. Other countries are implementing policies designed to restrict use: The Philippines is looking at imposing new taxes on these products. Even Donald Trump, not known for his pro-regulatory stance, has called for a ban on flavors that have clearly attracted children. Tobacco stocks took a hit as it became public knowledge that the sector was facing increased regulation, litigation and a criminal investigation by the U.S. Food and Drug Administration. A merger between industry giants Philip Morris International and Altria was formally called off, at least for now.

Health advocates shone a disinfecting spotlight on potential tobacco industry interference in U.N. meetings and organizations, cautioning delegations and organizers to be on the alert for approaches from the tobacco industry and its allies. **Read Vital Strategies’ statement**, submitted to the High-Level Meeting on Universal Health Coverage on behalf of the tobacco industry watchdog group, STOP, of which we are a partner.

**Innovative Health Care Financing Ideas Stay on the Sidelines**

It’s the elephant in the room, maybe even the blue whale (the world’s largest mammal): Where will we get the money to pay for universal health coverage, while addressing an epidemic of noncommunicable diseases, new threats to health, and ancient but still virulent diseases such as tuberculosis? Health expenses drain families and countries and hamper progress toward equitable societies and sustainable development. Alas, there weren’t a lot of answers in the speeches and documents coming out of the UNGA health meetings. A WHO report presented the case for governments to increase health spending. Civil society pushed for an end to subsidies on fossil fuels and other unhealthy commodities like tobacco, soda and alcohol, but largely these did not receive commitment from governments. There were also calls for encouraging wealthy countries—even the richest individuals, who together control trillions of dollars of wealth—to fund those who simply don’t have the means to pay for health coverage on their own. **Read our new brief on fossil fuel subsidies.**

**New Urgency on Climate but Little Action From the Biggest Polluters**

The Climate Action Summit on Sept. 23 followed a weekend of environmental protests in more than 150 countries. Climate activists demanded a swift transition to clean energy and an end to fossil fuel use. While more than 4 million people participated in the demonstrations to pressure governments to act on climate change, it became apparent early on that the largest greenhouse gas emitters in the world—China, the United States and India—were offering few insights into how they would curb their own emissions. Nonetheless, the youth action inspired by Greta Thunberg, a determined and brave teenager from Sweden, brought a much-needed sense of urgency. Meanwhile, the Geneva-based Intergovernmental Panel on Climate Change issued a report pointing to potentially irreversible changes and growing threats to the Earth’s oceans.

President Donald Trump, who continues to realign U.S. energy policy with his climate denialism, not surprisingly ignored the climate change topic altogether, announcing instead a new initiative on religious freedom. However, there were some bright spots: About 70 countries agreed to come up with more aggressive climate plans in 2020 and several wealthier nations announced more money for programs such as the U.N.’s Green Climate Fund. The Clean Air Fund was also launched to address air pollution and improve human health, aiming to increase foundation funding from 2015 levels by a factor of 10. **Read a Q&A with Daniel Kass**, our Senior Vice President for Environmental Health, about the health impacts of climate change.
Momentum for Universal Health Coverage Grows With U.N. Declaration

The declaration from U.N. member states committing to universal health coverage for all felt historic, similar to when the Sustainable Development Goals were adopted in 2015. It’s a worthy goal. For too long, in too many countries, getting sick has meant destitution. In 2015, nearly 1 billion people spent more than 10% of their household income on health care. The declaration echoes WHO recommendations that countries increase health spending by an additional 1% to 2% of GDP to close the gap on health care access and prevent it from worsening in the future. For advocates, the declaration can be a lever for accelerating progress in countries that need it. But it lacks teeth. One WHO official said it is “like a Christmas tree”—hung with an wide assortment of bright objects and surrounded with gifts for all—but it’s hard to see how its ambitious goals can come to fruition. Though many agree primary care and prevention should be the focus, there is no road map for how to move forward. And time dulls good intentions: Member states won’t be meeting about this again until 2023.

Health Data Is Getting Its Day in the Sun...

We applaud the Rockefeller Foundation’s announcement of a new US $100 million public health initiative to increase access to data science tools. Accurate and timely data is an essential foundation for health policy and funding decisions, and effective data tools can improve diagnostic and treatment decisions by health workers. Just a few days after the UNGA, a widely shared AP story about verbal autopsies highlighted the transformative impact that good mortality data can have on both communities and public health policies, and highlighted the reinvestment of US$120 million in the Data for Health initiative, an effort by Bloomberg Philanthropies and Australia’s Department of Foreign Affairs and Trade to improve health data in 25 countries.

... While Women’s Health and Reproductive Rights Are Pushed Back Into the Shadows

As a result of intense negotiations in the days before the universal health coverage declaration was adopted, much of the strongest language protecting sexual and reproductive health and rights was stripped from the final document. That’s a glaring omission, because when women have access to contraception, they can take more control of their lives, plan and space their births, and improve the health, education and lives of the children they do have. It also allows women to contribute more to the work force, reduces poverty and can even positively affect issues like deforestation that contribute to climate change. Nevertheless, the United States pushed back against sex education and access to abortion. Women remain sorely underrepresented among high level political leaders. This left many wondering whether a lack of commitment here may reflect the fact that so many of the speeches on the floor this week from top-level government officials, both prime ministers and health ministers, were from men. One positive development: The U.K. government announced a GBP 600 million aid package for sexual and reproductive health and rights.

Financing Common Goods for Health Wins as Best New Idea

With all the talk about unhealthy commodities and commercial determinants of health (think cigarettes, soda and alcohol), here is an idea presented at UNGA that we can get behind: the notion of common goods for health and the need to fund them. These are defined as population-based functions or interventions that require collective financing, either from government or donors, contribute to health and economic progress, and have a clear economic rationale.

By definition, common goods for health must generate large societal health benefits that cannot be achieved through market forces alone. For example:

- Taxes on products that harm health
- Environmental regulations and guidelines
- Health surveillance systems
- Solid waste management and sanitation systems

Missing in Action: Ending the Global Shortfall of Health Workers

Across the more than 600 side events and on the main floor, we saw too little attention paid to ensuring that trained and supported health workers are in place to deliver care. According to a 2016 WHO report, an additional 18 million health workers will be needed in order to meet universal health coverage commitments. This shortfall is a significant problem around the world, both in countries with aging populations and those with young, growing populations, and deserves to be addressed more robustly on the global stage.

Two additional reports worth noting:

- Healthy Budgets and Healthy People: Finance ministry views on the importance, strength and limitations of tobacco tax revenues and its uses from the World Heart Federation and The Economist
- Burning problems, inspiring solutions: sharing lessons on action against tobacco and fossil fuels from the NCD Alliance