**WHO news**

**Q: How do you ensure policy coherence between health, foreign affairs and trade, what are the mechanisms Norway has established or uses to do this?**

**A: The first conditions for policy coherence are transparency and accountability in everything we do. For example, I am in charge of Norway’s negotiations at the World Trade Organization (WTO). These have to be consistent with our proposals on patent rights. That means that we have to monitor and evaluate policy in these different areas to see that it is coherent.**

**Q: What are the good practices you would recommend to other countries in terms of shaping a foreign policy that can work to improve global health?**

**A: It’s too early to say. We will deliver our report in April 2007. It will not be an academic study, but a set of recommendations and ideas. Why was it so easy to get foreign ministers to join me in preparing the report? They all feel it’s important and an illustration of how they feel that health is emerging whether it concerns the spread of epidemics, travel, migration, air travel, threat from biological warfare, or the collapse of health systems as an important factor in failure of states. We will give copies of the report to WHO Director-General Margaret Chan and UN Secretary-General Ban Ki-moon.**

**Q: What good practices would you recommend for developing countries to be better partners, what would you like them to bring to the table?**

**A: It is important to have trade agreements that do not complicate access to drugs at affordable prices, patent regulations and other trade regulations, so that poor countries have access. Beyond that, in the spirit of WHO’s Commission on Macroeconomics and Health, we need broad partnerships between rich and poor countries to improve health. And rich countries need to help developing countries to make a dedicated effort with their health budget allocation.**

**Q: How can we achieve stronger global governance? Is there a need for a new global health forum, is the UN Economic and Social Council (ECOSOC) sufficient, could it be L20? Or could this forum be incorporated into the World Health Assembly?**

**A: I have no firm opinion on this. I believe we need to address health in several fora. I hope that WHO with its membership and constitution will be able to argue for a prominent role for the World Health Assembly that invites other opinions to be expressed there. Health also belongs in the Security Council and more prominently at the World Bank.**

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**Recent news from WHO**

- **Professor Michel Kazatchkine**, France’s Ambassador for HIV/AIDS and Communicable Diseases, has been appointed the next Executive Director of the Global Fund to fight AIDS, Tuberculosis and Malaria. Kazatchkine will replace Sir Richard Feachem, the founding Executive Director, who steps down at the end of his five-year term on 31 March. Kazatchkine is a physician who has treated people with AIDS for more than 20 years and led the world’s second-largest AIDS research agency, France’s Agence Nationale de Recherches sur le SIDA. In five years, the Global Fund has become one of the largest funders of tuberculosis and malaria programmes, and one of the three largest funders of HIV/AIDS programmes in the world, with 450 programmes in 136 countries.

- More collaboration is needed between public health agencies and faith-based organizations to make more progress towards the 2010 goal of universal access to HIV prevention, treatment and care, according to a WHO study released on 8 February. Please find the study at: http://www.arhap.uct.ac.za/research_who.php

- **WHO** announced on 31 January that a Phase III study of the candidate microbicidal cellulose sulfate had been stopped prematurely because of a higher number of HIV infections in the active compared with the placebo group. The termination of the trial is a major setback in the search for a safe and effective microbicidal that women can use to protect themselves against HIV infection.

- A neglected disease with a nearly forgotten name is making a comeback 40 years after a global control programme almost eradicated it. **Yaws**, a disease that eats away at the skin, cartilage and bones of its victims who are mostly children, is re-emerging in poor rural and marginalized populations of Africa, Asia and South America. WHO said on 25 January that more than 500,000 people are afflicted by yaws worldwide.

- **WHO’s Executive Board** re-appointed **Dr Hussein A Gezairy** as Regional Director for the Eastern Mediterranean Region (EMRO) on 23 January. Gezairy is WHO’s longest-serving elected leader, having been in office since 1982.

- **WHO** announced on 19 January a partnership with the World Food Programme’s logistics hubs to expedite the delivery of medical supplies in emergencies.

For more about these and other WHO news items, please see: http://www.who.int/mediacentre/news/releases/2007/en/index.html