

BRICS and global health: a call for papers

Pascal Zurn,^a Marie-Andrée Romisch-Diouf,^a Shambhu Acharya,^a Sarah Louise Barber,^b Natela Menabde,^c Luigi Migliorini,^d Joaquin Molina^e & Michael J O'Leary^f

In recent decades, the influence of Brazil, the Russian Federation, India, China and South Africa (BRICS) within the international arena has increased enormously.¹ These countries represent around 25% of the world's gross national income, more than 40% of the world's population and about 30% of the world's land area.² Although much attention has been paid to their economic performance, less widely noted is the fact that these countries are uniquely positioned to exert a decisive influence on health at the global level.

Within BRICS countries, hundreds of millions of people have been lifted out of poverty. This has resulted in marked improvements in health outcomes and in substantial progress towards achieving the Millennium Development Goals.^{3,4} BRICS countries are also gravitating towards universal health coverage, although not at an even pace. They are leaders in the manufacture of low-cost medicines and vaccines.⁵ Their experiences in reducing poverty and strengthening health systems, together with their booming economies and large populations, explain why they exert such an enormous influence on health worldwide. Besides, in only a few years they have amassed a wealth of experience and knowledge from which other low- and middle-income countries can draw valuable examples.

Despite their many assets, however, BRICS countries face important health problems. India has the highest number of maternal and infant deaths of any country in the world. South Africa has the greatest number of people with human immunodeficiency virus infection. Alcohol abuse is a major public health concern in the Russian Federation. In addition, BRICS countries' strong economic growth has created a new set of problems that need to be addressed.

Over the last decade, inequities in health and in the socioeconomic sphere have become accentuated in most of these countries.⁶ Although life expectancy has improved substantially in Brazil, China and India, BRICS countries as a whole still account for about 40% of the global burden of disease.⁷ They also face a "double" disease burden resulting from the coupling of infectious diseases with the emergence of new health problems triggered by environmental factors and to an increase in road traffic injuries and noncommunicable diseases. Tackling the social determinants of health continues to be a priority for BRICS countries.

Globally, BRICS countries are becoming increasingly important partners in international development cooperation.⁸ They are helping to reshape the landscape of aid effectiveness. According to the final declaration of the Fourth High Level Forum on Aid Effectiveness, held in 2011 in Busan, the Republic of Korea, the nature, modalities and responsibilities that apply to South-South cooperation differ from those that apply to North-South cooperation.⁹ Although the development cooperation coming from BRICS countries has increased substantially in recent years, estimates vary because of differences in the approaches and methods used to report development cooperation for countries not represented in the Development Assistance Committee.^{10,11}

Through "South-South" health cooperation, BRICS countries are able to reach populations beyond their own borders. These countries can engage in cooperation of this type either individually through bilateral agreements or collectively. Inter-BRICS cooperation is gaining momentum, as highlighted in the recent meeting of ministers of health held on 10–11 January 2013 in New Delhi.¹² Moreover, the establishment of

the BRICS development bank, agreed upon by BRICS leaders on 27 March 2013 in Durban, South Africa, will also contribute to the advancement of health in BRICS countries and beyond.

The *Bulletin* plans to publish a theme issue on BRICS and global health to enhance people's understanding of the dynamics of health and development in BRICS countries and of how these countries contribute to global health, both by improving health outcomes in their own territories and by engaging in mutual cooperation. This issue will cover these countries' key health policy achievements and their most important health challenges, as well as their rising influence on international health cooperation.

We welcome papers for all sections of the *Bulletin* and encourage authors to consider contributions on any of the following topics as they pertain to BRICS countries: universal health coverage; universal access to medicines or vaccines; emerging and existing public health challenges, notably health inequities and the double burden of disease; South-South cooperation and inter-BRICS cooperation.

The deadline for submissions is October 2013. Manuscripts should be prepared in accordance with the *Bulletin's* Guidelines for contributors and authors should mention this call for papers in a covering letter. All submissions will go through the *Bulletin's* peer review process. Please submit to: <http://submit.bwho.org>. ■

References

Available at: <http://www.who.int/bulletin/volumes/91/7/13-125344>

^a Department of Country Focus, World Health Organization, 20 avenue Appia, 1211 Geneva 27, Switzerland.

^b World Health Organization, Country Office, Pretoria, South Africa.

^c World Health Organization, Country Office, New Delhi, India.

^d World Health Organization, Country Office, Moscow, Russian Federation.

^e Pan American Health Organization/World Health Organization, Country Office, Brasília, Brazil.

^f World Health Organization, Country Office, Beijing, China.

Correspondence to Pascal Zurn (e-mail: zurnp@who.int).

References

1. Wilson D, Trivedi K, Carlson S, Ursúa J. *The BRICs 10 years on: halfway through the Great transformation*. Goldman Sachs; 2011 (Global Economics Paper No: 208). Available from: <http://blogs.univ-poitiers.fr/o-bouba-olga/files/2012/11/Goldman-Sachs-Global-Economics-Paper-208.pdf> [accessed 30 May 2013].
2. World Bank [Internet]. World Development Indicators Database. Washington: WB; 2012.
3. Sumner A. *Where do the world's poor live? A new update. IDS Working Paper 2012;393*. Available from: <http://www.ids.ac.uk/files/dmfile/Wp393.pdf> [accessed 30 May 2013].
4. *The Millennium Development Goals: report 2012*. New York: United Nations; 2012. Available from: <http://www.un.org/millenniumgoals/pdf/MDG%20Report%202012.pdf> [accessed 30 May 2013].
5. *Shifting paradigm: how the BRICs are reshaping global health and development*. New York: Global Health Strategies Initiatives; 2012. Available from: http://www.ghsinitiatives.org/downloads/ghsi_brics_report.pdf [accessed 30 May 2013].
6. Organization for Economic Co-operation and Development. *Inequalities in emerging economies*. Paris: OECD; 2012. Available from: <http://www.oecd.org/els/soc/49170475.pdf> [accessed 30 May 2013].
7. *Global burden of disease*: Geneva: World Health Organization; 2008.
8. Harmer A, Xiao Y, Missoni E, Tediosi F. "BRICS without straw"? A systematic literature review of newly emerging economies' influence in global health. *Global Health* 2013;9:15. doi: <http://dx.doi.org/10.1186/1744-8603-9-15> PMID:23587342
9. Nkunde M, Yongzheng Y. *BRICs' philosophies for development financing and their implications for LICs*. Washington: International Monetary Fund; 2012 (WP/12/74). Available from: <http://www.imf.org/external/pubs/ft/wp/2012/wp1274.pdf> [accessed 30 May 2013].
10. Walz J, Ramachandran V. *Brave new world: a literature of emerging donors and the changing nature of foreign assistance. Working paper 273*. Center for Global Development; 2011. Available from: http://www.cgdev.org/sites/default/files/1425691_file_Walz_Ramachandran_Brave_New_World_FINAL.pdf [accessed 30 May 2013].
11. Keeley B. *From aid to development: the global fight against poverty*. Paris: Organisation for Economic Co-operation and Development; 2012. Available from: http://www.oecd-ilibrary.org/agriculture-and-food/development-and-aid_9789264123571-en<http://www.oecd-ilibrary.org> [accessed 30 May 2013].
12. Health Ministers BRICS. *Delhi communiqué*. New Delhi: Press Information Bureau, Government of India; 2013. Available from: <http://pib.nic.in/newsite/erelease.aspx?relid=91533> [accessed 30 May 2013].