

2024 CONFERENCE REPORT



**Geneva
Health
Forum**



**UNIVERSITÉ
DE GENÈVE**



Hôpitaux
Universitaires
Genève



Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
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REPUBLIQUE
ET CANTON
DE GENÈVE



2024 GHF Conference



May 27-29

HEALTH, A COMMON GOOD!

ABOUT THE GENEVA HEALTH FORUM

Established in 2006 by the University Hospitals of Geneva (HUG) and the University of Geneva (UNIGE), the Geneva Health Forum (GHF) is a Swiss not-for-profit initiative that brings together a diverse range of stakeholders to discuss and address global health challenges. It serves as a neutral platform for dialogue and collaboration among policymakers, representatives from academia, civil society, and the private sector.

Its core mission is to facilitate a constructive dialogue among these global health actors, which, in turn,

contributes to the improvement of health policies and access to care worldwide.

With strong collaborations established alongside key pillars of the International Community in Geneva, the Geneva Health Forum supports the vision of:

A world where health is a human right and access to health a reality for every human being



Three thematic areas

- 1 Health and environment
- 2 Health equity
- 3 Digital health

Three main objectives

- 1 Giving increased visibility to field actors in global health
- 2 Facilitating networking, the exchange of experiences, and collaboration within the Geneva health hub and beyond
- 3 Promoting the development of cross-cutting solutions and facilitating the launch of new initiatives

GENEVA, THE INTERNATIONAL CAPITAL OF GLOBAL HEALTH

Geneva is recognized today as the international capital of health. Not only does it provide the seat of the **World Health Organization (WHO)**, but the city and canton also host more than 300 governmental and non-governmental organizations active in the public health sector.

Each year in May, the **World Health Assembly (WHA)** brings together the health ministers of the 194 member states to discuss and make decisions on various aspects of global health policy, including setting priorities, adopting resolutions, and approving budgets. The WHA addresses a wide range of global health issues, including infectious diseases, non-communicable diseases, health systems strengthening, emergency response, and access to healthcare.



THE GENEVA HEALTH FORUM, A FUNDAMENTAL GATHERING FOR GLOBAL HEALTH

GHF Conference 2024

From May 27 to 29, 2024, the Geneva Health Forum (GHF) Conference took place alongside the World Health Assembly (WHA). While the WHA gathered political leaders, the GHF Conference provided a unique platform to convey the perspectives of scientists, medical practitioners, and field actors on the main challenges and opportunities for global health.

For the past 18 years, the GHF Conference has distinguished itself in the global health landscape through its commitment to:



Amplify Voices from the Field:

The GHF brings together diverse yet complementary perspectives from the scientific community, field actors, and civil society. By carrying these voices, it draws upon the invaluable experiences of frontline healthcare workers and on-the-ground projects, effectively integrating research, science-based knowledge, and practical field experience.



Create a Neutral Forum for Debate:

The GHF Conference has always been dedicated to impartiality, providing a neutral space for informed and constructive dialogue.



Foster Multisectoral Collaboration:

Facilitating dialogue and collaboration among diverse global health stakeholders, spanning the political, academic, private sector, and civil society spheres.

GHF Audience

The Geneva Health Forum brings together a multisectoral and global audience including high level representatives from the following sectors:

Premier academic institutions

International organizations

Permanent missions to the UN

Field actors

Public institutions

Hospitals

Associations, foundations and NGOs

Leading multinational companies

Innovative startups

Global health media

Our Team

Steering Committee



**Antoine
Flahault**

University
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Geneva University
Hospitals (HUG)



**Sophia
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Communications
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Manager



Sonia Mondo

Administrative
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Assistant

Operational Team

HIGHLIGHTS – KEY FACTS AND FIGURES

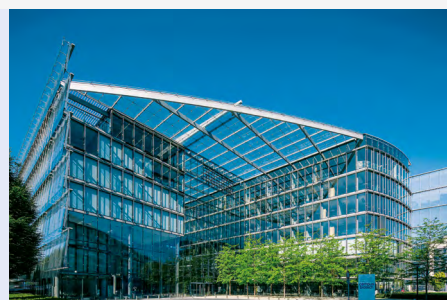
2024 GHF Conference: 10th Edition

Theme:

“HEALTH, A COMMON GOOD!”

Objective:

To provide an effective platform conveying the perspectives of scientists, medical practitioners, and field actors on the main challenges and opportunities for global health.



Main location:

Campus Biotech,
Geneva (Switzerland)



conference2024.genevahealthforum.com/

Three thematic days



Day 1 (Monday, May 27):

HEALTH AND ENVIRONMENT - TIME FOR SOLUTIONS



Day 2 (Tuesday, May 28):

MIGRATION, HEALTH AND EQUITY



Day 3 (Wednesday, May 29):

TOWARDS THE ELIMINATION OF MALARIA

CONFERENCE PROGRAMME - DAY 1



MAY 27

HEALTH AND ENVIRONMENT: A TIME FOR SOLUTIONS

DAILY PROGRAMME CO-HOSTED BY:



清华大学

万科公共卫生与健康学院

VANKE SCHOOL OF PUBLIC HEALTH
TSINGHUA UNIVERSITY

	HEALTH AND ENVIRONMENT	SATELLITE SYMPOSIA	CURRENT CHALLENGES
08:30 - 9:00 am	GHF Opening and Welcome	GHF Opening and Welcome	GHF Opening and Welcome
09:00 -10:30 am	The Silent Threat: Exploring pollution's impact on health		Essential learning for health emergencies and public health - WHO's open source online platform
10:30 - 11:00 am	Coffee break	Coffee break	Coffee break
11:00 am - 12:30 pm	Bridging science and policy on health and pollution		Geneva at the heart of global health cooperation: Insights from WHO and Collaborating Centres
12:30 - 2:00 pm	Lunch break	Lunch break	Lunch break
2:00 - 3:30 pm	Impact of the health system on the environment in LMICs		Reaching elimination of neglected tropical diseases: Challenges, lessons, and next steps
3:30 - 4:00 pm	Coffee break	Coffee break	Coffee break
4:00 - 5:30 pm	Presentations from the field		Tackling global health challenges with deep tech - CERN Global Health Workshop
5:30 - 6:00 pm	Coffee break	Coffee break	Coffee break

6:00 - 8:00 pm

EVENING EVENT:

IMPACT OF CLIMATE CHANGE ON THE MOST VULNERABLE POPULATIONS



CONFERENCE PROGRAMME - DAY 2



MAY 28

MIGRATION, HEALTH AND EQUITY



DAILY PROGRAMME CO-HOSTED BY:



MIGRATION, HEALTH AND EQUITY

SATELLITE SYMPOSIA

CURRENT CHALLENGES

09:00 - 10:30 am	The health situation of refugees and migrants : Where do we stand?		Strengthening surveillance, preparedness, and response to health crises through the operationalization of the humanitarian-development nexus – challenges and lessons learnt
10:30 - 11:00 am	Coffee break	Coffee break	Coffee break
11:00 am - 12:30 pm	Lessons Learned: Effective practices in enhancing migrant health	Safeguarding Health from Climate Change: Uniting for Resilience and Action	Operationalizing One Health & Planetary Health in Humanitarian Settings: Research & Practice
12:30 - 2:00 pm	Lunch break		Lunch break
12:45 - 13:45 pm		Launch of <i>The Lancet Regional Health-Europe Series</i> : 'Addressing migration and health inequity in Europe'	
2:00 - 3:30 pm	Ensuring continuity of care at different stages of the migration process		Equitable access to medical innovation for neglected and climate-sensitive infectious diseases: the role of collaborative research platforms
3:30 - 4:00 pm	Coffee break		Coffee break
4:00 - 5:30 pm	Presentations from the field		Moving mountains: Leveraging nursing and Midwifery Policy Leadership in Central Asia and beyond to improve health outcomes
5:30 - 6:00 pm	Coffee break		Coffee break

6:00 - 8:00 pm

EVENING EVENT:

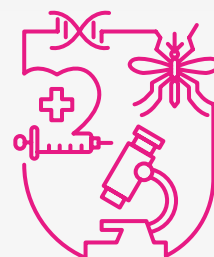
IN THEIR OWN WORDS: MIGRANTS' PERSPECTIVES UNVEILED

CONFERENCE PROGRAMME - DAY 3



MAY 29

TOWARDS THE ELIMINATION OF MALARIA



DAILY PROGRAMME CO-HOSTED BY:



HARVARD T.H. CHAN
SCHOOL OF PUBLIC HEALTH



**UNIVERSITÉ
DE GENÈVE**
FACULTÉ DE MÉDECINE



清华大学
万科公共卫生与健康学院
VANKE SCHOOL OF PUBLIC HEALTH
TSINGHUA UNIVERSITY

MIGRATION, HEALTH AND EQUITY

SATELLITE SYMPOSIA

CURRENT CHALLENGES

08:00 am		Accelerating action against vector-borne and other infectious diseases in a changing world	
09:00 - 10:30 am			Do we need a feminist global health policy to spur women's health innovation? Part 1: Gender biases in Research & Development
10:30 - 11:00 am		Coffee break	Coffee break
09:30 - 11:00 am	Elimination of malaria : Where do we stand?		
11:00 - 11:30 am	Coffee break		
11:00 am - 12:30 pm			Do we need a feminist global health policy to spur women's health innovation? Part 2: Drug drought in Women's Health
11:30 am - 01:00 pm	What role can the vaccine play in eliminating malaria?		
12:30 - 02:00 pm		Lunch break	Lunch break
01:00 - 02:00 pm	Lunch break		
2:00 - 3:30 pm	Elimination of Malaria : good practices from the field	NCD (Non-Communicable Disease) management during conflicts: lessons from Ukraine	The imperative to detect and treat Noma: what are the concrete steps to control the disease?
3:30 - 4:00 pm	Coffee break	Coffee break	Coffee break
4:00 - 5:30 pm	Presentations from the field		Harnessing AI for Global Health Improvements
5:30 - 6:00 pm	Coffee break	Coffee break	Coffee break

6:00 - 8:00 pm

EVENING EVENT:
CLOSING CEREMONY

A rich and dynamic platform



31 sessions

- Plenary sessions
- Discussion panels
- Sponsored satellite symposia
- Current challenge sessions
- Presentations from the field



4 side events



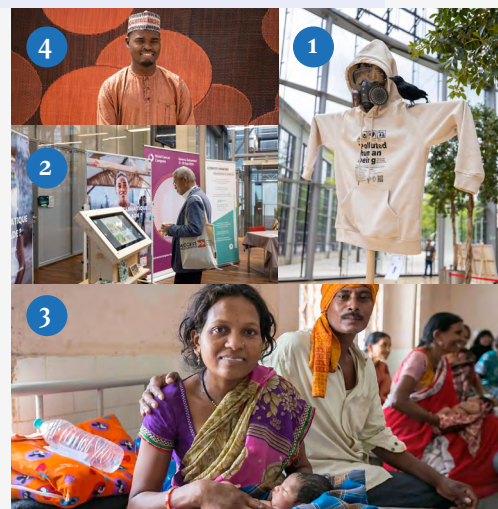
5 Research Awards

- Grand Jet d'Or de Genève
- 2 Jets d'Or awards for the Best Scientific Posters
- Science Speed Talks (PhD students presenting their thesis in 3mn)
- Clinical Research Award on Neglected Tropical Diseases



4 Art Exhibitions

- 1 "Brushstrokes for a Healthy Environment" - Global Alliance On Health And Pollution (GAHP)
- 2 "Climate change: Mozambique on the frontline" - Médecins Sans Frontières (MSF)
- 3 "PPH stories: Capturing the Impact of Post-Partum Haemorrhage" - Concept Foundation
- 4 "Portraits of Research: Community engagement on the frontline of vaccine delivery" - UK Humanitarian Innovation Hub, Geneva Center of Humanitarian Studies



ANOTHER SUCCESSFUL EDITION!



1700+
participants
from **87** countries

213 speakers



- from **36** countries
- representing **134** organizations



471
abstracts submitted

192



scientific posters presented



49

international organizations, NGOs, and academic institutions involved in building the program



Lancet Migration
Global collaboration to advance migration health



Selected to host the Launch of a special series of The Lancet (May 28): "Addressing migration and health inequity in Europe"



Conference Closing Day (Wednesday, May 29):
Illumination of Geneva's emblematic Jet d'Eau dressed in Geneva Health Forum's colours, courtesy of the City of Geneva!



DAY 1: KEY TAKEAWAYS



Geneva Health Forum Day 1 (Monday, May 27, 2024)

HEALTH AND ENVIRONMENT: A TIME FOR SOLUTIONS

The first day of Geneva Health Forum 2024 explored the intersections between health, environmental sustainability, and climate change. The discussions emphasized the need for science-based policies to tackle critical health challenges, from pollution and climate change to the environmental impacts of healthcare systems. Below are the key points discussed during those sessions.



I. Global Environmental Health and Pollution

Pollution is one of the largest contributors to global mortality, with 13.7 million deaths annually. Of these, 7 million are attributed to air quality issues, and 2 million result from hazardous chemicals such as lead, asbestos, and pesticides. These substances contribute to cardiovascular diseases, respiratory illnesses, and cancer.



WHO's estimates that 23% of the global burden of disease and 24% of deaths, which could be prevented, are due to environmental risk factors.

— Richard Brown, World Health Organization (WHO)

Promoting global science-policy interfaces: Discussions emphasized the importance of bridging the gap between scientific knowledge and regulatory frameworks. Effective solutions require integrating scientific insights into global treaties on pollution, plastics, and chemicals. A proposed science-policy panel, similar to the IPCC, aims to address chemicals and waste. Its final consultation took place in June 2024.

Urbanization and Health: Cities present opportunities for improved health outcomes but also exacerbate pollution. Sustainable urban planning must focus on health promotion and avoid repeating the mistakes of past industrialization.

Civil Society's Role: Civil society can drive change, as seen in past movements for clean air and tobacco control. Stakeholders stressed the importance of grassroots advocacy and engagement in environmental decision-making.

Proactive Regulation: With thousands of new chemicals developed annually, the burden of proof for safety must shift to manufacturers. This approach, combined with technological innovations like quantum technologies, could reduce environmental harm and accelerate solutions.

Pollution Management in low and middle-income countries (LMICs): Pollution disproportionately affects LMICs, where gaps in chemical and waste management increase health risks. Addressing these issues could prevent millions of premature deaths annually.

DAY 1: KEY TAKEAWAYS

II. Impact of Climate Change on Vulnerable Populations

Vulnerability to climate change is closely tied to poverty. Marginalized populations, including individuals with disabilities, children, and women, face disproportionate impacts. For instance, a child born in a low-income country today will experience three times as many climate-related challenges as in the past.

Global Health Implications: Climate change exacerbates public health issues, including food insecurity, vector-borne diseases, and mental health conditions. Dengue outbreaks in Peru, for example, have overwhelmed healthcare systems.

Proposed Solutions: A global resolution submitted to the World Health Assembly by countries like Peru and the Netherlands emphasizes making health systems more climate-resilient while reducing their environmental impact. This includes collaboration with the Alliance for Transformative Action on Climate and Health and addressing gender inequalities.

In addition, organizations like *Médecins Sans Frontières* (MSF) are adapting their approaches by training community health workers and using advanced tools for predicting disease outbreaks. However, a broader and more coordinated global response is necessary.



To tackle eco-anxiety, implementing climate policies would be a good start.

— Matteo Consiglio, Swiss Youth for Climate

Northern regions (e.g., Switzerland), are taking proactive measures to adapt to climate impacts. In Geneva, Switzerland, proactive measures include Geneva's Climate Program, focusing on emission reductions and adaptation strategies.

Mental Health: Eco-anxiety, particularly among young people, emerged as a significant concern. Participants called for integrating mental health support into climate response strategies to counter feelings of helplessness and despair.

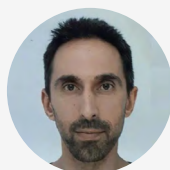
III. Environmental Challenges in Healthcare

Healthcare systems themselves contribute to environmental degradation, accounting for 3%-10% of national emissions. Poor waste management, energy inefficiency, and high resource consumption present significant challenges, especially in LMICs.

Waste Management: Poorly managed medical waste increases the risk of infections and environmental contamination. Successful examples, such as Senegal's structured waste management systems, demonstrate the importance of regulatory frameworks and private sector involvement.

Energy Efficiency: Healthcare facilities in LMICs often lack access to reliable and sustainable energy. The integration of renewable energy solutions, such as solar panels, can enhance efficiency and reduce emissions.

Despite WHO guidance on environmentally sustainable healthcare systems, progress remains limited in many regions. Community-centered approaches and indigenous knowledge are essential to designing effective solutions.



We can find climate-smart solutions that make the best use of local resources and expertise.

— Kiran Jobanputra, Climate Action Accelerator

DAY 1: KEY TAKEAWAYS

IV. Community Engagement and Surveillance

Climate change alters disease dynamics, with emerging threats such as floods and shifting weather patterns significantly increasing the risks of waterborne diseases like typhoid and cholera. To address these growing challenges, community-based approaches and adaptive surveillance systems are essential. Effective practices in this area include:

- **Niger's** wastewater monitoring for polioviruses enabled timely vaccination campaigns (Issifi Abdoukader Issifi Kollo, Centre de Recherche Médicale et Sanitaire (CERMES))
- **The Democratic Republic of Congo** applied One Health approaches to address zoonotic diseases and deforestation (Alessandra Falchi & Paloma Kiwan, University of Corsica)
- **Ivory Coast** highlighted challenges in wildlife surveillance, stressing the need for integration with human health systems (Arlette Dinde, Centre Suisse de Recherches Scientifiques en Côte d'Ivoire)

Behavioral change is central to preventive strategies. The conference explored framing environmentally damaging behaviors, such as overuse of energy and water, as addictions. Strategies similar to those used for tobacco control—denormalization and promoting positive alternatives—can help shift behaviors.



Viewing harmful environmental behaviors as addictions can help develop strategies for change.

— Daniele Zullino, Geneva University Hospitals

KEY OUTCOMES AND RECOMMENDATIONS

- 1 Ensure health considerations are embedded in global environmental treaties.
- 2 Establish a Science-Policy Panel similar to the IPCC. This panel should focus on chemicals, waste, and pollution to drive coordinated action.
- 3 Promote cities that enhance health and environmental sustainability.
- 4 Increase civil society and youth participation in advocacy and policymaking.
- 5 Enhance Risk Communication by tailoring clear, actionable messages focused on benefits rather than fear, to encourage positive behavioral changes.
- 6 Strengthen Chemical and Waste Management Regulations by shifting the burden of proof for safety to manufacturers and prioritize the precautionary principle.
- 7 Share best practices and develop waste management and energy efficiency frameworks, particularly in LMICs.
- 8 Address climate-related inequalities, with particular attention to vulnerable groups.
- 9 Develop mental health frameworks within climate response strategies.
- 10 Advocate for increased funding and technical support for sustainable healthcare initiatives.
- 11 Strengthen community involvement in developing surveillance and intervention systems.
- 12 Promote One Health and planetary health approaches to address interconnected environmental, animal, and human health challenges.
- 13 Invest in innovative surveillance technologies to address emerging risks.

DAY 2: KEY TAKEAWAYS



Geneva Health Forum Day 2 (Tuesday, May 28, 2024)

MIGRATION, HEALTH, AND EQUITY

The second day of the Geneva Health Forum featured four sessions focused on migration, health, and equity, addressing the health challenges faced by the 281 million international migrants globally. Mobility often exposes migrants to risks affecting their physical, mental, and social well-being. The forum provided a platform for stakeholders to discuss strategies to improve healthcare access for migrants and to engage in dialogue with key actors supporting migrant populations.



I. Challenges Faced by Migrants

A. Health Risks Across the Migration Process

Migrants and refugees, especially those in irregular situations, face significant barriers to accessing healthcare. These include language difficulties, stigmatization, and discriminatory health policies, all of which contribute to high morbidity and mortality rates.

PRE DEPARTURE PHASE

Lack of information on health risks and inadequate healthcare access in home countries; risks of exploitation and trafficking.

TRANSIT PHASE

Exposure to physical dangers, violence and extreme weather; challenges in social integration and accessing healthcare services.

SETTLEMENT PHASE

Need for managing chronic health conditions and ensuring long-term healthcare integration.

RETURN OR RESETTLEMENT PHASE

Complexities around healthcare access upon return of deportation, and the need for continuity of care across borders.

Health challenges for migrants vary depending on the stage of their journey. Common issues include:

- **Limited access to healthcare:** Administrative hurdles and discriminatory practices obstruct access, even in countries with universal health coverage (UHC), as seen in France, where over 50% of migrants face difficulties in using healthcare services.
- **Infectious diseases:** Migrants often experience heightened vulnerability to diseases like tuberculosis and malaria due to poor living conditions.
- **Mental health challenges:** Anxiety, depression, and post-traumatic stress disorder affect up to 40% of forcibly displaced individuals.
- **Gender-based violence and exploitation:** Women and unaccompanied minors are particularly at risk of trafficking and violence.
- **Internal migration challenges:** For example, in China, 300 million internal migrants face barriers to accessing healthcare despite mandatory health coverage laws.

DAY 2: KEY TAKEAWAYS

B. Health Systems: Challenges and Innovations

Addressing migrant health requires systemic reforms and tailored initiatives that enhance accessibility and equity. Case studies highlighted diverse challenges and responses:

- **Canada:** Barriers such as language and cultural differences persist despite health coverage for refugees. Independent refugee health clinics and community-based interventions have successfully improved access. *Annalee Coakley, University of Calgary*
- **France:** Health mediation programs assist migrants in navigating complex administrative systems and advocating for their health rights. *Nicolas Vignier, Hôpitaux Universitaires Paris Seine-Saint-Denis, AP-HP, Université Sorbonne*
- **Switzerland:** The Geneva University Hospitals (HUG) provide undocumented migrants with comprehensive services, including health promotion and palliative care, while training providers in culturally sensitive care. *Yves Jackson, Geneva University Hospital and University of Geneva*
- **United Kingdom:** Mobile units and anonymous vaccination campaigns have improved immunization rates among migrants who distrust healthcare systems. *Sally Hargreaves, St Georges University of London*

C. Frameworks and Tools

Innovative frameworks and tools were showcased as critical for improving healthcare access:

- **Educational initiatives:** Programs like “Boys on the Move” and “12 Questions and Answers on Sexual and Reproductive Health and Rights” (UNFPA, UNICEF) empower migrants with health-promoting knowledge regardless of the migration status or journey phase.
- **Humanitarian Service Points:** Established by the International Federation of Red Cross and Red Crescent Societies (IFRC), these provide first aid, mental health support, and connectivity along migration routes.
- **Digital tools:** PATH Initiatives in Ukraine responded to the internal migration crisis with innovative solutions like Health Access Points for essential services and mobile health teams for tuberculosis screening and COVID-19 vaccinations. These efforts reached tens of thousands of individuals and addressed urgent needs through flexible and adaptable healthcare delivery methods.

II. Ensuring Continuity of Care

Continuity of care is essential for migrants, particularly those living with chronic illnesses. However, mobility and fragmented healthcare systems pose significant challenges. Policy reforms since the COVID-19 pandemic have increased the involvement of health sectors in addressing migrant health.

A. Strategies to Ensure for Continuity of Care

- Leveraging digital tools for better access to health information and service delivery.
- Reinforcing humanitarian service points.
- Supporting refugee-led initiatives to empower migrants.
- Strengthening cross-border cooperation to address health needs at different stages of migration.
- Adopting circular migration models that allow migrants to return home with skills and resources to benefit their communities.

DAY 2: KEY TAKEAWAYS

B. Practices and Innovations

Strengthening health systems and research capacities is essential to improving the health of migrants. This includes training healthcare workers and policymakers, sharing evidence across borders and involving local communities.

COMMUNITY HEALTH INITIATIVES:

- Programs in countries such as Thailand, Bulgaria, and Uganda assess and upgrade health systems, generating significant engagement from national health ministries.
- The WHO's Global School on Refugee and Migrant Health, which trains policymakers and researchers, has been an essential initiative for fostering knowledge-sharing and collaboration. This training has reached over 20 countries and directly impacted 50,000 health professionals (Santino Severoni, WHO).
- The University of Geneva's first "InZone" open-studies certificate, aimed specifically at community health workers and individuals interested in community health in humanitarian settings. This program provides community health workers in refugee camps with the training they need to address medical deserts and improve health outcomes (Rafael Ruiz de Castaneda, Faculty of Medicine UNIGE).

MIGRANT-LED INITIATIVES:

- Community-based initiatives involving 16 million volunteers, including former migrants, to bridge cultural barriers and foster trust in healthcare provision, for example the Red Cross, which use the lived experiences of migrants and volunteers to build trust, bridge cultural gaps, and deliver services effectively.
- Programs such as "PPP" (Patients and Populations as Partners, Reinaldo Ortuno Gutierrez, MSF) and community volunteering efforts draw on lived experience to build trust and provide culturally appropriate care.

NATIONAL INITIATIVES

Several countries have integrated migrants into national health policies. To mention just a few:

- **Chile:** Launched a national action plan for migrant health services.
- **Colombia:** Granted universal health access to 5 million migrants and provided health insurance to 1.4 million.
- **Turkey:** Added 1,000 healthcare facilities to serve Syrian refugees.
- **Uganda:** Included 1.4 million refugees in its national health system.



There is demand; if you put forward concrete tools and opportunities for development, there is a response.

— Santino Severoni, World Health Organization (WHO)

DAY 2: KEY TAKEAWAYS

III. Collaboration and Policy Development

Robust partnerships among public institutions, NGOs, civil society, and the private sector are critical for effective migrant health interventions.

Collaborative frameworks such as the WHO Global Action Plan, Global Compact on Refugees, and Global Compact for Migration are paving the way for more integrated, multisectoral approaches to healthcare (Santino Severoni, WHO).

Note that 98% of financial resources for research on migrant health are channeled to institutions in high-income countries, to the detriment of local low-income communities who are directly confronted with these issues.

The United Nations and the Organization for Migration (IOM) emphasize multi-sectoral collaboration, involving immigration authorities, labor sectors, and the private sector, to improve health service delivery for migrants. IOM's strategy focuses on protecting populations on the move and improving the resilience and preparedness in health systems. Examples include health services along migration pathways in North Africa and the establishment of a Migration Health Network in the Philippines.

IV. Data and evidence-based approaches

The sessions emphasized the importance of generating high-quality data to inform policies. Collaboration among sectors, local communities, and international organizations is essential to bridge silos and address the complex health challenges faced by migrants.

A WHO survey in 2022 showed that only 35% of countries have integrated migrant health data within their national health information systems.

The concentration of research funding in high-income countries limits the potential for local solutions.

Countries need to focus on improving data quality, data accessibility, and policy formulation that considers the unique contexts of both migrants and refugees.

Engaging all relevant stakeholders, from local communities to international organizations, will be essential in making meaningful progress.

KEY TAKEAWAYS

- 1 Continuity of Care:** A survivor-centered approach that integrates health promotion, disease prevention, and timely access to services is crucial.
- 2 Political Commitment:** Greater resource allocation and policy collaboration are needed to meet the healthcare needs of migrants.
- 3 Empowerment and Inclusion:** Policies must address social determinants of health, empowering migrants through education, digital tools, and advocacy.



The systems need to be co-designed with the communities they seek to serve.

— Annalee Coakley, University of Calgary

DAY 3: KEY TAKEAWAYS



Geneva Health Forum (Wednesday, May 27, 2024)

TOWARDS THE ELIMINATION OF MALARIA

The third day of the Geneva Health Forum focused on strategies, challenges, and innovative approaches to eliminating malaria.



KEY FACTS

The malaria elimination strategy adopted by the World Health Assembly in 2015, updated in 2021, aims for a 90% reduction in malaria incidence and mortality rates and the elimination of malaria in 35 countries by 2030.

As of 2024, 17 countries, including Azerbaijan and Cabo Verde, are certified malaria-free.

However, in 2022, malaria caused 680,000 deaths and 249 million infections worldwide.

I. Tools and Innovations for Malaria Control

A. Insecticide-treated bed nets:

Tools like bed nets have played an important role in reducing malaria cases across sub-Saharan Africa, with the Global Fund distributing over 200 million nets globally. Over the past 30 years, bed nets have become widely available throughout malaria-affected regions of sub-Saharan Africa.

B. Indoor Residual Spraying (IRS):

Current repellents remain unsuitable for vulnerable populations, such as young children and pregnant women, prompting further collaboration to develop safer alternatives. Additionally, new insecticides and diagnostic tools such as glucose-6-phosphate dehydrogenase (G6PD) deficiency testing and tafenoquine have been pivotal in adapting malaria elimination strategies to local contexts.

C. Vaccines

The World Health Organization (WHO) recommends two vaccines, RTS,S and R21, targeting children in high-risk areas. These vaccines have shown promising results, reducing severe malaria cases by 30% and all-cause mortality by 33% in pilot trials. Their introduction in countries such as Ghana, Kenya, and Malawi demonstrates their potential.

While these vaccines represent a historic breakthrough, they are not a “silver bullet.” A comprehensive strategy combining both traditional and innovative tools is vital to eliminate malaria. The challenge now is increasing vaccine production, ensuring equitable access, and integrating the vaccines into holistic public health systems to achieve the goal of malaria elimination.



Malaria eradication is ambitious, achievable, and ultimately incredibly necessary.

— Scott Filler, The Global Fund

DAY 3: KEY TAKEAWAYS

II. Challenges and Strategies

Treatment Resistance and Funding

Resistance to insecticides and antimalarial drugs remains a significant challenge. Unpredictable funding further complicates efforts. The Medicines for Malaria Venture (MMV) has developed 15 medicines over 25 years, saving over 15 million lives, but sustained investment is critical.

Diagnostics and Localized Strategies

In countries like India, mixed infections and underdiagnosis hinder elimination efforts. Improved diagnostics, such as PCR testing and digital surveillance systems, have shown significant promise, with digital systems in Mandla district and Daman reducing malaria cases by 91%.

Community Engagement and Advocacy

Countries that have successfully reduced malaria—such as Sri Lanka and Cabo Verde—have prioritized political commitment, community engagement, and robust health systems. Localized interventions, such as targeted vector control and bed net distribution, have proven effective in conflict zones and remote areas.

Mass Strategies and Innovations

Mass strategies like mass drug administration (MDA), targeted drug administration, and reactive interventions

are essential in high-burden areas. For example, MDA in Kidiri Province, Democratic Republic of Congo, during an emergency in 2020, rapidly reduced mortality and morbidity.

Innovative tools such as genetic engineering to control mosquito populations are also under discussion. While promising, this technology raises ethical and environmental concerns, particularly regarding biodiversity risks.

Addressing Vulnerable Populations - Pregnant Women

Despite recommendations for intermittent preventive treatment (IPT) for pregnant women, completion rates remain low across sub-Saharan Africa. Advocacy efforts must address gaps in access and uptake of these lifesaving interventions.

Addressing Vulnerable Populations - Climate Change and Migration

Climate change exacerbates malaria transmission, particularly in regions with porous borders and high migration rates. Cross-border collaboration, such as between Brazil, Suriname, and French Guiana, is critical for controlling outbreaks.

III. Prevention of Malaria Re-establishment

Countries certified malaria-free face the risk of re-establishment due to migration and importation of cases, as seen in Greece. WHO recommends maintaining technical expertise and robust surveillance systems to prevent reintroduction. Continuous funding and political commitment are essential to sustain elimination efforts.



Achieving elimination is not the end of the fight. Due to importation, there is a risk of re-establishment.

— Elkhan Gasimov, World Health Organization (WHO)

DAY 3: KEY TAKEAWAYS

IV. Partnerships and Sustainable Financing

Global collaboration, involving entities like the Global Fund, GAVI, and the African Vaccine Manufacturer Accelerator, is essential to support national priorities and ensure adequate vaccine supply.

The Swiss Malaria Group is one example of a partnership, bringing together partners from different sectors (pharmaceutical industry, NGOs, government, research institutions, academia) to convince the Swiss government of the importance of continued investment into the fight against malaria.

Key Partnerships

Partnership Focus	Example	Outcome
Research and development	MMV, PATH, and GSK collaboration for vaccine and drug development	New medicines and vaccines developed, saving 15 million lives
Field implementation	MSF-led MDA in DRC	Reduced malaria mortality and morbidity
Community involvement	Red Cross' COVID-19 and malaria bed net distribution network	Reached 190 million with bed nets during pandemic

Policy and Community Engagement

Strong political will and multisectoral coordination are prerequisites for malaria elimination. Initiatives like “[Zero Malaria Starts With Me](#)” ensure malaria remains a political priority. Community-driven approaches, supported by technological innovation, are instrumental.

Examples include Tanzania’s larval source management and Kenya’s use of the Connected Diagnostics app, which provides policymakers with real-time data from malaria tests.

Community surveillance has to be strong, full access to all malaria-related services has to be in place, and, of course, there should be involvement, engagement, and support. For example, [Seed Global Health](#) is an organization that focuses on supporting and training community health workers.



We often say we need communities to have a space at the decision-making tables, but also on these global stages.

— Yacine Djibo, Speak Up Africa, Roll Back Malaria

KEY TAKEAWAYS

Achieving malaria elimination requires:

- 1 Multifaceted Approaches:** A combination of vaccines, diagnostics, innovative treatment, community engagement, and cross-border collaboration.
- 2 Sustained Financial and Political Support:** Ongoing investment and political commitment are essential, along with community-driven strategies and ethical frameworks for innovations like genetic engineering.

- 3 Adaptation to Local Contexts:** Climate change and regional challenges require tailored approaches, and strong leadership in national malaria programs is key to ensuring progress.

Eliminating malaria by 2030 is an ambitious but achievable goal. It requires sustained political commitment, adequate funding, innovative tools, and community-driven solutions. As highlighted during the forum, collaboration across sectors and borders is essential to overcoming the remaining challenges and ensuring a malaria-free future.

GHF 2024 CONFERENCE - SATELLITE EVENTS



Safeguarding Health from Climate Change: Uniting for Resilience and Action

Climate change is the biggest global health threat of the 21st century. It transcends environmental paradigms, encompassing vital public health dimensions. The escalation of extreme weather phenomena—heatwaves, floods, droughts, wildfires—ushers in substantial health risks to humanity. These climatic adversities disproportionately burden vulnerable communities and amplify existing health disparities.

This symposium convened an alliance of global stakeholders, including environmental health experts, climate scientists, public health leaders, government officials, and others, to share the latest knowledge and experiences. They discussed the health impacts of climate change, with a particular emphasis on vulnerable populations, and explored adaptation and mitigation strategies within the context of carbon neutrality, aiming to safeguard population health and well-being.



Tuesday, May 28, 2024

11:00-13:30

Fairmont Grand Hotel,
Geneva, Switzerland

Co-organizer: Vanke
School of Public Health
(Tsinghua University,
Beijing, China)



<https://conference2024.genevahealthforum.com/satellite-symposium-vanke-school/>



Launch of The Lancet Regional Health-Europe Series: 'Addressing Migration and Health Inequity in Europe'

This lunchtime session was organized on the launch day of The Lancet Regional Health-Europe Series on 'Addressing migration and health inequity in Europe'. This Series is co-chaired by Professor Bernadette Kumar and Professor Karl Blanchet, co-Chairs of the Lancet Migration European Regional Hub.

Dr Pooja Jha, Editor-in-Chief of The Lancet Regional Health - Europe introduced the Series and Professor Kumar, Professor Blanchet, and Professor Hargreaves presented various papers within the Series. The themes spanned widely - from vaccine equity to racism and discrimination, and universal health coverage. There was an opportunity at the end of the presentations to engage in a lively discussion about the current state of health equity research, policy and practice among refugee and migrant groups in Europe, and sharing of good practices for an equitable way forward.



Tuesday, May 28, 2024

12:45-13:45

Campus Biotech,
Chem. des Mines
9, 1202, Geneva,
Switzerland

Organizer: The Lancet
Migration European
Regional Hub



GHF 2024 CONFERENCE – SATELLITE EVENTS



Accelerating Action Against Vector-Borne and other Infectious Diseases in a Changing World

Vector-borne diseases, like dengue, malaria, and other infectious diseases, including neglected tropical diseases (NTDs), are being exacerbated by climate change, demographic shifts, and other environmental factors in today's rapidly changing world. The battle against these diseases underscores the critical role of innovation in developing new tools, treatments, and strategies for disease management and prevention.

A distinguished panel of experts discussed the need for continued innovation to address these diseases and the value of multi-stakeholder strategic partnerships – across the value chain – to ensure delivery to more patients and communities.



Wednesday, May 29, 2024

8:00-9:20

Campus Biotech,
Chemin des Mines
9, 1202 Geneva,
Switzerland

Co-organizer: IFPMA



<https://conference2024.genevahealthforum.com/conference-2024-satellite-symposium-ifpma/>



Non-Communicable Disease Management During Conflict — Lessons from Ukraine

Ukraine's ageing population and lifestyle changes significantly contribute to the rising incidence of non-communicable diseases (NCDs). Public health initiatives that promote healthy lifestyles, improve early detection, and provide effective treatment are essential to mitigate these trends and enhance the quality of life for Ukrainians. The symposium featured expert panels and discussions that highlighted the health challenges posed by Ukraine's high NCD burden, the impact of the war, and the need for adequate funding to ensure equitable access to health care for the most vulnerable populations in Ukraine. The discussions built on the experience of the Act4Health Project, organized by GFA Consulting, in collaboration with the Geneva University Hospitals (HUG), the Swiss Agency for Development and Cooperation (SDC), and the WHO Country Office in Ukraine.



Wednesday, May 29, 2024

14:00-18:00

Fairmont Grand Hotel,
Geneva, Switzerland

Co-organizers: GFA Consulting, Geneva University Hospitals, WHO Country Office in Ukraine, Ministry of Health of Ukraine, Swiss Agency for Development and Cooperation (SDC)



<https://conference2024.genevahealthforum.com/gfa-consulting/>

CURRENT CHALLENGES

The Current Challenges sessions are interactive, workshop-style discussions led by GHF partners. These sessions address pressing issues aligned with the World Health Assembly (WHA) agenda and the overarching conference theme of “Health as a Common Good.”

In total, 12 sessions were held at the Campus Biotech Innovation Park. These sessions explored a diverse range of topics, including strategies for the elimination of neglected tropical diseases (NTDs), the humanitarian-development nexus, the application of One Health principles in humanitarian contexts, and addressing gender biases in research and development (R&D).

For the complete list and details of the 12 Current Challenges sessions, please refer to the conference programme:



<https://conference2024.genevahealthforum.com/programme/>



RESEARCH AWARDS



Grand Jet d'Or



Date and time: Monday, May 27,
18:00-18:30

Supported by: AXA Research Fund

Prize: Grand Jet d'Or (50,000 Euros)

The Grand Jet d'Or award supports research projects focusing on health treatment, measurements, data utilization, and community involvement to address pollution-related health issues.

Winner: Exposure Sciences, Department of Occupational and Environmental Health, Center for Primary Care and Public Health (Unisanté), University of Lausanne.



Science Speed Talks - PhD Contest



Date and time: Wednesday, May 29,
18:00-18:45

Supported by: Swiss School of Public
Health (SSPH+)

Prize: Jet d'Or Award (1,000 CHF)

Four doctoral candidates had three minutes each to present their research in the clearest and most compelling manner to the audience. The audience then voted for the presentation deemed the most remarkable.

Winner: Benedicta Apuamah, Management Center Innsbruck (Austria): Acceptability of Sexual Reproductive Health Services Amongst Refugee Women in Tyrol, Austria.



RESEARCH AWARDS



Jets d'Or awards for the Best Scientific Posters

Fondation privée des **HUG**

Date and time: Wednesday, May 29, 19:15-19:45

Supported by: Fondation Privée des HUG

The “Jets d'Or for Research” rewards the top two scientific posters (1,000 CHF each).

Jet d'Or du meilleur Poster Scientifique

Winner: **Mvodo Meyo Elise Stephanie**, University of Buea (Cameroon): Innovative Community-Based Teaching Methods: One Health Water Africa (OHWA) Field School 2022 and 2023

Jet d'Or Coup de Cœur

Winner: **Menéndez Carmen**, Geneva Sustainability Centre, International Hospital Federation (Switzerland): Hospitals' sustainability maturity revealed by the Sustainability Accelerator Tool (SAT)



Clinical Research Award on Neglected Tropical Diseases

Date and time: Wednesday, May 29, 19:15-19:45

Supported by: Fondation Anne Maurer-Cecchini

The Anne Maurer-Cecchini Foundation supports research on neglected tropical diseases by rewarding a clinical or epidemiological research project carried out on these diseases, in order to enable its continuation.

The 2024 Award was attributed to an important research study on leprosy conducted in Comoros and Madagascar

Winner: **E. Hasker, Y. Assoumani, A. Randrianantoandro** at al. (Institute of Tropical Medicine, Antwerp, the National Tuberculosis and Leprosy Control Program, Comoros, the National Leprosy Control Program, Madagascar and others):

Publication: Post-exposure prophylaxis in leprosy (PEOPLE): a cluster randomised trial



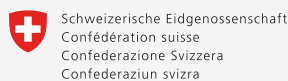
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