

Center for Vaccine
Ethics and Policy



Center for Vaccine Ethics & Policy (CVEP)
Vaccines and Global Health: The Week in Review
30 May 2026 :: Issue 847

This weekly digest targets news, events, announcements, articles and research in the vaccine and global health ethics and policy space and is aggregated from key governmental, NGO, international organization and industry sources, key peer-reviewed journals, and other media channels. This summary proceeds from the broad base of themes and issues monitored by the Center for Vaccine Ethics & Policy in its work: it is not intended to be exhaustive in its coverage.

Vaccines and Global Health: The Week in Review is published as a PDF and scheduled for release each Saturday [U.S.] at midnight [0000 GMT-5]. The PDF is posted at <https://centerforvaccineethicsandpolicy.net>. This blog allows full text searching of over 27,000 entries.

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Milestones, Perspectives

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Ebola – Bundibugyo virus disease (BVD) – PHEIC/PHECS

Disease Outbreak News (DONs)

[29 May 2026 | Ebola disease caused by Bundibugyo virus, Democratic Republic of the Congo & Uganda](#)

29 May 2026

Situation at a glance

The Bundibugyo virus disease (BVD) outbreak in the Democratic Republic of the Congo and Uganda continues to evolve rapidly, with increasing case numbers, geographic spread, and ongoing cross-border transmission. As of 27 May, a total of 906 suspected cases and 223 deaths among suspected cases have been reported in the Democratic Republic of the Congo. As of 29 May, a total of 134 confirmed cases, including nine in Uganda, with 18 deaths among the confirmed cases, have been reported across both countries. This is an additional 49 confirmed cases, eight confirmed deaths, 160 suspected cases and 47 suspected deaths since the last update on 21 May. In addition, there is one confirmed case, an individual from the United States of America, who had treated patients in the Democratic Republic of the Congo and is currently receiving care in Germany.

In the Democratic Republic of the Congo, transmission is concentrated in Ituri, as well as North Kivu and South Kivu provinces, with challenges in contact tracing and follow-up, insecurity, inadequate isolation, care, and referral systems for patients complicating response efforts. National authorities, in collaboration with WHO and partners, are implementing response measures including deployment of rapid response teams, delivery of medical supplies, strengthened surveillance, laboratory confirmation, infection prevention and control, the set-up of safe and optimized treatment centers, and community engagement.

Description of the situation

Since the last [Disease Outbreak News](#) was published on 21 May 2026, the number of suspected and confirmed cases has increased rapidly in the Democratic Republic of the Congo. In total, 906 suspected cases, including 223 deaths among suspected cases have been reported from Democratic Republic of the Congo; and 134 confirmed cases (nine in Uganda), including 18 deaths (one in Uganda) (CFR 14%) have been reported from the two countries as of 29 May. Additionally, a medical doctor from the United States of America who was exposed as part of their work caring for patients in the Democratic Republic of the Congo tested positive on 17 May and was transported to Germany for treatment and care.

Figure 1. Distribution of suspected and confirmed cases of Bundibugyo virus disease in Democratic Republic of the Congo and Uganda, as of 29 May 2026

... WHO risk assessment

On 22 May 2026, WHO assessed the risk of the outbreak of BVD to be very high at the national level in the Democratic Republic of the Congo, high at the regional level, and low at the global level. The risk assessment will be continuously reassessed in the coming days based on available and shared information.

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[Experts convened by WHO advise on candidate treatments and vaccines for Ebola disease caused by Bundibugyo virus](#)

28 May 2026 *News release* Geneva

In response to the current outbreak of Ebola disease caused by Bundibugyo virus occurring in the Democratic Republic of the Congo, with cases also reported in Uganda, **WHO convened several of its expert and advisory groups. These groups assessed potential vaccines and therapeutics for both prevention and treatment of Bundibugyo virus disease (BVD).**

The WHO advisory groups recommended that all the products identified and considered be used exclusively within clinical trials to generate robust data and ensure safe, ethical, and effective research. WHO convened a series of meetings with the WHO R&D Blueprint technical advisory groups on candidate vaccines and therapeutics for BVD.

In parallel, WHO also convened the Strategic Advisory Group of Experts on Immunization (SAGE) and its Ebola vaccine working group to advise on the potential role of licensed Ebola vaccines during BVD outbreaks.

Key recommendations

There are currently no licensed therapeutics or vaccines specifically approved for the prevention and treatment of BVD. Nevertheless, **WHO advisory groups considered several candidate products that are promising enough to warrant prioritization for evaluation in clinical trials. WHO is now working closely with the governments of the Democratic Republic of the Congo and Uganda to facilitate the implementation of research evaluation of these products.**

For treatment of cases:

- For treatment, the independent experts recommended prioritizing three candidate therapeutics for evaluation in research (i.e. clinical trials) among confirmed BVD cases: the monoclonal antibodies **MBP134 and Maftivimab®**, as well as the antiviral **remdesivir**.
- Combination therapy using a monoclonal antibody and remdesivir is also recommended for evaluation.
-

For prevention of cases:

- For post-exposure prophylaxis among contacts of confirmed and probable cases, the oral antiviral obeldesivir was determined to be a priority candidate, although experts noted that this approach depends on effective contact tracing, which remains operationally challenging in some of the affected areas of the Democratic Republic of the Congo. Research on post-exposure prophylaxis involves giving tablets of obeldesivir to contacts of cases to evaluate whether this prevents them from developing Ebola disease.
- **The most promising candidate vaccine was determined by the experts to be the single-dose rVSV Bundibugyo vaccine** (being developed by the International AIDS Vaccine Initiative or IAVI). **The development of this single-dose vaccine candidate will likely require 7–9 months before it is ready to be assessed through a clinical trial for its ability to prevent BDV.**
- **Another candidate vaccine, ChAdOx1 Bundibugyo (being developed by Oxford University/Serum Institute of India) could potentially become available within 2–3 months for efficacy assessment through a clinical trial.** However, additional animal data are still required to support and confirm further prioritization. Experts noted that a single-dose vaccine approach of this candidate could be suitable for contacts of Ebola cases, whereas a two-dose strategy might be considered for high-risk but unexposed populations such as health-care workers and frontline responders.
- The convened experts also reviewed the potential role of Ervebo, the only licensed Ebola vaccine. It is approved for use during outbreaks caused by the most common Ebola virus in Africa, from the *Orthoebolavirus family*. Ervebo is not licensed for prevention of BVD and evidence on cross-protection to other Ebola virus species remains limited and inconclusive. **WHO recommends that Ervebo should not be used outside carefully designed**

research settings, to allow for its performance against BDV to be assessed.

Ensuring ethical and safe clinical trials

WHO, the governments of the Democratic Republic of the Congo and Uganda, the Africa Centres for Disease Control and Prevention (Africa CDC), the ANRS Emerging infectious diseases (French National Agency for Research on AIDS and Viral Hepatitis), and other scientific partners are working together to develop and implement appropriate protocols to assess the safety and efficacy of the prioritized therapeutics through clinical field trials.

WHO calls for accelerated access to essential supplies, stronger community protection, engagement and trust, and coordinated investment in the research, development and evaluation of BVD countermeasures.

All research must adhere to the highest ethical standards, under the leadership of the national health authorities and in close consultation with affected communities.

In the meantime, our priority is to stop transmission with tools that we have used for decades of Ebola responses, which include disease surveillance, rapid testing and diagnosis, contact tracing, isolation and care for patients, infection prevention and control, community engagement, and safe and dignified burials.

Background

The WHO R&D Blueprint is a global initiative that allows the rapid activation of research and development activities during epidemics. Its aim is to fast-track the availability of proven effective tests, vaccines, and medicines that can be used to save lives and avert large-scale crises. SAGE is the principal advisory group to WHO for vaccines and immunization. It is charged with advising WHO on overall global policies and strategies, ranging from vaccines and technology, research and development, to delivery of immunization and its linkages with other health interventions.

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[Message by the WHO Director-General to the people of the Democratic Republic of the Congo](#)

Statement 28 May 2026

To the people of DRC, especially to the people of Ituri
Jambo kwenu wakahaji wa Ituri
Mbote na bino, bato ya Ituri

My name is Tedros, and I am the Director-General of the World Health Organization (WHO). But today, I am not writing to you as an official. I am writing to you as someone who knows your region, who has walked your streets, and who cares deeply about what happens to you and your families. I am writing because I want to be with you in these moments. And I want you to know that you are not alone.

Ebola is not new to me personally. From 2018 to 2020, I came fourteen times to North Kivu, the epicentre of the outbreak at that time. Fourteen visits to Beni, Butembo, Katwa, Goma, and many other communities. During that outbreak, Ebola spread across North Kivu, South Kivu, and reached parts of Ituri as well. I was alongside families who had lost their loved ones. I met health workers risking their lives every day. I met community leaders, traditional healers, religious leaders and business leaders who refused to abandon their people. I saw men and women show extraordinary courage in the most difficult of circumstances. The people there, who saw me coming back again and again, wanted to give me a name that belonged to their community. They asked me whether I was the first, second, or third

child of my parents. When I told them I was the firstborn, they gave me the name Dr Paluku. I carry that name with pride. It is not just a name. It is a bond. It is a reminder that this work is not about titles or institutions. It is about people. It is about you.

That outbreak was one of the most complex in history. It did not unfold in a stable, peaceful environment. It happened in the middle of armed conflict, with communities displaced, supply routes disrupted, and health workers operating under constant threat. People were fleeing violence while also trying to protect themselves and their families from a deadly disease. I remember being in Beni on more than one occasion while fighting was taking place on the outskirts of the city. We could hear it. And yet the health workers around me did not stop. They kept working. That kind of courage is something I will never forget. The challenges of that time are not so different from what you are facing today in Ituri. I understand that. I have seen it with my own eyes.

Mistrust ran deep, and the security situation cost us precious time. Our health workers were attacked. Clinics were targeted. People who were only trying to save lives found themselves caught in the middle of a conflict they did not start. Lives were lost that we might have saved, and that weighs on me still. But I also witnessed something remarkable. When we listened, when communities felt respected and heard, things began to change. Trust grew slowly, then more quickly. People came forward. And together, we managed to contain the outbreak. We did it. The people of DRC did it. I will never forget that.

Ebola is now back. This time, the outbreak is hitting Ituri province the hardest. More than 90% of all cases have been reported in Ituri province, with a small number of cases also reported in North Kivu and South Kivu. I know how frightening that is, and I know that the people of Ituri are bearing a burden that is not easy to carry.

I know that many of you are exhausted. You are already carrying so much: malaria, hunger, insecurity, and the daily struggle to keep your families safe. And now Ebola. It is not fair, and I will not pretend otherwise.

But I also want to say something else about Ituri, because this province deserves to be seen for more than its hardships. Ituri is a place of remarkable energy. It is a province of vibrant commerce, of entrepreneurial spirit, of communities that have refused to be defined by the conflicts around them. The markets of Bunia buzz with life. Traders, farmers, teachers, and young people building their futures against all odds. That spirit, that refusal to give up, is exactly what we need now. It is the foundation on which we will build our response. We do not come to Ituri with only medicine and expertise. We come to join a community that already knows how to fight for its survival.

I want to say a special word to the young people of Ituri. You are growing up in circumstances that no young person should have to face. And yet what I see, again and again, is not despair but determination. You are the future of this province and this country. In this outbreak, you have a vital role to play. Talk to your friends and your families. Share what you know about Ebola. Help break the fear and the silence that allow this virus to spread. Your voice carries further than you know, and we need it now more than ever.

And to the health workers of Ituri, I want to say this: you are seen, and you are not alone. Every day you go to work knowing the risks, and you go anyway. You do it for your patients, for your communities, for your families. You are the backbone of this response. Without you, none of this is possible. I know the conditions are hard. I know the resources are often not enough. I know that fear and exhaustion are real. Please know that WHO stands with you, that we are working to get you the support you need, and that your courage and dedication are known and deeply valued far beyond the borders of this province.

I also know that the security situation in parts of this region remains very difficult. Conflict and displacement make everything harder, including reaching people who need care and keeping health workers safe. I want to be honest: this is one of our greatest challenges.

We cannot do this work if those who are trying to help are prevented from doing so or put in danger. We are working closely with all relevant partners to ensure that the response can reach every community that needs it, and that no one is left behind because of where they live or what is happening around them.

That is why today I am making a direct appeal to all warring parties in this region: please, declare a ceasefire. Even briefly. Even just enough to let health workers through. People are dying from Ebola who do not have to die. Children are sick. Families are suffering. No cause, no conflict, no grievance is worth condemning innocent people to death from a preventable disease. A ceasefire, even a temporary one, would save lives. I urge you, I implore you: give us the space to help the people who need it most.

I also know that there is anger and mistrust in some communities, and I understand why. Trust must be earned, it cannot be assumed. We have not always done things correctly. But I promise you, we are here to learn as much as we are here to help.

I need to be honest with you about something important. Most previous Ebola outbreaks in DRC were caused by a virus called Ebola Zaire, for which we have vaccines and treatments. **This outbreak is caused by a different virus called Ebola Bundibugyo. There are currently no approved vaccines or treatments for it. This is serious, and you deserve to hear that plainly. But I also want you to know this: while there are no specific treatments for Bundibugyo, there is much we can do together to prevent the spread of this virus and save lives.** Early supportive care in our treatment centers can make a real difference. If you or someone you know falls ill, please do not wait. Coming forward early can make the difference between life and death. And everything we do, we will do with you. We will listen to you, we will share information with you, and we are here to help. And for those we cannot save, we will mourn with you. We will help you grieve your lost loved ones with safe and dignified burials.

We are working under the leadership of the Government of DRC, together with all relevant partners, united around one goal: to stop this outbreak and protect your communities. No one is working alone. No one is working at cross purposes. We are coordinated, we are committed, and we are here.

That is why I am coming to Bunia. I will be there in person, alongside my colleagues, meeting your leaders, listening to your concerns, and doing everything in my power to help you. I will not be managing this from a comfortable office far away.

This is the 17th Ebola outbreak in DRC. Together, you have overcome every single one before. That is not a small thing. That is a testament to the strength and resilience of your communities. I have seen that strength with my own eyes.

My brothers and sisters of Ituri, I want you to know that the world is watching your courage. You are not forgotten. Together, we will overcome this outbreak, as you have overcome every challenge before. Your resilience is the light that guides us all. We will get through this one too. Not because of anyone, but because of you.

Our teams are already on the ground, and they will stay for as long as necessary. And when this outbreak is over, we will not quietly disappear. We will not forget you. We will stay, and we will keep working with you to build health systems that protect every person in every community.

I look forward to seeing you in Bunia soon. Until then, please know that you are in my thoughts.

With respect and solidarity,
Paluku
Tedros
Tedros Adhanom Ghebreyesus
Director-General, World Health Organization

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WHO Guidance/Technical Publications

28 May 2026

[WHO Technical Advisory Group on therapeutics prioritization for Bundibugyo virus disease: meeting report, 20 and 26 May 2026](#)

28 May 2026

Overview

This meeting report summarizes discussions of the WHO Research and Development (R&D) Blueprint Technical Advisory Group on Therapeutics Prioritization regarding candidate therapeutics for Bundibugyo virus disease (BVD) during the ongoing Public Health Emergency of International Concern.

The meetings reviewed available evidence on antivirals and monoclonal antibodies intended for treatment and post-exposure prophylaxis (PEP) against Bundibugyo virus (BDBV), with particular attention to products currently in development. Evidence from preclinical studies, clinical safety data, pharmacokinetic considerations and experience from Ebola virus disease and other filovirus outbreaks informed the assessment process.

The report evaluates remdesivir, obeldesivir, MBP-134, maftivimab and Inmazed as potential candidates for clinical research. Remdesivir and obeldesivir demonstrated antiviral activity and supportive preclinical evidence, while MBP-134 and maftivimab showed broad neutralizing activity and promising efficacy in animal models.

The Technical Advisory Group prioritized MBP-134, maftivimab and remdesivir for inclusion in clinical trials for BVD, including investigation of combination therapy involving remdesivir and monoclonal antibodies. For post-exposure prophylaxis, the oral antiviral obeldesivir was prioritized for clinical evaluation.

28 May 2026

[WHO Technical Advisory Group on candidate vaccine prioritization: meeting report, 19 and 25 May 2026](#)

Overview

This meeting report summarizes the deliberations and recommendations of the WHO Technical Advisory Group on Candidate Vaccine Prioritization (TAG-CVP) regarding candidate vaccines for the rapidly evolving outbreak of Bundibugyo virus disease (BVD) caused by Orthoebolavirus bundibugyoense in the Democratic Republic of the Congo and Uganda.

Convened following the declaration of a Public Health Emergency of International Concern in May 2026, the TAG-CVP reviewed the epidemiological situation, the characteristics of available and pipeline vaccine candidates, and options for evaluating vaccines in outbreak settings. The report describes evidence presented on BDBV-specific vaccine candidates under development by IAVI and the University of Oxford, as well as data on potential cross-protection from existing Ebola virus vaccines.

The document outlines the criteria used by the TAG-CVP to assess candidate vaccines, including safety, potential efficacy, availability and implementation considerations. It summarizes available preclinical and clinical evidence for recombinant vesicular stomatitis virus and ChAdOx1 vaccine platforms, including challenge studies in non-human primates and immunogenicity findings.

The report presents consensus recommendations concerning the prioritization of homologous BDBV-specific vaccines and possible pre- and post-exposure study strategies.

28 May 2026

[WHO emergency guidance on the use of licensed Ebola virus vaccine during Bundibugyo virus disease outbreaks, 28 May 2026](#)

Overview

This emergency guidance document outlines the World Health Organization (WHO) position on the use of the licensed Ebola virus vaccine Ervebo® during outbreaks of Bundibugyo virus disease (BVD) caused by Bundibugyo virus (BDBV). Issued in the context of the 2026 Public Health Emergency of International Concern, the document reviews available evidence regarding potential cross-protection of Ervebo®, which is licensed for Ebola virus disease caused by Ebola virus (EBOV), against BDBV infection. WHO assessed preclinical and clinical immunological evidence, operational and ethical considerations, and implications for public confidence and outbreak response.

The review concludes that current evidence on cross-protection against BDBV is very limited and insufficient to determine or reliably estimate vaccine effectiveness. Existing studies suggest possible partial heterologous immune responses, but findings are inconsistent and based primarily on small nonhuman primate studies and laboratory immunological analyses. WHO therefore recommends that Ervebo® should not be used programmatically in response to BDBV outbreaks outside controlled research settings.

The document emphasizes that outbreak control should continue to rely on established public health measures, including surveillance, contact tracing, clinical management, infection prevention and control, and community engagement, while calling for accelerated development and evaluation of BDBV-specific and broadly protective filovirus vaccines.

28 May 2026

[WHO guidance for mass gathering events attended by individuals from areas with documented Bundibugyo virus detection, May 2026](#)

Overview

This WHO guidance provides updated recommendations for the planning and management of mass gathering events attended by individuals from areas with documented Bundibugyo virus disease (BVD) transmission.

Issued in the context of the 2026 epidemic in the Democratic Republic of the Congo and Uganda, the document replaces the 2014 interim guidance developed for Ebola virus disease outbreaks and reflects changes in virus taxonomy, epidemiology and available medical countermeasures. It outlines the specific characteristics of Bundibugyo virus disease, including transmission patterns, incubation period, clinical presentation and the absence of licensed vaccines or approved therapeutics.

The guidance sets out preparedness and response measures for event organizers and public health authorities before, during and after mass gatherings. It emphasizes the importance of risk assessment, event-based surveillance, screening procedures, referral pathways, infection prevention and control measures, and coordination under the International Health Regulations (2005).

Particular attention is given to early detection, laboratory confirmation through RT-PCR testing, isolation of suspected cases, risk communication and cross-border collaboration for contact tracing. The document also includes operational considerations for participant information, public health messaging and post-event evaluation to support evidence-based management of health risks associated with international gatherings during BVD outbreaks.

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AFRICA CDC

[African Leaders Mobilise Funding and Regional Response as Ebola Outbreak Escalates](#)

Press Release

Addis Ababa, Ethiopia, 25 May 2026 – Delays in mobilising resources and scaling up the response to the ongoing Bundibugyo Ebola outbreak could lead to wider regional transmission and greater loss of life, African leaders and global health partners warned on Tuesday.

The warning comes amid indications that the outbreak affecting the Democratic Republic of the Congo (DRC) and Uganda could become the second-largest Ebola outbreak after the 2014 West Africa epidemic that impacted several countries.

During a high-level virtual ministerial briefing convened by the Africa Centres for Disease Control and Prevention (Africa CDC) and the African Union, **leaders backed a continental preparedness and response plan requiring at least US\$319 million between June and November 2026 to strengthen outbreak control in affected countries and preparedness in at least 11 high-risk African Union member states.**

It was also revealed that **nearly US\$500 million had been committed or pledged by governments,** multilateral agencies and humanitarian partners. Africa CDC Director General Dr Jean Kaseya warmly welcomed the strong show of support, describing it as an important demonstration of global solidarity and commitment to addressing this critical challenge.

He said the next step under the joint Incident Management Support Team (IMST) would be to work with partners to validate the pledges, clarify the balance between new financing, repurposed resources, in-kind contributions and country-level allocations, and ensure that resources are directed toward the priority actions identified in the joint response plan...

[Health Leaders Endorse Coordinated Action and Continuity of Essential Services During Ebola Response](#)

KAMPALA, Uganda, 23 May 2026 – African health leaders and global partners have agreed to **strengthen regional coordination and resource mobilisation to contain the ongoing Bundibugyo Ebola outbreak** affecting the Democratic Republic of the Congo (DRC) and Uganda, while also safeguarding essential services such as education and routine healthcare, including continued efforts to contain cholera, measles and other outbreaks on the continent.

The commitments were endorsed during a high-level ministerial cross-border coordination meeting convened in Kampala by the Director General of the Africa Centres for Disease Control and Prevention (Africa CDC), Dr Jean Kaseya, together with ministers of health from the DRC, Uganda and South Sudan, alongside the World Health Organization (WHO), UNICEF, the United Nations Population Fund (UNFPA) and technical partners.

The meeting focused on strengthening surveillance, harmonising preparedness measures across borders, sustaining frontline services and reinforcing regional solidarity in the face of a growing outbreak.

Leaders stressed that the outbreak is unfolding in a region characterised by intense cross-border movement, insecurity and limited access to approved vaccines or therapeutics for the Bundibugyo strain, underscoring the importance of a coordinated regional response.

Speaking during a media briefing after the meeting, Dr Kaseya said the scale and trajectory of the outbreak required sustained continental solidarity and coordination...

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Europe

[ECDC increases activities as Ebola outbreak in DRC and Uganda intensifies](#)

European Centre for Disease Prevention and Control

27 May 2026

As the Ebola disease outbreak in the Democratic Republic of the Congo (DRC) and Uganda develops rapidly, the European Centre for Disease Prevention and Control (ECDC) is ratcheting up its support on

the ground, while continuing to emphasise that the risk of infection to the general population in Europe remains very low.

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USA

Department of State

Media Note

[Ebola Response Update – May 29, 2026](#)

May 29, 2026

[Excerpt]

The Department of State, in close coordination with the U.S. Centers for Disease Control and Prevention (CDC), is continuing to mount a rapid and comprehensive response to the Ebola outbreak in the Democratic Republic of the Congo (DRC) and Uganda...

On May 28, the United States, Mexico, and Canada issued the following statement:

“The United States, Mexico, and Canada have announced aligned public health travel measures for individuals coming from African regions at greatest risk from the Ebola virus. This coordinated approach aims to protect our citizens and the millions of visitors, fans, athletes, and tourists expected during the FIFA World Cup 2026™, while maintaining travel and commerce across our borders. The health and safety of every person in the region remains our highest priority as we welcome the world to North America.”

The Department of State issued a Worldwide Caution on May 28 with updated information on arrival restrictions and Ebola screening. The caution states that U.S. citizens and U.S. nationals who have been present in the DRC, Uganda, or South Sudan within 21 days of arrival in the United States must only enter through designated airports for enhanced screening. Travelers are advised to review the U.S. CDC information on what travelers need to know about returning to the United States from DRC, Uganda, and South Sudan for the list of designated airports.

The Department of State issued an updated health alert for U.S. citizens in Uganda on May 28 reiterating the recommendation against travel, providing information on border closures, and sharing CDC’s update to its Travel Health Notice from Level 1 to Level 2 (Practice Enhanced Precautions)...

CDC

[Update on Ebola Outbreak in the Democratic Republic of the Congo and Uganda, 5/29/2026](#) *[transcript]*

Kaiser Family Foundation/KFF [30 May 2026]

https://www.kff.org/search/?post_type=press-release

[New Ebola Quarantine Rule Bars Entry of Noncitizens, Including Green Card Holders, from Affected Countries](#)

May 29, 2026 *Quick Insights*

The rule is significantly more restrictive than approaches used to mitigate risks during past Ebola outbreaks and creates a standing administrative authority that may allow the CDC to quickly issue suspensions or place strict restrictions on entry of any noncitizen, including lawful permanent residents, under situations it deems to be high-risk public health emergencies in the future.

[Kenyan court orders suspension of US Ebola quarantine facility](#)

The Hill, by Laura Kelly - 05/29/26 11:12 AM ET

A court in Kenya on Friday blocked the government from permitting the U.S. to establish a quarantine facility for Americans exposed to Ebola virus, which is spreading in northeastern Congo.

The decision comes amid growing public backlash in the country to an announced U.S. plan, with critics accusing the Kenyan government of trading the country's biosecurity for foreign aid from the Trump administration.

A U.S. official told reporters Thursday that the Trump administration expected to open a 50-bed field hospital Friday at the Laikipia Air Base in Kenya to host Americans suspected of being infected with Ebola.

But the ruling by the High Court in Nairobi put a stop to those plans until petitions against it are heard on June 2.

The petition was filed by the Katiba Institute, a civil society organization focused on defending the Kenyan Constitution. The institute said in a statement that the discussions over establishing the U.S. facility "raises grave constitutional concerns regarding the rights to life, health, fair administrative action, public participation, and parliamentary oversight."...

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Gavi

[Gavi commits US\\$ 50 million to Bundibugyo Ebolavirus vaccines and outbreak response](#)

29 May 2026

:: Gavi's First Response Fund will make up to US\$ 40 million available to enable accelerated access to investigational doses and, eventually, approved vaccines

:: A further US\$10 million will support outbreak response and protection of routine immunisation services in impacted countries

:: Dr Sania Nishtar, Gavi CEO: "We need to act now to ensure that, once one or more vaccine candidates are ready, manufacturers are in a position to start producing doses at scale."

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World Bank

[Response to Ebola Outbreak in Democratic Republic of Congo \(DRC\) and Uganda](#)

May 28, 2026 *Factsheet*

How is the World Bank Group responding to the Ebola Outbreak?

The World Bank Group is responding swiftly to the Ebola outbreak in the Democratic Republic of Congo (DRC) and Uganda. We are drawing on our investments in health preparedness — and the financing tools built specifically for moments like this — to help countries contain the outbreak and protect vulnerable communities.

Our focus is on the people most at risk: the communities facing the outbreak, the health workers responding to it, and the governments working to contain it.

Mobilizing financing and technical support

Our immediate priority is to help ensure that financing and technical support can be mobilized rapidly to support frontline response efforts, reinforce health systems, and strengthen surveillance and cross-border preparedness.

- **Frontline response support** - Getting resources to the people responding to the outbreak, including for health workers, surveillance systems, and community engagement teams doing

the hard work of containment on the ground.

- **Health system reinforcement** - Strengthening the local and national health systems that communities depend on — including laboratory capacity, referral pathways, and supply chains.
- **Surveillance and cross-border preparedness** - Supporting fast case detection and public health interventions that are the foundation of containment, including reinforcing preparedness in neighboring countries at risk of spread.

Private sector capacity

The World Bank Group is following up with private sector clients to assess the impact of the outbreak on operations, including access to routine healthcare and products, as well as the private sector's capacity to scale up production and delivery of high-demand products such as Personal Protective Equipment (PPE), diagnostics, and specific treatment options.



Gates Foundation

[Gates Foundation Ebola Response Funding Announcement](#)

Press Releases & Statements

May 23, 2026

We are deeply concerned by the Bundibugyo Ebola outbreak affecting communities in the Democratic Republic of Congo and Uganda. Our thoughts are with the families who have lost loved ones, the communities facing uncertainty, and the frontline health workers, laboratory teams, responders, and community volunteers working under extremely difficult conditions to protect lives.

No single country or institution can contain an outbreak alone, especially when there are risks of cross-border spread. **The governments of DRC and Uganda, together with Africa CDC, WHO, and regional partners, are leading critical efforts to contain the outbreak and strengthen regional preparedness and cross-border coordination. We strongly support the “one plan, one budget, one team” African-led response** partners have endorsed, focused on rapid containment and operational coordination.

The Gates Foundation is committing an initial \$15 million in emergency funding to support this response through trusted institutions already working on the ground. The funding is designed to place the majority of resources as close to affected countries and communities as possible:

- :: \$5 million to Africa CDC for regional coordination, rapid deployment, and cross-border surveillance;
- :: \$5 million to WHO AFRO for frontline operational support to countries; and
- :: \$5 million to WHO Headquarters to support rapid procurement, diagnostics, and surge logistics for critical response commodities.

The foundation also supports collaboration between Africa CDC and WHO AFRO through the Joint Emergency Action Plan (JEAP), a framework designed to strengthen coordination and provide governments with more unified emergency support during health crises. This outbreak underscores the importance of leveraging that partnership so countries receive coordinated and timely support rather than fragmented parallel responses.

The foundation continues to support the development of vaccines, therapeutics, and diagnostics, including through our funding to CEPI, the Coalition for Epidemic Preparedness Innovations. However, because there are currently no approved vaccines or therapeutics for Bundibugyo Ebola, the immediate priority is rapid detection, strong public health measures, protection of frontline workers, and coordinated action to stop transmission as quickly as possible.

In an outbreak, every day matters. Early coordination and rapid action are the difference between containment and wider regional spread. We will continue working closely with governments, Africa CDC, WHO, and other partners to monitor the evolving situation and assess where additional support may be needed in the coming weeks.

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Polio – PHEIC

[Polio this week](#) [27 May 2026]

Headlines [Selected]

A Ray of Hope in a Divided World

In a week marked by intense geopolitical discussions, Judith Diment, Vice-Chair of Rotary International’s PolioPlus Committee, reflects on one remarkable reality: despite divisions, the world remains united behind polio eradication. Her reflections explore what polio can teach us about cooperation, civil society and the future of global health. [More](#).

Horn of Africa and Yemen strengthen push to end polio

On the sidelines of last week’s World Health Assembly, countries from the Horn of Africa and Yemen reaffirmed their commitment to stopping variant poliovirus transmission through stronger cross-border coordination, surveillance and synchronized action. In one of the world’s most interconnected epidemiological settings, regional collaboration remains essential to reaching every child and stopping transmission for good. [More](#).

Summary of new polioviruses this week:

- :: Afghanistan: one WPV1 case and eleven WPV1-positive environmental samples
- :: Madagascar: one cVDPV1 case
- :: Nigeria: three cVDPV3 cases
- :: Somalia: two cVDPV2 cases and three cVDPV2 environmental samples
- :: South Sudan: one cVDPV1 case

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Contents [click to move among sections]

- :: [Milestones, Perspectives](#)
- :: [WHO](#)
- :: [U.S. Immunization and Public Health Governance/Policy/Funding](#)
- :: [Organization Announcements](#)
- :: [Journal Watch](#)
- :: [Pre-Print Servers](#)
- :: [Think Tanks](#)
- :: [Public Consultations/Call for Inputs/Call for Papers](#)

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WHO & Regional Offices [30 May 2026]

<https://www.who.int/news>

Selected News/Announcements/Statements

29 May 2026 *Departmental update*

[WHO Global Code of Practice on the International Recruitment of Health Personnel amended](#)

29 May 2026 *News release*

[WHO urges governments to protect young people from addiction to tobacco and nicotine products](#)

28 May 2026 *News release*

[Experts convened by WHO advise on candidate treatments and vaccines for Ebola disease caused by Bundibugyo virus](#)

28 May 2026 *Statement*

[Message by the WHO Director-General to the people of the Democratic Republic of the Congo](#)

28 May 2026 *Departmental update*

[Adapting the global research agenda to local contexts](#)

28 May 2026 *Departmental update*

[WHO issues first recommendation on doxycycline post-exposure prophylaxis to help prevent sexually transmitted infections](#)

26 May 2026 *Departmental update*

[Global health leaders reaffirm commitment to Immunization Agenda 2030](#)

25 May 2026 *Departmental update*

[The World Health Assembly adopts updated Global Action Plan on Antimicrobial Resistance \(2026–2036\)](#)

25 May 2026 *Departmental update*

[High-level meeting reaffirms shared commitment to strengthen cross-border collaboration and accelerate elimination of malaria and neglected tropical diseases](#)

25 May 2026 *Departmental update*

[How integrating tradition and self-care has strengthened public health in the Americas](#)

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WHO Vaccines and Immunization [IVB]

https://www.who.int/health-topics/vaccines-and-immunization#tab=tab_1

News

28 May 2026 *News release*

[Experts convened by WHO advise on candidate treatments and vaccines for Ebola disease caused by Bundibugyo virus](#)

26 May 2026 *Departmental update*

[Global health leaders reaffirm commitment to Immunization Agenda 2030](#)

During the Seventy-ninth World Health Assembly (WHA), held from 18 to 23 May 2026, Member States and global health partners reaffirmed commitment to the Immunization Agenda 2030 (IA2030), recognizing vaccines as one of the most powerful, cost-effective and equitable public health interventions.

More than 70 Member States and regional groups, alongside non-State actors, technical partners and professional associations, voiced strong support for the [IA2030 Mid-Term Review](#), under WHA [agenda item 12.3](#), emphasizing that strong immunization programmes remain the foundation of outbreak preparedness, resilient health systems and long-term health security.

As global health systems confront mounting pressures from conflict, climate shocks, economic instability, and declining trust in science, Member States called for sustainable country-led immunization programmes, deeper integration with primary health care systems, and more targeted support from global health agencies and partners, particularly for fragile, vulnerable and conflict-affected settings...

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WHO Regional Offices

Selected Press Releases, Announcements

WHO African Region AFRO

:: 25 May 2026

[**Sherif Omoniyi: malaria vaccination champion in Nigeria**](#)

WHO Region of the Americas PAHO

:: 27 May 2026

[**PAHO and Mundo Sano Foundation sign agreement to strengthen disease elimination and cervical cancer prevention in the Americas**](#)

Madrid, Spain, 27 May 2026 (PAHO) — The Pan American Health Organization (PAHO) and Mundo Sano Foundation today signed a technical cooperation agreement to strengthen efforts to eliminate mother-to-child transmission of diseases and advance cervical cancer prevention in the Americas. The agreement was signed by Jarbas Barbosa, Director of PAHO...

WHO South-East Asia Region SEARO

No new digest content identified.

WHO European Region EURO

No new digest content identified.

WHO Eastern Mediterranean Region EMRO

No new digest content identified.

WHO Western Pacific Region

No new digest content identified.

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WHO - Emergency situation reports

Latest WHO official reports for emergency situations. Latest WHO official reports for emergency situations.

No new digest content identified.

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Disease Outbreak News (DONs)

Latest WHO Disease Outbreak News (DONs), providing information on confirmed acute public health

[**29 May 2026 | Ebola disease caused by Bundibugyo virus, Democratic Republic of the Congo & Uganda**](#)

[28 May 2026 | Hantavirus outbreak linked to cruise ship travel, Multi-locations](#)

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Weekly Epidemiological Record

<https://www.who.int/publications/journals/weekly-epidemiological-record>

vol. 101, 18 [full issue] 29 May 2026

<https://iris.who.int/server/api/core/bitstreams/5a7e6a5d-2810-476a-a808-b62024b73728/content>

:: Meeting of the Strategic Advisory Group of Experts on Immunization, March 2026: conclusions and Recommendations

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New WHO Publications

<https://www.who.int/publications>

Selected

29 May 2026

[Recommendations for the preparation, characterization, establishment and use of WHO international biological reference standards \(2026\)](#)

28 May 2026

[WHO Technical Advisory Group on therapeutics prioritization for Bundibugyo virus disease: meeting report, 20 and 26 May 2026](#)

28 May 2026

28 May 2026

[WHO Technical Advisory Group on candidate vaccine prioritization: meeting report, 19 and 25 May 2026](#)

Overview

28 May 2026

[WHO emergency guidance on the use of licensed Ebola virus vaccine during Bundibugyo virus disease outbreaks, 28 May 2026](#)

Overview

28 May 2026

[WHO guidance for mass gathering events attended by individuals from areas with documented Bundibugyo virus detection, May 2026](#)

Overview

26 May 2026

[WHO practical manual on meningitis diagnosis, treatment and care](#)

26 May 2026

[Contingency fund for emergencies: 2025 annual report](#)

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Africa

Africa CDC [30 May 2026]

<https://africacdc.org/>

Press Releases, Statements [Selected]

[Journal of Public Health in Africa Expands with New Rapid Communications, Policy and News Sections](#)

29 May 2026

Press Releases

[African Leaders Mobilise Funding and Regional Response as Ebola Outbreak Escalates](#)

26 May 2026

[Health Leaders Endorse Coordinated Action and Continuity of Essential Services During Ebola Response](#)

25 May 2026

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China – CDC+

National Health Commission of the People's Republic of China [30 May 2026]

<http://en.nhc.gov.cn/>

News

No new digest content identified.

National Medical Products Administration – PRC [30 May 2026]

<http://english.nmpa.gov.cn/>

News

No new digest content identified.

China CDC

CCDC Weekly Reports: Current Volume (8)

<https://weekly.chinacdc.cn/article/current>

2026 Vol. 8 No. 22

[PDF of this issue](#)

:: [Notifiable Infectious Diseases Reports](#)

[Reported Cases and Deaths of National Notifiable Infectious Diseases – China, April 2026*](#)

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Europe

European Centre for Disease Prevention and Control

<https://www.ecdc.europa.eu/en>

News/Updates/Reports/Publications [Selected]

[Strengthening public health intelligence through data analytics and artificial intelligence](#)

28 May 2026

With so many public health events developing and emerging, it is increasingly important to strengthen public health intelligence to ensure timely detection, assessment and response to potential public health threats. This was the goal of the hybrid meeting on data analytics and artificial

intelligence (AI) for public health intelligence hosted by the European Centre for Disease Prevention and Control (ECDC), which brought together international experts to advance innovation and collaboration in the field.

[ECDC increases activities as Ebola outbreak in DRC and Uganda intensifies](#)

27 May 2026

As the Ebola disease outbreak in the Democratic Republic of the Congo (DRC) and Uganda develops rapidly, the European Centre for Disease Prevention and Control (ECDC) is ratcheting up its support on the ground, while continuing to emphasise that the risk of infection to the general population in Europe remains very low.

European Medicines Agency [EMA]

<https://www.ema.europa.eu/en/news>

News & Press Releases

[ETF recommends updating COVID-19 vaccines to target XFG variant](#)

Updated vaccines will help maintain protection against disease as virus continues to evolve

29 May 2026

[EU recommendations for 2026/2027 seasonal flu vaccine composition](#)

Annual updates to virus strains ensure vaccines stay effective

26 May 2026

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India

National Centre for Disease Control

Directorate General of Health Services, Ministry of Health & Family Welfare

Announcements

No new digest content identified.

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[90.6% hospital births, 96% plus vaccinations: NFHS-6 reflects India's "accelerated progress" in family health parameters](#)

The Economic Times, India May 29, 2026, 11:13:00 PM IST

... The release said that India continues to make strong progress towards universal immunization coverage.

"Full vaccination coverage among children age 12-23 months based on vaccination cards, increased from 83.8% to 87.1%. 95.6% of children received most vaccinations through public health facilities reaffirming the trust of community towards public healthcare system," the release said.

"Any vaccine received by children age 12-23 months remains consistently high above 96%, while substantial improvement has been recorded across major vaccines. Substantial increase has been recorded in rotavirus vaccination coverage from 36.4% to 85.4%. Coverage of the second dose of measles-containing vaccine also increased significantly from 58.6% to 71.8%," the release added...

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U.S. Immunization and Public Health Governance/Policy/Funding

Given the continuing extraordinary situation in the U.S., we have established a separate section of the digest to capture and organize key content. Please note that we will selectively include external analysis and comment, either boxing or indenting this content under the relevant organization/action. We recognize that despite the volume of content in this section, this summary is indicative and not exhaustive

**Executive Branch - White House, State, HHS, FDA, CDC+
White House**

Presidential Actions – Executive Orders; Memoranda; Proclamations

REALIGNING UNITED STATES CORE CHILDHOOD VACCINE RECOMMENDATIONS WITH BEST PRACTICES FROM PEER, DEVELOPED COUNTRIES

Executive Orders May 29, 2026

By the authority vested in me as President by the Constitution and the laws of the United States of America, it is hereby ordered:

Section 1. Purpose and Policy. Pursuant to the Presidential Memorandum of December 5, 2025 (Aligning United States Core Childhood Vaccine Recommendations with Best Practices from Peer, Developed Countries) (Memorandum), the Department of Health and Human Services (HHS) completed a scientific assessment that compared United States childhood immunization recommendations with those of peer nations, analyzed vaccine uptake and public trust, evaluated clinical and epidemiological evidence and knowledge gaps, and examined vaccine mandates (scientific assessment). The scientific assessment found that the United States currently recommends more childhood vaccines than any peer nation, including more than twice as many vaccine doses as some European nations, and identified a set of consensus vaccines that are consistently recommended in all peer countries. The scientific assessment also found that, instead of implementing vaccination mandates, most peer nations maintain high childhood vaccination rates through public trust and education.

My Administration is committed to ensuring that Americans are receiving the best scientifically supported medical advice in the world. Additionally, my Administration is committed to protecting religious liberty and parental authority. **Therefore, it is the policy of the United States that the core childhood vaccine schedule should be aligned with scientific evidence and best practices from peer, developed countries while preserving access to vaccines currently available to Americans and that the Federal Government will continue to protect religious freedom and enforce all legal protections for parents.**

Sec. 2. Updating the Childhood Vaccine Schedule.

(a) The scientific assessment, with its proposed updates to the categories of the vaccine schedule, is acknowledged as a guiding resource for the Federal Government.

(b) The Centers for Disease Control and Prevention (CDC) and its Advisory Committee on Immunization Practices (ACIP) shall review the scientific assessment and the latest clinical data and, to the extent permitted by law, **take any appropriate steps to update the United States childhood and adolescent vaccine schedule. ACIP's review should consider ways to provide maximum flexibility to parents and doctors through recommendations for timing and sequencing of the administration of routine immunizations.**

(c) **Each executive department and agency shall ensure all actions, regulations, funding, and coverage related to child and adolescent immunizations align with the schedule recommended by the ACIP and adopted by the CDC**, including fulfilling all legal obligations with respect to parental authority, religious freedom, disability accommodations, and equal protection under the law. Specifically, consistent with the Memorandum and as recommended in the scientific assessment, all the immunizations that are in any category on the schedule recommended by the ACIP

and adopted by the CDC should continue to be covered without cost sharing by private insurance and covered by Medicaid, the Children's Health Insurance Program, and the Vaccines for Children Program.

(d) The HHS Director of the Office of Intergovernmental and External Affairs shall ensure that State government and health officials are informed of the policies in this order and should ensure that the scientific assessment is available as a resource to inform their consideration of State vaccination laws.

Sec. 3. General Provisions. (a) Nothing in this order shall be construed to impair or otherwise affect:

(i) the authority granted by law to an executive department or agency, or the head thereof; or
(ii) the functions of the Director of the Office of Management and Budget relating to budgetary, administrative, or legislative proposals.

(b) This order shall be implemented consistent with applicable law and subject to the availability of appropriations.

(c) This order is not intended to, and does not, create any right or benefit, substantive or procedural, enforceable at law or in equity by any party against the United States, its departments, agencies, or entities, its officers, employees, or agents, or any other person.

(d) The costs for publication of this order shall be borne by the Department of Health and Human Services.

DONALD J. TRUMP
THE WHITE HOUSE,

[Fact Sheet: President Donald J. Trump Realigns U.S. Core Childhood Vaccine Recommendations with Best Practices from Peer, Developed Countries](#)

The White House May 29, 2026

REALIGNING THE CHILDHOOD VACCINE SCHEDULE WITH INTERNATIONAL BEST

PRACTICES: Today, President Donald J. Trump signed an Executive Order to acknowledge a recent Department of Health and Human Services (HHS) scientific assessment on childhood vaccines as a guiding resource for the Federal Government. This scientific assessment can help to align the United States' childhood vaccine practices with scientific evidence and best practices from peer, developed countries.

- The Executive Order directs the Centers for Disease Control and Prevention (CDC) and its Advisory Committee on Immunization Practices (ACIP) to review the HHS scientific assessment, which included best practices from peer, developed countries for core childhood vaccination recommendations — vaccines recommended for all children — and take any appropriate steps to update the U.S. childhood and adolescent vaccine schedule.
- ACIP's review should consider ways to provide maximum flexibility to parents and doctors through recommendations for timing and sequencing of the administration of routine immunizations.
- All executive departments and agencies are directed ensure all actions, regulations, funding, and coverage related to child and adolescent immunizations fully align with the updated schedule recommended by the ACIP as a result of its consideration of the scientific assessment, and accordingly adopted by the CDC, while ensuring that Americans retain all of the access that they currently have to vaccines.
- The Order further directs HHS to ensure that State government and health officials are informed of the policies of the Federal government regarding child and adolescent immunizations and that the scientific assessment is available as a resource to inform their consideration of State vaccination laws.

ENSURING AMERICANS ARE RECEIVING THE BEST MEDICAL ADVICE IN THE WORLD: The HHS scientific assessment compared U.S. childhood immunization recommendations with those of peer nations, analyzed vaccine uptake and public trust, evaluated clinical and epidemiological evidence and knowledge gaps, and examined vaccine mandates.

- The scientific assessment found that the United States currently recommends more childhood vaccines than any peer nation, including more than twice as many vaccine doses as some European nations, and identified a set of consensus vaccines that are consistently recommended in all peer countries.
 - In 1980, American children following the CDC immunization schedule received 23 vaccine doses in 7 shots against 7 different diseases. In 2024, the recommended number of routine vaccines had risen to at least 84 vaccine doses in at least 57 shots for 17 diseases, plus the RSV monoclonal antibody immunization for a total of 18 diseases. This is more than other developed nations.
 - The scientific assessment recommends prioritizing 11 routine childhood vaccines, while preserving flexibility for parents and doctors to make individualized decisions for higher-risk children through shared clinical decision-making.
- The scientific assessment also found that, instead of implementing vaccination mandates, most peer nations maintain high childhood vaccination rates through public trust and education.
 - The U.S. is among a minority of peer nations with childhood vaccine mandates (enacted by individual U.S. states) for school entry.
- By signing today's Executive Order, President Trump is reaffirming his commitment to gold-standard science, ensuring Americans receive the best possible medical advice, and empowering patients and doctors with maximum flexibility.

MAKING OUR CHILDREN HEALTHY AGAIN: President Trump is committed to building a healthier future for America, starting with our youngest generation.

- In February, President Trump signed an Executive Order establishing the President's MAHA Commission, tasking the Commission with investigating and addressing the root causes of America's escalating health crisis—with an initial focus on childhood chronic diseases.
- The Trump Administration ended the blanket recommendation for all children to get the COVID-19 vaccine, updating its recommendation to be based on shared clinical decision-making between patients and clinicians.
- In May, the MAHA Commission released the *Make Our Children Healthy Again Assessment*, summarizing what is known and what questions remain regarding the childhood chronic disease crisis.
- In September, the MAHA Commission released *the Make Our Children Healthy Again Strategy*, a sweeping plan with more than 120 initiatives to reverse the failed policies that fueled America's childhood chronic disease epidemic. The strategy prioritized development of a vaccine framework that ensures America has the best childhood vaccine schedule.
- In December, President Trump signed a Presidential Memorandum to begin the process to align U.S. core childhood vaccine recommendations with best practices from peer, developed countries.

Department of State

Press Releases - Selected

Media Note

[Ebola Response Update – May 29, 2026](#)

May 29, 2026

[Excerpt]

The Department of State, in close coordination with the U.S. Centers for Disease Control and Prevention (CDC), is continuing to mount a rapid and comprehensive response to the Ebola outbreak in the Democratic Republic of the Congo (DRC) and Uganda...

On May 28, the United States, Mexico, and Canada issued the following [statement](#):

"The United States, Mexico, and Canada have announced aligned public health travel measures for individuals coming from African regions at greatest risk from the Ebola virus. This coordinated approach aims to protect our citizens and the millions of visitors, fans, athletes, and tourists expected

during the FIFA World Cup 2026™, while maintaining travel and commerce across our borders. The health and safety of every person in the region remains our highest priority as we welcome the world to North America.”

The Department of State issued a [Worldwide Caution](#) on May 28 with updated information on arrival restrictions and Ebola screening. The caution states that U.S. citizens and U.S. nationals who have been present in the DRC, Uganda, or South Sudan within 21 days of arrival in the United States must only enter through designated airports for enhanced screening. Travelers are advised to [review the U.S. CDC information on what travelers need to know about returning to the United States from DRC, Uganda, and South Sudan](#) for the list of designated airports.

The Department of State issued an updated [health alert](#) for U.S. citizens in Uganda on May 28 reiterating the recommendation against travel, providing information on border closures, and sharing CDC’s update to its Travel Health Notice from Level 1 to [Level 2 \(Practice Enhanced Precautions\)](#)...

HHS

Press Room - Selected

[Joint Statement with Argentina Health Minister](#)

Washington, D.C. — May 27, 2025

U.S. Health and Human Services Secretary Robert F. Kennedy, Jr. and Argentine Minister of Health Mario Lugones today issued the following joint statement regarding each country’s withdrawal from the World Health Organization (WHO):

“The WHO’s handling of the COVID-19 pandemic revealed serious structural and operational shortcomings that undermined global trust and highlighted the urgent need for independent, science-based leadership in global health.

“There are well-documented concerns regarding the early management of the pandemic and the risks associated with certain types of research. Rather than ensuring timely transparency, the WHO failed to provide critical access to information, impairing countries’ ability to act swiftly and effectively, with devastating global consequences.

“The absence of meaningful reforms, disproportionate financial demands, and the increasing politicization of the organization have ultimately led the United States and Argentina to withdraw from the WHO.

“The organization has shifted away from its founding mission, becoming increasingly reliant on voluntary contributions and vulnerable to the influence of non-scientific agendas. This diversion has distracted from addressing genuine public health threats.

“Withdrawal marks the beginning of a new path—toward building a modern global health cooperation model grounded in scientific integrity, transparency, sovereignty, and accountability. Our shared commitment is to cost-effective, evidence-based public health interventions that prioritize prevention, especially in children, by addressing root causes such as environmental toxins, nutritional deficiencies, and food safety standards.

“The United States’ Make America Healthy Again initiative is already showing historic progress. Deepening collaboration with partners who share these principles will drive innovation, reduce costs, and help build a stronger, healthier future. The Argentine government, for its part, inherited a devastated healthcare system and is now making rapid progress in rebuilding and strengthening it, with a renewed focus on transparency and quality care for all citizens.

“Real health threats demand urgency and gold-standard science. Under President Donald J. Trump, the United States is restoring a sovereign, results-driven approach—putting people above politics. Argentina, likewise, supports public health systems rooted in autonomy, transparency, innovation, and scientific rigor.

“We can no longer support a system that fails to protect our people or deliver on its mandate. The United States and Argentina invite all nations committed to scientific integrity, transparency, and the defense of human dignity to join us in shaping a new era of global health cooperation—one focused on results, sovereignty, and a safer future for all.”

NIH [to 30 May 2026]

<http://www.nih.gov/>

News Releases

No new digest content identified.

FDA

Press Announcements

No new digest content identified.

FDA CBER

What's New for Biologics

- 05/29/2026 [Frequently Asked Questions \(FAQs\): Electronic Submissions Program for CBER-Regulated Products](#)
- 05/29/2026 [COVID-19 Vaccines \(2026-2027 Formula\) for Use in the United States Beginning in Fall 2026](#)
- 05/28/2026 [BK261329- Erytra Eflexis](#)

FDA VRBPAC [Vaccines and Related Biological Products Advisory Committee]

Advisory Committee Calendar

[Vaccines and Related Biological Products Advisory Committee Meeting Announcement](#)

Date: June 18, 2026

FDA Pediatric Advisory Committee Meeting

Advisory Committee Calendar

No future meetings posted.

CDC

<http://www.cdc.gov/media/index.html>

Latest News - Selected

[Update on Ebola Outbreak in the Democratic Republic of the Congo and Uganda, 5/29/2026](#) [transcript]

CDC – Immunization Safety Office (ISO)

<https://www.cdc.gov/vaccine-safety-systems/about/cdc-monitoring-program.html>

No new digest content identified [last updated August 7, 2024]

ACIP

2026 Meetings Schedule

- ~~February 25-27~~ [Cancelled without notice; no agenda content posted]
- ~~March 18-19~~ [Cancelled without notice; no agenda content posted]
- June 24-25
- October 21-22

National Vaccine Advisory Committee (NVAC)

<https://www.hhs.gov/vaccines/about/index.html>

Upcoming Meetings/Latest Updates

No 2025-26 meeting dates posted.

Advisory Commission on Childhood Vaccines (ACCV)

<https://www.hrsa.gov/advisory-committees/vaccines/meetings>

Next ACCV meetings – TBD

MMWR Weekly

<https://www.cdc.gov/mmwr/index2026.html>

May 28, 2026 / No. 20

[PDF of this issue](#)

[:: Characteristics of Patients Hospitalized with Measles During an Outbreak — West Texas, January–March 2025](#)

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NSF

News

No new digest content identified.

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U.S. Congress

House

No new digest content identified.

Senate

No new digest content identified.

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Supreme Court, Federal & Appellate Courts

O’Neill Institute – Health Care Litigation Tracker [Georgetown University]

<https://litigationtracker.law.georgetown.edu/>

No new digest content identified.

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U.S. Medical, Scientific, Professional Societies; Health Organizations

This inventory is evolving and may not capture all instances of relevant comment and analysis.

American Academy of Family Physicians (AAFP)

<https://www.aafp.org/news/media-center.html>

(Accessed 30 May 2026)

No new digest content identified.

American Academy of Pediatrics (AAP)

<https://www.aap.org/en/news-room/news-releases-from-the-aap/>

(Accessed 30 May 2026)

News

No new digest content identified.

American College of Physicians (ACP)

<https://www.acponline.org/more-acp-news>

(Accessed 30 May 2026)

ACP News

No new digest content identified.

America's Health Insurance Plans (AHIP)

<https://www.ahip.org/news>

(Accessed 30 May 2026)

News

AHIP Statement on Vaccine Coverage

Press Release Updated as of May 2026 Published Sep 16, 2025

WASHINGTON – AHIP released the following statement regarding vaccine coverage.

"Health plans are committed to affordable access to vaccines, and AHIP member health plans will continue covering all ACIP-recommended immunizations with no cost-sharing through the end of 2027.

"Coverage decisions for immunizations are grounded in each plan's ongoing, rigorous review of scientific and clinical evidence and continual evaluation of multiple sources of data. These decisions reflect an operating environment shaped by federal and state laws, as well as program and customer requirements. The evidence-based approach to coverage of immunizations will remain consistent."

American Geriatrics Society (AGS)

<https://www.americangeriatrics.org/media-center>

(Accessed 30 May 2026)

Recent Press Releases

No new digest content identified.

American Medical Association (AMA)

<https://www.ama-assn.org/press-center>

(Accessed 30 May 2026)

Press Releases

May 30, 2026

AMA statement on EO directing CDC to assess childhood vaccine schedule

Statement attributable to: Bobby Mukkamala, MD, President, American Medical Association

"There is no credible scientific evidence to support changing the current childhood vaccine schedule. That schedule is built on decades of rigorous research and real-world data, and it is designed to protect children in the U.S. when they are most vulnerable based on our nation's disease burden.

"Altering it without clear, evidence-based justification risks continued confusion for parents and patients, undermining trust in vaccines, and ultimately lowering vaccination rates. That would put more children and communities at risk of preventable illness.

"Vaccines are one of the most effective tools in modern medicine. Decisions about their use must be guided by science, patient safety, and the expertise of unbiased physicians and public health experts—not by policy shifts that erode confidence in proven protections."

American Osteopathic Association (AOA)

<https://osteopathic.org/news/>

(Accessed 30 May 2026)

Latest News

No new digest content identified.

American Public Health Association (APHA)

<https://www.apha.org/news-and-media/news-releases?sortFieldName=ItemDate&sortDisplayName=Newest&sortMode=desc>
(Accessed 30 May 2026)

No new digest content identified.

Infectious Diseases Society of America (IDSA)

<https://www.idsociety.org/>
(Accessed 30 May 2026)

News

[Statement on decision to send Americans exposed to Ebola to Kenya](#)

The United States has already invested heavily in specialized treatment centers specifically designed to safely care for patients with Ebola and other dangerous infectious diseases.

Building and staffing a new unit in Kenya during an active outbreak for Americans exposed to Ebola is deeply concerning. It raises serious questions about resources, timing and the level of care Americans sent there will receive.

At a time when this outbreak is already challenging to contain, decisions should be guided by science, transparency and what is best for patients and public health. Americans facing exposure to a deadly disease deserve confidence that decisions about their care are being driven by evidence, preparedness and patient safety during an active outbreak.

— *Ronald G. Nahass, MD, MHCM, FIDSA — President, IDSA*

National Foundation for Infectious Diseases (NFID)

<https://www.nfid.org/news-updates/>
(Accessed 30 May 2026)

News and Updates

No new digest content identified.

National Medical Association (NMA)

<https://nmanet.org/blog/>
(Accessed 30 May 2026)

Latest News

No new digest content identified.

Pediatric Infectious Diseases Society (PIDS)

<https://pids.org/news-announcements/>
(Accessed 30 May 2026)

News & Announcements

No new digest content identified.

Society for Healthcare Epidemiology of America (SHEA)

<https://shea-online.org/news/>
(Accessed 30 May 2026)

No new digest content identified.

Society for Maternal-Fetal Medicine (SMFM)

<https://www.smfm.org/>

(Accessed 30 May 2026)

News

No new digest content identified.

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Civil Society – Individuals, Organizations, Institutions [Selected]

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Kaiser Family Foundation/KFF [30 May 2026]

https://www.kff.org/search/?post_type=press-release

New Ebola Quarantine Rule Bars Entry of Noncitizens, Including Green Card Holders, from Affected Countries

May 29, 2026 *Quick Insights*

The rule is significantly more restrictive than approaches used to mitigate risks during past Ebola outbreaks and creates a standing administrative authority that may allow the CDC to quickly issue suspensions or place strict restrictions on entry of any noncitizen, including lawful permanent residents, under situations it deems to be high-risk public health emergencies in the future.

Hantavirus Outbreak Revives COVID-Era False Health Claims — The Monitor

May 28, 2026 *Feature*

A hantavirus outbreak linked to a Dutch cruise ship in early May was followed by false health claims that mirror patterns documented in previous outbreaks. The Monitor also examines a new analysis of Americans' relationship with health and wellness influencers.

Global COVID-19 Tracker

May 27, 2026 *Tracker*

This tracker provides data on global COVID-19 cases and deaths by country, region, and income-level. Additionally, the tracker reports current closure, economic, and health system policy responses to the COVID-19 pandemic globally. This tracker will be updated as new data are available.

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Vaccine Integrity Project – CIDRAP [to 30 May 2026]

<https://www.cidrap.umn.edu/vaccine-integrity-project>

Announcements, Viewpoints

No new digest content identified.

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Center for Vaccine Ethics & Policy - GE2P2 Global Foundation [to 30 May 2026]

<https://centerforvaccineethicsandpolicy.net/>

No new digest content identified.

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Paul Offit, MD – Beyond the Noise

Substack: <https://pauloffit.substack.com/>

No new digest content identified.

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:: [Organization Announcements](#)

:: [Journal Watch](#)

:: [Pre-Print Servers](#)

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Organization Announcements

Paul G. Allen Frontiers Group [30 May 2026]

<https://alleninstitute.org/news-press/>

News

No new digest content identified.

Gates Foundation [30 May 2026]

<https://www.gatesfoundation.org/ideas/media-center>

Press Releases & Statements

[Gates Foundation Ebola Response Funding Announcement](#)

....The Gates Foundation is committing an initial \$15 million in emergency funding to support this response through trusted institutions already working on the ground. The funding is designed to place the majority of resources as close to affected countries and communities as possible:

CARB-X [30 May 2026]

<https://carb-x.org/>

News

No new digest content identified.

Chan Zuckerberg Initiative [30 May 2026]

<https://chanzuckerberg.com/newsroom/>

Newsroom

No new digest content identified.

CEPI – Coalition for Epidemic Preparedness Innovations [30 May 2026]

<http://cepi.net/>

CEPI News, Blog

News

No new digest content identified.

CIOMS – COUNCIL FOR INTERNATIONAL ORGANIZATIONS OF MEDICAL SCIENCES [to 30 May 2026]

<https://cioms.ch/>

News; Publications; Events

[New webinar on Reciprocal Effects of Drugs & the Microbiome](#)

10 June, 14:00 - 15:30 CEST (05:00 - 06:30 PDT / 08:00 - 09:30 EDT / 17:30 - 19:00 IST / 20.00 - 21.30 SGT / 21:00 - 22.30 JST) –

We are holding a webinar on Reciprocal Effects of Drugs & the Microbiome. This webinar will provide clinicians, pharmacovigilance experts, public health professionals, and regulators with an understanding of how drugs affect the microbiome and how the microbiome influences drug metabolism, with a focus on regulatory and pharmacovigilance implications. Webinar details and registration [here](#).

DARPA – Defense Advanced Research Projects Agency [U.S.] [30 May 2026]

<https://www.darpa.mil/news>

News

No new digest content identified.

DNDI – Drugs for Neglected Diseases Initiative [30 May 2026]

<https://dndi.org/press/press-releases/>

Press Releases

No new digest content identified.

Duke Global Health Innovation Center [30 May 2026]

<https://dukeghic.org/>

News

No new digest content identified.

EDCTP [30 May 2026]

<http://www.edctp.org/>

The European & Developing Countries Clinical Trials Partnership (EDCTP) aims to accelerate the development of new or improved drugs, vaccines, microbicides and diagnostics against HIV/AIDS, tuberculosis and malaria as well as other poverty-related and neglected infectious diseases in sub-Saharan Africa, with a focus on phase II and III clinical trials

News

No new digest content identified.

Emory Vaccine Center [30 May 2026]

<http://www.vaccines.emory.edu/>

Vaccine Center News

No new digest content identified.

European Vaccine Initiative [30 May 2026]

<http://www.euvaccine.eu/>

News

No new digest content identified.

Fondation Merieux [30 May 2026]

<http://www.fondation-merieux.org/>

Actualités

No new digest content identified.

Gates Medical Research Institute [30 May 2026]

<https://www.gatesmri.org/news>

News: Articles and Publications

No new digest content identified.

Gavi [to 30 May 2026]

<https://www.gavi.org/>

News Releases, Vaccines Work

29 May 2026

[Gavi commits US\\$ 50 million to Bundibugyo Ebola virus vaccines and outbreak response](#)

:: Gavi's First Response Fund will make up to US\$ 40 million available to enable accelerated access to investigational doses and, eventually, approved vaccines

:: A further US\$10 million will support outbreak response and protection of routine immunisation services in impacted countries

:: Dr Sania Nishtar, Gavi CEO: "We need to act now to ensure that, once one or more vaccine candidates are ready, manufacturers are in a position to start producing doses at scale."

29 May 2026

[DRC Ebola outbreak exposes community health gaps](#)

GE2P2 Global Foundation [30 May 2026]

www.ge2p2.org

News/Analysis/Publications-Digests/Statements/Digests

:: **[Vaccines and Global Health: The Week in Review](#)** - Current edition

:: **[Public Consultations Watch :: Global Calls for Input/Public Comment – 01 May 2026](#)**

GHIT Fund [30 May 2026]

<https://www.ghitfund.org/newsroom/press>

Press Releases

No new digest content identified.

Global Fund [to 30 May 2026]

<https://www.theglobalfund.org/en/news/>

News Releases

No new digest content identified.

Global Research Collaboration for Infectious Disease Preparedness [GloPID-R] [30 May 2026]

<https://www.glopid-r.org/>

News & Event

[GloPID-R coordinates research response to Ebola Bundibugyo disease outbreak in DRC](#)

GloPID-R and its members are intensifying their coordinated research response to the ongoing Ebola Bundibugyo outbreak in the Democratic Republic of the Congo (DRC), supported by a new real-time research tracking page developed within Pandemic PACT.

Hilleman Laboratories [30 May 2026]

<http://www.hilleman-labs.org/>

News & Insights

No new digest content identified.

HHMI - Howard Hughes Medical Institute [30 May 2026]

<https://www.hhmi.org/news>

Press Room

No new digest content identified.

Human Immunome Project [nee Human Vaccines Project] [30 May 2026]

<https://www.humanimmunomeproject.org/>

News

No new digest content identified.

IAVI [30 May 2026]

<https://www.iavi.org/>

Press Releases, Features

No new digest content identified.

INSERM [30 May 2026]

<https://www.inserm.fr/en/home/>

Press Releases

No new digest content identified.

International Coalition of Medicines Regulatory Authorities [ICMRA]

<http://www.icmra.info/drupal/en/news>

Selected Statements, Press Releases, Research

No new digest content identified.

ICH [International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use] [to 30 May 2026]

<https://www.ich.org/>

News/Pubs/Press Releases [Selected]

No new digest content identified.

ICRC [to 30 May 2026]

<https://www.icrc.org/en/news>

Latest press releases and statements

No new digest content identified.

IFFIm [30 May 2026]

<http://www.iffim.org/>

Press Releases/Announcements

No new digest content identified.

IFRC [to 30 May 2026]

<http://media.ifrc.org/ifrc/news/press-releases/>

Press releases

[Silent humanitarian crises deepen across Lebanon and Iran](#)

26/05/2026 | *Press release*

IPPS - International Pandemic Preparedness Secretariat [30 May 2026]

<https://ippsecretariat.org/news/>

News

No new digest content identified.

Institut Pasteur [30 May 2026]

<https://www.pasteur.fr/en/press-area>

Press Documents

Press release 29.05.2026

[UK and France launch landmark biomedical and AI health alliance to accelerate research into major diseases](#)

A new partnership will unite expertise, infrastructure and data across borders to accelerate diagnosis, treatment and ultimately prevention of major diseases – starting with women’s health, infectious diseases and pandemic preparedness.

InterAcademy Partnership (IAP)

<https://www.interacademies.org>

News

Tue, 26 May 2026

[Science Centres Across Africa Are Expanding Access to STEM Learning](#)

The InterAcademy Partnership (IAP) Science Education Programme has spent years working through national academies to strengthen science education, with a focus on inquiry-based learning and practical engagement with STEM. In Africa, this work has increasingly taken shape through the development of science centres and innovation spaces that bring science closer to classrooms, teachers and communities.

Across the continent, a new generation of science centres is emerging with support from IAP and its partners, including universities, ministries and national academies. These initiatives are creating spaces where science is experienced through experimentation, design and discovery rather than through textbooks alone...

ISC / International Science Council [to 30 May 2026]

<https://council.science/current/>

ISC is a non-governmental organization with a unique global membership that brings together 40 international scientific Unions and Associations and over 140 national and regional scientific organizations including Academies and Research Councils.

blog

[Call for collaboration: Shaping ISC action on freedom and responsibility in science | deadline: 12 June 2026](#)

ISC Members and Fellows are invited to collaborate on some of the most frequently requested topics for ISC action, including free movement of scientists, research integrity in the age of AI, and protection of science in times of crisis and conflict, among others.

The ISC's Committee for Freedom and Responsibility in Science (CFRS) is exploring five new initiatives, in response to issues and concerns raised by the scientific community:

- Free movement of scientists and visa restrictions affecting scientific exchange:
- Protecting science, scientists, and scientific infrastructure in times of crisis and armed conflict:
- Research integrity issues associated with the uptake of AI/LLMs:
- Responsible science advocacy action:
- Scientific responsibility and its relationship with scientific freedom

International Union of Immunological Societies (IUIS)

<https://iuis.org/>

News, Resources

No new digest content identified.

IVAC [30 May 2026]

<https://www.jhsph.edu/research/centers-and-institutes/ivac/index.html>

Updates; Events

No new digest content identified.

IVI [30 May 2026]

<http://www.ivi.int/>

IVI News & Announcements

No new digest content identified.

Johns Hopkins Center for Health Security [30 May 2026]

<https://centerforhealthsecurity.org/newsroom>

Center News [Selected]

No new digest content identified.

Robert Wood Johnson Foundation [to 30 May 2026]

<https://www.rwjf.org/en/about-rwjf/newsroom.html>

Latest News and Highlights

No new digest content identified.

MSF/Médecins Sans Frontières [to 30 May 2026]

<http://www.msf.org/>

Latest [Selected Announcements]

DRC Ebola outbreaks

[MSF statement on the occasion of WHO DG visit to Bunia, DRC](#)

Statement 30 May 2026

Democratic Republic of Congo

[Ebola disease in DRC: MSF scales up response to a rapidly evolving outbreak](#)

Project Update 29 May 2026

National Academies-Sciences-Engineering-Medicine [NASEM] - USA [to 30 May 2026]

<https://www.nationalacademies.org/newsroom>

News

Symposium

[The State of the Science Address 2026](#)

June 2, 2026

3:00 PM - 6:00 PM (EDT)

National Academy of Medicine - USA [to 30 May 2026]

<https://nam.edu/programs/>

News, Stories, Insights

[National Academy of Medicine Names 10 Scholars in Diagnostic Excellence for 2026](#)

Published May 28, 2026

The National Academy of Medicine (NAM) has selected 10 individuals for the 2026 class of the [NAM Scholars in Diagnostic Excellence program](#). This collaborative program in partnership with the Council of Medical Specialty Societies (CMSS) offers a one-year, part-time experience for exceptional health professionals to advance their diagnostic skills, make significant contributions to improve clinical diagnosis at the national level, and accelerate their career development as national leaders in the field.

PATH [30 May 2026]

<https://www.path.org/media-center/>

Newsroom [Selected]

[Pro Mujer and PATH announce strategic alliance to accelerate women-centered health innovation across Latin America](#)

The partnership will advance integrated health models, strengthen health systems, and mobilize scalable financing solutions to expand women's access to health care across the region.

May 27, 2026 by PATH

Sabin Vaccine Institute [30 May 2026]

<https://www.sabin.org/press/>

Latest News & Press Releases

No new digest content identified.

UNAIDS [30 May 2026]

<http://www.unaids.org/en>

News, Stories, Updates

No new digest content identified.

UNICEF [to 30 May 2026]

<https://www.unicef.org/media/press-releases>

Latest press releases, news notes and statements [Selected]

Press release 28 May 2026

[UNICEF's first international shipment of emergency Ebola response supplies arrives in Ituri, northeastern Democratic Republic of the Congo](#)

KINSHASA/DAKAR, 28 MAY 2026, – More than 100 metric tons of urgently needed and lifesaving humanitarian supplies have started to be airlifted and delivered by UNICEF to the Democratic Republic of the Congo (DRC) as part of the overall emergency response to the escalating Ebola outbreak, with support from the Europ...

Unitaid [30 May 2026]

<https://unitaid.org/>

News releases

No new digest content identified.

Vaccine Equity Cooperative [nee Initiative] [30 May 2026]

<https://vaccineequitycooperative.org/news/>

News

No new digest content identified. [Last update Jun 30, 2023]

Vaccine Confidence Project [30 May 2026]

<http://www.vaccineconfidence.org/>

News, Research and Reports

No new digest content identified.

Vaccine Education Center – Children's Hospital of Philadelphia [30 May 2026]

<http://www.chop.edu/centers-programs/vaccine-education-center>

News

[Vaccine Update Newsletter May 2026](#)

Wellcome Trust [30 May 2026]

<https://wellcome.org/>

News, Opinion, Reports

No new digest announcements identified.

The Wistar Institute [to 30 May 2026]

<https://www.wistar.org/news/press-releases>

Press Releases

No new digest announcements identified.

World Bank [to 30 May 2026]

<http://www.worldbank.org/en/news/all>

News [Selected]

[Response to Ebola Outbreak in Democratic Republic of Congo \(DRC\) and Uganda](#)

How is the World Bank Group responding to the Ebola Outbreak? The World Bank Group is responding swiftly to the Ebola outbreak in the Democratic Republic of Congo (DRC) and Uganda. We are

drawing...

Date: May 28, 2026 Type: Factsheet

Strengthening Health Systems in the Maghreb: Supporting Services and Reforms in Morocco and Tunisia

Development Challenge Geographical variations in access to services, limited human resources and financial sustainability of expanded health coverage are challenges for Morocco. Strengthening governance...

Date: May 26, 2026 Type: Result Brief

WFPHA: World Federation of Public Health Associations [30 May 2026]

<https://www.wfpha.org/>

Blog, Events

No new digest announcements identified.

World Medical Association [WMA] [30 May 2026]

<https://www.wma.net/news-press/press-releases/>

Press Releases

No new digest announcements identified.

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ARM [Alliance for Regenerative Medicine] [30 May 2026]

<https://alliancerm.org/press-releases/>

Selected Press Releases

No new digest announcements identified.

BIO [30 May 2026]

<https://www.bio.org/press-releases>

Press Releases

No new digest announcements identified.

DCVMN – Developing Country Vaccine Manufacturers Network [30 May 2026]

<http://www.dcvmn.org/>

News; Upcoming events

No new digest announcements identified.

EFPIA – European Federation of Pharmaceutical Industries and Associations

<https://www.efpia.eu/news-events/>

News & Events

No new digest announcements identified.

ICBA – International Council of Biotechnology Associations [30 May 2026]

<https://internationalbiotech.org/>

News

No new digest announcements identified.

IFPMA [30 May 2026]

<https://ifpma.org/>

News & Resources

Press release 28 May 2026

[Global biopharmaceutical leaders meet Japanese Prime Minister to reinforce action needed to retain Japan's leadership in life-sciences](#)

By IFPMA

Statement 29 May 2026

[79th World Health Assembly: Constituency statement on the follow-up to the Political Declaration on non-communicable diseases](#)

On 21 May 2026, the International Federation on Ageing delivered a joint constituency statement on the follow-up to the Political Declaration on non-communicable diseases (NCDs) at the 79th session of the World Health Assembly. We urge WHO and Member States to ensure that implementation of the Political Declaration on the prevention and control of NCDs reflects global population ageing....

International Alliance of Patients' Organizations – IAPO [30 May 2026]

<https://www.iapo.org.uk/news>

Press and media [Selected]

No new digest announcements identified.

International Generic and Biosimilar Medicines Association [IGBA]

<https://www.igbamedicines.org/>

News

No new digest announcements identified.

PhRMA [30 May 2026]

<http://www.phrma.org/>

Press Releases

No new digest announcements identified.

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Vaccines/Therapeutics/Medicines – Selected Developer/Manufacturer Announcements

We recognize that this listing is indicative but certainly not exhaustive. We invite nomination of other vaccine developers for potential addition to those monitored below.

AstraZeneca

Press Releases - No new digest announcements identified.

Bavarian Nordic

Latest News - No new digest announcements identified.

BioCubaFarma – Cuba

Últimas Noticias - No new digest announcements identified.

Biological E

News - No new digest announcements identified.

BioNTech

Press Releases

05.29.2026

[European Commission Authorizes Update to Pediatric Use of Pfizer and BioNTech COVID-19 Vaccine](#)

... With this authorization, the Pfizer-BioNTech COVID-19 vaccine will be administered as a 10- μ g dose for all children aged 6 months through 11 years. Prior to today's authorization, the primary COVID-19 vaccination series for children aged 6 months through 4 years was a three-dose series of 3- μ g per dose. This approach reduces the primary vaccination series in this age group to two doses.*...

Boehringer

Press Releases - No new digest announcements identified.

CanSinoBIO

News - Website not responding at inquiry.

CIGB

Latest News

[Nasalferon: health registration for the prophylaxis and treatment of viral respiratory infections](#)

25 May 2025

CinnaGen – Iran

CinnaGen News - No new digest announcements identified.

Clover Biopharmaceuticals – China

News - No new digest announcements identified.

CSL Seqirus

News Releases - No new digest announcements identified.

Curevac

News - Website now directs to BioNTech site

Dailchi Sankyo

Press Releases - No new digest announcements identified.

Gamaleya National Center/Sputnik

Latest News and Events - No new digest announcements identified [Last: 09 Nov 2020]

<https://sputnikvaccine.com/> - No new digest announcements identified [Last: 31 Aug 2022]

GSK

Press releases for media

28 May 2026

[Bepirovirsen achieves unprecedented functional cure rates with potential to redefine treatment for chronic hepatitis B](#)

EuBiologics, S Korea

News - No new digest announcements identified.

HIPRA

Press releases

[David Caballero appointed Managing Director of HIPRA Animal Health to drive the company's global growth](#)

28-05-2026

JNJ Innovative Medicine [Janssen]

Press Releases - No new digest announcements identified.

Merck

News releases - No new digest announcements identified

Moderna

News and Blog Posts - No new digest announcements identified

Nanogen

News - No new digest announcements identified.

Novartis

News - No new digest announcements identified.

Novavax

Press Releases - No new digest announcements identified.

Pfizer

Recent Press Releases - No new digest announcements identified.

R-Pharm

<https://rpharm-us.com/index.php>

[No news or media page identified]

Samsung Biologics

Latest News - No new digest announcements identified.

Sanofi Pasteur

Press Releases - No new digest announcements identified

Serum Institute

News & Announcements - No new digest announcements identified

Sinopharm/WIBPBIBP

News - No new digest announcements identified.

Sinovac

Press Releases

[SINOVAC's Influenza Vaccine \(Split Virion\), Inactivated \(MDCK Cell\) Granted Clinical Trial Approval](#)

May 27, 2026 — SINOVAC has received approval from the National Medical Products Administration (NMPA) to launch clinical trials for its Influenza Vaccine (Split Virion), Inactivated (MDCK cell). The P 2026/05/27

SK Biosciences

Press Releases

[SK bioscience Signs Vaccine Technology Transfer Agreement with Colombia's VECOL to Advance Local Vaccine Manufacturing in Latin America](#)

2026.05.26

SK bioscience collaborates with Colombia's government-led US\$260 million vaccine localization initiative through technology transfer and local manufacturing cooperation with state-owned pharmaceutical company VECOL

Takeda

Newsroom - No new digest announcements identified.

Valneva

Press Releases - No new digest announcements identified.

WestVac Biopharma

Media - No new digest announcements identified.

Zhifei Longcom, China

[Anhui Zhifei Longcom Biologic Pharmacy Co., Ltd.]

Website [No News/Announcements page identified]

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Journal Watch

Vaccines and Global Health: The Week in Review continues its weekly scanning of key peer-reviewed journals to identify and cite articles, commentary and editorials, books reviews and other content supporting our focus on vaccine ethics and policy. Journal Watch is not intended to be exhaustive, but indicative of themes and issues the Center is actively tracking. We selectively provide full text of some editorial and comment articles that are specifically relevant to our work. Successful access to some of the links provided may require subscription or other access arrangement unique to the publisher.

If you would like to suggest other journal titles to include in this service, please contact David Curry at: david.r.curry@centerforvaccineethicsandpolicy.org

AJOB Empirical Bioethics

Volume 17 2026 Issue 1

<https://www.tandfonline.com/toc/uabr21/current>

[Reviewed earlier]

AMA Journal of Ethics

Volume 27, Number 12: E823-875 December 2025

<https://journalofethics.ama-assn.org/issue/aging-bad-you>

Aging Is Bad for You?

At some point along life's trajectory, growing becomes aging. Gerotherapeutics—biologically-based approaches to health that target processes of aging—seem poised to respond. This theme issue investigates ethical valences of what gerotherapeutics suggest about our socially, culturally, and historically entrenched patterns of pathologizing and medicalizing aging. Advancement in our understanding of physiological mechanisms of aging has prompted some to reconceive lifespans as health spans. Geroscience also suggests the need to critically evaluate whether and to what extent we should think of anti-aging ventures as legitimate enterprises of health care. Normative roles played by aging in our personal and relational narratives, in our expectations about how duration and quality of life confer value to life, and in how life extension promotes or undermines our notions of wisdom and a good life are all at stake.

American Journal of Human Genetics

May 07, 2026 Volume 113 Issue 5 p889-1124

<https://www.cell.com/ajhg/current>

This month in The Journal

Paul W. Hook, Alyson B. Barnes

Population cohorts have enabled the discovery of genetic variants associated with a multitude of human phenotypes. While the focus is usually on SNPs, other types of variants have been shown to be impactful, including tandem repeats (TRs). Typically, investigations including TRs employ genotyping tools that rely on TR reference catalogs. However, existing catalogs differ substantially in both the number and definitions of TRs, as well as compatible data types and genotyping tools. This lack of standardization makes it difficult to unify results across studies and limits discovery.

American Journal of Infection Control

May 2026 Volume 54 Issue 5 p473-592

<http://www.ajicjournal.org/current>

[Reviewed earlier]

American Journal of Preventive Medicine

May 2026 Volume 70 Issue 5

<https://www.ajpmonline.org/current>

[Reviewed earlier]

American Journal of Public Health

May 2026 116(5)

<http://ajph.aphapublications.org/toc/ajph/current>

[Reviewed earlier]

American Journal of Tropical Medicine and Hygiene

Volume 114 (2026): Issue 5 (May 2026)

<https://www.ajtmh.org/view/journals/tpmd/114/4/tpmd.114.issue-5.xml>

[Reviewed earlier]

Annals of Internal Medicine

May 2026 Volume 179, Issue 5

<https://www.acpjournals.org/toc/aim/current>

[Reviewed earlier]

Artificial Intelligence – An International Journal

Volume 354 May 2026

<https://www.sciencedirect.com/journal/artificial-intelligence/vol/354/suppl/C>

[Reviewed earlier]

BMC Cost Effectiveness and Resource Allocation

<http://resource-allocation.biomedcentral.com/>

(Accessed 30 May 2026)

[No new digest content identified]

BMC Health Services Research

<http://www.biomedcentral.com/bmchealthservres/content>

(Accessed 30 May 2026)

[No new digest content identified]

BMC Infectious Diseases

<http://www.biomedcentral.com/bmcinfectdis/content>

(Accessed 30 May 2026)

[The 2025 measles outbreak in Texas](#)

Tamer Oraby, Martial L. Ndeffo-Mbah

Research Open access 30 May 2026

BMC Medical Ethics

<http://www.biomedcentral.com/bmcmedethics/content>

(Accessed 30 May 2026)

[The ethicality of mandatory COVID-19 vaccinations in Uganda: a qualitative study](#)

Sharon Nameri, Fred Nakwagala, John Barugahare

Research Open access 29 May 2026

BMC Medicine

<http://www.biomedcentral.com/bmcmed/content>

(Accessed 30 May 2026)

[No new digest content identified]

BMC Pregnancy and Childbirth

<http://www.biomedcentral.com/bmcpregnancychildbirth/content>

(Accessed 30 May 2026)

[No new digest content identified]

BMC Public Health

<http://bmcpublikealth.biomedcentral.com/articles>

(Accessed 30 May 2026)

Articles

[Informing life-course immunization and pandemic preparedness: a COVID-19 vaccine evaluation and HPV introduction experience in Sierra Leone](#)

Desmond Maada Kangbai, Ronald R. Mutebi, Susan Michaels-Strasser

Research Open access 27 May 2026

[Mpox knowledge, attitudes toward Mpox vaccine and hesitancy for Mpox vaccination among teachers in Kenya](#)

Patrick M. Mutua, Michael M. Gicheru, Erick K. Serem

Research Open access 22 May 2026

BMC Research Notes

<http://www.biomedcentral.com/bmcresnotes/content>

(Accessed 30 May 2026)

[No new digest content identified]

BMJ Evidence-Based Medicine

June 2026 - Volume 31 - 3

<https://ebm.bmj.com/content/31/2>

[Reviewed earlier]

BMJ Global Health

May 2026 - Volume 11 - 5

<https://gh.bmj.com/content/11/5>

[Reviewed earlier]

Bulletin of the Atomic Scientists

DIGITAL MAGAZINE - March 2026

<https://thebulletin.org/magazine/2026-03/>

[Reviewed earlier]

Bulletin of the World Health Organization

Volume 104, Number 5, May 2026, 285-368

<https://www.who.int/publications/journals/bulletin>

[Reviewed earlier]

Cell

May 14, 2026 Volume 189 Issue 10 p2783-3176

<https://www.cell.com/cell/current>

Articles

[Reviewed earlier]

Cell and Gene Therapy Insights

February 2026 Issue, Volume 12 Issue 1

<https://www.insights.bio/cell-and-gene-therapy-insights/journal/283/volume-12-issue-1>

[Reviewed earlier]

Child Care, Health and Development

Volume 52, Issue 4 July 2026

<https://onlinelibrary.wiley.com/toc/13652214/current>

[Reviewed earlier]

Clinical Pharmacology & Therapeutics

Volume 119, Issue 6 Pages: 1393-1673 June 2026

<https://ascpt.onlinelibrary.wiley.com/toc/15326535/current>

[Reviewed earlier]

Clinical Therapeutics

June 2026 Volume 48 Issue 6 p485-552

<http://www.clinicaltherapeutics.com/current>

[New issue: No digest content identified]

Clinical Trials

Volume 23 Issue 2, April 2026

<https://journals.sagepub.com/toc/CTJ/current>

[Reviewed earlier]

Conflict and Health

<http://www.conflictandhealth.com/>

[Accessed 30 May 2026]

[**Understanding Ukraine's immunization supply chain resilience in the face of war: a mixed-method study**](#)

Stanislav Gaievskiy, Yevgenii Grechukha, Jarno Habicht

Research Open access 25 May 2026

Contemporary Clinical Trials

Volume 164 May 2026

<https://www.sciencedirect.com/journal/contemporary-clinical-trials/vol/164/suppl/C>

[Reviewed earlier]

The CRISPR Journal

Volume 9 Issue 2, April 2026

<https://journals.sagepub.com/toc/tcja/9/2>

[Reviewed earlier]

Current Genetic Medicine Reports

Volume 13, Issue 1 December 2025

<https://link.springer.com/journal/40142/volumes-and-issues/13-1>

[Reviewed earlier]

Current Medical Research and Opinion

Volume 42, Issue 1, 2026

<https://www.tandfonline.com/toc/icmo20/current>

[Reviewed earlier]

Current Opinion in Infectious Diseases

June 2026 - Volume 39 - Issue 3

<https://journals.lww.com/co-infectiousdiseases/pages/currenttoc.aspx>

[New issue: No digest content identified]

Current Protocols in Human Genetics

<https://currentprotocols.onlinelibrary.wiley.com/journal/19348258>

[Accessed 30 May 2026]

[No new digest content identified]

Cytotherapy

June 2026 Volume 28 Issue 6

<https://www.isct-cytotherapy.org/current>

[Reviewed earlier]

Developing World Bioethics

Volume 26, Issue 1 Pages: 1-80 March 2026

<https://onlinelibrary.wiley.com/toc/14718847/current>

[Reviewed earlier]

Development in Practice

Volume 36, 2026 Issue 2

<https://www.tandfonline.com/toc/cdip20/36/2?nav=tocList>

[Reviewed earlier]

Development Policy Review

Volume 44, Issue 3 May 2026

<https://onlinelibrary.wiley.com/toc/14677679/current>

[Reviewed earlier]

Disaster Medicine and Public Health Preparedness

Volume 20 - 2026

<https://www.cambridge.org/core/journals/disaster-medicine-and-public-health-preparedness/latest-issue>

[Reviewed earlier]

Disasters

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[Offline: The dishonest politics of global health](#)

Richard Horton

The latest outbreak of Ebola in DR Congo loomed over proceedings at the World Health Assembly (WHA) last week. The first case: April 24. A Public Health Emergency of International Concern (PHEIC): May 17. 23 days: unconscionable delay or understandable caution? As Edem Adzogenu, Global Emissary for the Accra Reset, pointed out, Ebola was discovered in DR Congo in 1976—and, 50 years later, there is still no adequate national surveillance capacity. A second issue poisoned many conversations in Geneva: what should a future global health architecture look like? And who should

lead its design? Presumably WHO would play an important part. Potential candidates for the agency's next Director-General (DG) strode through the marbled halls of the Palais des Nations, some more openly visible about their intentions than others. Between now and September, the campaign for DG will be a phoney war, with few public manoeuvres or statements. Still, the status quo cannot continue. In a crowded hostel on the more modest Rue Rothschild, some of the greyest eminences of global health (with a sprinkling of more animate voices) were convened by a former UN diplomat with rebellious tendencies to reflect on what was at stake.

Reform has become an end in itself. Too much attention is given to the organogram of global health. Structural change is merely window-dressing. The first purpose of any global health initiative has become self-preservation. Donors do not want change. WHO does not have the mandate for change. What is WHO anyway? A collection of member states or a voice for the peoples of these member states? Can the complexity of institutions be simplified? Probably, but only by those with the power to do so. And political power follows economic power. One cannot delegate power that does not exist. Even when a decision is taken to liquidate UNAIDS or merge UN Women with UNFPA, resistance kicks in and reform stalls. We need new voices—all voices. Not the G7. The present leadership is broken. “We are not hearing the cry” from countries.

These discussions are entertaining. Sometimes they are even important. But the impartial observer wandering through the rooms of the WHA might have been struck by the willingness, even enthusiasm, of participants to collude in epic dishonesty. At the launch of the Pan-European Commission on Climate and Health, ministers of health read speeches proclaiming their trenchant support for its recommendations (for example, to declare climate change a PHEIC). But, as the 2026 Europe report of the Lancet Countdown on health and climate change showed, few political parties across Europe have made climate and health a core element of their policy. Ministers were telling untruths—and being applauded for doing so. At an event to debate plans for implementation of the 2025 Political Declaration on Non-Communicable Diseases and Mental Health, the realities of the global health landscape were casually overlooked by distinguished political figures. A WHO wounded by the intentional violence of a former member state. Multilateralism replaced by an aggressive and extractive bilateralism. Populist political nationalism displacing any idea of solidarity or interdependence between nations. In a discussion about our readiness to address the next pandemic threat, multiple speakers made clear that the world is most definitely not ready. One government official rode against the tide by choosing to emphasise investments in surveillance, laboratories, people, and leadership. A representative from a multilateral agency declared that “we are there, in certain aspects”. She spoke about “the world together”. Even the most optimistic observer today would likely agree that the world is not together. We have rarely been more fractured. Why are so many so wilfully blind to the truth? One speaker on the Rue Rothschild did speak honestly. He pointed out the lack of accountability for political leaders who break their promises. What do we do? Forget global health reform, please. Forget a new global health architecture. Forget the idea of a reset. The first step must be to tell the truth. We should stop lying to one other. We should stop being deliberately deceitful. If we speak honestly, we might be able to re-establish the trust lost between global health and governments. And if we can bring politicians and the public with us, perhaps we can rebuild hope and optimism in global health. Without truth, we have nothing.

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Article 29 April 2026

[Improving access to essential medicines via decision-aware machine learning](#)

Nationwide deployment of a novel decision-aware machine learning framework as a decision support tool for the allocation of essential medicines in Sierra Leone resulted in improved access to essential healthcare in this resource-constrained setting.

Angel Tsai-Hsuan Chung, Jatu Abdulai, Osbert Bastani

Abstract

A critical challenge in healthcare systems in low- and middle-income countries is the efficient and equitable allocation of scarce resources, particularly essential medicines¹. This problem is complicated by limited high-quality data, which restricts the applicability of traditional data-driven techniques^{2,3,4,5}. Here we propose a novel decision-aware machine learning framework for the allocation of essential medicines, which additionally leverages multi-task learning to ensure sample efficiency and catalytic priors to ensure equitable allocation. In collaboration with the national government of Sierra Leone, we performed a staggered, nationwide deployment of our system as a decision support tool. Our econometric evaluation finds an estimated 19% increase in consumption of allocated products in treated districts, demonstrating its efficacy at improving access to essential medicines. Our tool was subsequently scaled nationwide, covering an estimated two million women and children under 5 years of age. Our work demonstrates how machine learning methods can improve efficiency at very low cost in resource-constrained global health settings.

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Volume 10 Issue 4, April 2026
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May 26, 2026 vol. 123 no. 21
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Volume 141 Issue 3, May/June 2026

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Volume 36 Issue 7, June 2026

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Volume 22 Issue 2, April 2026

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Lucas Ferreira Theotonio dos Santos, Anna Maria Gomes, Daniel Ando Oliveira, Antônio José Cordeiro

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Article 128677

Research article Open access

[Modeling optimal deployment strategies for Nipah vaccines and monoclonal antibodies](#)

Oscar Cortes-Azuero, Carolin Vegvari, Ellie Sutcliffe, Emma Roney, ... Henrik Salje

Article 128688

Vaccines

<https://www.mdpi.com/journal/vaccines>

[Accessed 30 May 2026]

[No new digest content identified]

Value in Health

May 2026 Volume 29 Issue 5 p711-920

<https://www.valueinhealthjournal.com/current>

[Reviewed earlier]

World Medical Journal – Official Journal of The World Medical Association

Nr. 4, December 2025, vol. 71

<https://www.wma.net/publications/world-medical-journal/>

[Reviewed earlier]

World Development

Volume 201 May 2026

[New issue; No digest content identified]

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:: [*Milestones, Perspectives*](#)

:: [*WHO*](#)

:: [*Organization Announcements*](#)

:: [*Journal Watch*](#)

:: [*Pre-Print Servers*](#)

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Pre-Print Servers

arXiv

<https://arxiv.org/>

[Accessed 30 May 2026]

[Filters: Emerging Technologies; Neural and Evolutionary Computing; Computers and Society; Computational Engineering, Finance, and Science; General Literature; Genomics; Neurons and Cognition; Populations and Evolution; Other Quantitative Biology; General Economics]

[No new digest content identified]

Gates Open Research

<https://gatesopenresearch.org/browse/articles>

[Accessed 30 May 2026]

[Filter: All articles]

[No new digest content identified]

medRxiv

<https://www.medrxiv.org/content/early/recent>

[Accessed 30 May 2026]

[Filter: All articles]

[Integrating vaccination with short-term behavioral guidance enables mpox outbreak control](#)

Davide Maniscalco, Olivier Robineau, Pierre-Yves Boelle, Alexandra Mailles, Harold Noel, Arnaud Tarantola, Annie Velter, Vittoria Colizza

medRxiv 2026.05.26.26354088; doi: <https://doi.org/10.64898/2026.05.26.26354088>

Cross-reactive Bundibugyo antibody responses after licensed Ebola vaccines

Edouard Lhomme, Aurelie Wiedemann, Ahidjo Ayouba, Safaa Ben-Farhat, Guillaume Thaurignac, Celine Roy, Abdoul Habib BEAVOGUI, Seydou Doumbia, Mark Kieh, Bailah Leigh, Samba Sow, Stephen A Migueles, Deborah Watson-Jones, Yazdan Yazdanpanah, Rodolphe THIEBAUT, Martine Peeters, Laura RICHERT, Yves Levy, PREVAC study Team
medRxiv 2026.05.27.26354223; doi: <https://doi.org/10.64898/2026.05.27.26354223>

Rethinking under-vaccination: social identity and its association with vaccination attitudes and hesitancy-related behaviour

Leah Borovoi, Rotem Kahalon, Michael Edelstein
medRxiv 2026.05.25.26354049; doi: <https://doi.org/10.64898/2026.05.25.26354049>

Filovirus Evidence Maps: A community resource to identify and curate the published evidence on immunity and vaccination for BDBV, EBOV, MARV, and SUDV

Yuna Chung, Bronwyn A Bailey, Ellen Bowden-Reid, Mariah Csolle, Steffen S Docken, Kim Jachno, David S Khoury, Steve McDonald, Loyal Pattuwage, Heath White, Tsharni Zazryn, Tari Turner, Miles P Davenport
medRxiv 2026.05.22.26353826; doi: <https://doi.org/10.64898/2026.05.22.26353826>

OSF Pre-prints

<https://osf.io/preprints/discover?provider=OSF&subject=bepress%7CLife%20Sciences>
[Filter: OSF Pre-prints Subject filters: Medicine and Health Sciences Format Filter: Pre-prints]
[No new digest content identified]

Wellcome Open Research

<https://wellcomeopenresearch.org/browse/articles>
[Accessed 30 May 2026]

Research Article Open Access

REVISED - Perceptions of policymakers and ethicists on ethical considerations in the conduct of research during disease outbreaks in Nigeria

[version 2; peer review: 1 approved with reservations, 1 not approved]

Aminu Yakubu, et al.

Abstract

Background

There is a dearth of literature on the perspectives of stakeholders from countries in Africa on the institution of a research culture as part of a holistic system of pandemic preparedness and response. This study aimed to explore the perspectives of policymakers, representatives from Research Ethics Committees (RECs), and international bioethics experts on the ethics of conducting research during infectious disease outbreaks in Nigeria.

Methods

We conducted structured interviews with six policymakers actively engaged in disease outbreak response. The interview themes included systems and structures for research, local researcher competency, regulatory oversight, study types, ethical review approaches, and integrating research into outbreak response. We further engaged 12 participants including REC members from Nigeria and Liberia, international bioethics experts, and study co-investigators in a structured discussion to appraise and expand on themes identified during the interviews at a 2-day meeting in December 2018. We also held two virtual consultations afterwards. The findings from these processes were synthesized through a joint reflexive analysis involving all author-participants to develop a comprehensive report.

Results

Participants stressed the significance of conducting research during disease outbreaks to understand causal factors, evaluate public health measures, and inform future prevention and treatment strategies, and identified the need for clear ethical guidelines for RECs during outbreaks. Participants proposed a sliding scale for prioritizing categorized studies, emphasizing immediate solutions over future-focused research. Discussants proposed a "systems approach" to ethics review, emphasizing interdependence, governance structures, communication infrastructure, effective communication with policymakers, and a funding structure.

Conclusion

Conducting ethical research during disease outbreaks requires a comprehensive, context-dependent approach, involving stakeholders, and ensuring robust ethical oversight through proficient RECs. The proposed "System Approach" offers a model for sustainable and effective ethics review during outbreaks, fostering locally relevant and socially valuable research while prioritizing the well-being of research participants and communities.

Plain language summary

There is very little literature on the perspectives of these stakeholders on improving ethical research during disease outbreaks and epidemics in African countries. Engagement with various stakeholders, including research ethics committees, policymakers, communities, and researchers is identified as an important strategy for promoting ethical research, especially during disease outbreaks and epidemics. We explored the perspectives of policymakers and research ethics committee members in Nigeria as well as international bioethics experts on the ethics of conducting research during infectious disease outbreaks in Nigeria. First, we interviewed six policymakers in Nigeria. Second, we held structured discussions with research ethics committee members and experts in bioethics on the findings from the interviews. Third, we synthesized and analyzed these findings.

Our participants reiterated the importance of conducting research during disease outbreaks and emergencies. They highlighted the need for context-dependent research prioritization using a sliding scale and proposed a "System Approach" for research during disease outbreaks and epidemics among other recommendations.

The findings from our study may be useful to relevant stakeholders in Nigeria in their efforts to strengthen the country's outbreak preparedness and response system against future occurrences. The proposed "System Approach" offers a model for sustainable and effective ethics review during outbreaks that could be considered by the authorities.

* * * *

Think Tanks

Brookings [to 30 May 2026]

<http://www.brookings.edu/>

Research, Events

Commentary

Realizing Africa's pharmaceutical potential

Landry Signé

May 28, 2026

:: Africa's health sector faces intense supply chain vulnerabilities, with the continent only producing 1% of vaccines and 30% of essential medicines it consumes.

:: In this vulnerability lies the opportunity for transformation. Governments and private companies are already investing in vaccine, biologics, and pharmaceutical production facilities to strengthen regional health security and reduce reliance on foreign supply chains.

:: By incorporating vertical integration, public-private partnerships with blended finance, and technology transfer and strategic alliances, Africa's pharmaceutical potential can be fully seized.

Center for Global Development [30 May 2026]

<https://www.cgdev.org/>

All Research

BRIEF

[Health Taxes and the IMF](#)

Masood Ahmed and Sanjeev Gupta

May 28, 2026

With fiscal pressures mounting and health burdens rising, the IMF is well positioned to elevate health taxes from underused instruments to a central pillar of domestic revenue mobilization, delivering both stronger public finances and better health outcomes.

Chatham House [to 30 May 2026]

<https://www.chathamhouse.org/>

Selected Analysis, Comment, Events

[Ebola in DR Congo: A 'catastrophic collision of disease and conflict'. Independent Thinking podcast](#)

The major Ebola outbreak in the Democratic Republic of Congo's northeast is not just a public health emergency in an already impoverished and violence-beset region.

Audio

Published 29 May 2026 30 minute listen

Council on Foreign Relations [30 May 2026]

<https://www.cfr.org/media/news-releases>

New Releases [Selected]

No new digest content identified.

CSIS [to 30 May 2026]

<https://www.csis.org/>

Reports [Selected]

No new digest content identified.

IS Global [to 30 May 2026]

<https://www.isglobal.org/en/>

Newsroom

No new digest content identified.

McKinsey Global Institute [to 30 May 2026]

<https://www.mckinsey.com/mgi/overview>

Featured Research

No new digest content identified.

ODI [Overseas Development Institute] [to 30 May 2026]

<https://odi.org/en/publications/>

Publications

No new digest content identified.

Pew Research Center [to 30 May 2026] <https://www.pewresearch.org/LatestPublications>
No new digest content identified.

Rand [to 30 May 2026] <https://www.rand.org/pubs.html>
Published Research [Selected]
No new digest content identified.

Urban Institute [to 30 May 2026] <https://www.urban.org/research>
New Research Publications - Selected Brief
[Measuring the Impact of Unconditional Cash on the Social Determinants of Health](#)
Preliminary Evaluation Findings from Cohort 1 of the CashRx Program
Daisy Gomez Palacios, Mary Bogle, Alexa Kort
May 27, 2026

World Economic Forum [to 30 May 2026] <https://agenda.weforum.org/press/Media> [Selected]
[Global Economic Outlook Hangs in Balance between Geopolitical Headwinds and AI boost, Chief Economists Warn](#)
News 28 May 2026

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Public Consultations/Calls for Inputs/Calls for Papers

WMA - Declaration of Taipei Revision Launched [Ongoing]

...The Declaration of Taipei tries to achieve a balance between the rights of individuals giving their tissue or data for research and other purposes based on confidentiality and privacy rules while at the same time recognising that health data has become a very powerful tool for increasing knowledge.

In analysing the scenarios that already exist for the use (and misuse) of health data and biobanks, we came to the conclusion that the major risk scenarios may not result from science, but from the commercial, administrative or political use of such data. Limiting our guidelines to research only would have left us blind to the imminent risk of abuse from outside the field of medicine: commercialization, cost-cutting and potential political abuse.

Therefore, in contrast to the Declaration of Helsinki, this policy aims to address any use of health databases and biobanks excluding individual treatment and is not restricted to research. As physicians are the primary custodians of confidential health information, they feel an obligation towards their patients and other persons who entrust them with their data and specimens...

In April 2025, the WMA appointed a workgroup to initiate the revision process of this document. To encourage as much global participation in the revision process as possible, the WMA is collaborating with its members to host a series of regional meetings...

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Vaccines and Global Health: The Week in Review is a service of the Center for Vaccine Ethics and Policy ([CVEP](#)) / GE2P2 Global Foundation, which is solely responsible for its content.

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Support for this service is provided by the [Bill & Melinda Gates Foundation](#) and industry resource members Janssen/J&J, Pfizer, Sanofi US, and GSK. (list in formation).

Support is also provided by a growing list of individuals who use this membership service to support their roles in public health, clinical practice, government, NGOs and other international institutions, academia and research organizations, and industry.

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