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Climate, disease and food - a lot still to do

In 2012, the issue that we make the least progress on – but lament at length about – will remain global warming. Campaigners will continue to use doomsday language to try to hustle for faster action. Climate change negotiators will continue to dress up their failures as victories.



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In December 2011 in Durban, politicians heartily congratulated themselves for signing a two-page agreement that contained no commitments beyond launching a process sometime ahead of 2015 to develop another protocol like the one signed in Kyoto. Both India and China have stressed since then that they will not agree to a legally binding agreement for emissions reduction, while Canada has quit the Kyoto Protocol.

We will never reduce emissions significantly until we manage to make green energy cheaper than fossil fuels. Sadly, we currently lack the political willpower and leadership to ditch the current approach and focus sharply on research and development to drive down alternative energy prices over the coming decades. Therefore, unfortunately I expect little to change on climate change in 2012.

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One of the more dangerous beliefs to have emerged in the past year or so is the idea that we can declare victory over the AIDS epidemic. We have seen triumph declared in some quarters based on breakthroughs in treatment coverage.

But our complacency could be damaging, especially in Africa which bears the brunt of the epidemic.

Treatment remains very expensive, and arduous for individuals. Funding from developed governments is dropping – a trend that must be reversed. We also need to acknowledge that billions of dollars have been spent on well-meaning attempts to save lives, with an alarming lack of high-quality evaluation of how these investments have performed. On a systemic level, we do not know enough about what works, where, and why – or how to replicate our successes.

As the research project RethinkHIV found, there is an urgent need for increased investment in developing an HIV vaccine, but also in eradicating mother-to-child transmission of HIV by 2015, which would take additional expenditure of just \$140 million a year. Another compelling investment is spending more to make blood transfusions safer, and in building male circumcision programmes.

Another issue that will not attract much media attention – but should be seen as a serious challenge – is the problem of undernutrition. The challenge of 'hidden hunger', especially in tough economic conditions, can be devastating.

Undernutrition is an underlying cause of millions of deaths, and can hold back learning and development.

As the Nobel laureate panel found in the Copenhagen Consensus 2008 project, there is a compelling case to make small investments in responding to vitamin A and zinc deficiencies, or in biofortification and micronutrient fortification to solve problems like iodine and iron deficiencies.

This summer, the Nobel laureate panel will reconvene to consider and rank solutions to global challenges, in Copenhagen Consensus 2012, using economic research and analysis to identify the smartest ways to respond to the world's biggest problems. Because, sadly, as the issues that we spend the most time talking about are not those where our investment is needed most urgently – or where we can make the biggest difference – this effort is still urgently necessary.