Editorial comment

**Launch of the '*One Health* Global Think-Tank
for Sustainable Health & Well-being' – 2030 (GHW-2030)**

The adoption of the 17 Sustainable Development Goals (SDGs) by the UN General Assembly in September 2015 opens a new era for global, regional, national and local initiatives to ensure the well-being and sustainability of the planet and people (1). *The South Eastern European Journal of Public Health* (SEEJPH) published several papers (Volumes 2,3,5) on the UN Global Goals (2, 3, 4). In addition, Prof Ulrich Laaser and Prof Vesna Bjegovic Mikanovic established together with Dr George Lueddeke a global think-tank on 'Global Health, Governance, and Education' (5) to help inform the writing of the Epilogue of Dr Lueddeke's recent book entitled *Global Population Health and Well-Being in the 21ˢᵗ Century – Towards New Paradigms, Policy, and Practice* (6). In continuation of this process we worked with Dr. Joanna Nurse, head of the *Commonwealth* Secretariat Health and Education Unit* (HEU) (7, 8) and collectively founded the '*One Health* Global Think Tank for Sustainable Health & Well-being – 2030' (GHW-2030).

A synopsis of the think-tank's remit and membership is set out below. The summary is followed by a background paper outlining the GHW-2030 rationales, particularly in light of the UN 2030 Agenda for Sustainable Development (9), and the pressing need to incorporate holistic *One World, One Health* values, principles and practice (10, 11) - as these relate to environmental, social, economic and geopolitical spheres - with a view to guiding associated frameworks (12, 13), policies and enabling strategies. A listing of current GHW-2030 members and affiliations is also provided.

*For the GHW-2030,
 April 2016*

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* The Commonwealth is a voluntary association of 53 independent and equal sovereign states. It is home to 2.2 billion citizens, of which over 60% are under the age of 30'' (7).

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THE *ONE HEALTH* GLOBAL THINK TANK
FOR SUSTAINABLE HEALTH & WELL-BEING – 2030 (GHW-2030)

PURPOSE, RATIONALES, AND GUIDANCE

Synopsis

Purpose

To bring together global multi-sectoral and multi-disciplinary thought leaders to articulate and advocate for sustainable 'planet and people' health and well-being.

Mission and Method

The central mission of the GHW-2030 multi-sectoral think tank is to contribute to the implementation of the UN Sustainable Development Goals (SDGs) by working toward achieving the education and health goals in cooperation with the Commonwealth Secretariat using an international interdisciplinary/multidisciplinary/transdisciplinary global *One Health* approach. A major focus of the think tank will be on the health and well-being – physical, emotional, aspirational – of children and young people particularly as these relate to their personal security, physical and emotional well-being, education and employment and the sustainability of life on the planet.

Referencing contemporary and future-oriented developments, the activities of think tank members include:

- analysing *root causes* with regard to *key issues in environmental, social, economic and geopolitical arenas,* particularly in relation to 'well-being' goals, targets and indicators
  underpinning the UN 2030 Agenda for Sustainable Development;
- considering and assessing *future risks*, such as egocentrism, demographic shifts, environmental, and public *One Health* challenges generally – human, animal, plant, environmental – and identifying potential solutions at local, national, regional and global levels;
- exploring *creative and innovative approaches* for informing global and national policy directions, including a 'Global Framework for Public Health Systems and Services' (see background paper below, Fig 4) .
- publishing and disseminating *knowledge and evidence-based papers articles* (possibly informed by recognised research tools (e.g., CDC-authored Community Guide) *or interviews* in a creative and sustained fashion;
- producing short summaries of *policy options* and *recommendations* for policy-makers and planners;
- stimulating public *online discussions* as well as potential *consortial activities,* including social media; and
- contributing to *decision-making and policy development* (government and non-governmental) to enhance sustainable 'health and well-being' at local, national, regional and global levels, involving existing and potential mechanisms for transformative enabling action.

In addition, along with others, think tank members will have the opportunity to engage in *high level on-line policy discussions* on the Commonwealth Secretariat's Health and Education Unit *Hubs* as well as contribute to a range of *policy briefs* which target policy makers and planners on key global health issues.
(**Health**:<healthhub@commonwealth.int> **Education:**<eduhub@commonwealth.int>)

Terms of Reference

The overall aim of GHW-2030 is to explore and present evidence-based and refreshing or creative solutions through theme papers / interviews that impact on well-being or quality of life (human, animal, plant, environmental) and that go beyond silo thinking and conventional political interventions. Think tank reviews will be undertaken annually with agendas set out by the Secretariat and will be reported to the Commonwealth Secretariat Health and Education Unit seeking its guidance for dissemination and implementation.

- Papers may originate with any member of the think tank and will be considered a 'draft' subject to reviews of think tank members.
- Contributions from trans-disciplinary and/or multi-sectoral 'primary' sources are essential;
- The draft papers will be reviewed first by the Secretariat and subsequently circulated to other members for comments through three review rounds.
- Draft papers should be restricted to significant contemporary global issues (e.g., involuntary migration, food safety and security, unemployment/underemployment, national governance, armed conflict, small island health, climate change, social instability, public health emergencies caused by infectious diseases such as the Ebola and the Zika virus, urban violence and crime).
- The papers should be about 1500-2500 words in length, excluding references.
- Each paper should culminate with recommendations in terms of addressing the issue(s).
- Comments will be returned to originating author(s) for integration of feedback.
- Final papers will be disseminated, first, to all think tank members and, secondly, they will be submitted for consideration to global/public/clinical health and social care journals* and other fora (e.g., social media), to reach a wider audience.
- Up to six papers will be reviewed annually, involving on-line meetings, as required, and agreed through final on-line approval meetings of all members.

Organisation

For the time being the group will function in association with the Commonwealth Secretariat Health and Education Unit (HEU), facilitated by its on-line health and education hubs. Links to other think tanks or working groups addressing similar concerns will be developed wherever possible.

Membership and Affiliations

Think tank members (two year renewable term) involve those who helped to draft the Epilogue 'Global Health, Education and Governance,' for the book, *Global Population Health and Well-Being in the 21ˢᵗ Century: Toward New Paradigm, Policy and Practice* and others working in diverse capacities in such areas as education, politics, health, research, journalism, economics, civil service, business, law, to name several fields. Recommended affiliations include leading organisations focusing on global / national health and well-being.

Secretariat

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THE *ONE HEALTH* GLOBAL THINK-TANK
FOR SUSTAINABLE HEALTH & WELL-BEING -2030
(GHW-2030)

PURPOSE, RATIONALES, AND GUIDANCE

The 21st century has been marked by a rapidly accelerating globalization of cultures, religions, trade, and also of conflict. Correspondingly recognition of global threats is rising with regard to environmental degradation, social divides and resulting civil war, enforced migration, and terrorism. Taken together, it has become clear that global and regional governmental structures are struggling to cope effectively with emerging challenges to peace, security, basic human rights and planetary imbalances.

The eight Millennium Development Goals (MDGs) - as a global average – have made considerable progress in several key areas, including increasing the net enrolment rate in primary school education in developing regions from 83 per cent in 2000 to 91 per cent in 2015 and raising official development assistance (ODA) from developed countries by 66 per cent in real terms between 2000 and 2014, reaching $135.2 billion (1).

However, progress has been uneven. As one example, poverty reduction, 'which has declined significantly over the last two decades' (1) is partly due to the overachievement of countries like China and cannot be generalised across other – especially low income countries (2). And, while initiatives appear to be promising across the other seven MDGs, many targets remain unfulfilled and many more have emerged or have deepened since the MDG inception in 2000 (3).

To cite a few specific examples: across 53 nations and about 2.5 billion people in the Commonwealth nations 'There are still approximately 23 million primary-aged children out of school' and 'just over a third (8.5 million) are known to have access to anti-retroviral therapy' for those living with HIV/AIDS. Moreover, given global socioeconomic and political polarizations, 'The radicalization of young people and the underachievement of boys are emerging as challenges' (4).

Addressing the global life-threatening issues, as Ban Ki-moon UN Secretary-General highlights in the MDG final report, requires 'targeted interventions, sound strategies, adequate resources and political will.' What has been demonstrated throughout the MDG initiative, he concludes in the Introduction to the MDG final report, is that 'even the poorest countries can make dramatic and unprecedented progress' (1). For the Secretary-General the most important factor is 'to tackle root causes and do more to integrate the economic, social and environmental dimensions of sustainable development,' thereby working toward resolving the 'uneven achievements and shortfalls in many areas'.

The recently agreed UN Addis Ababa Action Agenda (5), the 2030 Agenda for Sustainable Development (6), including the 17 Sustainable Development Goals (Figure 1), as well as the Framework Convention on Climate Change (7) may be timely and catalytical in underpinning the establishment of the think tank, elaborated in the Terms of Reference (p. 4)

The Sustainable Development Goals (SDGs) (2016-2030)

By agreeing to the 17 SDGs on 25 September 2015 (6), the 193 Member States of the UN General assembly resolved to:

- end poverty and hunger everywhere;
- combat inequalities within and among countries;
- build peaceful, just and inclusive societies;
- protect human rights and promote gender equality and the empowerment of women and girls; and
- ensure the lasting protection of the planet and its natural resources (6).

Figure 1: Visual representation of the overarching elements of the SDGs

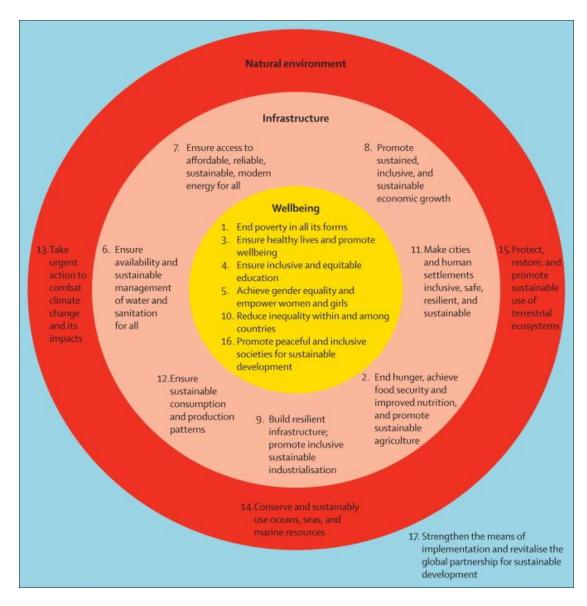Source: Commonwealth Secretariat, Health and Education Unit, 2015 (4)

Inherent in the UN final report *Transforming our world: the 2030 Agenda for Sustainable Development* (6) are fundamental principles and values that inter alia include

- adopting an overarching approach that fully integrates the social, economic and environmental dimensions of sustainable development;
- committing to the intent of 'leaving no one behind' and reflecting universality through all goals;
- placing people and the planet at the centre at global, regional, national and local levels; and

- supporting development cooperation commitments and means of implementation (MOI) that consider Finance, Trade, Technology, Capacity-building, Policy and Institutional Coherence, Data and Monitoring and Multi Stakeholder Partnerships .

Jeff Waage and Christopher Yap (editors) of *Thinking Beyond Sectors for Sustainable Development* (Figure 2) (8) grouped the SDGs into three main concentric circles and categories: Natural Environment, Infrastructure and Well- Being , underpinned by SDG 17 which cuts across all SDGs (6). Each SDG has specific targets with performance indicators, which are currently under development and are 'expected to be adopted by the UN Economic and Social Council (ECOSOC) and the UN General Assembly (UNGA), 'preferably in June 2016' (9).

Figure 2: Framework for examining interactions between sustainable development goals. (Goal 17 is excluded from this framework because it is an overarching goal.)

Environmental-social sustainability and prospects for individual 'well-being'

The central concerns of the 2030 Agenda lie with ensuring sustainability of the natural environment, infrastructure while globally meeting basic human needs in order to safeguard and promote societal and individual well-being. The authors of 'A Vision for Human Well-being: transition to social sustainability' (10) emphasise the value of "living in ways that can be sustained because they are healthy and satisfying for people and communities." In short, they posit that "While environmental sustainability examines living within the limits of the natural world", social sustainability requires providing for material, social and emotional needs, avoiding behaviours that result in poor health, emotional distress and conflict, and ensuring that we do not destroy the social structures (such as families and communities), cultural values, knowledge systems and human diversity that contribute to a vibrant and thriving human community.

As the authors make clear, 'Key components of human well-being are dependent on well-functioning ecosystems and the biosphere" and "conversely, maintaining a healthy environment and making the transition to environmental sustainability requires human societies that function well.'

Another important working hypothesis put forth is that 'Healthy, happy individuals with a strong sense of place, identity and hope for the future are more likely to make protection of their environment a priority'. In this regard, a useful definition of "well-being" comes from the UK Department of Health which in the report Confident Communities, Brighter Futures. A Framework for Developing Well-Being' (11) defined 'well-being' as 'a positive state of mind and body, feeling safe and able to cope, with a sense of connection with people, communities, and the wider environment'. According to the report, promoting mental health and well-being can be enhanced by a number of strategies or initiatives especially those that

> • use a life course approach to ensure a positive start in life and healthy adult and older years. With such an approach, people develop and share skills to continue learning and have positive social relationships throughout life.
> • build strength, safety and resilience: address inequalities and ensure safety and security at individual, relationship, community and environmental levels.
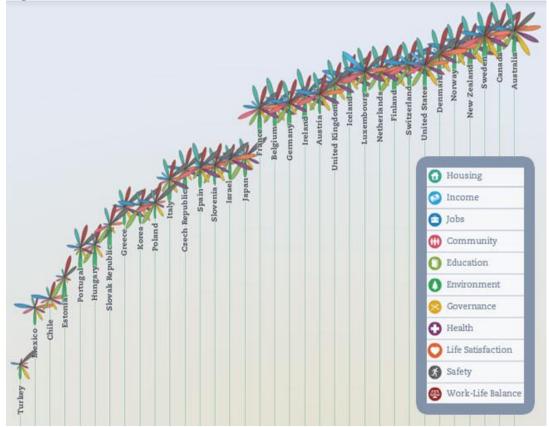> • develop sustainable, connected communities: create socially inclusive communities that promote social networks and environmental engagement
> . • integrate physical and mental health: develop a holistic view of well-being that encompasses both physical and mental health, reduce health-risk behaviour and promote physical activity.

OECD's 'better life' index: an illusionary measure for the 21st century?

The comprehensive and informative global/national/regional OECD's better life index (12,13) indicates that Australia is the '#1 place to live if all factors or criteria - housing, income, jobs, community, education, environment, governance, health, life satisfaction, safety and work-life balance - were treated with equal importance.'

Figure 3: OECD better life index

Source: OECD, 2014

However, while 'the overall level of health and wellbeing of Australians is relatively high compared with other countries,' (14) the graph and findings may be somewhat illusory and may fall short in terms of representing a true picture of individual well-being on national scales where 'there are significant disparities in the health outcomes of different populations' impacting mostly on the poor, the marginalised, the disadvantaged and increasingly the desperate as the European migration crisis makes clear.

Many past and present reviews of well-being have been and continue to be based on Gross Domestic Product (GDP) per capita. While GDP as an average measure is "a good proxy for well-being,' it 'ignores the asymmetrical distribution of wealth in a country' (10) and continues to correlate wealth and well-being as complementary and generally benign measures. Research tells us that 'happiness is not always closely associated with income or other objective indicators of well-being such as physical health.' In fact, Amartya Sen, acclaimed philosopher and proponent of social justice has argued that what is most important is to provide 'the freedoms and capabilities that allow each person to achieve what will contribute to his or her own well-being,' (15) which may place less value on material wealth and shift from economic focus toward 'equality in social relations, social trust in most other people, and degree of democracy; and safety of the area in which one lives' (10, 16).

Highlighting that 'evidence about well-being comes from several different standpoints,' Dr Piumatti from the University of Belgrade (17) reminds us that 'economists

and psychologists are improving the measures of subjective well-being' (18) and that 'questions about the influence of different determinants of psychological well-being are also being raised" (19). More specifically, he observes that

> *Researchers agree on the fact that individuals have different sources of well-being at different stages in their lives. For example, career and educational goals are highly relevant for people across the globe, particularly for young people who are transitioning into work. Failing to meet one's personal goals can result in disappointment and lower levels of well-being (20). Accordingly, in order to contribute moving the measurement of subjective well being from a primarily academic activity to the sphere of official statistic and to raise awareness on this topic, we need to build bridges across disciplines. Indeed, many new dimensions have already been absorbed by this field: nutritionists cooperate on defining the field of nutritional well-being (21), sociologists utilize the definition of community well-being (22), while other scientists analyze well-being in different age groups (23, 24). These works also represent a reflection of the complex and contested nature of well-being.*

Moreover, it is noteworthy that while the meaning and application of 'well-being' as a social construct may differ, viewed historically, 'human' well-being has been largely defined in physical terms enabled through wealth creation and made possible - especially in the past century - through advancements in technology and science. In this respect well-being has become synonymous with a substantial rise in the standard of living for about a fifth of the world population totalling close to 7.4 billion at the moment. But economic growth has come at a steep price: first, it has promulgated a rather narrow – consumption –driven- concept of 'well-being' that is human ego-centric (vs animal, environmental – eco-centric) affecting the potential prosperity of only about 20 per cent of the human population - coupled with huge losses in other species and biodiversity. And, secondly, it has created modern lifestyles that are arguably incongruous with our genetic evolution and are fast becoming a major societal dilemma affecting individuals from all groups regardless of background and increasingly all nations, high and low incomes (25, 26).

As one example, considering the limitations of Figure 3, obesity rates in Australia are climbing faster than anywhere else in the world with about 5 million Australians classified as obese (27) out of close to 24 million people. These trends are equally disturbing in the UK where, for example, a study predicts that 'by 2035, 39 per cent of the population will be classed as obese, 33 per cent will be overweight and only 28 per cent will be of healthy weight or less, on current trends. (28). Even close to half the staff in the UK National Health Service, the largest employer in the UK, –about 700,000- are estimated to be overweight or obese (29).

China is also experiencing a similar crisis. According to a study by the University of Washington's Institute for Health Metrics and Evaluation, 'The country is now No. 2 for obesity, with its number of obese residents outstripped only by the U.S. Its obesity rate has skyrocketed over the last three decades, resulting in 46 million obese Chinese adults and 300 million who are overweight (30).

Similarly, obesity appears to spreading across India, where its 'economic boom has been accompanied by a meteoric increase in the number of people with diabetes – and those at risk for the disease. Prevalence rates are up to 20% in some cities, and recent figures showed surprisingly increased rates in rural areas.' There are now over '65.1 million people with the disease, compared to 50.8 million in 2010' (31).

A study by the University of Washington's Institute for Health Metrics and Evaluation focused on South Asians and is generalizable to all nations trying to find a way forward to unhealthy and often unhappy lifestyles. Perhaps unsurprisingly their report concluded that obesity 'is primarily driven by nutrition, lifestyle and demographic transitions, increasingly faulty diets and physical inactivity, in the background of genetic predisposition' (32).

Another worrying trend likely intensified by modernism relates to mental health. Research in Australia found that 'One in four young Australians currently has a mental health condition' and 'A quarter of young Australians say they are unhappy with their lives' (14). These changes are also evidenced in levels of unhappiness in children in the UK, where a helpline study comparing reasons why children call Childline from 1986 to the present, found that one in eight calls are now primarily related to feelings of loneliness and low self-esteem rather than sexual abuse and pregnancy which was the case 30 years ago. Helpline concludes that 'the pressures of modern life are 'creating a generation of children plagued by low-level mental health problems,' causing stress attributable largely to 'social media 'and cyberbullying (33).

Exacerbating the difficulty of finding solutions in the UK and likely in other high and moderate income nations is the low priority that seems to be ascribed to mental health. As one example, the UK Medical Research Council 'spent less than 3 per cent of its budget on mental health last year,' (34) and local councils 'spend only 1 per cent of the annual budget on mental health' with some spending 'nothing on preventing mental illness' (35). Nationally only £3.3 billion are allocated to public health out of a total NHS budget of about £116 billion, that is, around 3 per cent, considering that 'annual cost from days at work lost and under-employment along with care and treatment is estimated at £105 billion' alone (34). Most health funds globally are spent on treatment of physical health, not prevention of mental illness and ensuring well-being, despite non-communicable diseases, including a dramatic rise in depression, anxiety disorders, self-harming –especially among adolescents - now accounting for c. 70 per cent of all mortalities and morbidities worldwide. Perhaps Dr Stan Kutcher from Dalhousie University in Nova Scotia, Canada, echoes the feelings of many distressed parents across the globe querying 'why mental health services waited until young people reached crisis point before stepping in,' when 'oncologists did not wait until a cancer was in stage 4 before treating it' (36). As a grieving father noted, giving young individuals who are mentally ill a 'strip of pills' and 'website names' is not the answer and more funded, collaborative and focused social research and system reform are urgently required (36).

At the extreme opposite end of the Figure 2 'well-being' spectrum are the non-OECD millions of children and young adults who are presently displaced or caught in conflict and war zones. Syria is a cruel example of 'social breakdown' as intolerable as any in preceding wars, reflected starkly in the Unicef report, 'Committing to Child Survival: A Promise Renewed Progress Report 2015' (37) and reminding us that 'in '2015 an estimated 5.9 million children will have died before turning 5 – and children under 5 from the poorest households are twice as likely to die as those from the richest.' Further, the authors acknowledge 'the cost of inaction - at moral, economic and societal levels - is too high,' and unquestionably must be viewed as one of the most important priorities for the United Nations Development Program (UNDP) and those responsible for implementing the SDGs globally (38).

Re-focusing on social and individual well-being in the 21ˢᵗ century

Rogers et al (10) conclude their article by highlighting that unlike the natural sciences where there is general consensus 'on the urgent need to reduce carbon emissions,' recently translated into a worldwide agreement at the Paris Climate conference, social science research still has a considerable distance to travel before nations agree to 'replace the consumer culture with something more supportive of human and social and emotional needs…' In this regard, while tackling poverty, inequalities and 'promoting peaceful, just and inclusive societies', our biggest challenge in this decade and beyond may be no longer defining "success and happiness" solely "in terms of material wealth" but accepting that "human happiness and well-being can continue to grow without exceeding sustainability limits and planetary boundaries' (10).

Writing in *The Times*, in a piece entitled, 'The search for happiness is all Greek to me,' science correspondent Oliver Moody laments that "Moral philosophy has all but vacated the public sphere over the last century, and, while we might blame practitioners for walling themselves up in a labyrinth of obscurities", the truth may be "that the rest of the world is too busy upgrading its iPhones and filling its tax returns to listen". The writer's main point is that our seemingly 'busy' lives make "all of us poorer" and "without a common idea of neither happiness nor "even the means to come up with one" (39).

His conclusion may be confirmed by on-going deliberations that involve the draft SDG indicators by hundreds of dedicated stakeholders. The SDG indicators are certainly pointing in the right direction (9), but, by and large, the emphasis is still primarily on 'conventional growth, competitiveness and personal gain' not on 'promoting sustainable social development and well-being for all' (10). In short, there is little evidence that the SDGs will lead to diminishing 'inequalities within and between societies' along with developing 'economic and political policies and institutions that serve human well-being in all its dimensions.'

The UN decision to establish a ten-member group to support the Technology Facilitation Mechanism (TFM), as part of the Addis Ababa Action Agenda (AAAA) for the period 2016-2017 to promote 'technology initiatives' is an important step (40). It is also telling. The decision does little to respond to 'the imperatives of human rights and the values of humanity and solidarity' (40). As success of the UN 2030 Agenda for Sustainable Development (6) depends arguably more on human than technological systems and factors, as the 20ᵗʰ century and this century have already painfully demonstrated, would it not make sense to establish a parallel, authoritative 'mechanism' for achieving humanitarian ends that value 'consensus and common action, mutual respect, inclusiveness, transparency, accountability, legitimacy and responsiveness'? (4). Moody appears to be entirely justified in reminding us that it is really time 'to tell us why we're wrong'- and the urgency 'to show us a better way' (39).

It is against this broad background that we have established the '*One Health* Global Think Tank for Sustainable Health and Well-Being – 2030' and agreed its overall rationales and guidelines.

The *one health* global think-tank for sustainable health & well-being -2030 (GHW-2030)

Purpose

To bring together global multi-sectoral and multi-disciplinary thought leaders to articulate and advocate for sustainable 'planet and people' health and well-being.
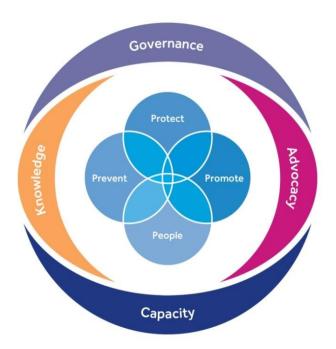
Mission and Method

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- stimulating public *online discussions* as well as potential *consortial activities,* including social media; and
- contributing to *decision-making and policy development* (government and non-governmental) to enhance sustainable 'health and well-being' at local, national, regional and global levels, involving existing and potential mechanisms for transformative enabling action.

Figure 4: Public Health Systems and Services

Source: Commonwealth Secretariat, Health and Education Unit, 2015 (33)

*Potential Journals (others to be added depending on theme or author preference)
American Journal of Preventive Medicine, American Journal of Public Health, Bulletin of the World Health Organisation, American Journal of Tropical Medicine and Hygiene, Ecology Letters, European Journal of Public Health, Global Journal of Interdisciplinary Social Sciences, Health Affairs, Infection Ecology and Epidemiology, International Journal of One Health, International Journal of Public Health, Journal of the American Medical Association, Journal of American Public Health, Journal of International Humanitarian Action, Journal of the Veterinary Medical Association, Journal of the United Nations, Lancet Global Health, One Health Journal (Sweden), Oxford Public Health Magazine, PLOS ONE, South Eastern European Journal of Public Health, Trends in Ecology and Evolution, Vector-Borne and Zoonotic Diseases, Veterinary Sciences (Switzerland), World Bank Research Observer….

In addition, along with others, think tank members will have the opportunity to engage in *high level on-line policy discussions* on the Commonwealth Secretariat's Health and Education Unit *Hubs* as well as contribute to a range of *policy briefs* which target policy makers and planners on key global health issues (4).
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The 'One World, One Health' concept refers to 'a worldwide strategy for expanding interdisciplinary collaboration and communication in all aspects of health for humans, animals and the environment' (42). According to the One Health Initiative (OHI), 'The synergism achieved will advance health care for the 21st century and beyond by accelerating biomedical research discoveries, enhancing public health efficacy, expeditiously expanding the scientific knowledge base, and improving public health education and health care.' The global One Health Commission (43) asserts that these aims can be greatly facilitated by:

- *Connecting* One Health Stakeholders
- *Creating* Strategic Networks / Partnerships
- *Educating* about One Health issues to support a paradigm shift in information sharing, active health interventions, collaborations, and demonstration projects.

It is anticipated that 'When properly implemented, the One Health concept will help protect and save untold millions of lives in our present and future generations' (42). Public Health is the fundamental bridge or key coordinating mechanism to 'improve health outcomes and well-being of humans, animals and plants and to promote environmental resilience…' (43).

Immediate Catalysts

The GHW-2030 think tank has developed based on the experience with the international group of advisors contributing to the final chapter of George Lueddeke's book, *Global Population Health and Well-Being in the 21st Century – Toward New Paradigms, Policy, and Practice* (25). The intention is to make use of this network of excellence and create a permanent structure inviting additional experts to work on topics of global health and well-being relevance. More particularly, the impetus for establishing the think tank is based on recommendations contained in the book's Epilogue, which highlights recommendations for global decision makers, including the need to consider *'the creation of a collective Public or Population Health and Well-Being vision underpinned by Global Social Justice, formalized structures of regional health* and well-being'; and transforming *'traditional health & and social care education and training through innovative practice, focusing on prevention and health promotion'* (44).

Supporting the latter, the Association of Schools of Public Health in the European Region (ASPHER) has already recently underlined this essential in its Global Charter (45) and in its Strategy 2020 (46). Similarly, the World Federation of Public Health Associations (WFPHA) has prepared "A Global Charter for the Public's Health: The Public Health System: Role, Functions, Competencies and Education Requirements" (47) (in print), and the framework of a global strategic network for public health education and training has been outlined by Professor Vesna Bjegovic-Mikanovic, ASPHER president, et al (48).˙

Organisation
For the time being the group will function in association with the Commonwealth Secretariat Health and Education Unit (HEU), facilitated by its on-line health and education hubs. Links to other think tanks or working groups addressing similar concerns will be developed wherever possible.

Membership and Affiliations
Think tank members (two year renewable term) involve those who helped to draft the Epilogue 'Global Health, Education and Governance,' for the book, *Global Population Health and Well-Being in the 21ˢᵗ Century: Toward New Paradigm, Policy and Practice** (25) and others working in diverse capacities in such areas as education, politics, health, research, journalism, economics, civil service, business, law, to name several fields. Affiliations include leading organisations focusing on global / national health and well-being.

Additional Affiliations
A number of key organizations have joined the think-tank. Additional members are being sought representing *inter alia:*

> *American Public Health Association (APHA), Asia Pacific Academic Consortium for Public Health (APACPH), Earth Institute (TEI), European Public Health Association (EUPHA), Global Health Council (GHC), India Public Health Association (IPHA), International Association of Public Health Institutes (IANPH), Rockefeller Foundation (RF), United Nations – UNDP, UNESCO, UN FOUNDATION, World Bank Group (WBG), World Health Organisation (WHO), World Veterinary Association (WVA), World Medical Association (WMA).*

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