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REVIEW



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BRICS leaders issue Rio de Janeiro Declaration and highlight health initiatives led by Fiocruz

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ABSTRACT

Brazil assumed the presidency of BRICS this year and stipulated some health priorities as strengthening BRICS Network of Research in Public Health and Health Systems; strengthening BRICS Vaccine Research and Development Centre; elimination of socially determined diseases and infections; tuberculosis research network; combat public health emergencies of international concern or catastrophes; physical and technological infrastructure for specialized care in remote and hard-to-reach areas; BRICS regulatory authorities for medical products; and artificial intelligence and data governance in health systems. BRICS leaders gathered for the 17th Summit on July 6–7 in Rio de Janeiro, Brazil, where they issued the Rio de Janeiro Declaration, themed “Strengthening Global South Cooperation for More Inclusive and Sustainable Governance”. In the human and social development promotion section of the main document, the health-related paragraphs highlighted two initiatives led by Fiocruz, a strategic institution of the Brazilian State: the BRICS Network of Research in Public Health and Health Systems and the BRICS Vaccine Research and Development Centre. A third initiative, the Conference of the BRICS National Public Health Institutes, coordinated by Fiocruz, although not mentioned at the Leaders’ Summit, earned a place in the BRICS Health Ministers’ declaration due to its significance. Its recommendations will help advance knowledge on public health issues and support decision-making processes. The objective of this article is to report the development of initiatives led by Brazil during its presidency in 2025 and subsidize India, the next presidency, to continue the health actions related to health.

Key Words: BRICS, 17th BRICS Leaders’ Declaration; BRICS Network of Research in Public Health and Health Systems; BRICS Vaccine R&D Center; Conference of the BRICS National Public Health Institutes; Health Systems Strengthening; Electronic R&D Stock; e-R&D-Hub; access to vaccines and medicines

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Introduction

In the current international landscape, where short-term interests and bilateral strategies gain strength, the struggle for solidarity and cooperation continues to represent resistance. The recent foreign policy of the United States under Donald Trump’s ruling, exemplifies this rupture with the multilateral and solidarity-based logic where the defense of national interests occurs, among other ways, through the instrumentalization of international institutions when they favor direct political or economic gain, and their dismantling when they do not^{1,2,3}.

In this context, global health emerges as one of the most promising plexuses for building practical consensus, especially due to its

¹ Amorim C. Brasil defende o multilateralismo [Brazil defends multilateralism]. [In Portuguese]. Le Monde Diplomatique. Portuguese edition. May, 2025. Accessed 22.10.2025. <https://pt.mondediplo.com/2025/05/o-brasil-defende-o-multilateralismo.html>

² Cox RW. Gramsci, hegemonia e relações internacionais: um ensaio sobre método. In: Gill S. Gramsci: materialismo histórico e relações internacionais [Gramsci, Hegemony and International Relations: An Essay on Method. In: Gill S. Gramsci: Historical Materialism and International Relations]. [In Portuguese]. Rio de Janeiro: Editora UFRJ; 2007:101-124. Accessed 22.10.2025. <https://ru.scribd.com/document/392014459/Robert-Cox-Gramsci-Hegemonia-e-Relacoes-Internacionais>

³ Carnegie A, Clark R. Multilateralism can survive Trump. Foreign Affairs. December 24, 2024. Accessed 27.10.2025. <https://www.foreignaffairs.com/united-states/multilateralism-can-survive-trump>

interdependent, universal nature, and direct connection to human security. This hypothesis gains strength when analyzed from the perspective of "multiplexity", which refers to an international order composed of multiple modes of governance that coexist and interact. Considering that the international system is polycentric and plural, depending on the area, behavior and influence from actors related to the governance and outcomes might change. While trade, security, and the environment often collapse under geopolitical disputes, global health presents a potential arena for convergence. It allows countries with different political orientations to cooperate, as has been seen in the tackle against HIV/AIDS or during the COVID-19 response.

From this perspective, plurilateral forums, mainly informal international organizations, such as BRICS, which host discussions on global health and its challenges, take on relevance for fostering and promoting international cooperation. Cooper, Dal, and Canon argue that, in operational terms, the choice of informal institutions over formal ones is related to the increased importance of efficiency. Nevertheless, not all international organizations are equally relevant [1]. Cooper focuses on the premise that some informal institutions are more important than others and, therefore, deserve greater attention [2].

For Amorim, diplomat and special advisor to the Brazilian Presidency for International Affairs, unlike other coalitions of developing countries, BRICS's performance is marked by concrete results⁴. One of the examples he most often cites is the New Development Bank, created in 2014, which offers public financing focused on infrastructure and sustainability. In addition to providing public funding, BRICS aims to be a forum for political and diplomatic articulation among countries of the Global South and a space to promote cooperation in various areas, including health^{5,6}.

BRICS recognizes the North-South divide and is aware that the Global South development is the main step to move forward on reducing inequities in the world. Despite industrialization efforts in various countries in the South, industrial convergence has not been accompanied by a convergence in the levels of income and wealth [3].

This context increased BRICS relevance during the Brazilian chairship in 2025 that established two strategic priorities as its central focus: (1) Global South Cooperation and (2) BRICS Partnerships for Social, Economic, and Environmental Development, under the motto "Strengthening Global South Cooperation for More Inclusive and Sustainable Governance". Brazil proposed directing efforts and political attention to six thematic areas considered fundamental: (1) Global Health Cooperation; (2) Trade, Investment, and Finance; (3) Climate Change; (4) Artificial Intelligence Governance; (5) Reform of the Multilateral Peace and Security Architecture; and (6) Institutional Development⁷.

The unprecedented prioritization of Global Health Cooperation by the Brazilian BRICS chairship in 2025 represents a historic opportunity for Brazil to exercise innovative and influential leadership, capable of repositioning health at the center of multilateral agendas and articulating global solutions in strategic spaces such as the BRICS. As Buss, Estephanio, Kavanami and Burger suggested, Brazil might continue to use its influence for promoting transformative global pacts, whose

⁴ Amorim C. Brasil defende o multilateralismo [Brazil defends multilateralism]. [In Portuguese]. Le Monde Diplomatique. Portuguese edition. May, 2025. Accessed 22.10.2025. <https://pt.mondediplo.com/2025/05/o-brasil-defende-o-multilateralismo.html>

⁵ Hoirisch C. BRICS tenta redesenhar a ordem internacional [BRICS attempts to reshape the international order]. [In Portuguese]. Accessed 22.10.2025. <https://ceei.fiocruz.br/?q=Artigo-BRICS-por-Claudia-Hoirisch>

⁶ Amorim C. BRICS: O novo nome do multilateralismo [BRICS: The new name for multilateralism]. [In Portuguese]. Accessed 22.10.2025. <https://www1.folha.uol.com.br/opiniao/2025/07/brics-o-novo-nome-do-multilateralismo.shtml>

⁷ Brasil divulga prioridades de sua presidência à frente do Brics [Brazil announces priorities for its BRICS presidency]. [In Portuguese]. Accessed 22.10.2025. <https://agenciabrasil.ebc.com.br/internacional/noticia/2025-02/brasil-divulga-prioridades-de-sua-presidencia-frente-dos-brics>

common goal is the implementation of the Sustainable Development Goals to progress towards global equity within and between countries [4].

Regarding the health agenda, Brazil included into discussions core objectives such as strengthening the BRICS Network of Research in Public Health and Health Systems and the BRICS Vaccine R&D Centre, fostering partnerships for the elimination of socially determined diseases and infections, enhancing the tuberculosis (TB) research network, and addressing public health emergencies of international concern or catastrophes. Additionally, the agenda focused on physical and technological infrastructure for specialized care in remote and hard-to-reach areas, the BRICS regulatory authorities for medical products and the advancement of artificial intelligence and data governance in health systems⁸.

The confluence of these priorities culminated in the 17th BRICS Summit, held in Rio de Janeiro on July 6–7. On that occasion, delegations from eleven member countries (Brazil, Russia, India, China, South Africa, Saudi Arabia, Egypt, United Arab Emirates, Ethiopia, Indonesia, and Iran) along with ten partner nations (Belarus, Bolivia, Kazakhstan, Cuba, Malaysia, Nigeria, Thailand, Uganda, Uzbekistan, and Vietnam) gathered. Six invited countries also attended: Angola, Chile, Kenya, Mexico, Turkey, and Uruguay. The summit saw participation from regional organizations including the Community of Latin American and Caribbean States and the African Union, as well as multilateral organizations within the United Nations system, such as the World Health Organization, World Trade Organization, and United Nations Conference on Trade and Development. Development banks including the New Development Bank, Asian Infrastructure Investment Bank, and Development Bank of Latin America were also invited. The strong Global South representation reinforced Brazil's expectation of uniting a significant coalition of nations and organizations with aligned objectives.

On the first day, Brazil's Ministry of Foreign Affairs released the Rio de Janeiro Declaration, themed "Strengthening Global South Cooperation for a More Inclusive and Sustainable Governance"⁹. Alongside this main document, three key statements were issued: the BRICS Partnership for the Elimination of Socially Determined Diseases¹⁰, the BRICS Leaders' Framework Declaration on Climate Finance¹¹, and the BRICS Leaders' Statement on the Global Governance of Artificial Intelligence¹².

The human and social development section contains four health-related paragraphs. One of them highlights two initiatives led by Oswaldo Cruz Foundation (Fiocruz), a strategic institution of the Brazilian State: the BRICS Network of Research in Public Health and Health Systems, described in the declaration as a "vital forum for collaboration among high-level public health organizations of the BRICS countries", coordinated by Fiocruz's National School of Public Health and the Vice-Presidency of Global Health and International Relations; and the BRICS Vaccine Research and Development (R&D) Center, managed by Bio-Manguinhos Institute.

Moreover, there is a third initiative also coordinated by Fiocruz, which is the Conference of the BRICS National Public Health Institutes (NPHIs).

⁸ Brazilian Presidency. Accessed 22.10.2025. <https://brics.br/en/about-the-brics/brazilian-presidency>

⁹ Rio de Janeiro Declaration. Strengthening Global South Cooperation for a More Inclusive and Sustainable Governance. Accessed 22.10.2025. [@download/file](http://brics.br/en/documents/presidency-documents/250705-brics-leaders-declaration-en.pdf)

¹⁰ BRICS nations sign partnership to eliminate diseases driven by poverty and inequality. Accessed 21.09.2025. <https://brics.br/en/news/brics-nations-sign-partnership-to-eliminate-diseases-driven-by-poverty-and-inequality>

¹¹ BRICS Leaders' Framework Declaration on Climate Finance. (In Portuguese). Accessed 21.09.2025. https://www.gov.br/mre/pt-br/canais_atendimento/imprensa/notas-a-imprensa/declaracao-marco-dos-lideres-do-brics-sobre-financas-climaticas

¹² BRICS Leaders' Declaration on Global Governance of Artificial Intelligence. (In Portuguese). Accessed 21.09.2025. https://www.gov.br/mre/pt-br/canais_atendimento/imprensa/notas-a-imprensa/declaracao-dos-lideres-do-brics-sobre-governanca-global-da-inteligencia-artificial

Although not mentioned at the Leaders' Declaration, its significance earned a place in the BRICS health ministers' declaration¹³. The Conference's recommendations will help advance public health knowledge and support decision-making processes.

The objective of this article is to document the progress derived from the development of these three initiatives led by Fiocruz during Brazil's 2025 BRICS presidency. By detailing the operational outcomes and analyzing their contributions to global health issues, this work aims to provide a blueprint and concrete recommendations for India's succeeding BRICS presidency to continue the health track actions.

Advancement of Fiocruz-led initiatives

BRICS Network of Research in Public Health and Health Systems

The BRICS Network of Research in Public Health and Health Systems was first proposed in 2024 during the Russian presidency of the BRICS, with Fiocruz designated as Brazil's representative. The objective was to foster cooperation and mutual support in public health, including the analysis of the health systems of the BRICS countries.

Under the Brazilian presidency in 2025, the initiative evolved into a structured Work Program aimed at strengthening BRICS health systems through South-South cooperation. The Network's primary objective is to promote collaboration and mutual support among BRICS countries in the field of public health. The Network's work rests on key pillars: (1) South-South cooperation, as an essential instrument for health systems strengthening, (2) by reinforcing health systems, it becomes possible to simultaneously improve population well-being and enhance the efficiency and quality of health services.

BRICS constitutes a group of populous, economically dynamic countries facing social inequalities common to countries of the Global South. They possess health systems with different organizations and similar challenges regarding governance, financing, and control of some chronic and infectious diseases. Recent studies have highlighted the importance of strengthening their health systems to increase their resilience to future health emergencies [5]. There is evidence of the relevance of the role of nation-states in building strategies for health sovereignty and the need to strengthen cooperation among BRICS countries from an equitable perspective [6, 7].

A significant political milestone in 2025 was the holding of the 15th meeting of BRICS health ministers, reaffirming the importance of cooperation in health. The final declaration emphasized the collective commitment to addressing global health challenges, reducing structural inequalities, and expanding collaboration across the Global South. The Ministers underscored the need to build capacities, ensure universal access to health care, vaccines, medicines, and diagnostics, and strengthen resilient systems that promote equity in health. A key outcome of this declaration was the formal recognition of the BRICS Network as an essential platform for collaboration, focused on policy and health systems research. This political endorsement consolidated the Network's legitimacy and reinforced its role as a strategic mechanism for collective action.

Based on these advances, the BRICS Network Work Program was structured around three main areas: (1) technical cooperation, aimed at

¹³ Declaration of the XV BRICS Health Ministers' Meeting. Accessed 21.09.2025. http://brics.br/en/documents/social-issues/250617_brics_xv-brics-health-declaration.pdf/@download/file

identifying good practices and priority policies in each country, always respecting national contexts and promoting local autonomy, (2) capacity building in strategic areas to strengthen health systems, through seminars and short courses, (3) health systems research, to generate evidence to support public health decisions. The process of developing this Program was highly participatory. Meetings were held with strong engagement from Network members, broad dialogues on health systems and cooperation in priority areas, which allowed the identification of both common challenges and numerous possibilities for joint action.

The implementation of the Work Program began in April 2025 with the inaugural meeting of the Network. At that meeting, the characteristics of each country's health system were mapped and the role of the BRICS Bank in financing joint initiatives was discussed. Each delegation presented an overview of its national health system, addressing its organization, governance, financing, priority policies, and the main health problems faced by its population. Based on this, a central question was addressed: what would be the potential areas of cooperation and joint research among the BRICS countries, considering their characteristics, strengths and challenges? These presentations showed the great diversity of experiences, but also revealed common challenges and, above all, several opportunities to strengthen the BRICS health systems collaboratively.

In May 2025, the second meeting of the Network was held. On that occasion, the dialogue on opportunities for cooperation among the BRICS health systems was advanced. Each country presented its best practices and priority policies in health, enriching the collective debate. It was also discussed the governance of cooperation between countries, identifying mechanisms to implement these practices of bilateral or plurilateral interest. Another important result was the presentation of the Terms of Reference for the construction of a compendium of best practices in health systems, with inclusion criteria and basic content. Furthermore, the Terms of Reference was introduced for the elaboration of a book on the health systems of the BRICS countries, aimed at generating applied results. Finally, It was identified priority areas for joint research and capacity-building activities. This mapping paved the way for the next phase of the work.

The consolidation of a structured Work Program to implement research, training, and technical cooperation actions is one of the main results of the Network's work in 2025. This collective effort will result in three concrete products: a basket of good practices and priority policies in health systems, a comprehensive book on the health systems of the BRICS countries, and joint research and training activities in priority areas. These areas include structuring and strategic themes for strengthening health systems, such as: (1) Primary health care, (2) Health information systems and digital health, (3) Pharmaceutical care (development and provision of vaccines, medicines, diagnostics, and strategic supplies), (4) Epidemiological studies, surveillance, and emergency preparedness, (5) Aging and control of chronic diseases, (6) Maternal and child health, (7) Environment, climate change and health; (8) Communicable diseases; (9) Social Determinants of Health and (10) Human resources in health.

One of the most innovative elements of the Network's Work Program is the basket of good practices and priority policies in BRICS health systems. This instrument brings together successful national experiences that can inspire other countries in the bloc. The proposal was that each country select relevant practices, considering its own context, and that these practices compose a basket available to the Ministries of Health

of the BRICS countries, as support and encouragement for cooperation. It is a living repository that values the diversity of the BRICS and strengthens South-South cooperation.

In summary, the Network presupposes three collaborative strategies to build more resilient health systems:

1. supporting South-South cooperation through the development of a basket of good practices and priority policies in health systems,
2. expanding the production and dissemination of evidence on BRICS health systems through the comprehensive book, which is in progress,
3. fostering joint research and capacity-building activities in strategic areas such as primary care, digital health, epidemiological surveillance, aging, climate change, among others.

The innovative nature of this proposal lies in the participatory process: each country will design projects according to its interests and, after validation by the Network, subgroups will be formed to develop research and capacity-building actions.

The BRICS Network of Research in Public Health and Health Systems was conceived to support the strengthening of several strategic areas. Among them are universal health systems, primary care, digital health, and the advancement of science and technology in health in the countries of the bloc. Another essential point is to expand the influence of countries in the Global South in the international governance of health. And, at the same time, to promote sustainable socioeconomic development with social inclusion, reinforcing health as a right and as a vector of social justice.

BRICS Vaccine R&D Centre

The BRICS Vaccine R&D Centre is rooted in a continuous commitment to collective action, tracing its formal origins back to the 10th BRICS Summit in Johannesburg in 2018¹⁴. In that occasion leaders demonstrated their first inclination to establish cooperation mechanism related to vaccine R&D.

This momentum was sustained through subsequent meetings. For instance, the 2020 Moscow Declaration encouraged the timely and effective operationalization of the BRICS Vaccine R&D Centre. In 2021, the New Delhi Declaration welcomed the tangible progress made toward a virtual launch.

A consensus was achieved among the original five countries (Brazil, Russia, India, China and South Africa) as leading national institutions were designated to represent their countries in the Centre. The Institute of Technology on Immunobiologicals (Bio-Manguinhos) of the Oswaldo Cruz Foundation (Fiocruz) was named as the Brazilian national center.

The virtual launch of the BRICS Vaccine R&D Centre ultimately took place on March 22, 2022, led by China's Ministry of Science and Technology. During this remarkable event, the national centers jointly proposed the "Initiative to Strengthen Cooperation on Vaccines and Jointly Build a Defense Line Against Pandemic", solidifying a significant platform for preparedness and technological sovereignty among member states.

In the backdrop, the Director-General of the World Health Organization, Dr. Tedros Adhanom Ghebreyesus warned that "...the world is on the brink of a catastrophic moral failure—and the price of this failure will be paid with lives and livelihoods in the world's poorest countries. At that stage, high-income countries had administered over 39 million COVID-19

¹⁴ 10th BRICS Summit – Johannesburg Declaration – July 27, 2018. Accessed 22.10.2025. <https://www.gov.br/mre/en/contact-us/press-area/press-releases/10th-brics-summit-johannesburg-declaration-july-27-2018>

vaccine doses across at least 49 nations, compared to just 25 doses in a single low-income country¹⁵⁻¹⁷. These disparities persisted throughout the pandemic-by November 2022, nearly 13 billion vaccine doses had been administered globally, yet less than 25% of people in low-income countries had received even one dose [8].

Access to COVID-19 diagnostic testing and treatments revealed similar disparities. Only 0.4% of the 3 billion COVID-19 tests conducted globally by March 2022 were performed in low-income countries [9]. Treatment disparities in access to COVID-19 treatments proved even more stark, with high-income countries reserving over 70% of available medicines, while just eight low-income nations had received oral antiviral treatments by November 2022¹⁸. These systemic failures prompted BRICS countries to establish this collaborative mechanism. In the same sense, BRICS nations recognized the need to develop effective solutions for emerging challenges, including a rapid and coordinated response to a potential Disease X threat¹⁹.

In 2024, during the Russian Federation's 2024 Pro Tempore Presidency, the Centre further advanced its activities by proposing an electronic platform aimed at intensifying connections among the participants. This effort was reflected in the Declaration of the XIV BRICS Health Minister's Meeting where Russia presented the so-called Electronic R&D Stock (e-R&D-Stock). This mechanism is a dedicated digital exchange space designed to foster scientific and technological collaboration projects. It seeks to connect diverse vaccine market stakeholders, including research institutions, pharmaceutical companies and regulatory bodies to enable the sharing of competences, dissemination of R&D project information, and provision of consulting services. Its key functionalities focus mainly on optimizing collaborative R&D, clinical and preclinical studies, technology transfer, and supply chain activities.

Under Brazil's 2025 Pro Tempore Presidency, the Brazilian Ministry of Health alongside with Bio-Manguinhos/Fiocruz proposed four main goals to significantly advance the Centre's activities: advancing discussions and a framework for the Electronic R&D Stock; stimulating bilateral partnerships and cooperation with other BRICS Networks (such as those on Tuberculosis, Socially Determined Diseases, and Regulatory Agencies) while emphasizing alignment with the Global Coalition for Local Production, Innovation, and Equitable Access; promoting the engagement of the New Development Bank (NDB) to establish a resource mobilization strategy for BRICS vaccine and biotechnology initiatives; and driving the Centre towards a concrete operational structure, especially considering the expansion of the BRICS membership.

Pari passu to these objectives, the Centre also seeks to contribute to achieving the Sustainable Development Goals of the 2030 Agenda, particularly Goal 3 – Health and well-being. Aligned with an agenda that integrates science and production while contributing to public policies, these efforts aim to expand regional and Global South capacities

¹⁵ WHO Director-General's opening remarks at 148th session of the Executive Board. Accessed: 22.10.2025. <https://www.who.int/news-room/speeches/item/who-director-general-s-opening-remarks-at-148th-session-of-the-executive-board>

¹⁶ Buss P, Hoirisch C, Alcazar S. O Brics e a barbárie global das vacinas [BRICS and the global barbarity of vaccines]. (In Portuguese). Accessed: 22.10.2025. <https://ceefiocruz.br/?q=o-brics-e-barbarie-global-das-vacinas>

¹⁷ Hoirisch C. Quo vadis, Brics? Colaboração biofarmacêutica, diplomacia vacinal dos BRICS e (des)motivações para o cumprimento dos compromissos acordados sobre vacinas COVID-19 [Quo vadis, BRICS? Biopharmaceutical collaboration, vaccine diplomacy of the BRICS and (de)motivations for fulfilling the agreed commitments on COVID-19 vaccines]. (In Portuguese). Accessed: 22.10.2025. <https://api.arca.fiocruz.br/api/core/bitstreams/e747f0b4-d61f-424c-9aca-894a1e20e7a6/content>

¹⁸ COVID-19 Market Dashboard. Unicef (N.D.) COVID-19 market dashboard. Accessed: 07.10.2025 <https://www.unicef.org/supply/covid-19-market-dashboard>

¹⁹ Moscow Declaration of the XIV BRICS Health Ministers' Meeting. Accessed: 22.10.2025. [@download/file](https://brics.br/pt-br/documentos/acervo-de-presidencias-anteriores/health-ministerial-declarations/2024-brics-health-ministers-declaration.pdf)

in innovation and production, with the goal of ensuring equitable access to vaccines and health technologies.

To date, the Centre has held three key meetings. The First Meeting, in March, sought to bring together a shared understanding of member countries' health systems functioning, with a focus on schedules and access to vaccination; the World Health Organization's perspective on potential BRICS contributions to global health; and the NDB's operational mechanisms and potential support to the Centre, emphasizing a balanced approach regarding the requirements to drive the creation of the e-R&D-Stock.

The Second Meeting, in May, had as its main themes: enhancing cooperation among Centre members based on previously identified opportunities; strengthening integration with other BRICS health initiatives (the TB Research Network, the Partnership for the Elimination of Socially Determined Diseases, and cooperation among regulatory agencies); as well as advancing the proposal to establish the e-R&D-Stock and discussing opportunities to support the Centre's activities – including drafting ministerial declaration language to highlight the Centre's priorities and aspirations.

Finally, the Third Meeting, in September, focused on deepening the necessary foundations for the Centre's consolidation and future activities. Discussions included a progress update from the e-R&D-Stock Working Group, a review of the Centre's governance structure (originally proposed by China in 2022) to adapt it to the expanded BRICS membership, and information sharing on the outcomes of the BRICS Medical Products Regulatory Authorities Meeting.

Furthermore, the meeting initiated a significant discussion on launching a dedicated BRICS Vaccine project, identifying tuberculosis as the first potential target. The session concluded with a valuable exchange of experiences on R&D regulation, intellectual property, technology transfer, and infrastructure financing, featuring presentations from key industry players.

Following the 2025 meetings, BRICS member countries also agreed to establish a Working Group to operationalize the initiative, officially adopting the name e-R&D-Hub for the digital platform. This Working Group has been convening monthly since June 2025, focusing on resolving critical operational and legal challenges necessary for the platform's launch. A key achievement was the finalization and agreement of the comprehensive Terms of Reference in October 2025. This document defines the Group's scope and mandates, a formal governance structure, including the establishment of a Steering Committee, an Advisory Board, and a Secretariat. The Group concentrated heavily on resolving critical issues such as securing a sustainable financing model, establishing policies for intellectual property and data security, and ensuring technical interoperability among member countries' systems. Future deliverables for the WG include drafting a dedicated Data Governance Policy, an Intellectual Property Policy, and a Budget Proposal to secure the necessary support for the platform's full implementation and initial launch.

Conference of the BRICS National Public Health Institutes

The Conference of the BRICS National Public Health Institutes NPHIs aimed to formulate coordinated messages and proposals from about twenty National Public Health Institutes (including BRICS members and partners) to provide technical and political advice to BRICS Health Ministers and promote cooperation among countries.

The Conference took place in Rio de Janeiro from September 15–17, 2025, and was conceived as a forum to generate mutual knowledge among BRICS NPHIs, as well as to promote political and technical coordination around critical issues for NPHIs such as health surveillance and socially determined diseases.

Despite their functional diversity, the NPHIs share a common commitment to public health and population well-being in their respective countries, advising and supporting their governments through scientific and technical guidance. As key structures within health systems, they play a fundamental role in reducing health inequities, protecting citizens from health threats and emergencies—such as pandemics, vaccine-preventable diseases, emerging and re-emerging infectious diseases, natural disasters, and antimicrobial resistance—while ensuring universal, comprehensive, and quality health care, in line with the One Health approach [10].

Imperative to the implementation of a significant number of policy decisions, NPHIs fulfill essential public health functions by generating scientific evidence to inform public actions, developing the health workforce, engaging in cross-sectoral, regional, and international collaborations to strengthen global health security, among others [11].

In this regard, the coordination, alignment, and joint planning enabled by the Conference of the BRICS NPHIs represent key factors for enhancing the effectiveness of actions and commitments made by BRICS member governments, thereby decisively contributing to the creation of more resilient, robust, equitable, effective, and high-quality health systems²⁰.

The agenda of the Conference, encompassed the following issues: (1) Strategic Dialogue among BRICS NPHIs: Mapping NPHI Capacities on Shared Health Priorities; (2) Health Surveillance and Emergency Response; (3) Strengthening National Health Systems; (4) BRICS Cooperation on the Social Determinants of Health to Address Health Inequities; (5) Climate Change, Health and Equity: A Strategic Pathway to COP30; and (6) Combating Hunger and Poverty.

The Conference successfully agreed to launch the Network of BRICS NPHIs which will continue NPHIs engagement in relevant health matters throughout specific working groups. Another successful achievement was the commitment of the Government of India to include the Conference and this Network in the agenda for their upcoming BRICS chairship. The above-mentioned, among other commitments can be found in the Conference Declaration²¹.

Other health initiatives mentioned in the Leaders' Declaration

The countries have chosen to develop a Partnership for the Elimination of Socially Determined Diseases²². The concept involves nations uniting to eliminate poverty-related illnesses, such as TB, leprosy, yellow fever and dengue.

The Partnership will establish priority diseases at each stage, according to each country's legislation and capacities. Global and regional conferences on the subject are planned, with participation from national health institutes, universities and health ministries.

²⁰ Moreira M, Buss PM, Estephanio JM. Strengthening national public health institutes: Fiocruz's perspective. In: Kickbusch I, Kirton J. Health: a political choice – the future of health in fractured world, London: Global Governance Project, 2025. Accessed: 22.10.2025. <https://a.storyblok.com/f/305196/x/111f24a7f2/health-is-a-political-choice.pdf>

²¹ Conference of the BRICS National Public Health Institutes (NPHIs). Issues note. BRICS 2025. Accessed: 22.10.2025. <http://brics.br/pt-br/documentos/conference-of-the-brics-national-public-health-institutes-nphis-issue-note-brics-2025.pdf/@download/file>

²² Elimination of Socially Determined Diseases and Infections. Issues note. BRICS 2025. Accessed: 22.10.2025. <https://brics.br/pt-br/documentos/elimination-of-socially-determined-diseases-and-infections-issue-note-brics-2025.pdf/@download/file>

Once priority diseases are identified, the Partnership will seek to strengthen existing BRICS initiatives, particularly the BRICS Network of Research in Public Health and Health Systems and the BRICS Vaccine R&D Center (and in the case of TB, the BRICS TB Research Network), which provide robust platforms for collaborative research, surveillance, training of health personnel and innovation.

Regarding socially determined diseases, it is important to note that BRICS countries account for over 50% of the global TB burden. The TB Research Network aims to participate in clinical trials for new vaccines under development. Funding for this type of research remains a concern, and under Brazil's leadership new funding sources will be sought to sustain ongoing research initiatives.

The consolidation of the TB Research Network with support from the New Development Bank and the World Health Organization, guiding research and policy, along with regulatory cooperation on medical products, demonstrates the concrete progress BRICS has made as a group²³.

Final considerations

As BRICS expands its membership and influence, its emergence as a powerful global bloc has drawn increasing scrutiny from the United States. With the inclusion of new member countries, BRICS now represents 45% of the world's population and contributes approximately 35% to global gross domestic product, marking a significant shift in global power dynamics.

The BRICS Network of Research in Public Health and Health Systems promotes health cooperation to address structural and health inequalities in the Global South. It operates on the premise that robust public health systems can drive social and economic improvements, with direct and indirect impacts on living conditions. Research, training of health personnel, and technical cooperation among BRICS nations can contribute to strengthening universal health systems, with primary healthcare, digital health, science, and technology serving as strategic components. In the context of the current crisis in multilateralism, the proactive and coordinated action of BRICS countries represents a pathway to consolidating their role in global governance.

e-R&D-Hub initiative serves as a structural proposal through which member states—despite their diversity and geographical distances—can showcase potential collaborative projects for developing strategic health products. The e-R&D Hub aims to foster partnerships not only for vaccines but also for medicines and diagnostic kits that support public health policies, ensuring equitable access in alignment with the objectives of the BRICS Vaccine R&D Center. The establishment of a working group marks an important step forward for the project. However, greater commitment and active participation from member countries will be essential to fully realize their intended goals.

The BRICS Summit yielded highly positive outcomes across all areas, though continued follow-up will be necessary to ensure the implementation of approved proposals. It would be advantageous to advance in its institutionalization, with the creation of a permanent Health Ministers' Council, supported by a technical secretariat, which could facilitate the implementation of agreed measures and greatly enable a coordinated

²³ Health receives priority at the 17th BRICS Summit in Rio de Janeiro. [In Portuguese]. <https://cee.fiocruz.br/?q=sauda-recebe-prioridade-na-17-cupula-do-brics-no-rio-de-janeiro>. Access 21.09.2025.

response to a new pandemic and other health emergencies, as well as articulate common positions in international forums.

References

1. Cooper AF, Parlar Dal E, Cannon B. The cascading dynamics of informal institutions: organizational processes and governance implications. *Int Polit*. 2022. doi:10.1057/s41311-022-00399-4.
2. Cooper AF. A critical evaluation of rationalist IR in the analysis of informal institutions. *Int Polit*. 2022. doi:10.1057/s41311-022-00391-y
3. Arrighi G, Silver BJ, Brewer BD. Industrial convergence, globalization, and the persistence of the North-South divide. *St Comp Int Dev*. 2003;38:3-31. doi:10.1007/BF02686319
4. Buss PM, Estephanio JM, Kavanami V, Burger P. Unmatched opportunity: Brazil must use its G20 presidency to focus on transformative global pacts. *BMJ*. 2024;386:q1571. Published 2024 Jul 23. doi:10.1136/bmj.q1571
5. Pereira AMM, Esperidião MA, Andrade SKAV, et al. Governance and responses of health and surveillance systems to COVID-19 in BRICS countries: A scoping review protocol. *PLoS One*. 2025;20(3):e0319572. Published 2025 Mar 17. doi:10.1371/journal.pone.0319572
6. Martins TCF, Guimarães RM, Pereira AMM. BRICS in the management of the COVID-19 pandemic: a comparative study on social distancing and vaccination measures in the nations of the bloc. [BRICS in the management of the COVID-19 pandemic: a comparative study on social distancing and vaccination measures in the nations of the bloc]. *Cad Saude Publica*. 2025;41(5):e00069024. Published 2025 Jun 9. doi:10.1590/0102-311XPT069024
7. Martins TCF, Pereira AMM, Machado CV, de Freitas CM, Guimarães RM. Comparative analysis of the lethality pattern of Covid-19 and the response of BRICS countries to the pandemic in the context of multilateralism: An ecological study. *PLoS One*. 2025;20(9):e0332883. Published 2025 Sep 30. doi:10.1371/journal.pone.0332883
8. Gleeson D, Townsend B, Tenni BF, Phillips T. Global inequities in access to COVID-19 health products and technologies: A political economy analysis. *Health Place*. 2023;83:103051. doi:10.1016/j.healthplace.2023.103051
9. Balakrishnan VS. 2 years of the Access to COVID-19 Tools-Accelerator. *Lancet Infect Dis*. 2022;22(7):948. doi:10.1016/S1473-3099(22)00378-4
10. Tweed S, Selbie D, Tegnell A, et al. Syndemic health crises-The growing role of National Public Health Institutes in shaping a coordinated response. *Int J Health Plann Manage*. 2023;38(4):889-897. doi:10.1002/hpm.3634
11. Squires N, Garfield R, Mohamed-Ahmed O, et al. Essential public health functions: the key to resilient health systems. *BMJ Glob Health*. 2023;8(7):e013136. doi:10.1136/bmigh-2023-013136