

# **WS104**

GOVERNANCE FOR PUBLIC HEALTH AND PANDEMIC PREPAREDNESS: WHAT HAVE WE LEARNED SINCE THE BEGINNING OF THE PANDEMIC?

#### | BACKGROUND

The COVID-19 pandemic affects societies at all levels – it is not unique to health. It has highlighted the need for specific governance patterns to ensure an efficient response to the epidemic while minimizing the collateral effects on other segments of society or the economy. Many countries are now thinking about the "after", about building back better. We must reflect on what types of governance mechanisms are needed for pandemic preparedness and resilience at all levels: global, national and subnational – drawing the lessons from current structures, frameworks, responses and solutions. Identifying lessons learned from the first months of the pandemic is the first step before being able to think about creative innovative mechanisms for health and pandemic preparedness governance.

At the global level, the pandemic has highlighted the need for specific mechanisms such as public-private partnerships for the equitable access to essential supplies, diagnostics, treatments and vaccines. Questions are raised around emergence of nationalisms, limiting multilateralism approaches and the power given by States Parties to multilateral organizations. Another issue is that some recommendations by international organisations (such as the WHO) are not followed in times of emergencies, which could undermine trust and legitimacy of such organizations.

At national level, we witnessed lack of preparedness and ad-hoc nature of decision, even for countries with high preparedness index score. In times of unknowns and uncertainties, balancing health objectives and socio-economic impacts was difficult for many countries, of which some tried to "buy time" to strengthen readiness. There were some gaps in protecting some specific vulnerable populations and taking into consideration their needs and the disproportionate impact of the disease on them. This makes us reflect on what would be the appropriate levels of inclusiveness and multi-disciplinary needed for decision-making. Crises and emergency times may also be opportunities for governments to justify extreme measures and strong mechanisms must exist to fight corruption or abuse of authority. Ensuring state continuity is also often at stake during emergencies.

At subnational level, it would be important to understand what governance is most efficient to implement a whole of society approach at local level, including communities and private sector, and what would be ideal relationships between rural and urban areas. Regional cooperation mechanisms are also important to study.

At all levels, questions are raised around evidence-based policies, processes, systems, regulations and operations. Key recurring themes are inclusiveness, accountability, transparency, flexibility, effectiveness, trust and resilience. Another recurring issue we face at all levels is financing and the chronic underfunding and underinvestment in global health and pandemic preparedness.

The COVID-19 pandemic affects societies at all levels – it is not unique to health. It has highlighted the need for specific governance patterns to ensure an efficient response to the epidemic while minimizing the collateral effects on other segments of society or the economy. Many countries are now thinking about the "after", about building back better. We must reflect on what types of governance mechanisms are needed for pandemic preparedness and resilience at all levels: global, national and subnational – drawing the lessons from current structures, frameworks, responses and solutions. Identifying lessons learned from the first months of the pandemic is the first step before being able to think about creative innovative mechanisms for health and pandemic preparedness governance.

At the global level, the pandemic has highlighted the need for specific mechanisms such as public-private partnerships for the equitable access to essential supplies, diagnostics, treatments and vaccines. Questions are raised around emergence of nationalisms, limiting multilateralism approaches and the power given by States Parties to multilateral organizations. Another issue is that some recommendations by international organisations (such as the WHO) are not followed in times of emergencies, which could undermine trust and legitimacy of such organizations.

At national level, we witnessed lack of preparedness and ad-hoc nature of decision, even for countries with high preparedness index score. In times of unknowns and uncertainties, balancing health objectives and socio-economic impacts was difficult for many countries, of which some tried to "buy time" to strengthen readiness. There were some gaps in protecting some specific vulnerable populations and taking into consideration their needs and the disproportionate impact of the disease on them. This makes us reflect on what would be the appropriate levels of inclusiveness and multi-disciplinary needed for decision-making. Crises and emergency times may also be opportunities for governments to justify extreme measures and strong mechanisms must exist to fight corruption or abuse of authority. Ensuring state continuity is also often at stake during emergencies.

At subnational level, it would be important to understand what governance is most efficient to implement a whole of society approach at local level, including communities and private sector, and what would be ideal relationships between rural and urban areas. Regional cooperation mechanisms are also important to study.

At all levels, questions are raised around evidence-based policies, processes, systems, regulations and operations. Key recurring themes are inclusiveness, accountability, transparency, flexibility, effectiveness, trust and resilience. Another recurring issue we face at all levels is financing and the chronic underfunding and underinvestment in global health and pandemic preparedness.

## | **OBJECTIVES**

- Look at governance structure of international organizations, countries and sub-national entities during the first months of the COVID-19 pandemic
- Reflect on what would be effective governance structures and mechanisms to prepare for and respond to the multifaceted aspects of epidemics and pandemics.
- Extract 3 to 5 lessons learned about governance at global, national and subnational levels that will be used to develop a framework to analyse complex and multifaceted health crises.





#### Moderator / Panelist

### Ilona Kickbusch

Chair of the International Advisory Board

Global Health Centre, the Graduate Institute of International and Development Studies

Switzerland

rofessor Ilona Kickbusch is the Founder and Chair of the Global Health Centre at the Graduate Institute of International and Development Studies in Geneva.

Professor Kickbusch key interests relate to the political determinants of health, health in all policies and global health. She is the founder of the Global Health Centre at the Graduate Institute, Geneva. She advises countries and organizations on their global health strategies and trains health specialists and diplomats in global health diplomacy.

She is a member of the Global Preparedness Monitoring Board and is co-chair of UHC 2030. She acts as Council Chair to the World Health Summit in Berlin. She has been involved in German G7 and G20 activities relating to global health and the global health initiatives of the German EU presidency in 2020. She chaired the international advisory board for the development of the German global health strategy. She publishes widely and serves on various commissions and boards. She initiated the @wgh300 list of women leaders in global health. She is program chair of the leaders in health network SCIANA. She is co-chair of a Lancet FT Commission on "Governing health futures 2030: growing up in a digital world." She continues to advise the World Health Organization.

Professor Kickbusch has had a distinguished career with the World Health Organization. She was key instigator of the Ottawa Charter for Health Promotion and WHOs Healthy Cities Network and has remained a leader in this field. She was the director of the Global Health Division at Yale University School of Public Health and responsible for the first major Fulbright Programme on global health. She has published widely and received many prizes and recognitions.

She has been awarded the Cross of the Order of Merit of the Federal Republic of Germany (Bundesverdienstkreuz) in recognition of her "invaluable contributions to innovation in governance for global health and global health diplomacy".