PMAC PRINCE MAHIDOL AWARD CONFERENCE 2021

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.

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| 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 multi-faceted 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.



Speaker

Magda Robalo

High Commissioner for COVID-19

High Commission for COVID, Presidency of the Republic Guinea-Bissau

Dr. Magda Robalo is the High Commissioner for COVID-19, in charge of coordinating the National Response to the pandemic in Guinea-Bissau. She is the immediate past Minister of Public Health in the first parity Government of Guinea-Bissau. She is Adjunct Professor at Griffith University, member of the Malaria Elimination 8 Board and the Chair of the Ethics and Governance Committee of the Global Fund to fight AIDS, Tuberculosis and Malaria.
She led an outstanding career of over 30 years in the public health field. Magda is an audacious thinker, always enthusiastic about the opportunities and a believer in the possibilities to turn things around, for the betterment of people's lives. She is actively supporting the careers of young female physician leaders from Portuguese speaking countries in Africa.
She joined the World Health Organization (WHO) in 1998, to lead a distinguished career that spanned 20 years, after a stint at UNICEF and Plan International. In these two organizations, she was involved in boosting immunization, polio eradication and nutrition programmes in the former and in setting up a community malaria programme, built around education and revenue generation schemes for women in the rural, remote regions of Bafatá and Gabú in the latter.
Dr Robalo held senior positions at WHO, serving as Malaria Regional Advisor (2002-2007) and WHO Representative to South Africa, Zambia, Namibia and Ghana (2007-2015) before becoming the Director of Communicable Diseases (2015-2018), leading WHO's work on HIV/AIDS, Hepatitis, Tuberculosis, Malaria, Neglected Tropical Diseases, Climate Change, Water and Sanitation, Human Environment Protection and Vector Control in the African Region. She coordinated a large and diverse team of experts to advise African countries and work with partners in shaping the health agenda, developing and implementing health policies, promoting innovative and lasting solutions to improve health and wellbeing and reduce poverty.
Dr Magda Robalo received her medical degree from the University of Porto (Portugal), obtained a post-graduate diploma in Public Health and Tropical Medicine from the Universidade Nova de Lisboa (Portugal) and a Masters of Sciences in Epidemiology from Université Laval (Canada).