

PL2

HOW ARE WE DEALING WITH COVID-19?

| BACKGROUND

The COVID-19 pandemic has undeniably challenged the status-quo of the world order. We will see its tremendous repercussions on health, lifestyles, economy, society, environment and others particularly over the next two to three years. Even as the world tries to deal with the pandemic, there are experiences that need to be shared and lessons that need to be learnt.

The trans-border nature of the virus highlights the need for collective actions and international cooperation. A globalized world advances international travel and transnational communication, but it also accelerates the spread of infectious disease such as COVID-19. Regional cooperation and multilateralism are essential at this time to ensure equitable distribution of resources. However we are seeing the disruption of regional cooperation in some parts of the world. We see some countries engage in philanthropic diplomacy, while others adopt more conservative and self-serving policies to manage the pandemic. The geopolitical impacts of COVID-19 also challenge the balance of power between the West and the East.

The interconnected global supply chain, once viewed as an asset, is now viewed with suspicion. The shortages of PPE, test kits etc. show just how precarious the supply chain is. Many countries have also used this as an opportunity to foster local innovation and production and global institutions need to promote this by facilitating free sharing of technology and knowledge. The issue of access to medical products for the prevention and treatment of COVID-19 remains, especially for poor people and poor countries.

While the pandemic underscores the importance of global and regional cooperation, it has also heightened the crisis in governance for health. The WHO is expected to play an important role in this crisis, with countries dependent on it for technical advice and guidance and many low-income countries dependent on it for supplies of medical products; at the same time WHO is facing a governance and funding crisis. In dealing with the pandemic, many countries have used the police force and coercion, and attacks on civil liberties have been on the rise. There are concerns related to transparency of COVID-19 data and privacy. The WHO and the UN Human Rights Council have stressed the need for a human rights approach in dealing with the pandemic.

The health systems of most countries have struggled to respond to the crisis, though there are those that have shown exceptional resilience. The pandemic has once again brought to fore the importance of investing in public health, strong public health systems, comprehensive primary health care and the role of health workers and other frontline workers. However, health workers and other frontline workers in many countries have faced problems in accessing adequate protective equipment. There have been other challenges in dealing with the pandemic. Discourses by politicians in some countries contradict the established public health practices of restricted travel, physical and social distancing to curb the spread of diseases.

The implications of social determinants of health on people's wellbeing have never been so starkly illustrated. Within countries, the pandemic has exacerbated inequalities, with the more vulnerable groups suffering either due to the disease or due to the steps taken to curb the pandemic. Migrant workers, refugees and asylum seekers, prisoners, indigenous communities, people of colour and ethnic minorities have especially borne the brunt of the crisis. Access of these groups and communities to healthcare has made them extremely vulnerable to deaths due to the disease. We are also seeing a humanitarian crisis in many countries, due to the lockdown which is affecting the poor, women and unorganized sector workers the most. The ensuing economic crisis has forced us to reconsider the current economic model.

This plenary will provide an opportunity to discuss how the international community is managing the pandemic. It will aim to provide evidence and insights on the role of governments and the global community in dealing with this crisis and its implications for the most vulnerable.

| OBJECTIVES

- How have health systems responded to the pandemic and what is the impact of COVID-19 on health systems? What has been the impact on non-Covid conditions?
- How is COVID-19 using and reshaping infectious disease/global health security governance and mechanisms? How are the global health ecosystem's governance and mechanisms adapting to COVID-19?
- What has the experience of the pandemic shown in terms of the need for a new economic order?

- How has the pandemic brought focus to the social and economic determinants of health? What have been the socio-economic impacts of the pandemic, with reference to vulnerable communities and special groups such as children?
- How is the pandemic changing geopolitics, global supply chains, regionalism and multilateralism? How is this affecting supranational health-related actions?
- Which groups and communities have been most affected by the pandemic and its response and what have governments done to ameliorate the situation?
- What should a human rights based response to the pandemic look like? How close or far are countries from it?
- What are the issues we have to grapple with in the next 1-2 years and what needs to change right now? Examples of issues: production and distribution of vaccines and therapeutics, economic issues, access to housing and water, strengthening public health systems, social inequality and discrimination.



Panelist

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Dr. Jos Vandelaer is the Regional Director for Emergencies in the Regional Office for South-East Asia of the World Health Organization Representative. He took up this position in October 2020. Prior to his current position, Dr Vandelaer was the WHO Representative to Nepal, from 2015 till 2020, where he oversaw WHO's support to the government and people of Nepal.

Dr Vandelaer had earlier worked in the area of Immunization. From 2009 till 2015, he was Chief of UNICEF's global Immunization program, based in New York, USA, after having held immunization-related positions since 1996 at the World Health Organization in the Philippines, India, and Myanmar, and - as a UNICEF secondee - in WHO/Geneva. He started his career with Medecins Sans Frontieres in 1986, working in emergencies in Sierra Leone, South Sudan, Surinam, and Thailand. Later he worked in migration/refugee health for the International Organization for Migration (IOM) in Vietnam and Croatia/Bosnia-Herzegovina and for UNHCR in Myanmar. Dr. Vandelaer holds a Medical Doctor degree from the University of Leuven (Belgium), a diploma in Tropical Medicine from the Antwerp Institute for Tropical Medicine (Belgium), and a Masters degree in Public Health from Harvard University (USA). He speaks English, French and Dutch and is a national of Belgium.