

How has COVID-19 changed the global health agenda

Preben Aavitsland at PhD-kurs 18.3.2022

Four areas

1. Health security
2. Economy
3. Innovation
4. Social justice

Health security – the fear factor

- The 2005 “agreement” was: tell us about your outbreaks and give us your strains, and we will help, not punish you
- Early detection
- Early warning
- Stopping at the source
- Preventing international spread
 - Travel restrictions
 - Border controls
- A new treaty?



Economy – the money factor

- Pandemics disrupts globalization, trade and tourism
- Poor health hurts economy
- The health industry
 - Just in time versus preparedness
- Demand for self-sufficiency
- Philanthropy and investments

Innovation – the necessity factor

- Diagnostics
- Treatments
- Vaccines – mRNA
- Non-pharmaceuticals
- Surveillance systems
- Genome sequencing
- Infectious disease modelling
- Telemedicine

Social and human rights – the justice factor

- Social gradients and determinants
- Fragile groups
- Sharing
- Disruption of other programmes

WHA74.7 Strengthening WHO preparedness for and response to health emergencies¹

The Seventy-fourth World Health Assembly,

Having considered the consolidated report by the Director-General;²

Recalling decision EB148(2) (2021) on strengthening WHO's global health emergency preparedness and response, which called for the development of a resolution in this regard;

Reaffirming that the objective of WHO is the attainment by all peoples of the highest possible level of health;

Reaffirming also that the Constitution of WHO defines health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, and declares that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition;

Further reaffirming the functions set out in Article 2 of the WHO Constitution in order for the

1. DECIDES to establish a Member States Working Group on Strengthening WHO Preparedness and Response to Health Emergencies, which is open to all Member States;¹

2. REQUESTS the Member States Working Group on Strengthening WHO Preparedness and Response to Health Emergencies to consider the findings and recommendations of the Independent Panel for Pandemic Preparedness and Response, the IHR Review Committee and the Independent Oversight and Advisory Committee for the WHO Health Emergencies Programme, taking into account relevant work of WHO, including that stemming from resolution WHA73.1 (2020) and decision EB148(12) (2021), as well as the work of other relevant bodies, organizations, non-State actors and any other relevant information;

3. RECOMMENDS that, following regional consultations to be finalized by end of June 2021, the Member States Working Group on Strengthening WHO Preparedness and Response to Health Emergencies shall have a Bureau comprising six officers (two Co-Chairs and four Vice-Chairs, to be appointed at the first meeting), one from each WHO region;

4. REQUESTS that the Co-Chairs and Vice-Chairs shall facilitate the work of the Member States Working Group on Strengthening WHO Preparedness and Response to Health Emergencies in close dialogue with its membership;

5. REQUESTS ALSO the Member States Working Group on Strengthening WHO Preparedness and Response to Health Emergencies to work in an inclusive manner and to define and agree on its working methods;

6. FURTHER REQUESTS the Member States Working Group on Strengthening WHO Preparedness and Response to Health Emergencies to submit a report with proposed actions for the WHO Secretariat, Member States, and non-State actors, as appropriate, for consideration by the Seventy-fifth World Health Assembly in 2022 through the Executive Board at its 150th session;

7. URGES Member States:¹

(1) to increase and improve efforts to build, strengthen and maintain the capacities required under the International Health Regulations (2005) and to continue to report annually to the Health Assembly on the implementation of the International Health Regulations (2005), using as appropriate, available tools included in the International Health Regulations (2005) monitoring and evaluation framework;

(2) to strengthen their own public health capacities and workforce for indicator-based and

Possible changes

- A pandemic treaty?
 - A revised IHR?
 - Improved national preparedness
 - Other changes
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- Watch the World Health Assembly 2022!



Conclusions

- Crises have always been an opportunity for change
- The post-covid world is being shaped right now
- You can influence the way forward!

Ethical dilemmas in in
the global response
to epidemics?

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Outbreak response versus disease programmes

Outside helpers versus domestic expertise

Dumped vaccines or no vaccines

Mandatory vaccination? Vaccine passports?

Hiring locals and disrupting labour market

Taking viruses and not giving benefits back

Limiting individual freedoms to stop an outbreak

Unsafe practices locally

Stopping trade and traffic