



T20 Statement for the G20 Health Ministerial Meeting

Rome, 5-6 September 2021

Overview

This is the most important moment for Health in a century. More than 200 million people have had confirmed COVID-19, and more than 4.5 million people are known to have died of the disease worldwide, making COVID-19 the most consequential global pandemic since 1918. The actual health toll of the pandemic will be much greater as we develop better counts of the excess mortality from a range of other causes that were exacerbated during years of limited health care access for billions worldwide. Emerging data show global downturns in life expectancy in many countries worldwide, reversing decades-long trends of improvement. Economies were halted as countries imposed restrictions on movement, internally and with the rest of the world, to mitigate the spread of the virus, triggering a worldwide recession. While the effects of the pandemic are universal, the experience has been profoundly uneven, with persons from lower socioeconomic status and often of minority racial/ethnic groups bearing a disproportionate burden of COVID-19 infections and its economic consequences. Countries worldwide are witnessing an increase in the number of people in poverty, a reversal of decades-long trends. The health consequences of the economic downturns will continue to be felt in the coming years well beyond the current crisis.

The global health impact of the COVID-19 pandemic cannot be overstated. Investments are needed now to avoid a similar catastrophic result in the event of future pandemics. We need stronger health systems, global surveillance systems, rapid production, and distribution of vaccines worldwide, and greater attention to the underlying health and social conditions that have aggravated the impact of the pandemic.

Task Force 1 “Global Health and Covid-19” of the Think20 (T20), the engagement group of the G20 which brings together think tanks, universities, and other research centers, has outlined a set of policy proposals for G20 decision-makers that can help move the world in that direction. This reflection is complementary to discussions underway in the G7 framework and should be considered also in relation to the process aimed at strengthening the World Health Organization, and the development of a possible pandemic Treaty.



Strengthening preparedness of healthcare systems

We recommend that the G20 countries commit themselves to adopt national health policies to deliver quality healthcare through a balanced model that incorporates hospital-centered and decentralized, community-based approaches and to invest in the education and training of a more robust and larger workforce of health professionals. The healthcare systems should be able to manage, during a pandemic or between waves, routine diagnosis and treatment protocols of diseases that have in some cases even a higher collective impact on the population, e.g. cancer, diabetes, malaria, etc. Such commitment by G20 countries should be enshrined in an international cooperation framework with the oversight of the WHO, and eventually extended to non-member countries, with a global health security logic.

We underline that health systems should not operate in isolation, and global preparedness should be implemented in a way that involves all the relevant disciplines and stakeholders. The zoonotic origin of most emerging pathogens, the crucial role of humans in overexploitation of the environment and the complexity of socioeconomic drivers involved in the epidemics requires a holistic One Health approach. We recommend that relevant international bodies coordinate with national governments to implement a One Health Strategy by adopting a One-Health based Conceptual Framework. This implies a specific One Health governance structure across sectors and disciplines, the integration of One Health in all relevant national and international plans, an integrated One Health risk assessment and a harmonized cost-effectiveness evaluation framework. Industrial investment and regulation should also be aligned with these goals.

In addition, we recommend promoting wider health education programs for schools and public information campaigns aimed at improving the level of health literacy of the population.

Enhancing reporting and surveillance of pathogens and human populations

The Covid 19 pandemic has laid bare the lack of reliable, harmonized and rapidly available data needed for reporting at the early stages of the pandemic and for managing its impact. Creating new instruments and mechanisms capable of providing such data is of paramount importance. We recommend establishing a new independent, incentivized and scientist-led reporting and monitoring of pathogens and other emerging health threats, called Emerging Health Threat Data Platform. This Platform would enable researchers to share information in a peer-to-peer network, free of political constraints. It would leverage the vast set of data, information and analytics produced through the independent collaboration of the global community of scientists.



High-quality health data lies at the core of both effective and equitable responses and is central to designing evidence-informed policy-making and guiding and evaluating targeted interventions that are likely to have maximum effect. We recommend that countries be encouraged to report health emergency data to WHO in a standardized, disaggregated manner (including age and sex), with additional nationally relevant disaggregation, as appropriate to each country. The capacity of lower-resourced countries to report such disaggregated data should be strengthened.

Boosting equitable access and production of diagnostics, therapeutics and vaccines to confront Covid-19 on a global footing

Covid19 pandemic demonstrated that supply and production capacities are insufficient to deliver large quantities of health products quickly to the entire world, and that generic production, patent pools and voluntary licensing mechanisms have not ensured the huge supplies of products required to confront it. Low and middle-income countries are poorly served, and the African region in particular has few production capabilities. The crisis has highlighted the need to build trust in the security of global and regional supply chains by removing trade barriers and encouraging regional diversification with long-term solutions. The smartest and most sustainable way to speed up testing, vaccines and treatments everywhere in the world, today and beyond COVID-19, is to expand and diversify manufacturing regionally, and to ensure the supply chains of essential raw material and finished dosage forms. G20 leaders should therefore focus on short, medium and long-term robust industrial and trade policy measures to address vulnerabilities in manufacturing value chains while enhancing manufacturing resilience.

Public and private investments should be provided to companies in Africa and other regions that have the capabilities, will and readiness to act as regional providers. This will bring essential supplies closer to the point-of-need in faster and lower-cost ways, through diversified and scaled-up production and supply chains.

Innovative initiatives are required to ensure worldwide equitable access for all people to diagnostics, vaccines and medicines:

- New arrangements to accelerate access for all people to on-patent medicines, vaccines and equipment, including price control, voluntary licensing, enhanced public and private sector partnerships.
- Enhanced production capacity in Low- and Medium Income Countries (LMICs) and especially Africa where present capacities and investments are extremely limited.
- Transparent public, non-profit, or public-private arrangements in regional R&D, trials, and manufacturing plants to ensure access to vaccines and health equipment and material.



- Support for globally resilient supply chains through robust manufacturing networks and access to raw materials.

Global health equity

Finally, none of this will be sufficient without paying specific attention to global health equity before and during future pandemics. A truly global perspective on health equity requires to consider the inequitable distribution of health across countries and within countries, regions, cities, and neighbourhoods, between gender, racial/ethnic, and socioeconomic groups. To achieve this, we recommend establishing a global health equity observatory that provides data on health inequity within and between countries and the underlying drivers. Such an observatory could leverage existing health data collection innovations and data on key pillars of health equity such as education, employment, and infrastructure and identify critical data gaps. In doing so, such an observatory would help identify critical health equity goals, best practices applicable in different contexts, and critical health equity challenges.

Second, data on the root causes of global health inequity will be insufficient without complementary systems of global accountability. Purely voluntary and state-led tools to measure inequity are inadequate because of the context-specific nature and often deep-seated cultural factors at the root of such inequities. Countries, non-governmental agencies, and funders should invest in foundational drivers of health equity rather than focusing on downstream biomedical interventions. To that end, it is critical to build systems of accountability that include local stakeholders but also guarantee periodic reporting to institutional mechanisms and bodies such as United Nations Special Rapporteurs and UN committees.

Conclusions

The Covid-19 pandemic has challenged global health, security and economic growth, exacerbating inequalities and putting unprecedented pressure on healthcare systems and governments around the world. The T20 proposals to tackle the root causes of these challenges emphasize the need for new approaches to the economy, industrial investments, and regulations well beyond the health sector.

This pandemic has thrust health concerns into the limelight; this is a rare opportunity for G20 Health Ministers to take centre stage. How they respond will leave a legacy in future pandemic preparedness and the ability in the medium to long term of health systems to address other global health priorities, equity and access for all. This is not a responsibility to be taken lightly.

