




Riyadh Global
**Digital Health
Summit** —

11-12 August, 2020

Pandemic Threats

Predictability	Threat
Known Knowns	COVID-19, AMR, vaccine hesitancy
Known Unknowns	Pandemic influenza
Unknown Knowns	Zoonoses, vector-borne disease (e.g. Zika)
Unknown Unknowns	

Impact of Health Policy on Pandemics

Pre-Pandemic

- Pandemic planning
- Health systems infrastructure
- Public engagement
- Research & Innovation

During Pandemic

- Evidence-based flexibility
- Health communication
- International coordination and collaboration

Post-Pandemic

- After action reviews
- Revision of plans

Prepare



Respond



Reflect

Preparedness – The Cost of Not Doing it



WORLD ECONOMIC FORUM

Agenda Platforms Reports Events Videos English

Global Agenda COVID-19 Environment and Natural Resource Security Forests

Fighting COVID-19 could cost 500 times as much as pandemic prevention measures



World Health Organization Health Topics Countries Newsroom Emergencies

The cost of inaction: COVID-19-related service disruptions could cause hundreds of thousands of extra deaths from HIV

Gains made in preventing mother-to-child transmission of HIV could be reversed, with new HIV infections among children up by as much as 104%



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Coronavirus outbreak Cost of preventing next pandemic 'equal to just 2% of Covid-19 economic damage'

Advertisement: Smärta produkter hos Sparmax. Frikt trådlös hörlurar till robotdammsugare och LED-teknik.

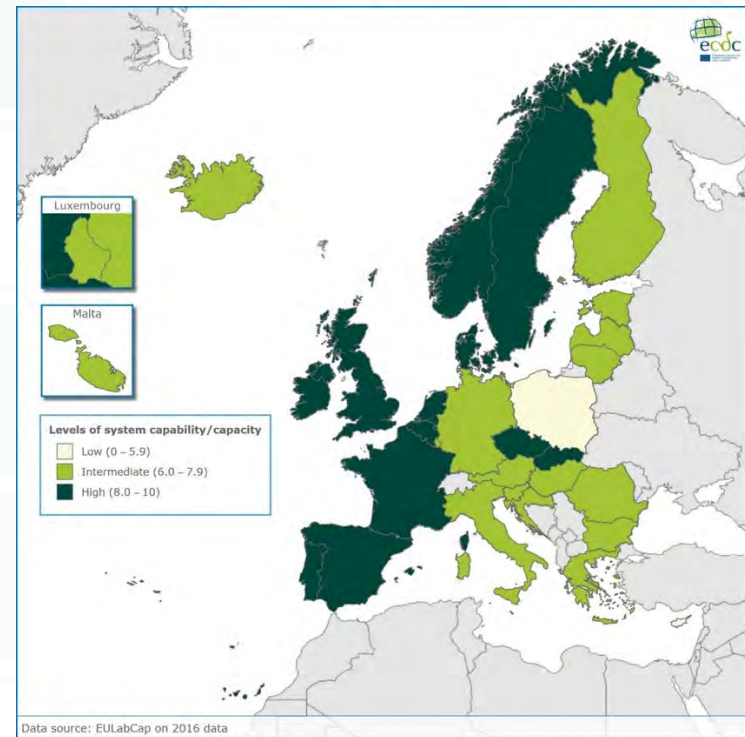
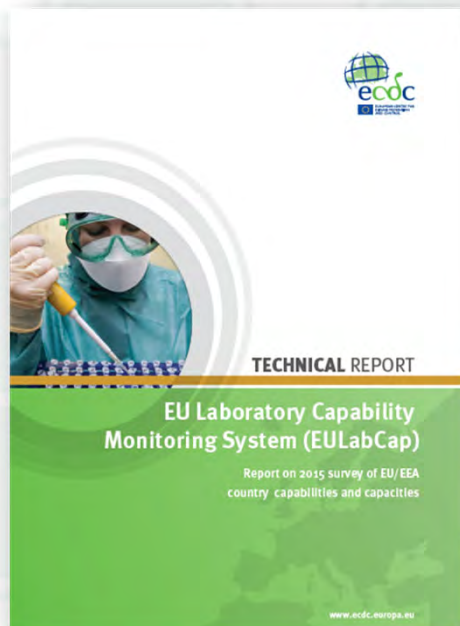
Preparedness – The Cost of Not Doing it



The annual reduction in global GDP caused by AMR could be as large as the losses provoked by the 2008 global financial crisis. **However, the cost impacts of AMR on GDP would be worse than those of the 2008 global financial crisis** in two respects. First, they would be felt throughout the period to 2050, not just for a couple of very bad years. Second, with AMR, low-income countries would experience larger drops in economic growth than wealthy countries, so global poverty and economic inequality would increase.

Health Service Infrastructure & Resources

Laboratory Capacity



Public/Community Engagement



“Affected communities are increasingly recognised as key resources that can be utilised during public health emergencies, and that the concerns and experiences of ordinary people should be harnessed as an important part of the response.”

Evidence-based Flexibility

Given the context of uncertainty inherent in the unpredictability of the influenza virus, there is a tendency, in an emergency situation and in the absence of information, to assume the worst-case scenario and resource the response accordingly. There is, however, an alternative approach, which is to take a view on the most likely outcome, while monitoring events closely and changing tack as necessary.

Ministers should determine early in a pandemic how they will ensure that the response is proportionate to the perceived level of risk and how this will guide decision-making.

Commission further work to support key decision-making early in a pandemic...consider the practicalities of developing methods to measure the severity of a pandemic in its early stages.

The WHO lacked a consistent, measurable, and understandable depiction of the severity of a pandemic. This situation was problematic because, regardless of the definition of a pandemic, the decisions about response logically depend on both spread and severity.

Dame Deirdre Hine. An independent review of the UK response to the 2009 influenza pandemic. UK Cabinet Office 2010

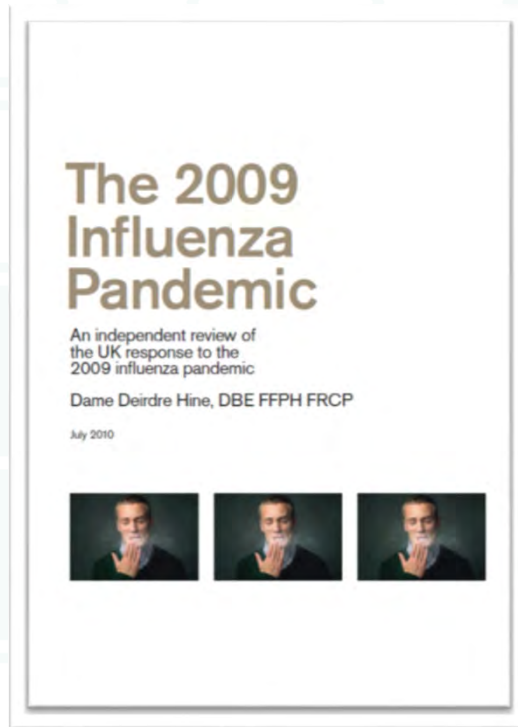
Harvey V. Fineberg, Pandemic Preparedness and Response —Lessons from the H1N1 Influenza of 2009. N Engl J Med 2014; 370:1335-1342

International Coordination and Collaboration

The screenshot shows the European Commission website. At the top left is the European Commission logo. To its right, the text 'European Commission' is displayed. Further right, the language is set to 'English' with a speech bubble icon and 'EN'. Below this is a search bar. A blue navigation bar contains the breadcrumb: 'Home > Live, work, travel in the EU > Public Health > Crisis preparedness and response >'. Below this, the page title 'Crisis preparedness and response' is shown. A horizontal menu contains several tabs: 'All topics', 'Overview', 'Joint Procurement', 'Crisis Management', 'International cooperation', and 'Projects'. The 'Joint Procurement' tab is selected. The main content area has the heading 'Joint Procurement of medical countermeasures'. The text below reads: 'The outbreak in 2009 of H1N1 pandemic influenza highlighted weaknesses in the access and procurement of pandemic vaccines and medications. In 2010, the European Council requested the Commission to study the possibility of joint procurement of vaccines in the frame of a future pandemic. Provisions for the joint procurement of medical countermeasures are included in Article 5 of Decision No 1082/2013/EU on border threats to health. As of April 2020, the Joint Procurement Agreement has been signed by 37 countries, the UK, Albania, Montenegro, North Macedonia, Serbia and Bosnia and Herzegovina, as well as the EU.'

The screenshot shows a press release on the European Commission website. At the top left is the European Commission logo. To its right, the text 'European Commission' is displayed. Further right, the language is set to 'English' with a speech bubble icon and 'EN'. Below this is a search bar. A blue navigation bar contains the breadcrumb: 'Home > Press corner > COVID-19: Commission creates first ever rescEU stockpile'. Below this, the text 'Available languages: English' is shown. The main content area has the heading 'COVID-19: Commission creates first ever rescEU stockpile of medical equipment'. Below the heading, the text 'Press release | 19 March 2020 | Brussels' is displayed.

After Action Reviews



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Save Costs
Reduce Disruption
Secure Trust
Save Lives
Reduce Fear
Reduce Inequalities
Improve Prevention
Reduce Impact

THANK YOU



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