

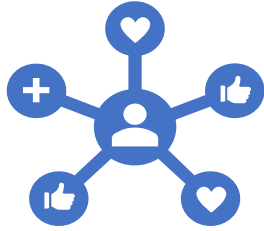
# Global Health : Innovative collaboration is key to tackling diseases



At least half of the  
global population



still do not have full  
access to essential  
health services



**Today we update two questions from the 2018 Great Decisions Book based on today's data**

1. The WHO was criticized for ineffectiveness, and inefficiencies, in response to the EBOLA outbreak in Africa. Consider International organizations concerned with global health issues collaborate...the WHO, the UN, the world bank and others. What are the unique advantages that larger multilateral institutions have when it comes to addressing global health. What are the deficiencies
2. It took grassroots, civil society movements to transcend stigma and garner political response to HIV/Aids . What roles should Governments, multilaterals and civil society play to ensure that future epidemics and pandemics are addressed with maximal efficiency



**Then we delve further and suggest an action plan with two sub-questions :**

1. How can the threat of new and reemerging diseases and immune micro-organisms be reduced?
2. How can scientific and technological breakthroughs be accelerated to improve the human condition?

**There are several organizations focusing on these issues, for discussion today we will focus on some:**

WHO the largest and global health organization works worldwide to promote health, keep the world safe, and serve the vulnerable.

- monitor data and information.
- detect and respond to acute health emergencies
- prepare and prevent for emergencies by identifying, mitigating and managing risks
- elimination and eradication of high-impact communicable diseases
- climate change in small island developing states



The Global Health program at the Council on Foreign Relations (CFR) provides independent, evidence-based analysis and recommendations to meet the health challenges of a globalized world.

- Infectious Diseases that cross borders with easier trade and travel,
  - the emerging perils of antibiotic resistance and climate change
- 
- Global Preparedness Monitoring Board (GPMB) established by the WHO and the World Bank.
  - Pandemic Influenza Preparedness Board (PIP) (WHO sponsored)
  - THE MILLENNIUM PROJECT : is a global participatory think tank established in 1996 under the American Council for the United Nations University that became independent in 2009 (not to be confused with the UN Millennium Project)
  - The International Health Regulations (IHR) is the governing treaty for global preparedness and response to public health emergencies advises WHO.
  - Bill and Melinda Gates Foundation

## The WHO

### Governance and International Law

WHO architects proposed the agency be in Geneva: Apolitical

- 1946, before globalization, the WHO constitution allows The WHO
- To set standards for the safety, purity, potency, advertising
- To label biologicals, pharmaceuticals, vaccines
- And similar products moving in international commerce.



### Point #1 Governance

- A new world of challenges for global health governance
- Shifting donor priorities
- Evolving health needs in many low- and middle-income nations,
- Ways in which global health governance is adapting to these changes, with a focus on the institutions, rules, and processes that govern the health of people across the world.

As WHO manages outbreaks:

- How can we strengthen global governance tools and ensure existing systems fit an evolving world
- Respond to the current virus, like other highly infectious, serious diseases in a highly mobile population, spreads across geopolitical boundaries and requires multisectoral coordination and collaboration to mitigate the consequences of the outbreak.
- It underscores why global health governance is critical to saving lives.

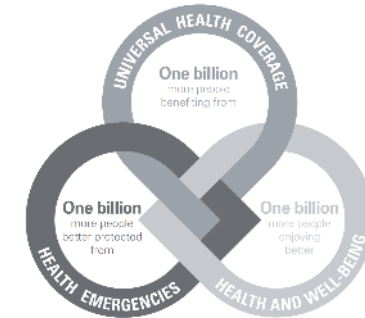
**The WHO needs to become the trusted and timely source of verified epidemiologic information**

## The WHO needs to become the trusted and timely source of verified epidemiologic information

Programme budget  
2020–2021

The WHO can:

- Be a beacon of information,
- Promote and eventually approve new countermeasures
- Provide ethical standards for the response,
- Share best practices for clinical care during an outbreak.



The WHO is responsible for making a determination as to whether the emerging outbreak constituted a Public Health Emergency of International Concern (PHEIC)

WHO is not sufficiently resourced to sustain response activities:

- Budget of WHO is miniscule compared in size to Stanford Univ. total 2017/18 budget \$5.9 billion in expenditures and 2018-19 UC EXPENDITURES \$36.6B, (UCSC 2.3%)
  - Particularly in light of other public health emergencies around the world including
  - an Ebola outbreak ( and continues in Africa)
  - Current COVID 19

US has worked to keep the WHO budget as low as possible, has exerted tough political pressure and threatened to leave before.

Some countries are even welcoming (behind closed doors) a recalculation of contributions to politically trim down U.S. influence and make it more like any other member

## Point #2 International Law

### Geopolitics and Crisis Are Not New for the WHO

Founders of the WHO knew about the critical role of law in public health.

- The WHO can promote and adopt treaties (**Article 19**)
- It has at its disposal an international legal mechanism in the form of binding regulations (**Article 21**).
  - It is this power that is the thorn in the side of those who fight to close down the organization,
- Worldwide Health is political : Pandemics are a symptom
- Health has become an industry
- Best political choice (at the moment) would be to strengthen WHO's legal power—not destroy it
- Geopolitics are part of WHO's daily bread, and parties are present at every single meeting.
- Despite all the rhetoric and constant blaming on the WHO for inaction
  - Many member states actually want a weak WHO.
  - That is exactly why they don't want to pay for it. E.g. the sugar, tobacco and pharma lobby influence
- Rarely WHO speaks out publicly against one of its members
- When it does happen, everyone remembers it and sees it as an extraordinary show of courage.
  - Former WHO Director General Gro Harlem Brundtland during the SARS outbreak in 2003 called out China and the City of Toronto for not acting responsibly.
- WHO tries to get countries to work together
  - The present political climate is not made for that approach.
- The WHO's technical staff are nonpolitical, they are disease experts and ill-equipped to deal with the intricacies of global diplomacy



An example of Geopolitics, Pandemics and Taiwan Case study

Taiwan is an important stakeholder and a valuable partner in fighting this unprecedented COVID- 19 crisis

### Why isn't Taiwan a member of the WHO?

China, (PRC), refuses to allow that to happen claiming Taiwan is a province of China

### U.S. position on Taiwan's membership in the WHO?

In March 2020, the Trump administration enacted the Taiwan Allies International Protection and Enhancement Initiative Act

U.S. Sec. of State Mike Pompeo said that we would "do [its] best to assist" Taiwan's "appropriate role" in the WHO



### COVID 19 and Taiwan

- Taiwan had 380 confirmed cases and 5 deaths (4/19), a stunningly low number for a population of 23.6 million.
- Particularly impressive given the high level of travel between China and Taiwan.
- Taiwan's success can be attributed to early preparedness, health expertise, government competence, and popular alertness.
- On December 31, Taiwan's government, alarmed by developments in Wuhan, expressed concerns to the WHO.
- **But it received no reply.** Instead, the WHO endorsed China's denial of human-to-human transmission until January 21.
- Taiwan has continually shared coronavirus data with the WHO, but the WHO has **never released this information** to its members
- While the WHO appeared to downplay the global threat
  - Taiwan adopted vigorous measures for screening, testing, contact tracing, and enforcing quarantines.
  - These measures were aided by technology and big data,
  - Cooperation of citizens who remain highly vigilant due to their traumatic 2003 experience with SARS.
- Particularly important in Taiwan's approach are transparency and open information.
  - Taiwan's Central Epidemic Command Center, established after SARS, releases information in daily briefings.
  - Stark contrast with China's initial cover-ups of the outbreak and continued suppression of independent reporting.
- Director General Tedros (elected in large part with China's support) was widely criticized for actions to help China downplay
- **Taiwan's exclusion is an example of how the world's health body puts politics before public health.**
- **We must hold the WHO accountable when it fails.**



## Where to Go From Here?

### Governance

- The WHO reformed its work in preparedness and response after its failure to respond in a timely manner to the Ebola outbreak in 2014–15
- It is the member states that have not fulfilled their commitments to the International Health Regulations both politically and financially.
- With all the political problems currently faced by countries around the preparedness and information requirements and the declaration of a Public Health Emergency of International Concern (a new tool introduced by the IHR) reforming the International Health Regulations cannot and should not be avoided.

### International Law

**Countries have the political choice now to strengthen the WHO, its funding, and its legal power, or to destroy one of the UN's most important agencies**

- Need to act on a stronger international agreement on preparedness and response, a revised and strengthened set of International Health Regulations, and a strong accountability mechanism.
- The new legal instrument could and should hold both the WHO and countries accountable
- The director general says frequently that health is a political choice.
  - Many of the countries made the wrong political choices in their responses to COVID-19—indeed they made the wrong choices much earlier when they refused to invest in preparedness and in the WHO.
- **In the context of COVID-19 we constantly hear that we cannot go back to business as usual.**
- **That applies to establishing a well-funded system of global health governance with teeth.**





## **The Millennium Project Challenges**

### **How can the threat of new and re-emerging diseases and immune micro-organisms be reduced?**

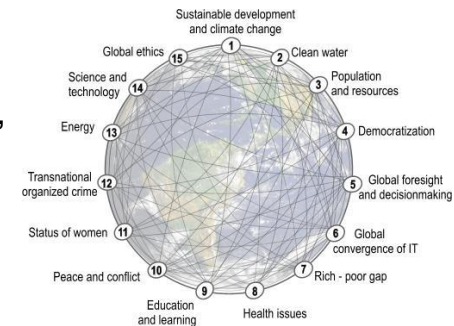
#### **Actions to Address Global Challenge 8:**

- Implement [WHO Global Vaccine Action Plan](#).
- Increase support to anticipate and counter drug resistance.
- Improve global plans and resiliency training to address future major epidemics.
- Create and implement strategies to counter the barriers to developing new classes of antibiotics and bringing them to market.
- Complete mortality records worldwide to improve data base for research; only half of all deaths have recorded causes.
- Increase global health funding to its previous annual increase of about 10%.
- Focus on early detection, accurate reporting, prompt isolation, and transparent information and communications infrastructure.
- Increase tele-medicine and AI diagnostics as the shortage of health workers continues to worsen in poorer regions of the world.
- Increase investment in clean drinking water, sanitation, and hand washing.
- Optimize the use of current health technologies (drugs, devices, biological products, medical and surgical procedures, support systems, and organizational systems) with corporate/NGO partnering for holistic approaches to health care.
- Encourage telemedicine, including online self-diagnosis and AI, expert software.
- Climate change and other global environmental changes are resulting in changes in the magnitude and pattern of risks, underlining the need for increased investment in monitoring and surveillance

### **How can scientific and technological breakthroughs be accelerated to improve the human condition?**

#### **Actions to Address Global Challenge 14**

- Create global means to link research agendas to human needs and threats.
- Establish some kind of international S&T organization to improve the human condition more as an online public access global collective intelligence system rather than as an intergovernmental body like UNESCO.
- Support research to prevent future artificial super intelligence evolving against human interests.
- Encourage scientist to take an oath similar to the Hippocratic Oath taken by physicians to “do no harm.”
- Pass laws to prosecute “patent trolls” (firms that don’t produce anything but simply file patent lawsuits for extortion) to drop deceitful patent law cases.
- Create systems to remove space debris, or else access to space may become too hazardous.
- Explore ways to limit access to materials and S&T information that can be used by individuals for destructive purposes.



PANDEMIC INFLUENZA PREPAREDNESS FRAMEWORK FOR THE SHARING OF INFLUENZA VIRUSES AND ACCESS TO VACCINES AND OTHER BENEFITS

<https://www.theguardian.com/global-health-progress/2020/jan/30/global-health-challenges-how-innovative-collaboration-is-key-to-tackling-diseases>

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<http://www.millennium-project.org/>