



POLICY BRIEF:

The global architecture for pandemic preparedness and response

Prepared by:
The Independent Panel for Pandemic Preparedness and Response

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The
Independent
Panel
FOR PANDEMIC
PREPAREDNESS
& RESPONSE



Introduction

The Independent Panel for Pandemic Preparedness and Response, co-chaired by H.E. Ellen Johnson Sirleaf and the Rt. Hon. Helen Clark, was created in 2020 to learn the lessons of the current COVID-19 pandemic and produce recommendations to safeguard the future. On 12 May 2021, the Panel released its recommendations for a global transformation of the international system for pandemic preparedness and response to prevent future outbreaks of infectious diseases becoming catastrophic pandemics. This policy brief considers the Panel's recommendations in relation to the global governance architecture proposed.

The Panel's diagnosis

The Panel found that there were critical failings at each step of the COVID-19 response from preparedness to detection and alert and to the early and sustained response. When a novel pathogen was identified, the international alert system, including the IHR mechanisms, were not swift enough. Time was lost as SARS-CoV-2 spread. Too few countries responded adequately to the declaration of a Public Health Emergency of International Concern on 30 January 2020. As the pandemic spread, the global and national response failed to prevent a wide and deep social and economic crisis.

The COVID-19 pandemic demonstrates what the world should have known: potential pandemics pose an existential threat. Pandemics and other severe health threats should be a matter for Presidents and Prime Ministers, as are threats of war, terrorism, nuclear disaster, and global economic instability. Instead, pandemic preparedness and response has been largely siloed within the health sector.

The Panel's comparative analysis of national responses to COVID-19 has shown that the most effective responses to date were those which established effective multi-sectoral co-ordination reporting to the highest level of government. Where public health and economic mitigation efforts were not synchronized and mutually supportive, public health measures were unable to contain the spread of the virus. Similarly, internationally, it took too much time to establish effective co-ordination between health and economic support measures, and to ensure that other sectors, including trade and intellectual property regulation, shared a common vision. The market-driven scramble for tools and supplies, including vaccines, resulted in inequitable availability.

The Panel's recommendations seek to overcome the twin challenges of ensuring that pandemic threat is elevated to the highest leadership level and that pandemic preparedness and response are treated as a whole-of-government and whole-of-society responsibility with the appropriate co-ordination mechanisms across government and economic and social sectors.

A package of recommendations for pandemic preparedness and response

The Panel has put forward a package of recommendations that require implementation as a whole in order to achieve the goal of stopping future outbreaks becoming catastrophic pandemics. These include strengthening existing entities including WHO, negotiating a new treaty to address gaps in the international legal framework around pandemic preparedness and response, providing a new mechanism for financing, and establishing a Global Health Threats Council at Heads of State and Government level to ensure ongoing political commitment, promote transparency and accountability.

The Panel has called for a political declaration, to be adopted by Heads of State and Government at a Special Session of the UN General Assembly convened for the purpose in late 2021, committing all countries to transforming the international system for pandemic preparedness and response.

A Global Health Threats Council

The Panel has proposed the establishment of this Council to secure high-level political leadership for, and attention to, pandemic prevention, preparedness, and response, and to enhance global, regional, and national accountability. The Council's functions would be to maintain political commitment to pandemic preparedness between emergencies and to response during emergencies; monitor progress towards pandemic preparedness and response goals and targets set by WHO; draw attention to gaps through high-level advocacy; guide the allocation of resources by a new International Pandemic Financing Facility; and hold actors accountable.

The Council's membership would be at the level of Heads of State and Government and include private sector and civil society representation. The Council would not take on operational functions. It would interact with key stakeholders, including the UN Secretary-General, WHO Director-General, Executive Director of the IMF, and the President of the World Bank Group. The Council would be informed by the enhanced accountability mechanisms recommended by the Panel, including a formalized system of universal periodic peer review of pandemic preparedness and response capacities facilitated by WHO, and regular pandemic preparedness assessment and evaluation of economic policy response plans by the IMF as part of its Article IV consultations with countries. The Council would serve to galvanise global efforts; it would not have directive authority in relation to specific international organizations.

Financing

The Panel has proposed a new International Pandemic Financing Facility to raise additional reliable financing for preparedness and for surge funding in case of a pandemic threat. It will draw contributions from countries based on an ability-to-pay formula and have secure funding streams which are not dependent on discretionary ODA budget lines. The Facility will need to be able to mobilize 10-15-year contributions of approximately \$5-10B per annum to fill gaps in

preparedness; and in the event of a pandemic threat have the ability to disburse up to \$50-100B for early response at short-notice. In recommending this new financing facility, the Panel does not recommend creating a new global fund. Funds would flow through existing international and regional mechanisms based on their functions.

Strengthening the authority and independence of WHO

To ensure greater speed and transparency in the face of pandemic threats, the Panel recommends a more focused, securely funded, and independent WHO, which has enhanced authority and ability to investigate outbreaks and report rapidly. Recommended measures to empower WHO include putting its funding on a more secure basis with unearmarked funding and with Member State fees meeting two-thirds of the base programme budget and having a single seven-year term of office for the Director-General and for each regional director. WHO's mandate should focus on normative, policy and technical guidance, including supporting countries and regions to build capacity for pandemic preparedness and response and for resilient and equitable health systems.

The Panel has recommended that countries rapidly agree on a new pandemic framework convention, using the powers of Article 19 of the WHO Constitution. This convention or treaty would address gaps in the current legal framework, endorse principles for effective pandemic preparedness and response, establish norms and obligations of countries, and clarify the responsibilities between states and international organisations. The convention would be complementary to the International Health Regulations and help ensure that these legally binding international instruments facilitate a pro-active and rapid response to outbreaks with pandemic potential.

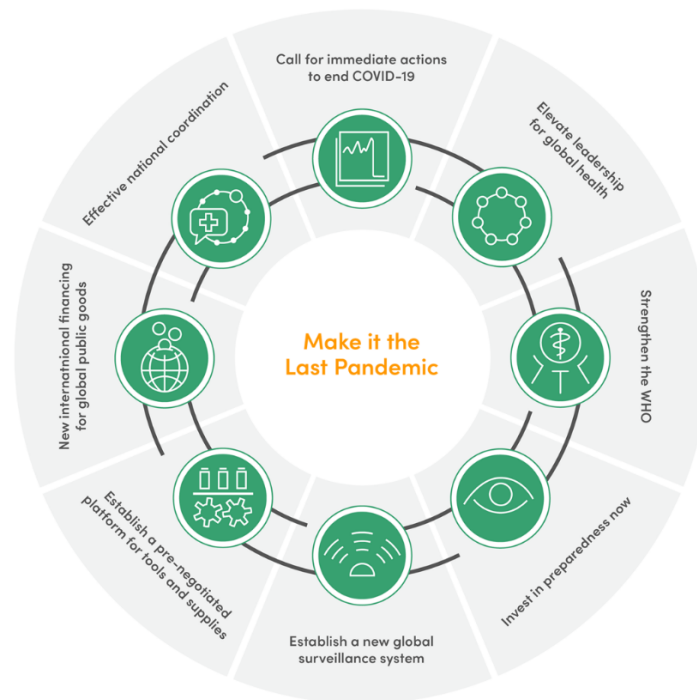
Global public goods

In order to address the inequitable distribution of tools and supplies, the Panel recommends establishing a pre-negotiated platform, which shifts from the market-driven approach of ACT-A to one aimed at delivering global public goods. The current ACT-A should be transformed into a truly global end-to-end platform to deliver vaccines, therapeutics, diagnostics and essential supplies. Urgent measures are required now to increase access to essential therapies including oxygen, and to meet needs for COVID-19 vaccines equitably and globally.

Strategic and coordinated action

The Panel has not recommended that new global health institutions be created to respond to the failures that led to COVID-19 becoming a catastrophic global pandemic. The organic evolution of the international health system over recent decades in order to address particular health problems has resulted in pockets of major progress but also created inefficiencies resulting from unclear roles and responsibilities and an inability to leverage effectively the comparative advantages of different actors. The Panel's recommendations are therefore

directed to concrete measures designed to ensure that the international system is more co-ordinated with better links between the sub-national, national, regional, and global levels in pandemic preparedness and response. The Panel has proposed ways to strengthen WHO in its leadership role on preparedness and response, and to ensure that WHO is better able to perform this role by increasing the accountability and engagement of States acting individually and jointly in assuming their responsibilities to guard against health threats.



Further information

The Panel's report *COVID-19: Make it the Last Pandemic* is available here: <https://theindependentpanel.org/mainreport/>. Further detail on considerations in relation to WHO, a pandemic treaty, access to essential supplies and the financing mechanism are available in background documents prepared for the Panel, available here: <https://theindependentpanel.org/mainreport/#background-documents>