

PMAC 2021 COVID-19

Advancing Towards
an Equitable and Healthy World



Synthesis: Summary, Conclusion & Recommendations



3 FEB 2021
WEDNESDAY



19.00-20.30 HRS. (BKK) | 13.00-14.30 HRS. (GE) | 07.00-08.30 HRS. (NY)

PMAC2021.COM

PMAC 2021 | COVID-19

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Conference programme structure

Pre- conference: 21 October 2020 – 28 January 2021

- 14 Side meetings
- 4 Field trips
- 21 Webinar sessions
- Keynote Speech by 2 Prince Mahidol Award Laureates

Main conference: 29 January – 3 February 2021

- Opening Session and Armchair Conversation
- 5 Plenary Sessions (PL0 – PL4)
- Synthesis Session

Pre- conference: Webinar sessions

21 October 2020 – 28 January 2021

Subtheme 1

What has the world learned from COVID-19?

- **4 Webinar Sessions**

Subtheme 2

How we dealing with COVID-19?

- **7 Webinar Sessions**

Subtheme 3

What should we do for the future?

- **5 Webinar Sessions**

Subtheme 4

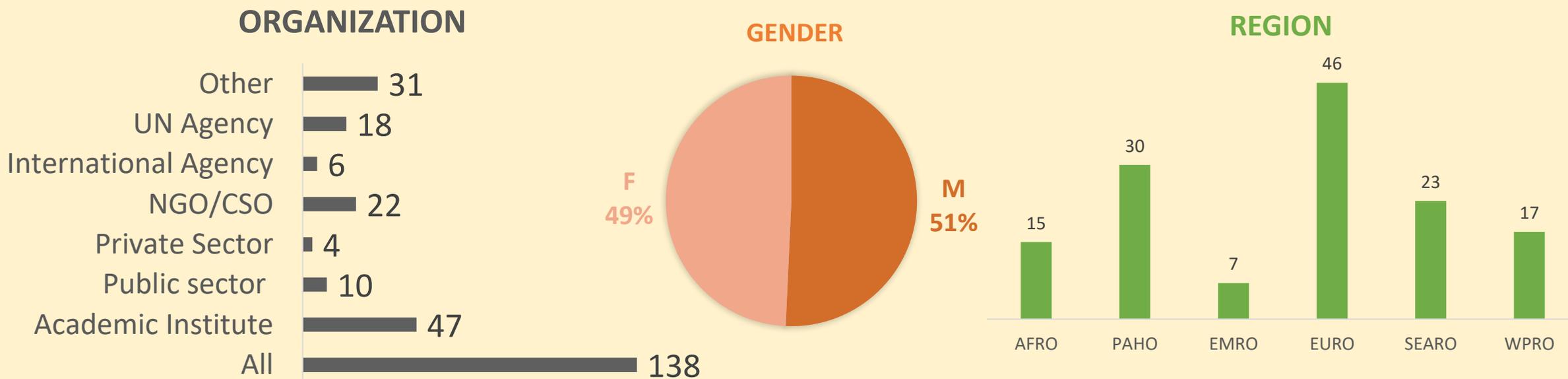
COVID-19 and the global megatrends.

- **5 Webinar Sessions**

Main conference: 29 January – 3 February 2021

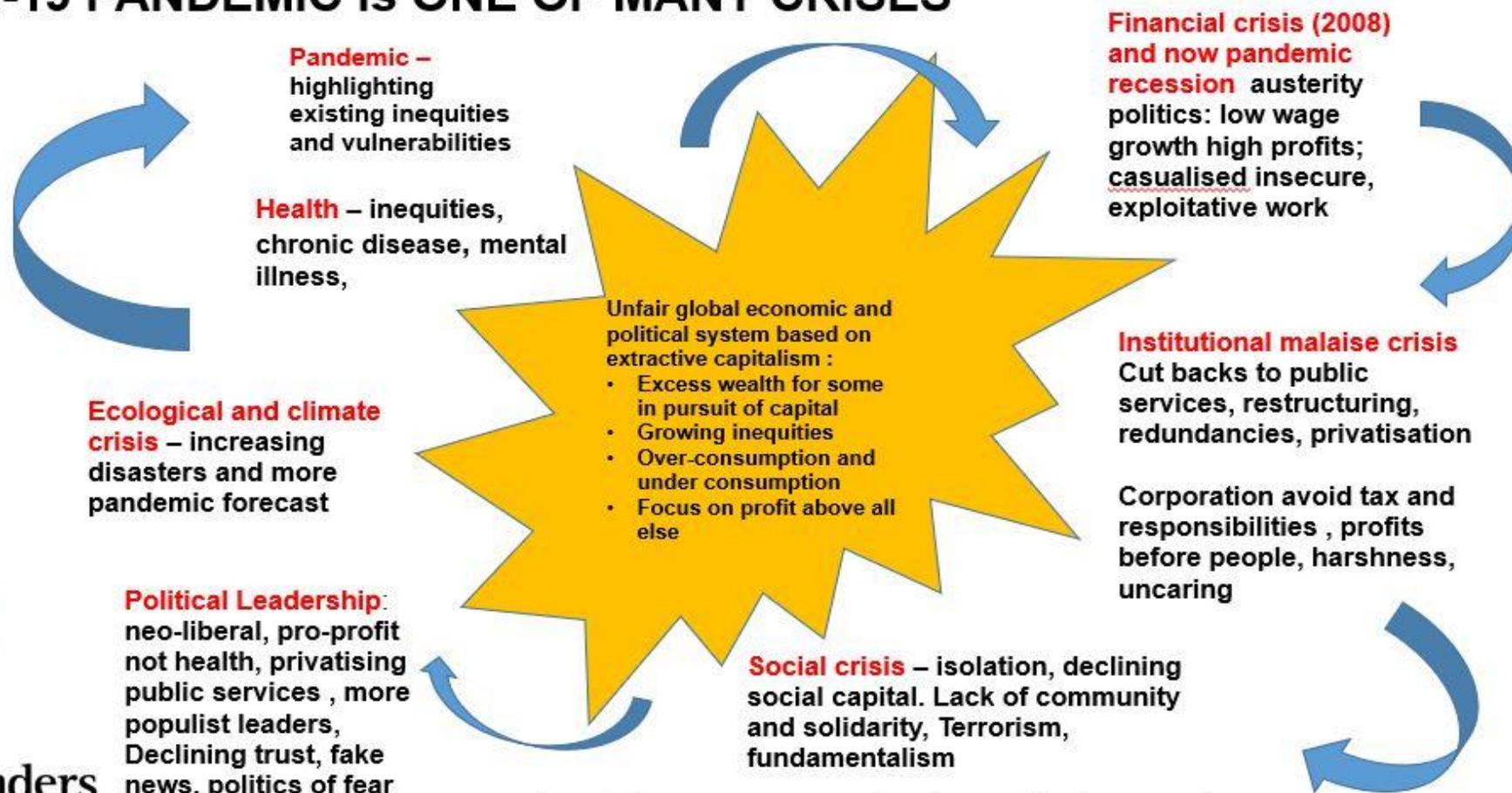
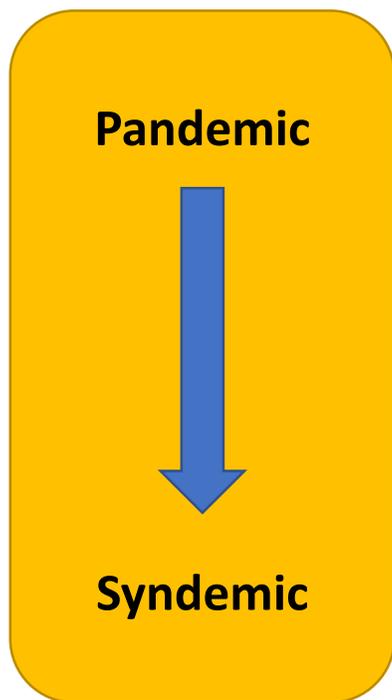
Plenary	Title
Opening Session	Opening Session by HRH Princess Maha Chakri Sirindhorn & Armchair Conversation
PL0	Politics, Political Economy, and History: Major Trends Shaping the COVID-19 Pandemic
PL1	What has the world learned/is learning from COVID-19?
PL2	How are we dealing with COVID-19?
PL3	Investing In The Future: Ensuring The World Will Never Be Vulnerable To Another “COVID-19” Threat
PL4	Protecting and improving human and planetary health - a Syndemic View
Synthesis session	Synthesis : Summary, Conclusion & Recommendation

Panelists & speakers: 138 from 35 countries



Participants: 1,612 from 87 countries

Covid-19 PANDEMIC is ONE OF MANY CRISES



Adapted from Baum Governing for Health (2019: 10)

Source: Slide from Fran Baum, PL2

Outlines of the summary



A. Challenges prior to the COVID-19 pandemic



B. Impact of the COVID-19 pandemic



C. What we are doing during the COVID-19 pandemic



D. What we should do for the future

A. Challenges prior to the COVID-19 pandemic

- Global context
- Global readiness for pandemic
- Health system vulnerability

Global context

The world of inequity and social vulnerability

- Poverty, discrimination, social exclusion, gender inequality, peace and justice (WS104,204, 402)

Imbalance of trade and health

- Intellectual property and trade regimes fraught with challenges for equitable access to health innovations (WS202)

Global inaction on climate change and ecological deterioration

- Ecological deterioration, fragmented global governance for climate change (WS302,304,403,405)

Global readiness for pandemic

Governance: national and global challenges

- The political economies of health systems and public health developments in H/UMICs and LMIC/LICs have varied, and contributed to weaknesses and inefficiencies (PL0)
- Inadequate health governance at all levels (WS104)
- No governance for infodemic management (WS102,202)

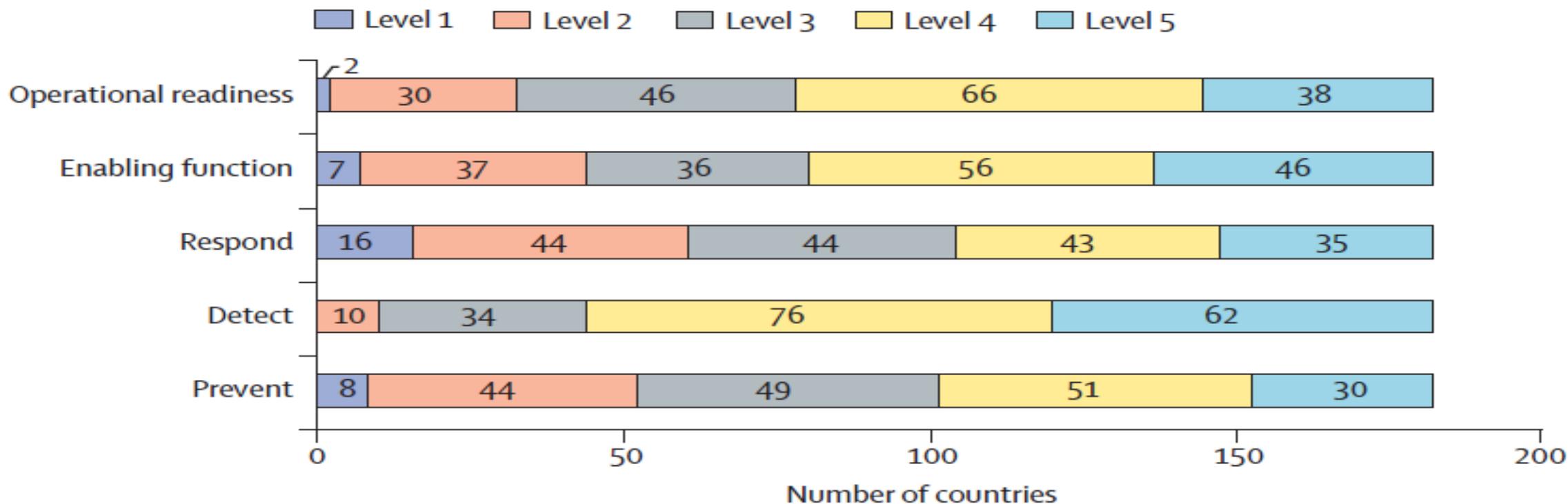
Existing surveillance systems not ready for emerging threats

- Highly dependent on countries' capabilities, causing delays in detection of emerging infections, reporting and prevention (WS304)

Health system vulnerability (PL+++ , WS+++)

- Many countries are far from achieving UHC
- Incomprehensive framework of health systems using 6 building blocks
- Weakness in the foundations of health systems: PHC, community health care, infrastructure, public health functions- a weak link
- Inadequate health workforces, medical supplies, and logistics

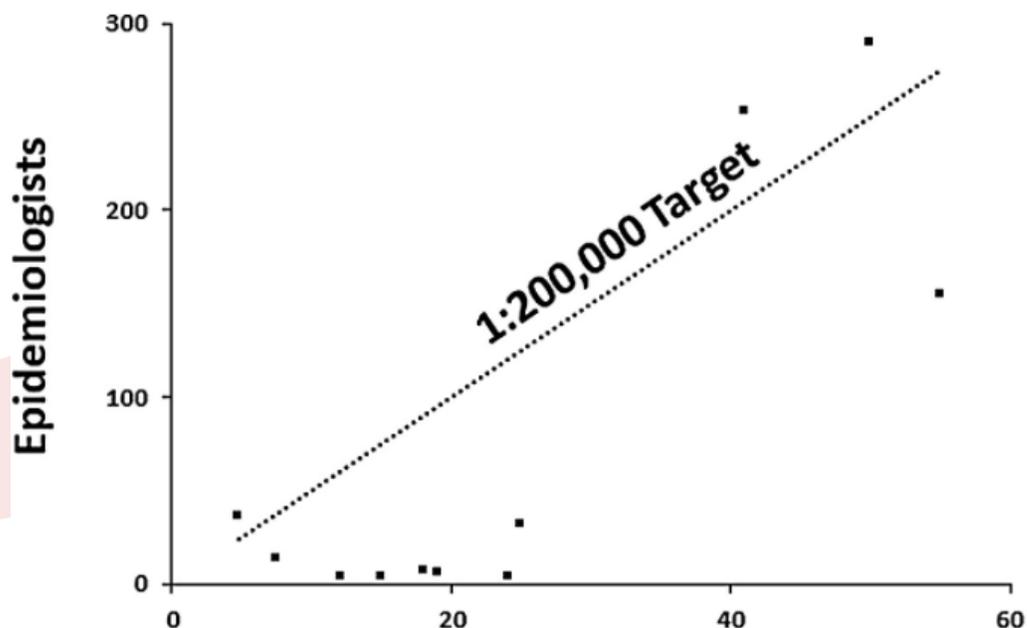
Capacities to prevent, detect, respond, enabling function, and operational readiness



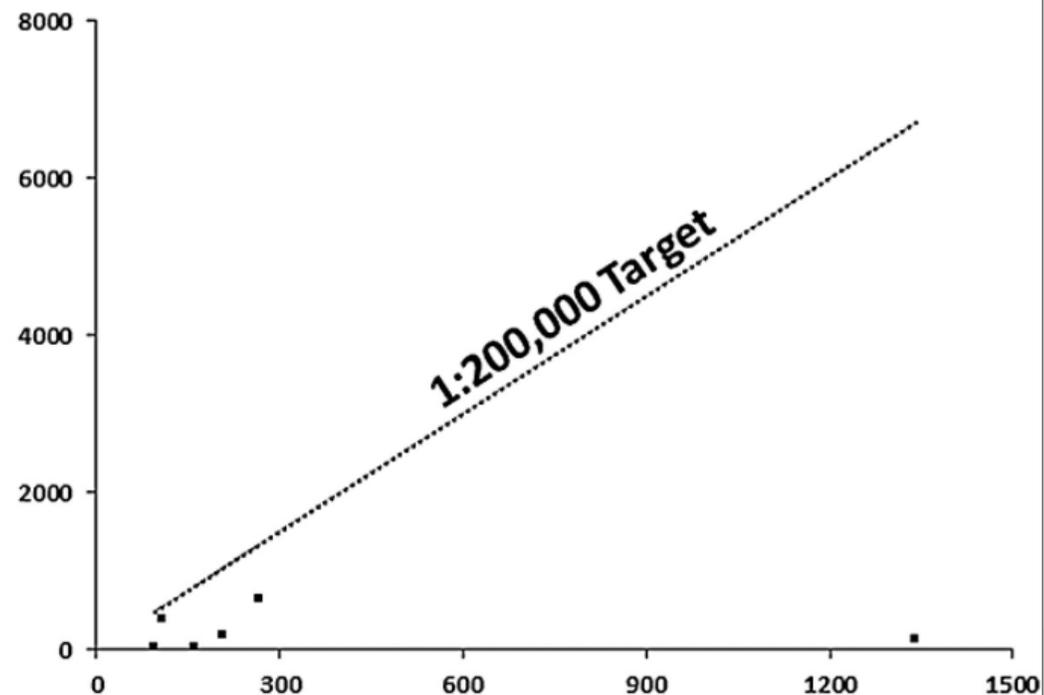
IHR capacity: analysis of 182 countries using SPAR 2018, 1 the lowest and 5 the highest national capacity

Shortage of field epidemiologists (target 1:200,000 pop)

Panel A: US-supported GHSA countries with populations < 60 million (n=11)



Panel B: USA-supported GHSA countries with populations ≥ 60 million (n=6)



Country Population (10⁶)

(Williams et al, 2020)

B. Impact of the COVID-19 pandemic



Search by Country, Territory, or Area



[Overview](#)

[Data Table](#)

[Explore](#)

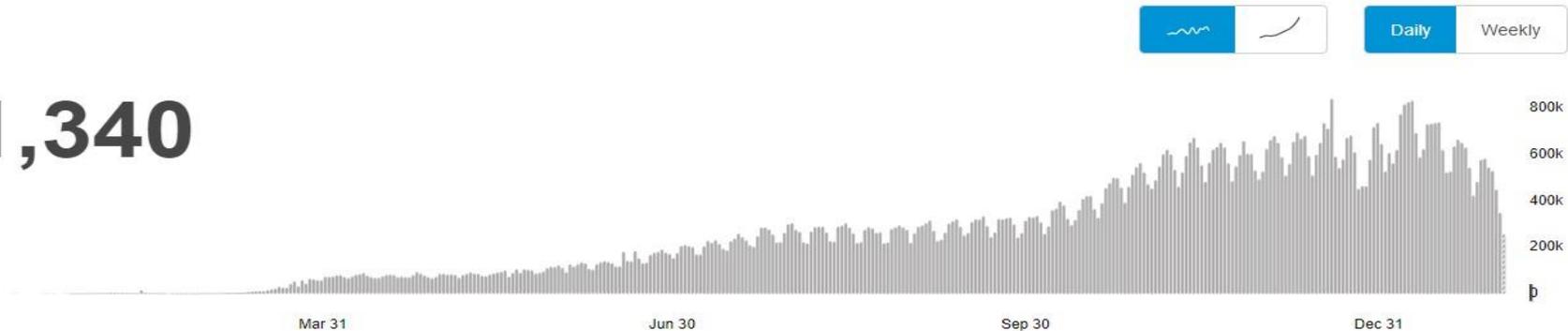
[Back to top](#)

WHO Coronavirus Disease (COVID-19) Dashboard
Data last updated: 2021/2/3, 9:45am CET

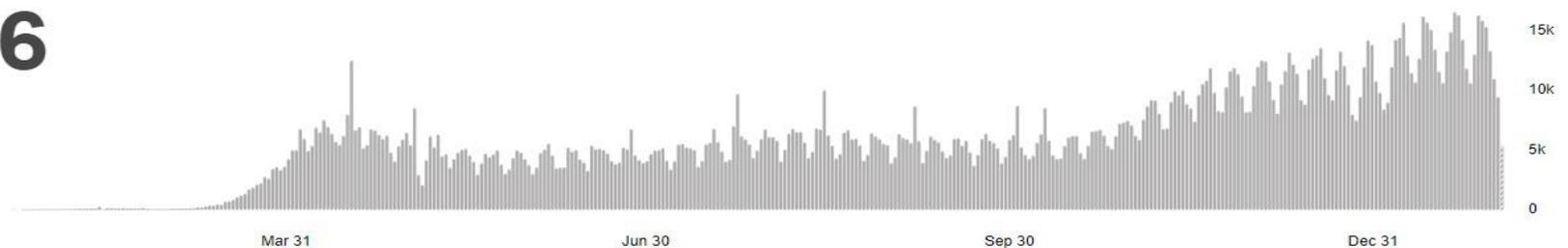
Globally, as of **9:45am CET, 3 February 2021**, there have been **103,201,340 confirmed cases** of COVID-19, including **2,237,636 deaths**, reported to WHO.

Global Situation

103,201,340
confirmed cases



2,237,636
deaths



Source: World Health Organization
Data may be incomplete for the current day or week.

Source: <https://covid19.who.int/>

Comorbidities associated with mortality in 31,461 adults with COVID-19 in the United States: A federated electronic medical record analysis

Comorbidities within the Charlson comorbidity index	Death with COVID-19, OR	(95% CI)
Renal disease	7.45	(6.60–8.40)
Myocardial infarction	7.25	(6.25–8.42)
Congestive heart failure	6.62	(5.84–7.52)
Dementia	6.40	(5.42–7.55)
Peripheral vascular disease	4.70	(4.04–5.46)
Moderate/severe liver disease	4.47	(2.83–7.08)
Cerebrovascular disease	4.16	(3.60–4.82)
Metastatic solid tumor	3.68	(2.73–4.97)
Diabetes mellitus	2.89	(2.56–3.26)
Any malignancy	2.78	(2.37–3.27)

Harrison SL, Fazio-Eynullayeva E, Lane DA, Underhill P, Lip GYH (2020) Comorbidities associated with mortality in 31,461 adults with COVID-19 in the United States: A federated electronic medical record analysis. PLoS Med 17(9): e1003321.

<https://doi.org/10.1371/journal.pmed.1003321>

Differential Impact



Settings with crowded people especially urban area



Ageing people



Women and children

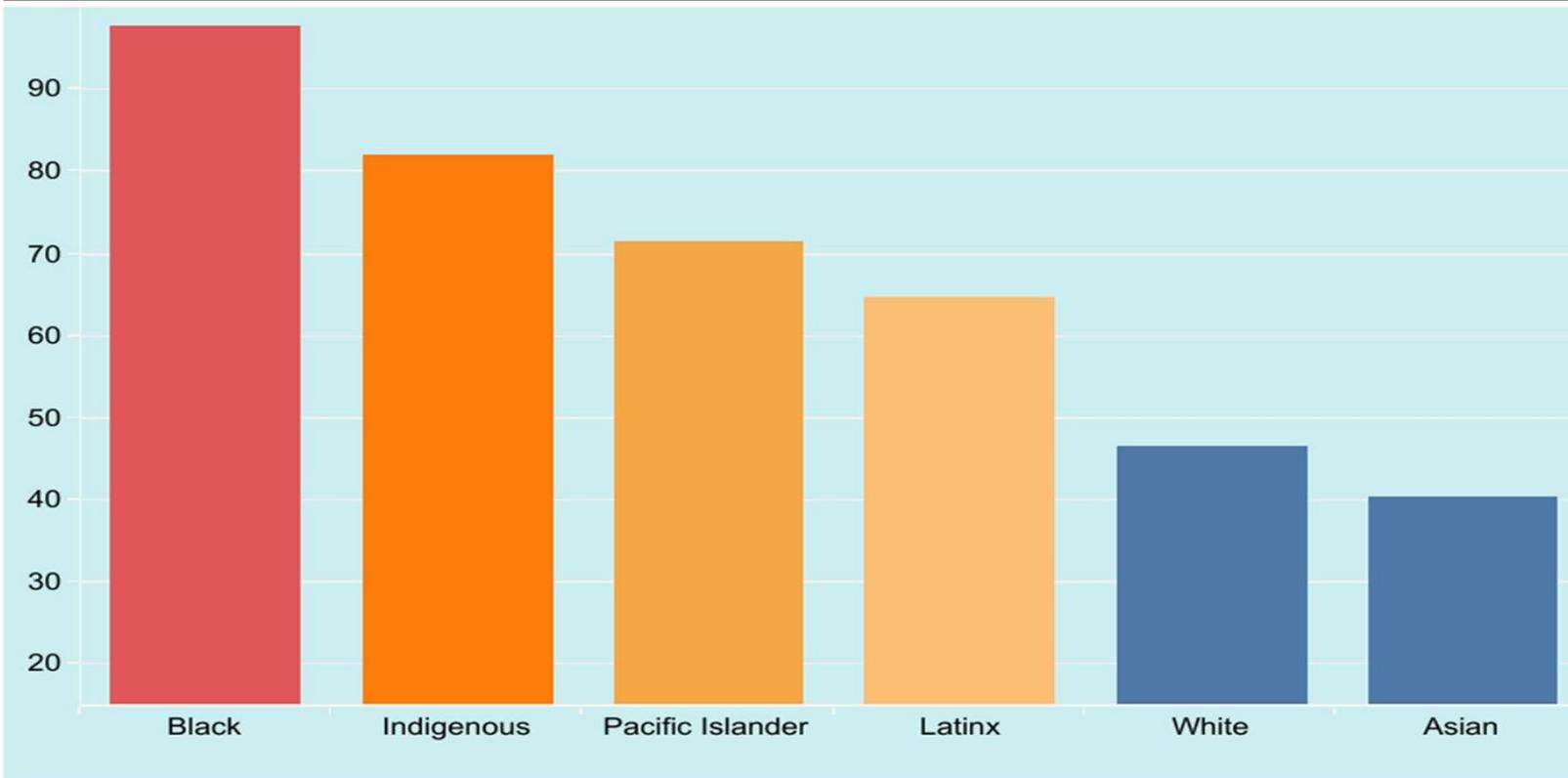


Minorities, migrant, refugee, ...

B. Impact of the COVID-19 pandemic

Covid-19 Death Rates are Higher for Black and Indigenous People

U.S. deaths of Covid-19 per 100,000 people by race, through September 15, 2020



Source: APM Research Lab

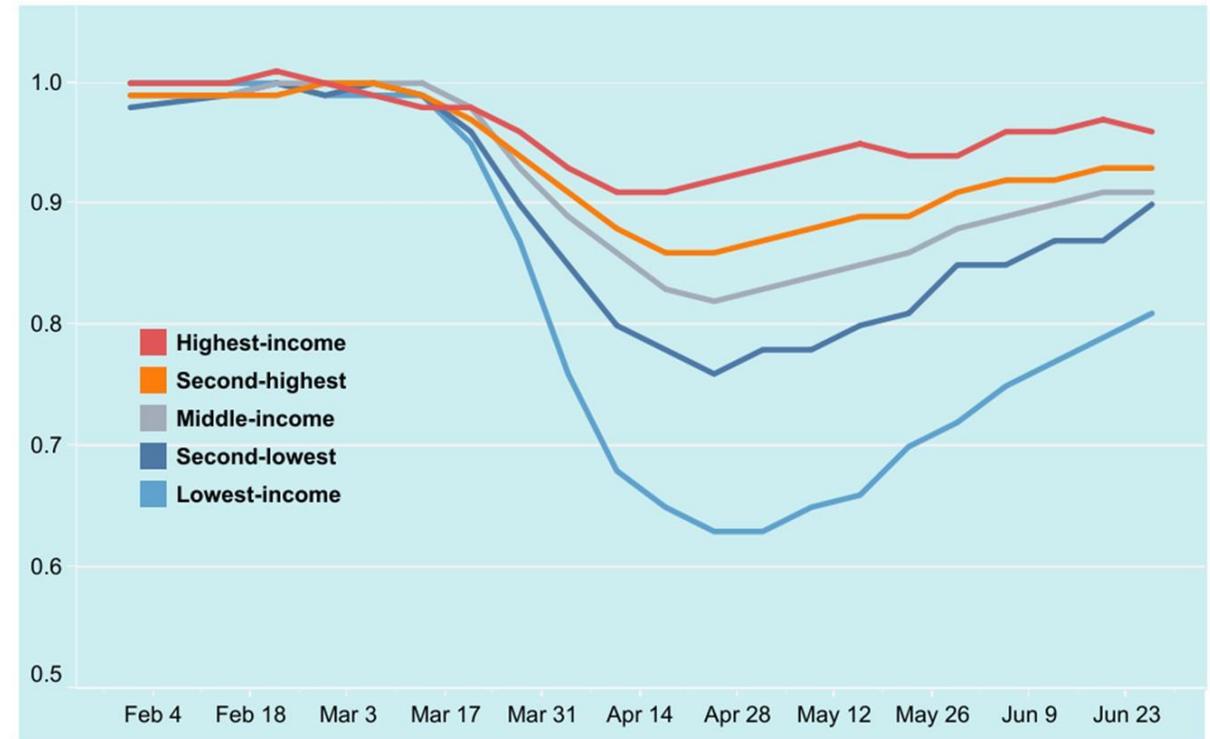
Source: Slide from PL2, Fran Baum

B. Impact of the COVID-19 pandemic

- **Economy**
- **Food insecurity and malnutrition**
- **Education**
- **Environment**
- **Global human development**

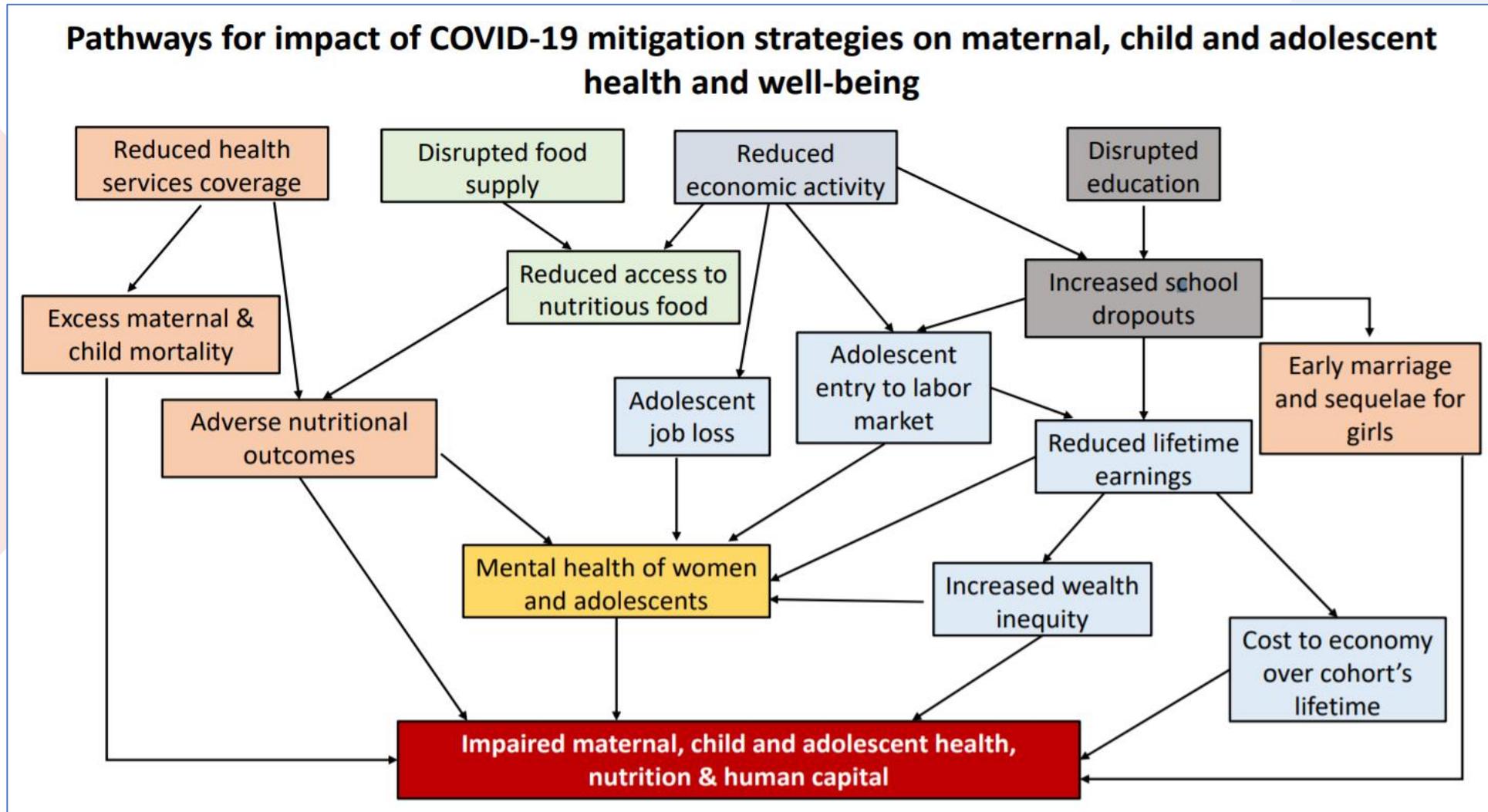
Low-Wage Workers Have Higher Pandemic Job Losses

Change in U.S. employment levels by income group, relative to February 1, 2020



Source: Becker Friedman Institute for Economics, University of Chicago, July 2020

Source: Slide from PL2, Fran Baum



(Source: Slide from PL4, Zulfiqar A Bhutta FRS)

Overwhelm of health system

- Supply chain interruption: supply shock, demand shock, and infrastructure shock
- Lack of capacity to maintain essential services
- Increased reports on substandard/falsified medicine, essential drugs, and medical supplies related to COVID-19

Mis and disinformation

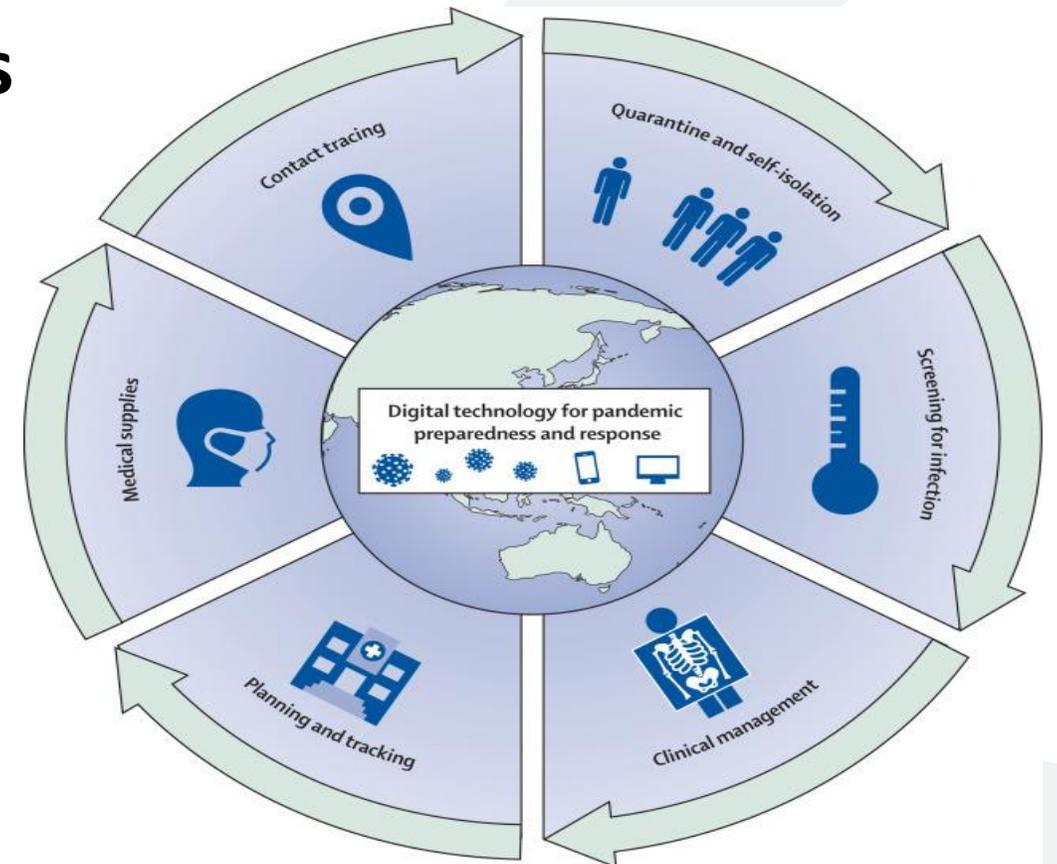
- Fear and mistrust among the population, government, and media

Violence

- Women and girls
- Domestic violence
- Anti-Asian Hate Crime During the COVID-19 Pandemic (Gover, A.R., Harper, S.B. & Langton, L. *Am J Crim Just* 45, 647–667 (2020). <https://doi.org/10.1007/s12103-020-09545-1>)

Advancing healthcare technologies

- COVID-19 vaccine
- ‘Digital Health pandemic’
 - Telemedicine
 - Artificial Intelligence (AI)



Source: Whitelaw S et al, (2020)

C. What we are doing during the COVID-19 pandemic

- Global response
- National response
- Remaining challenges

Global response to COVID-19

WHO Key Recommendations

1. Preventing local transmission via social and public health measures
2. Ensuring sufficient physical, human, and financial resources to maintain health services
3. Governance arrangements, whole-government actions on pandemic management and risk communications

Global response to COVID-19

- **Global governance**

- International Health Regulations;
- Equitable access to affordable medical products:
 - Access to COVID-19 Tools (ACT) Accelerator program
 - COVAX
 - Expansion of Medicine Patent Pool (MPP)
- Mechanism to share knowledge, intellectual property and data
 - The COVID-19 Technologies Access Pool (C-TAP)

- **Political economy during COVID-19**

National response to COVID-19

- **Different variation in interventions:**
 - Contextualized solutions integrating social and cultural values
 - UHC allows greater access to greater range of healthcare services
 - Timing in introducing interventions
- **Governance and leadership:**
 - Whole-of-government responses, transparency and accountability of decision makers

Face mask coverage



By [Elaine He](#) and [Lionel Laurent](#), July 17, 2020
<https://www.bloomberg.com/graphics/2020-opinion-coronavirus-global-face-mask-adoption/>

Remaining challenges

- Existing global governance is inadequate for rapid response
- Data-driven vs politically-driven policy decisions
- Nationalism vs multilateralism
- Inequitable allocation of resources, especially vaccine allocation
- Lack of capacity to maintain regular & essential services
- Ineffective risk communication: mis- and dis-information

D. What we should do for the future

- Pandemic preparedness and response
- Health systems strengthening at all levels
- Maximizing digital technologies for health
- Shifting efforts towards a sustainable world

Pandemic preparedness and response

At global and/or regional level

- Reforming global governance
- Strengthening the early warning system for emergencies and pandemics
- Investment in surveillance system through “One Health” approach
- Increase multilateralism, multisectoral, and interdisciplinary collaboration
- Risk communication and community engagement, esp infodemic management

At national level

- Re-envision the country preparedness and response plan
- Strengthen country’s capacity for preparedness and response to a health crisis
- Incorporate health and well-being into non-health policies

**** Political will is needed in all levels ****

Health systems strengthening at all levels (PL2-4)

1. Governance and leadership for Health
2. Integrate actions on health security, UHC, health promotion through strengthening PHC and all levels of care
3. Community engagement and empowerment
4. Public-Private partnerships

Vaccine agenda for 2021 and beyond

- Monitoring all variants and measure vaccine efficacy
- Expanded manufacturing capacity through technology transfer
- Equitable allocation of the vaccines
- Strengthened vaccine regulation, ensuring timely approval
- Assured supply chain and delivery
- Monitoring adverse events and corrective actions
- Ongoing investment in diagnostic, drugs, and vaccines research
- Ensuring adequate financing for COVID-19 vaccination

Maximizing digital technologies for health

- **The roles of technology in responding to crises**
- **Solutions to advancing technology for a better society**
 - Trust and multidisciplinary collaboration
 - Flexible and distributive regulations
- **Data literacy and data governance**

Shifting effort towards a sustainable world

- **Equity and peaceful world**
 - Protection and promotion of human rights
 - Poverty and inequity
 - Protection of vulnerable groups
 - Strengthening and empowering civil society
 - Continue decolonization
- **Building a healthier and better world**
 - Environmental sustainability- climate change, wildlife, and ecology
- **Empowering young generation**

Summary

COVID-19 is a **syndemic** that uncovered the pre-existing contexts and problems of health, social, economic, politics, and environment.

COVID-19 is a **human security crisis** in the century; solutions lie equally with responsive governments and global collective actions. Its long term deep ramification requires leadership to reconstruct the society and the world.

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Special thanks



PMAC 2021

Lead Rapporteur: Viroj Tangcharoensathien, Diana Weil, Walaiporn Patcharanarumol, Narisa Limpapaswat, and Chompoonut Topothai

Session Rapporteur: (55)

Angkana	Lekagul	Krittika	Tiwari	Payao	Phonsuk	Sirirat	Wongprakornkul
Anond	kulthanmanusorn	Maki	Sakuma	Peeraya	Piancharoen	Sirirudee	Chanthachaiwat
Aparna	Ananthakrishnan	Mashida	Rashid	Pensom	Pengsombat	Somtaneuk	Chotchoungchatchai
Atcharaporn	Thammachot	Mathudara	Phaiyarom	Piyawan	Kanan	Supapat	Kirivan
Beverly	Johnston	Mayumi	Okada	Praewa	Kulatnam	Suphanna	Krongthaeo
Bharadee	Lalitkittikul	Milin	Sakornsin	Puri	Chunekamrai	Thanakit	Suebsaicharoen
Chaaim	Patchanee	Napassorn	Wongakkarakhun	Rungsun	Munkong	Thitikorn	Topothai
Chanyapron	Pengnorapat	Nattadhanai	Rajatanavin	Saranya	Sachdev	Titaree	Boontantrapiwat
Chayannan	Jaide	Nichapa	Chindaduangratn	Sarayuth	Khuntha	Titiporn	Tuangratananon
Hathairat	Kosiyaporn	Nontakorn	Siriwattanasatorn	Sarin	KC	Watinee	Kunpeuk
Htoo Aung	Cho	Orana	Chandrasiri	Shaheda	Viriyathorn	Warisa	Panichkriangkrai
Jintana	Jankhotkaew	Pamela	Rao	Sigit	Arifwidodo	Wit	Wichaidit
Jurairat	Phromjai	Patinya	Srisai	Sininard	Wangdee	Yui	ITO
Karoon	Chanachai	Patiphak	Namahoot	Sirinard	Nipaphorn		

Rapporteur coordinator: Walaiporn Patcharanarumol, Chompoonut Topothai and Nattanicha Pangkariya

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Q&A



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