

危機を繰り返さない国際システムにむけた改革を～  
COVID-19対応検証独立パネルはどう取り組んだのか

**COVID-19:  
Make it the  
Last Pandemic**

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# Presentation of the Independent Panel's report

The Independent Panel

## COVID-19: Make it the Last Pandemic

The Independent Panel

### COVID-19: Make it the Last Pandemic A Summary

COVID-19 remains a global disaster. Worse, it was a preventable disaster. That is why the recommendations of the Independent Panel for Pandemic Preparedness and Response are urgent and vital. The world needs a new international system for pandemic preparedness and response, and it needs one fast, to stop future infectious disease outbreaks from becoming catastrophic pandemics.

The Independent Panel has found weak links at every point in the chain of preparedness and response. Preparation was inconsistent and underfunded. The alert system was too slow and too weak. The World Health Organization was under-powered. The response has exacerbated inequities. Global political leadership was absent.

Now, a priority is to end illness and deaths from COVID-19. Current national waves of transmission are causing the same human traumas as those witnessed last year – especially tragic when we know that public health measures could prevent them. Vaccine distribution is blatantly unjust and not strategic. Vaccine variants are emerging as SARS-CoV-2 spreads, and ever new ones are possible. The burden on people and nations is intolerable. That is why the Panel calls for essential short-term measures.

But the world cannot afford to focus only on COVID-19. It must learn from this crisis, and plan for the next one. Otherwise, precious time and momentum will be lost. That is why our recommendations focus on the future. COVID-19 has been a terrible wake-up call. So now the world needs to wake up, and commit to clear targets, additional resources, new measures and strong leadership to prepare for the future.

We have been warned.

## How an outbreak became a pandemic

A companion to *The end of pandemics: How the COVID-19 outbreak became a pandemic and how we can stop that from happening again*

## An authoritative chronology of the COVID-19 pandemic

Mali, RN,BSN

"We've got to educate people. We've got to help them understand that it's real. It's sad that it's been a year and some people still don't understand or they just don't care."

Mali Johnson, Nurse, Baltimore, USA

REAL-TIME EVIDENCE	INTERNATIONAL ACTIONS	COUNTRY ACTIONS
<p>29 JANUARY 2020</p> <p><b>Science</b></p> <p><b>Bat coronavirus likely ancestor of SARS-CoV-2</b> A bat coronavirus is found to share 96.3% of its genome with SARS-CoV-2. Author: Katharine G. Peinado, J. C. Sánchez, S. Hargrett, et al. Source: <i>Science</i>, Genetics and Evolution, Nature</p> <p><b>Cases</b></p> <p><b>China reaches 6,000 cases, spread to 15 countries</b> 6,065 cases globally, of which 5,997 are from China. 68 cases outside China, in 15 countries. Source: <i>WHO Situation Report</i></p> <p><b>Cases</b></p> <p><b>United Arab Emirates: First cases detected</b> Four cases reported in the United Arab Emirates in air travelers arriving from Wuhan. Author: Katharine WHO Source: <i>WHO</i></p> <p><b>Cases</b></p> <p><b>Study of first 425 Wuhan cases published in NEJM</b> Study of first 425 lab-confirmed cases in</p>	<p><b>Meeting</b></p> <p><b>Third meeting of the STAG-IH</b> STAG-IH discusses briefings on Strategic Response Plan, and R&amp;D Update-Global Research and Innovation meeting. Author: Katharine WHO STAG-IH Source: <i>WHO</i></p> <p><b>Announcement</b></p> <p><b>WHO DG praises China on return to Geneva</b> "China's efforts to contain the outbreak at the epicentre have been essential for preventing the further spread of the virus." Author: Katharine WHO DG Source: <i>WHO</i></p> <p><b>Interim Guidance</b></p> <p><b>Interim guidance on the use of masks</b> Wearing a medical mask is one of the prevention measures to limit spread of certain respiratory diseases, including 2019-nCoV, during home care and in health care settings. Author: Katharine WHO HQ Source: <i>WHO</i></p>	<p><b>Border Control Measures</b></p> <p><b>Three countries implement border restrictions</b> <i>Cases per million Japan 1.16 Viet Nam 0.05 Singapore 1.0</i></p> <p>Japan, Viet Nam and Singapore implement various levels of border closures and travel restrictions during this week. Source: <i>Japan, Viet Nam, Singapore</i></p>

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# Key Findings



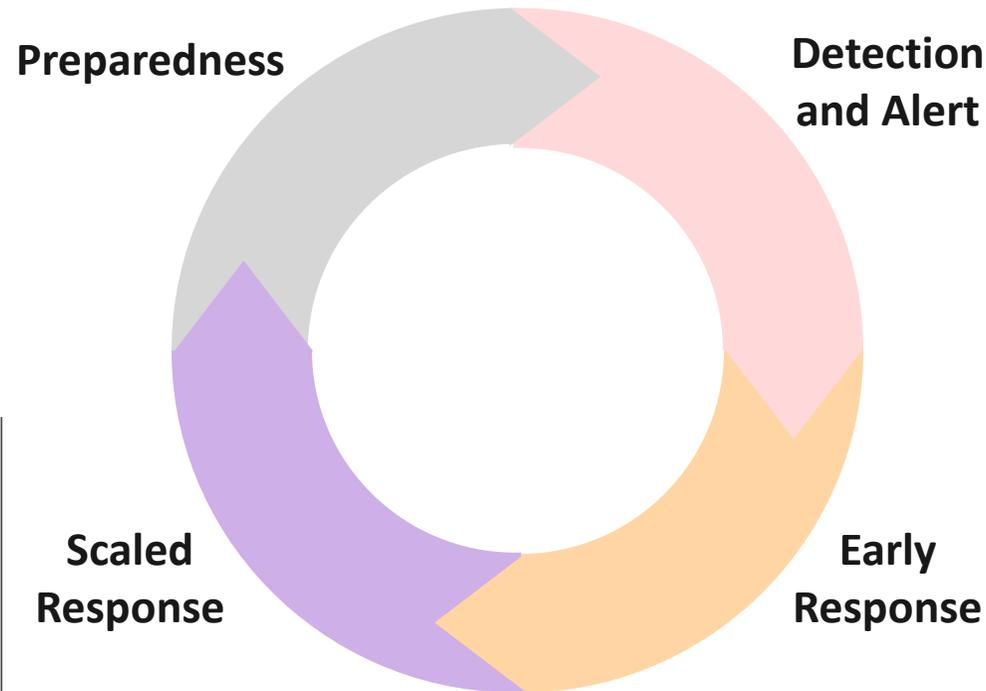
# Key failings identified

## 1. Countries were not prepared

- Preparedness capacities and plans were not sufficient
- Targets & metrics failed
- Financing was inadequate – not prioritized nor incentivized

## 4. The pandemic turned into crisis

- Small number of countries Partner, Coordinate, Develop, Strengthen vs. many Devalue, Deny, Delay, Distrust
- Intl. system faced with many issues in equity, inclusiveness, manufacturing bottlenecks, etc.



## 5. Cross-cutting issues across phases

- Pandemic not seen as a top global threat
- WHO not empowered to lead
- Financing not sufficient and slow

## 2. Series of delays in every step

- Detection did not fully leverage digital, ONE Health, etc.
- Country report, WHO validation & alert delayed by politics

## 3. Delayed responses turned the outbreak into a pandemic

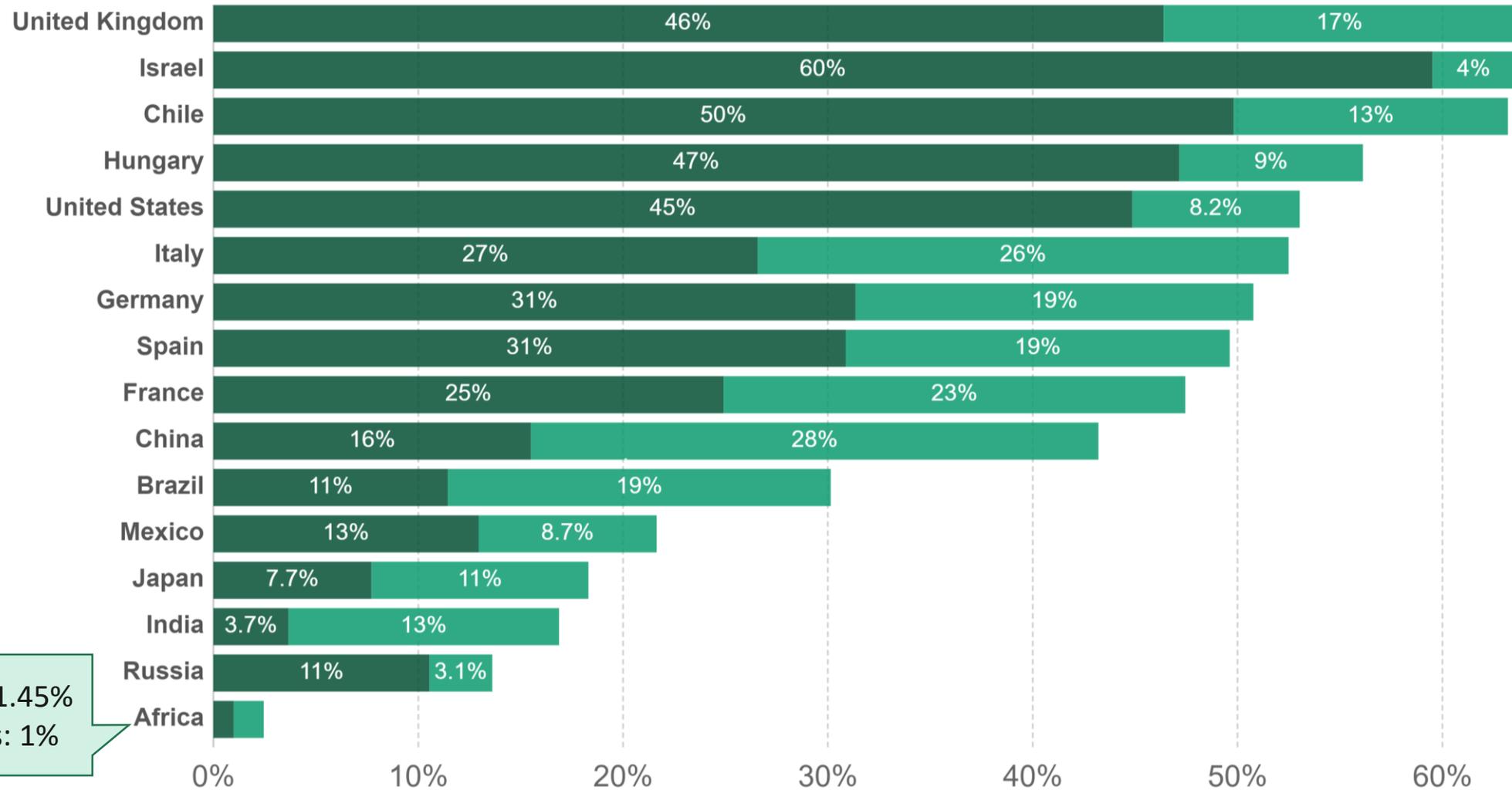
- Many countries did “wait & see” instead of rapid containment
- Lack of clear advice on strategy
- Surge financing and essential supplies delayed

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# Huge inequity in access to COVID-19 vaccines

■ Share of people fully vaccinated against COVID-19 ■ Share of people only partly vaccinated against COVID-19 (As of June 21, 2021)

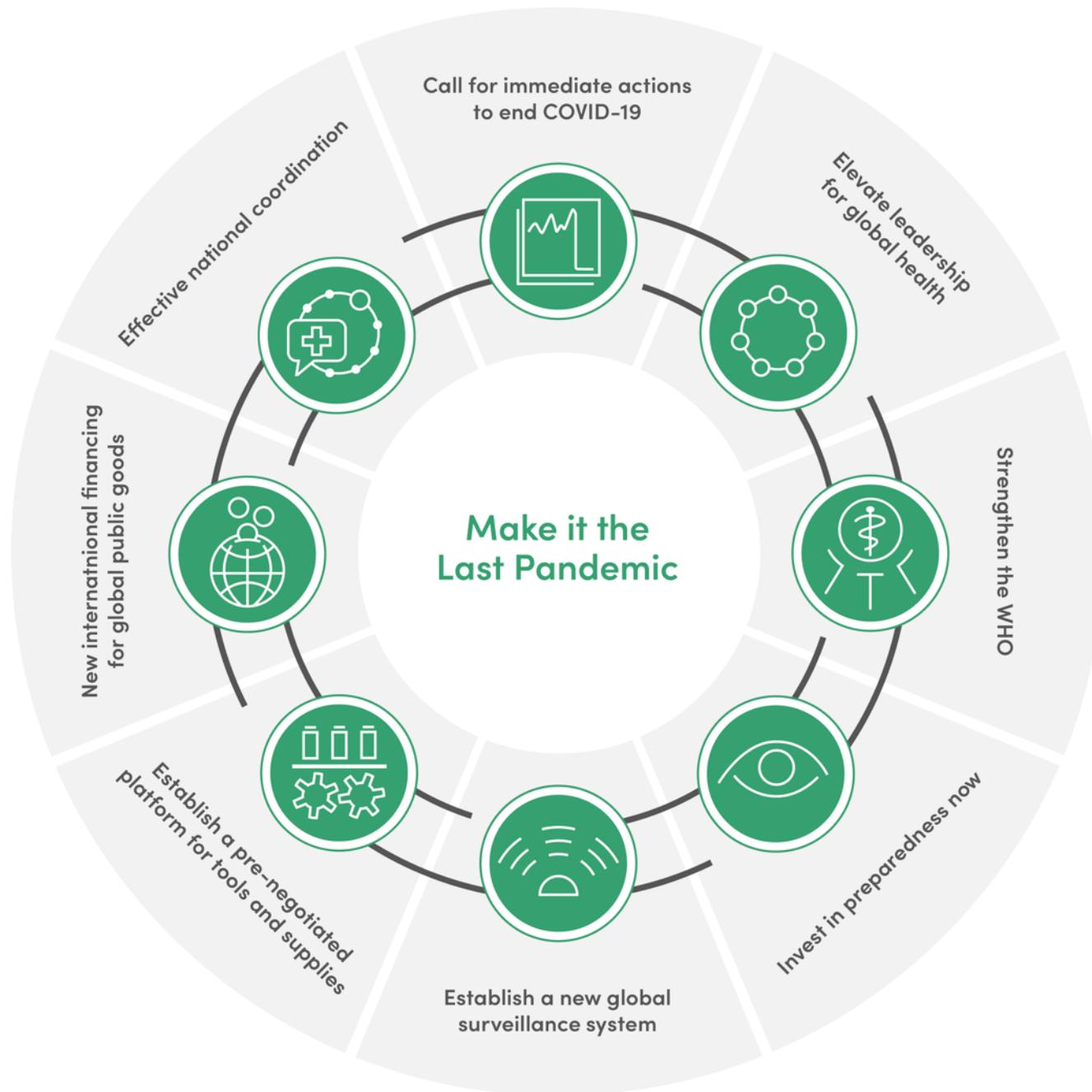


One dose: 1.45%  
Two doses: 1%



# Recommendations





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# Recommendations – *for bold and vital reforms*



1. Elevate leadership to prepare for and respond to global health threats to the highest levels
  - Establish a high-level ***Global Health Threats Council*** led by Heads of State and Government.



# Recommendations – *for bold and vital reforms*



## 2. Strengthen the independence, authority and financing of WHO

- ***Focus WHO's mandate on normative, policy, and technical guidance.***
- Establish the ***financial independence of WHO*** based on fully unearmarked resources.
- Strengthen the independence of the Director-General, including by having ***a single term of office of seven years with no option for re-election.***
- ***Resource and equip WHO Country Offices*** to respond to technical requests from governments to support pandemic preparedness and response.

# Recommendations – *for bold and vital reforms*



## 3. Invest in preparedness now to prevent the next crisis

- ***All governments to update their preparedness plans*** within six months.
  - National pandemic coordinator to coordinate whole-of-government preparedness
  - Public health institutes with multi-disciplinary capacities
  - Annual multi-sectoral simulation exercises to assess and improve
- ***WHO to formalize universal periodic peer reviews*** as a means of accountability and learning between countries.
- The ***IMF should include a pandemic preparedness assessment*** as part of the ***Article IV consultation*** with member countries.

# Recommendations – *for bold and vital reforms*



## 4. A new agile surveillance information and alert system

- ***WHO to establish a new global system for surveillance, based on full transparency*** by all parties, using state-of-the-art digital tools.
- ***The World Health Assembly to give WHO the explicit authority to publish information*** about outbreaks immediately, and to ***investigate pathogens with pandemic potential*** without the prior approval of countries
- ***Future declarations of a public health emergency of international concern should be based on the precautionary principle***, as in the case of respiratory pathogens, and on clear, objective, and published criteria.

# Recommendations – *for bold and vital reforms*



## 5. Establish a pre-negotiated platform for tools and supplies

- ***Transform the current ACT-A into a truly global end-to-end platform*** to deliver the global public goods of vaccines, therapeutics, diagnostics, etc.
- ***Secure technology transfer and commitment to voluntary licensing*** in all agreements where public funding has been invested in R&D.
- ***Establish stronger regional capacities for manufacturing, regulation, and procurement*** of needed tools for equitable and effective access



# Recommendations – *for bold and vital reforms*



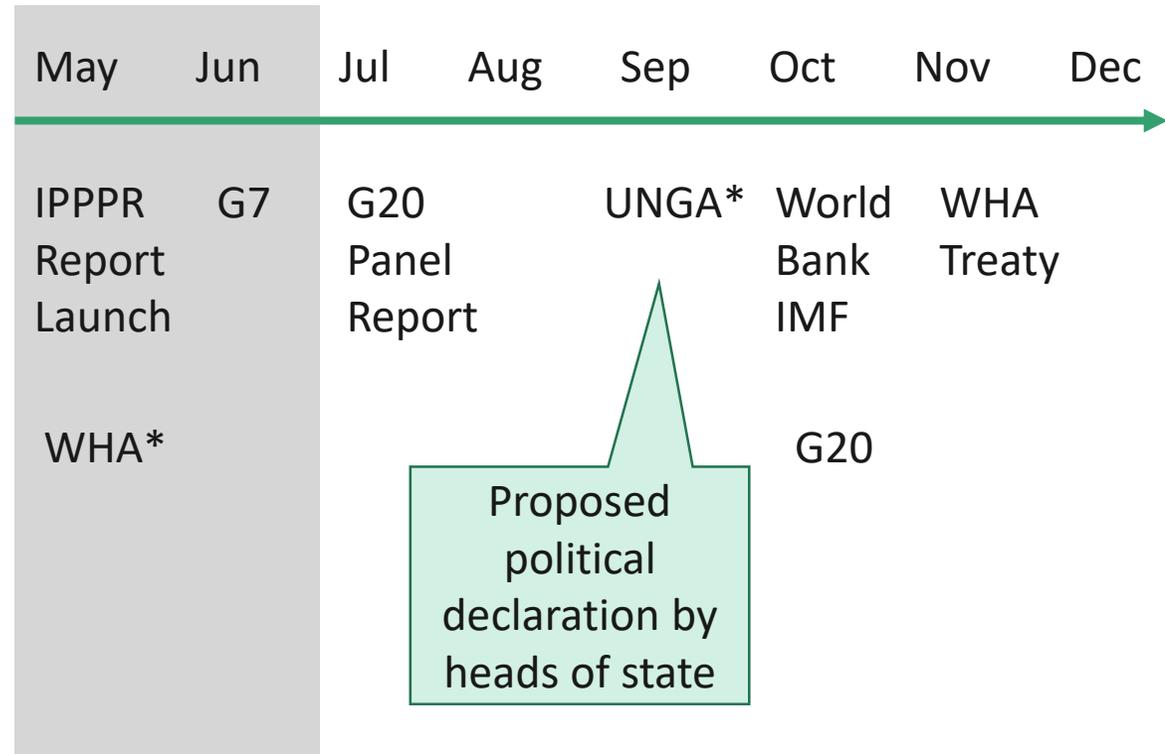
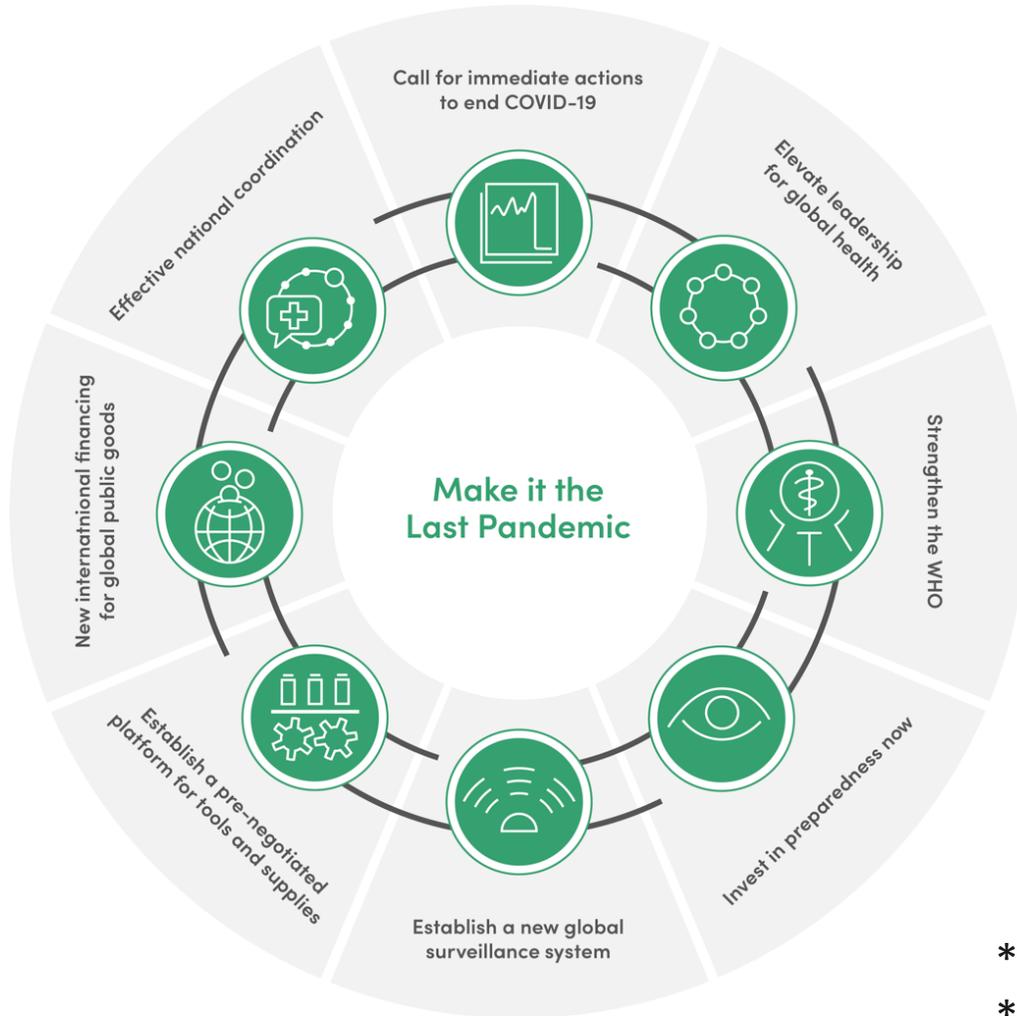
## 6. Raise new international financing for pandemic preparedness and response

- ***Create an International Pandemic Financing Facility*** to raise additional reliable funding for pandemic preparedness, and for rapid surge financing for response, with contributions of US\$5-10 billion per year, ***preferably from non-ODA budget lines.***
- The ***Global Health Threats Council will have the task of allocating and monitoring funding*** from this instrument.



# Call for Action

## 2021 Calendar for political decisions on global governance reforms to prevent future pandemics



\* WHA: World Health Assembly

\* UNGA: United Nations General Assembly

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# The Independent Panel

FOR PANDEMIC PREPAREDNESS & RESPONSE

