

LEADERSHIP FOR THE AMERICAS

— AWARDS GALA —

September 28, 2021

Gala Awards Dinner

6:00 – 9:30 PM

Woodrow Wilson Plaza
Washington, DC

October 14, 2021

Virtual High-Level Roundtable

11:00 AM – 12:30 PM

LEADERSHIP FOR THE AMERICAS

High-Level Roundtable

TIME TO ENGAGE: MOBILIZING THE PRIVATE SECTOR FOR HEALTH EMERGENCIES RESPONSE AND RECOVERY IN THE AMERICAS

BRIEF

The Western Hemisphere has been deeply affected by the Covid-19 crisis, which has countless consequences, but also offers the opportunity to develop more robust health systems. Mobilizing resources on a larger scale than previously expected from public and private sources will foster long-term sustainability and resilience of health systems, especially in the face of a health crisis.

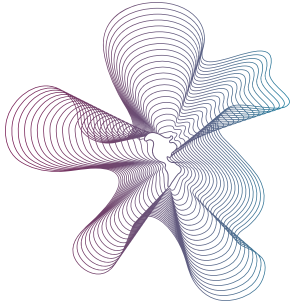
INTRODUCTION AND BACKGROUND

Social and economic policy decisions made today in response to the Covid-19 crisis, as well as resource allocation, will have a widespread impact in the years to come. The recent health crises caused by the Ebola epidemic and the Covid-19 pandemic have shown that governments on their own cannot cope with an emergency of high proportions. During emergencies, governments must develop new capacities and services, increase, or reorient production, in some cases coordinate and monitor production chains to ensure supply while serving the most vulnerable. Governments also face internal institutional divergences and fragmentation, as well as distrust from the population. Government capabilities are overwhelmed. Decisions must be made with limited, changing and in many cases unconfirmed information.

Strengthening and investing in health systems is both a national and regional priority for economic stability and security. The private sector plays a critical role in addressing the challenges faced by countries in responding to and recovering from health emergencies. Understanding public and private roles during a health crisis should lead to building a common agenda that requires agile action from all actors while ensuring that joint efforts do not distort their unique capabilities. It is necessary to take advantage of institutional and sectoral experience, capacity, and resources to overcome the health crisis and facilitate economic recovery.

The private sector is keen to help, given their social responsibility. The crisis also creates opportunities to work with other actors - government, faith-based organizations, NGOs, competitors, etc. Nevertheless, it is always appropriate to acknowledge that “the private sector is not one monolithic entity.”¹ Collaboration between the government and the private sector

1. “WEF Managing Risk Epidemics, 2015,” http://www3.weforum.org/docs/WEF_Managing_Risk_Epidemics_report_2015.pdf.



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can be confusing and chaotic at first. It requires leadership, strategic vision, a good dose of pragmatism, and flexibility. Health emergencies are valuable opportunities for learning and building trust while avoiding duplication. There is no single model for a successful public-private partnership, something that works in a region or country may not work in another.²

The World Health Organization (WHO) has taken a step forward urging governments to adopt a whole-of-government and whole-of-society approach.³ It highlights that no single entity has the capacity to successfully manage the dynamic, complex problems that arise in a pandemic environment. The WHO recommends building partnerships between the government and all stakeholders in society to manage essential services such as health, finance, transport, telecommunications, energy, food, and water. The model consists of a continuous cycle of readiness, response and recovery of services.⁴

In a rapidly and constantly evolving health landscape, strategic measures are critical to protect people's health and establish economic resilience. Uncertainty remains high, countries continue to face increasing numbers of Covid variants, limited access, and hesitancy to vaccines. Decision-makers face an opportunity to boost public-private partnerships to develop Covid exit strategies and build new approaches for future health emergencies.

PURPOSE AND SCOPE

The purpose of this concept note is to deepen the discussion on the involvement of the private sector in health emergencies response and recovery in the Americas. This discussion takes into account three strategic issues: **I. Quality, transparency, and sharing and use of data lead to effective decision-making. II. Collaboration leads to innovative solutions to ensure equal regional access to health products and services. III. Accurate information and reliable sources help counter misinformation, disinformation, and conspiracy theories.**

THREE STRATEGIC ISSUES TO MOBILIZE THE PRIVATE SECTOR'S INVOLVEMENT IN HEALTH EMERGENCIES

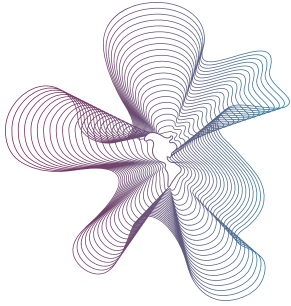
I. QUALITY, TRANSPARENCY, AND SHARING AND USE OF DATA LEAD TO EFFECTIVE DECISION-MAKING

The Covid-19 pandemic has clearly shown the importance of reliable, comparable, timely, open, and disaggregated data and statistics to tackle a crisis efficiently. A large amount of data has been made available tracking cases, deaths, as well as economic and social indicators to monitor the impact of the crisis. Most of the data and expertise needed to perform adequate monitoring comes from the private sector, and academia. Opening a collaborative channel between governments, key academics and private actors is necessary to alleviate bottlenecks and allow for the exchange and use of data for effective decision-making in all sectors.

2. "All Hands on Deck: Mobilising the Private Sector for the COVID-19 Response," UHC2030, <https://www.uhc2030.org/blog-news-events/uhc2030-blog/all-hands-on-deck-mobilising-the-private-sector-for-the-covid-19-response-555347/>.

3. "Enabling the Private Health Sector in the National Response to COVID-19: Six Current Policy Challenges Health Systems Governance Collaborative," <https://hsgovcollab.org/en/node/4397>.

4. Dubb, Sukhpreet, "Coronavirus Pandemic: Applying a Whole-of-Society Model for the Whole-of-the World," British Journal of Oral and Maxillofacial Surgery 58 (May 1, 2020), <https://doi.org/10.1016/j.bjoms.2020.05.009>.



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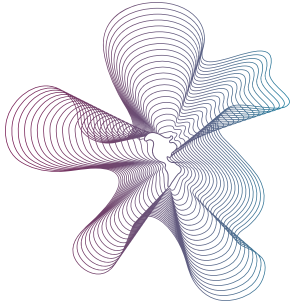
KEY POINTS

- **Good data is a key pillar to manage and respond to health emergencies that have outsized socioeconomic impacts.** To better serve policymakers, data must be consistent, accessible, and easy to interpret. At the onset of a crisis, rapid and real-time data collection often comes with high potential for error. Private-sector know-how can help governments analyze and better use interoperability between internal apps and other data exchange tools, which are increasingly turning to application programming interfaces (APIs), in order to manage the flow of information in health systems⁵ and other sectors of the economy. Some notable projects included efforts by the United States Urban Institute, which used weekly unemployment claims from Washington State and data from the US Bureau of Labor Statistics to estimate the disease's toll for each sector of the economy. A similar collaboration between Statistics Canada and the Canadian Chamber of Commerce sought to understand the impact of the pandemic on businesses, surveying owners whether their businesses had seen a decline in revenue, how they may have adjusted staffing and remote working conditions, and whether they had found new ways to interact with customers amid social dissociation.⁶
- **Privacy and transparency of personal data is a key aspect of data management.** Governments and private companies need to balance the simultaneous protection of public health and personal privacy. When data is used to make decisions, it is vital that people are protected from potential harmful effects, such as profiling or exclusion. To protect people's health, governments and institutions may introduce restrictions on movement as well as mechanisms for tracing. The private sector can be supportive to this type of measures and motivate employees to report timely and accurately the requested information by authorities. These include contact-tracing and self-reporting apps, capable of recording and transmitting personal health information, a by-product that underscores the profound importance of data protection and privacy.
- **Timely data sharing and open access.** The sharing of data between people and organizations without previous relationships is possible if all adhere to important ethical principles on the use of data. Public sector organizations have, however, largely implemented open data initiatives, with a certain number of academic institutions, civil society, and private sector involvement. The reliability of timely and accurate data sharing in all types of health emergencies is crucial for the work of epidemiologists, researchers, health teams, funding agencies, private enterprises, and governments. In the region, the early initiatives included some, albeit relatively few, initiatives by governments and stakeholders to use open government data (OGD) to clarify the social and economic impact of the crisis. Projects such as Peru's Datos Abiertos Coronavirus (which informed citizens of Covid-19-related procurement and budget resources), Brazil's Public Expenditures on Covid-19, or Costa Rica's Portal on Transparency of Public Management under the Covid-19 Crisis) underscored this transparency work.⁷

5. HITInfrastructure, "Why Application Programming Interfaces Are Key for Healthcare," HITInfrastructure, <https://hitinfrastructure.com/features/why-application-programming-interfaces-are-key-for-healthcare>.

6. "Open Data in Action: Initiatives during the initial stage of the COVID-19 pandemic," <https://www.oecd.org/gov/digital-government/open-data-in-action-initiatives-during-the-initial-stage-of-the-covid-19-pandemic.pdf>.

7. "Open Data in Action: Initiatives during the initial stage of the COVID-19 pandemic," <https://www.oecd.org/gov/digital-government/open-data-in-action-initiatives-during-the-initial-stage-of-the-covid-19-pandemic.pdf>.



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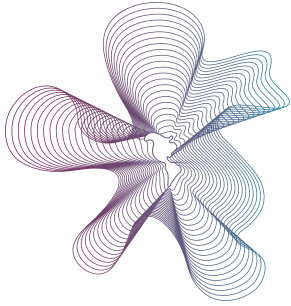
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II. COLLABORATION LEADS TO INNOVATIVE SOLUTIONS TO ENSURE EQUAL REGIONAL ACCESS TO HEALTH PRODUCTS AND SERVICES

The health crises increase the demand for health products and services in countries, even for the best-resourced health systems under acute stress. In lower- and middle-income countries (LMICs), the private sector often provides a significant proportion of health services and products. The private sector's commitment and involvement offers opportunities for health systems to increase access, quality, and coverage. To achieve this requires building alliances between the public and private sectors, by identifying intersecting interests while preserving their roles.

KEY POINTS

- **The private sector could further strengthen the competitive supply channel for critical supplies and equipment.** More links between private and public interests have created creative, home-grown solutions to produce, source and distribute supplies to meet the demand for critical products in a health emergency. In the regional effort for equal and rapid Covid-19 vaccine distribution, private sector participation is essential to end the acute phase of the crisis. For example, the National Association of Businessmen of Colombia (ANDI) has joined efforts in the National Vaccination Plan against Covid-19 by purchasing 1.4 million vaccines free of charge for the vaccination of employees and collaboration the private sector.
- **Offering medicines and health products at an affordable and fair price is critical for a swift response.** The price of medicines and health products depends on multiple market factors, including comparative clinical value, competitiveness between manufacturers, and the volume of potential users. Governments and pharma companies need to create incentives to facilitate affordable and equal access, especially wealthier countries with highly competitive pharmaceutical companies. A fair price approach aims to cover manufacturing costs and a reasonable return to its makers, guaranteeing access, particularly to the region's low- and middle-income countries. Although multilateral mechanisms have been promoted to address issues related to recouping research and development costs to meet health needs in an emergency, both governments and companies are expected to devise more innovative and collaborative R & D solutions to facilitate equal access to all. It needs to be accompanied by sustainable investment strategies in the healthcare infrastructure and health systems, which increase efficiency, reduce costs, and create value for private investors.
- **Incentivize and increase regional manufacturing capacity, supply, and scale-up process for medicines and health products.** The development and construction of new production capacity for medicines and health products in the region, in particular in Latin American and Caribbean countries, is both resource and time-intensive. A range of financial incentives and instruments are needed to encourage more significant investment in manufacturing capacity, either internally or through partnerships with other manufacturers. *For example, Pfizer BioNTech announced a partnership with Brazilian biopharmaceutical company Eurofarma Laboratórios SA to produce 100 million doses of the two-dose Pfizer shot for distribution in Latin America. Production is expected to start in 2022.* The pandemic of Covid-19 has shown how important it is to move in this direction, but a regional approach to cooperation is needed to promote equal access to products.



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- **Optimize the delivery of health services and platforms.** Health systems in the region must act, prioritize and form national strategies to identify essential health care to respond to increasing demand for services related to unattended or delayed patients in an emergency. As recommended by the WHO, this should include effective patient flow at all levels of care, investment in human resources, public-private health funding, and elimination of financial barriers to access, the use of digital platforms, as well as monitoring capacity to support the provision of essential health services.

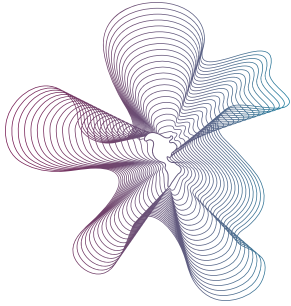
III. ACCURATE INFORMATION AND RELIABLE SOURCES HELP COUNTER MISINFORMATION, DISINFORMATION, AND CONSPIRACY THEORIES

Misinformation, disinformation, and conspiracy theories are a growing threat that will ultimately require global and regional cooperative efforts among researchers, governments, and social media platforms.

In June 2020, the WHO held its first ever conference on “infodemiology” in response to misinformation about Covid-19. It was then that the term “infodemic” was coined to categorize some of the common features of rumors, stigma, and conspiracy theories that in public health emergencies are defined as “overabundance of information,” some accurate and some not, making it difficult for people to find trustworthy sources and reliable advice when they need it.

KEY POINTS

- **Coordination and collaboration are essential to deal with disinformation.** The spread of Covid-19 disinformation is a complex issue that requires cooperation, coordination, and trust among online platforms (mostly private), governments, and national and international health organizations. Tackling misinformation and disinformation will require different strategies. Private companies can help mitigate or reduce misinformation and disinformation by financing or developing alliances with independent companies or organizations dedicated to fact-checking. *Companies or platforms such as Facebook, Google, TikTok, Instagram, Twitter, and YouTube have developed initiatives and efforts to prevent misleading or false information, by granting access to specialized government agencies or authorized and reliable sources. Another way to reduce the effects of disinformation, misinformation and conspiracy theories is to offer authorities free publicity, as Facebook, Twitter, and Google have done with WHO during the Covid-19 pandemic.*
- **The best way to deal with the spread of misinformation is to put science at the forefront of all discussions.** The need for trustworthy information has never been greater and more urgent than during this pandemic. Millions of people around the world are looking for reliable, fact-based, and gender- sensitive journalism that can help them navigate the biggest shared challenge of our lifetime. One of the key pillars needed to slow or control an epidemic or pandemic, mitigate its effects, and underpin collective social responses is to be able to count on reliable sources of information. In the event of a global health crisis, it is imperative to work with responsible journals and journalists, as they represent the best antidote to the misinformation fueling the pandemic. In addition to the role of the media, governments have the responsibility to provide clear, consistent, and credible communications.
- **Understanding vaccine hesitancy and resistance to medical treatments.** Another critical problem to be addressed is that of anti-vaxxers and other movements that promote refusal to medical therapies, impairing health systems’ ability to respond to a health crisis. These movements involve a minority of people who believe vaccines and some



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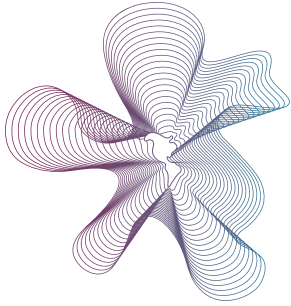
medical treatments are unsafe and violate their human rights. Typically, they deny the existence or validity of science that supports their use in the general population. There are many active communities of anti-vaxxers on the Internet and social media platforms. According to a recent report in *The Lancet Digital Health*, about 31 million people follow anti-vaccination groups on Facebook.⁸ Fortunately, it appears that providing persistent, abundant, statistically sound, and easy-to-understand information on the positive effects of vaccination compared to the dangers of avoiding it can help overcome unfounded reluctance.

Recent health emergencies have evidenced that when public and private sectors jointly commit their will and capacities, their added strengths are decisive in overcoming these challenges. Besides, their contribution becomes more meaningful to society's wellbeing, economic recovery, and health systems performance, improving the business climate, both in developed and developing countries.

DISCUSSION QUESTIONS

- What types of incentives are needed for promoting reliable and sustainable partnerships with the private sector to respond effectively to health emergencies?
- How can public-private partnerships, particularly in developing countries, be strengthened to address public health needs, including improved health system resilience?
- What are the most valuable assets that the private sector can bring in a health emergency?
- How can the public and private sector work together to turn Covid-19 era regulatory efficiencies into a guiding model for future health emergencies?
- How can the private sector support the ability to identify and leverage new data resources to complement traditional statistical data while protecting citizens' privacy and human rights?
- What are the potential costs of transforming the region's health systems into more data-driven care models, and what benefits can be realistically expected that could offset those investments?
- How can the private and public sector work together to make more efficient use of health resources?
- What types of incentives are needed to encourage the private sector to expand regional production and production capacity for medicines and health products for the prevention of infectious diseases, outbreaks, and epidemics?
- How can the private sector help strengthen the health infrastructure so health systems are more resilient and can effectively respond to a health emergency while meeting the needs of chronic patients?
- What role should the private sector have and facilitated in adequately informing citizens government and / or scientific recommendations in response to a health crisis, including technological digital literacy?
- What measures can be taken jointly with the private sector to mitigate the spread of misinformation, disinformation, and conspiracy theories? What works, what does not?

8. Talha Burki, "The Online Anti-Vaccine Movement in the Age of COVID-19," *The Lancet Digital Health* 2, no. 10 (October 1, 2020): e504–5, [https://doi.org/10.1016/S2589-7500\(20\)30227-2](https://doi.org/10.1016/S2589-7500(20)30227-2).



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