Strengthening Health Emergency Preparedness, Response and Resilience

WGIHR Briefing

23 June 2023
Strengthening Health Emergency Preparedness, Response & Resilience (HEPR)

Based on independent reviews, synthesising +300 recommendations ...

... developed in consultation with Member States & partners, presented at the World Health Assembly May 2022
Financing: Strengthening the global architecture for health emergency preparedness & response

G20 joint finance and health taskforce
- WHO and World Bank estimated annual preparedness financing needs (USD 30bn) with significant financing gap (USD 8bn)

Established Pandemic Fund
- Provide dedicated, additional long-term funding for PPR
- Complement existing PPR institutions & work by addressing gaps
- Promote coordination among key agencies working on PPR
- Incentivize increased investments by countries & partners
- US$ 1.7 Billion in pledges from over 24 donors to date

Scalable and predictable response financing mechanisms being discussed in the India G20 and Japan G7
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Scalable and predictable response financing mechanisms being discussed in the India G20 and Japan G7
US$31.1 Bn need/year calculated by updating G20 HLIP & related work; US$10.5 Bn gap/year calculated using representative data points.

1. Assumes LICs should be supported at 100% of their needs, while LMICs would be supported up to 60%, and UMICs up to 20%. Consistent with approach for Financing Framework of the ACT-Accelerator endorsed by Facilitation Council Financial Working Group including representatives of Canada, France, Germany, Indonesia, Italy, Norway, South Africa, UK, USA.

2. Conservative estimate based on annual reports from CEPI, FIND, GAVI, The Global Fund, UNICEF, WHO.
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- Provide dedicated, additional long-term funding for PPR
- Complement existing PPR institutions & work by addressing gaps
- Promote coordination among key agencies working on PPR
- Incentivize increased investments by countries & partners
- US$ 2 Billion in pledges from over 24 donors to date

Scalable and predictable response financing mechanisms being discussed in the India G20 and Japan G7
**Financing:** The Pandemic Fund aims to provide dedicated and catalytic financing for PPR: First Fund Call for Proposals issued March 3 – Due May 19

**Objectives and first call for proposals**

- **Objectives of Pandemic Fund**
  - Fostering coordination nationally (across sectors within countries), and among countries regionally and globally
  - Incentivizing additional investments in pandemic prevention, preparedness, and response
  - Building capacity/demonstrating capability
  - Ensuring administrative/operational efficiency of PF

- **Countries eligible to receive funding** from the International Bank for Reconstruction and Development (IBRD) and/or International Development Association (IDA)

- **Priorities** include Surveillance, Laboratory Systems, and Human Resources/Workforce Strengthening
Financing: Leveraging opportunity of Pandemic Fund proposal development

February
- Feb 3rd: Expression of Interest issued
- 13th Feb: Member State Briefing
- 23rd Feb: UNCT joint country call

March
- Mar 3rd: First call for proposal
- Regular Country Briefings

April

May
- May 19th: Pandemic Fund proposals due
- Technical Advisory Panel Review

June
- Technical Advisory Panel Review

July
- Pandemic Fund Board Decisions

ASSESS: Capacity, risk vulnerability
DEVELOP: Prioritized and costed plans
MOBILIZE: Financial & technical resources
IMPLEMENT: monitor, review & adjust

Map existing funding sources, identify critical gaps & mobilize additional resources

Multi-sector process, multi-stakeholder process
The first Pandemic Fund call for proposals will result in $2.1 Bn unmet funding requests, highlighting significant additional financing needs for preparedness.
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Over 60% of applications included 2+ implementing entities.

85% of country submitted proposals identified WHO as an implementing entity.
The first Pandemic Fund call for proposals will result in $2.1\ Bn unmet funding requests, highlighting significant additional financing needs for preparedness.

Over 92% of eligible LICs and 80% of eligible LMICs submitted applications.

Broad geographical distribution with 56% of applications from AF and AM regions.
The first Pandemic Fund call for proposals will result in $2.3 Bn unmet funding requests, highlighting significant additional financing needs for HEPR.

Funding requested and amount available in first Pandemic Fund call for proposals, $ Bn

<table>
<thead>
<tr>
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<th>Total funding requested in first Pandemic Fund CfP</th>
<th>Amount available in first PF CfP</th>
<th>Funding gap</th>
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</thead>
</table>
| Observations

- **133 eligible proposals totaling $2.1 Bn in funding requested** against $300 Mn available for first Pandemic Fund call for proposals, which will result in $1.8 Bn unmet funding requests.
- The important effort invested in the application process to produce the documentation required can be leveraged to develop National Investment Plans (NIPs).
- The purpose of NIPs is to mobilize additional financing and match donor priorities with country needs, helping ensure the Pandemic Fund fulfills objective of being catalytic.
Financing, preparedness activities, and multisectoral actions can be integrated to support investment cases for health emergency capabilities at a national level.

- **Building on IHR assessments & NAPHS**
  - Assessing risks & addressing specific threats

- **National Investment Plan**
  - for financing for health emergency preparedness, prevention & resilience

- **Strengthening systems & resilience**

Map existing funding sources, identify critical gaps & mobilize additional resources
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Scalable and predictable response financing mechanisms being discussed in the India G20 and Japan G7
Context | The G20 JFHTF and the G7 Health Working Group are both interested in understanding and improving pandemic response financing

The G20 is committed to addressing gaps in financing the pandemic response...

"...we welcome ... [a] JFHTF strategy to guide joint finance-health sector readiness to support a global response to future pandemics, including through a report on best practices and exploring how surge financing mechanisms could be made operational, duly considering discussions in other global forums...."

G20 Bengaluru FMCBG Chair Summary, 15 February 2023

This is aligned with other commitments including from the G7...

"...we commit to work with the G20 JFHTF and our international partners to thoroughly assess how the existing financing sources, particularly untapped funding streams, can be used in pandemic “response” and to explore a “surge” financing framework...."

G7 Nagasaki Health Ministers’ Communiqué, 14 May 2023

Estimated annual preparedness financing needs (USD 30bn) with significant financing gap (USD 8bn)

& other domestic, bilateral, public/private-sector, MDB preparedness investments
Scope | Mapping focuses on existing international financing options, acknowledging the primary importance of domestic plans and financing

**Country Level Response**
*Governments fund the domestic response in their own countries, with support of IFIs*

**Global and Regional Response**
*Bilateral & multilateral mechanisms to orchestrate the global response and support the LIC/LMIC country response*

**Focus of JFHTF**
*Mapping and gap analysis of existing financing options*
**Methodology** | Existing financing options have been mapped against response financing needs to understand current status and gaps

1. **Level 1** Country Level response
   - **Outline response financing framework**
     - Developed to outline response financing needs across level 1 & level 2

2. **Level 2**: Global & regional response
   - **Map existing mechanisms against needs**
     - Through interviews & analysis, international mechanisms mapped against response financing needs framework

3. **Identify gaps to meet response financing needs**
   - Financing gaps (volume and speed of financing) or functional gaps (mechanism or coordination)

4. **Address gaps** *(Out of scope)*
   - Potentially explore options to mitigate and address gaps identified from the mapping
## Framework | Response financing starts domestically, but multilaterals further support initial response & coordination, L(M)ICs, & access to MCMs

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<thead>
<tr>
<th>Levels</th>
<th>Needs</th>
<th>Financing Mechanisms</th>
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<tbody>
<tr>
<td><strong>Country Level Response</strong></td>
<td>National health response incl. collab surveillance, community protection, safe &amp; scalable care while maintaining essential health services, access to MCMs &amp; national emergency coordination</td>
<td>1.1 Domestic emergency response financing &amp; non-contingent external financing</td>
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<td>Social &amp; economic response to protect livelihoods, jobs, &amp; businesses including scaling of social protection schemes, exceptional support to businesses to mitigate impact of non-pharmaceutical interventions</td>
<td>1.2 Contingent external financing</td>
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<td>Macroeconomic interventions to use fiscal resources transparently during the implementation of the response, &amp; preserve financial stability, such as implementing monetary easing, &amp; liquidity provisions</td>
<td>1.3 New external financing after the crisis hits</td>
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<td><strong>Global &amp; Regional Response</strong></td>
<td>Ensure swift characterization of the threat, support to the initial response, threat containment and ongoing communications &amp; coordination</td>
<td>2.1 Contingent financing and pre-committed grants for global rapid response and coordination</td>
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<td>Support countries with technical assistance, operational support, in-kind contributions, financing, and assist in purchase of MCMs</td>
<td>2.2 Response-specific bilateral and multilateral support to countries excluding MDBs</td>
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<td>Support at-risk investment R&amp;D, manufacturing and to secure volumes of MCMs to enable equitable access</td>
<td>2.3 At-risk financing to ensure access to MCMs</td>
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MCMs = medical countermeasures
Mapping & Gap Analysis | Although large amount of funding made available, delays and lack of coordination impeded effectiveness

National Response

1.1 Domestic emergency response financing & non-contingent external financing

1.2 Contingent external financing options

1.3 New external financing options after the crisis hits

1.4 Out of scope (domestic mechanisms only)

Summary of findings

Many contingent financing instruments, not necessarily well coordinated with national response priorities or released on Day Zero. Not all countries have dedicated, pre-negotiated instruments for pandemic crisis contingent financing.

COVID-19 retrospective: ~US$250 B

Available to date: ~US$10-15 B

Implemented: Estimate based on limited data availability

Note: In context of World Bank operation disbursement equivalent to allocations
Mapping & Gap Analysis | Lack of coordination and timeliness impacted response with key gap in at-risk financing

Global and Regional Response

2.1 Contingent financing and pre-committed grant options for global rapid response and coordination

incl. mechanisms hosted/ delivered by:

- World Health Organization
- UNICEF
- UN
- CERF
- THE GLOBAL FUND
- United Nations Foundation
- UNDP Office Partners Gateway

Summary of findings

Significant funding made available in first year, however gap of US$0.5 B in first 28 days of response. Funding came with limited predictability due to reliance on appeals.

COVID-19 retrospective:
Available year 1: ~US$2.5 B
Implemented: ~100%

2.2 Response-specific bilateral and multilateral support options to countries excluding MDBs

incl. mechanisms hosted/ delivered by:

- Diagnostics Consortium
- FIND
- Gavi
- Unitaid
- World Health Organization
- United Nations Foundation
- Unicef
- WFP
- WHO
- UNICEF
- UNDP Office Partners Gateway

Summary of findings

Significant funding made available, but was delayed, unpredictable & poorly coordinated with MDBs. No chance of frontloading due to no early pledges. Implementation impacted by funding delays & lack of emergency SOPs.

COVID-19 retrospective:
Available Q1 ’22: ~US$18 B
Implemented by Q1 ’22: ~40%

2.3 At-risk financing options to ensure access to MCMs

incl. mechanisms hosted/ delivered by:

- CEP
- Diagnostics Consortium
- Gavi
- Unitaid
- World Health Organization
- Unicef
- UNICEF
- WHO
- WFP
- UNDP Office Partners Gateway

Summary of findings

Significant gap in at-risk financing (~US$9 B). Limited number of instruments can take an at-risk position, with historical heavy skew towards vaccines.

COVID-19 retrospective:
Available Q1 ’22: ~US$13 B
Implemented by Q1 ’22: ~40%

1. The Diagnostics Consortium for COVID-19 was an inter-agency mechanism created at the request of the UN Secretary General to secure volumes of COVID-19 tests and allocate them among over 160 countries with limited market access, according to agreed principles. Over 50 members were involved.
2. Based on HSRC analysis Q1 2022.
3. Based on Gavi, Unitaid, CEPI, AVAT, FIND Dx
Next steps | the JFHTF may wish to consider the potential path forward

- Further elaborate the mapping and gap analysis for consideration of the G20 JFHMM in August

- Frame the objectives, scope & framework of an "operational playbook" to codify pandemic response financing processes

- Develop proposals to optimize existing response financing for speed, coordination, and at-risk financing, for further deliberation by the JFHTF
Framework to measure health, social and economic vulnerabilities...

Health system resilience & response
- Health Expenditure per capita
- Logistics Index
- Physicians per 1,000 population
- UHC Service coverage
- International Health Regulations

Social & economic protection
- Informal economy relative to GDP
- Food insecurity index
- Social protection benefit coverage
- Internet connectivity

Macroeconomic stability
- Population with bank savings
- Share of export in the GDP
- Credit to private sector
- Global Value Chain
- Agriculture & tourism

...to manage pandemic risks through informed policies and investments in preparedness and resilience

1. What are the current risks and vulnerabilities for pandemics and where are investments required to maximise preparedness and resilience to minimize the health, social, and economic impact?

2. What are the types of policy responses, associated costs, and differential impacts between health, social, and economic outcomes of different mitigation measures?