

Outcome of the Health20 Summit (1<sup>st</sup> and 2<sup>nd</sup> September 2021) – An Open Letter to Mario Draghi, Prime Minister of Italy and G20 Health Ministers ahead of the G20 Health Ministers Summit on 5<sup>th</sup> September 2021 and the Joint G20 Health and Finance Ministers Meeting on 29<sup>th</sup> October

Dear Prime Minister Mario Draghi,

## **Urgent Measures to Transform Global Health Security**

We congratulate you and your government for the effectiveness of your Presidency of the G20.

There are several critical ministerial meetings remaining this year, including the forthcoming health ministers, the joint finance and health ministers, and of course the G20 heads of government meetings. The focal point of these meetings will be to tackle the response to the global COVID-19 pandemic, ensuring health equity and how to return to a period of economic growth and prosperity.

Many ideas have been proposed from a wide range of organisations interested in global health and pandemic preparedness and response.

The G20 Health and Development Partnership has been working with G20 Presidencies since 2017 to help support initiatives that have a practical impact on the health of our citizens and therefore the economic performance of national economies in and beyond the G20.

We set out in this letter, what we believe are achievable goals for the G20 and the wider international community.

We believe that 2021 is a pivotal moment in how we address global health resilience, much as 2009 was the pivotal moment in how heads of government responded decisively to the global financial crisis at that time.

The 2009 London G20 Heads of State Communique strengthened existing institutions and provided significant additional finance to address the global financial crisis. Now in 2021 we call upon the G20 to strengthen existing health governance mechanisms and in addition, we call for the creation of a new health financing mechanism, the Global Health Financing Board. This would be independent of WHO direction and control, similar to the independence of the EU Court of Auditors, which operates within the EU institutional framework.

We believe that it is essential that the **Italian G20 Presidency secures this new roadmap and timeline** for building a properly financed and resilient health security architecture.

## **Improved Governance**

We support the broad conclusions of the recently released report by the **G20 High-Level Independent Panel on Financing the Global Commons for Pandemic Preparedness (HLIP).** In particular, we believe the reports' financial demands are the minimum required to secure future global health systems resilience.



We consider that the human and economic cost of this coronavirus pandemic must be met with urgent and decisive action by heads of government to transform the global health security architecture and financing mechanisms into a strong resilient system that is inclusive and equitable in its operation.

The proposals by the G20 HLIP and the Independent Panel for Pandemic Preparedness and Response (IPPPR) for a strengthened and more independent WHO, should be complemented by a strengthened Global Preparedness Monitoring Board (GPMB) which should be complemented by a Global Health Financing Board. Its composition should be broadened to include economists and epidemiologists. This board should report its findings regularly to the WHO, the G20 and the G7 and at the United Nations General Assembly. Annually the report should be considered at the summit meeting hosted by the WHO.

G20 countries should ensure that as new initiatives and frameworks for the global health architecture are developed, community voices and experts from a wide range of geographies, especially from Low- and Middle-Income Countries (LMICs), are represented in the decision-making process. This inclusive approach is necessary to ensure that new health technologies and tools are designed with end-users in mind, including the most vulnerable populations.

We believe that social partners and private sector should be fully engaged in the new architecture, as it is individuals and their families, businesses and their employees and healthcare workers who will continue to face the challenge at a micro-level to face up to this and potentially future health-related socio-economic challenges.

## **Investing in Health System Strengthening**

The G20HDP together with our partners including Harvard University and the WifOR Institute in Germany, have built a four-step framework, developed in the "If We Can't Measure It, We Can't Fix It" paper, that identifies common metrics to demonstrate the return on investment (ROI) in health. It is based on a system already used by several countries, including Germany.

Multiannual investments in health system strengthening can have a direct and speedy impact on a country's economic performance and resilience. A common set of metrics are needed to measure the socioeconomic effectiveness of sustainable health investments. As with the green finance agenda, we need new mechanisms to help bridge the gap in our health and investment strategy.

There is a **critical role for finance ministries and central banks to incorporate health investment metrics into the criteria by which an economy's performance is measured**. It must be treated as one of the critical variables in determining the economic resilience of a nation.

At a European level, we urge the European Union to incorporate health investment data from across the EU into the European Semester Cycle and the Annual Sustainable Growth Strategy, in a similar way to the incorporation of climate change mitigation investments and the Green Deal into the Annual Sustainable Growth Strategy. The two existential threats stemming from climate change and communicable disease are legitimate factors that impact economies and societies as we see today.

The International Monetary Fund (IMF) must also be encouraged to incorporate health system resilience into its own annual Article IV surveillance procedure, so that the IMF's early warning



system addresses the resilience of each country's health system, particularly in relation to pandemic preparedness.

In addition to increased government multiannual funding and the efficient channelling of philanthropy to leverage support, we urge the **G20 to encourage significant investments in deploying similar mechanisms as are being used in tackling climate change.** 

## Future Funding of Research, Technology, and Innovation in Health

As we work to build stronger systems to prevent future pandemics, we recognise the immediate work that needs to be done to respond to the ongoing COVID-19 pandemic. **G20 leaders must come together and agree to a Global COVID-19 Response Roadmap without delay.** This must include action to increase countries' vaccine distribution and delivery capabilities, as well as equitable access to diagnostics, therapeutics (such as oxygen), and other key interventions and supplies (such as personal protective equipment).

The creation of the ACT-Accelerator (ACT-A) was a timely and crucial step in fast-tracking the innovations in diagnostics, therapeutics, and vaccines. It should receive continued support by the G20. It is imperative that G20 leaders ensure that the ACT-A will be properly supported and funded to execute its mission.

However, we believe that the ongoing threats of communicable and non-communicable diseases must be addressed through more than a 'pledging' mechanism to raise the funds necessary for the development of new tools, as we saw with the ACT-A.

The biotech sector and the pharmaceutical industry moved at record speed to get several safe and effective COVID vaccines developed and manufactured at unprecedented scale, forecast to reach over 12 billion doses by the end of 2021. We believe they should be commended for this prompt action and included as an integral partner in the design and implementation of the new pandemic preparedness architecture.

## Strengthening Existing Partnerships and Building New Partnerships to Meet the New Challenges

**Product Development Partnerships (PDPs)** have decades of expertise in addressing both chronic and emerging health threats around the world, with a focus on developing and deploying products that are available, accessible, affordable, and appropriate for use in LMICs.

PDPs have used their knowledge and expertise to contribute to the achievements of the ACT-A and to address the supply chain and manufacturing problems for COVID-19 mitigation. They have also played a major role in securing continued production, supply, and affordability of health tools for diseases of poverty during the COVID-19 crisis and have supported research and development capacity for an aligned response to the COVID-19 pandemic and these diseases.

We believe that PDPs should continue to be sustainably supported as they play a critical role in tackling silent/emerging epidemics of major global public health impact. These include HIV/AIDS, Malaria,



Tuberculosis, Antimicrobial Resistance (AMR), Sepsis, Diabetes, Cardiovascular Diseases and Neglected Tropical Diseases which are a crucial asset for an effective framework for pandemic preparedness and response. Developing a strengthened global health architecture and funding for pandemic preparedness cannot be at the expense of existing, essential services and life-saving initiatives in LMICs.

Given the inequitable access to diagnostics, therapeutics, and vaccines, especially in LMICs, we recognise that north-south and south-south partnerships must be supported at a regional level to build and strengthen laboratory, clinical research, regulatory and manufacturing capacity in LMICs, to build the sustainable infrastructures needed to support access to safe and timely health innovations and medical products to tackle existing and future public health threats.

We commend the commitment of the Islamic Development Bank (IsDB) to the promotion of Science Technology and Innovation (STI) and we urge the G20 under the upcoming G20 Indonesian Presidency (2022) to convene a meeting of MDBs, academic institutions and the life sciences and pharmaceutical sector to establish regional pilot projects to promote Health STI.

## **Health in the Digital Age**

The health of our citizens in the digital age requires the urgent adoption of tools that allow the rapid assessment of risk, efficient testing and inclusive and accessible clinical responses that can be fast tracked. Governments must lead the digital transformation of health systems and services, reenvisioning the future of health in a world increasingly driven by digital technology and data insights and in a way that best serves their citizens.

We urge the G20 to promote the technical and leadership capacity of LMICs to promote the country ownership and stewardship of this digital transformation. In addition, the G20 should encourage greater partnerships with private sector technology companies and health providers to increase the availability and accessibility of digitally enabled health services to all populations.

The COVID-19 pandemic has underscored the importance of shared access to multi-sectoral data that can drive innovative uses of digital tools and in data analytics for response efforts. We welcome the establishment of the Global Hub for Pandemic and Epidemic Intelligence hosted by the WHO in Germany. This Hub, along with other efforts to increase coordination and collaboration across countries will increase our collective ability to respond to future health threats.

Trust is a foundational component of digital transformation, and we encourage the ongoing focus on strong governance that contributes to the ethical and responsible use of personal data. The G20 should champion policies and approaches that reinforce the protection of data while defining mechanisms for great use of data in resolving critical health challenges.

We welcome the establishment of the **WHO Academy**, which will be an institution that will promote digital solutions via artificial intelligence and virtual reality to bring the lifelong learning revolution to the health sector and reach 10 million learners around the world by 2023.



#### **SUMMARY OF H20 PROPOSED ACTIONS**

Urge Heads of Government, health, and finance ministers in the remaining G20 meetings this year to agree a roadmap and a timeline for the urgent implementation of the following:

- 1. Support the concept of a common framework of metrics to promote independent accountability and oversight of governance, of sustainable financing mechanisms as an important tool to annually assess the economic interdependencies between health and the overall economy by making use existing metrics and procedures such as the European Semester Cycle and the Annual Sustainable Growth Strategy and the IMF Article IV procedure.
- 2. Call upon the G20 to create a new health financing mechanism, the Global Health Financing Board. This would be independent of WHO direction and control like the independence of the EU Court of Auditors.
- 3. Support the G20 HLIP report recommendation that countries must commit to a new base of multilateral funding for global health security based on pre-agreed and equitable contribution shares by advanced and developing countries. This includes a pandemic preparedness financing mechanism that would help support surveillance infrastructure, strengthen research capacity, and catalyse innovation to contain future health threats.
- 4. Support activities aimed at securing significant funding for addressing future global health security threats, in line with the recent G20 HLIP recommendations on financing, such as developing resilient domestic finances for prevention and preparedness, enabling fast-tracked surge financing by International Financial Institutions (IFIs) in response to a pandemic, strengthening the WHO and One Health Financing and leveraging capabilities and resources of the private and philanthropic sectors.
- 5. Commit to rapidly scaling up the development of and ensuring equitable access to COVID-19 vaccines, therapeutics, and diagnostics now and strengthening sustainable manufacturing capacities via coordinated public-private strategies in LMICs in the long-term. Fully fund the Access to COVID-19 Tools Accelerator and fulfil the urgent \$7.7billion investment needs for the Rapid ACT-Accelerator Delta Response (RADAR).
- 6. Urge the G20 under the upcoming G20 Indonesian Presidency (2022) to convene a meeting of Multilateral Development Banks (MDB), academic institutions and the life sciences and pharmaceutical sector to establish regional pilot projects to promote Health Science Technology and Innovation.
- 7. Strengthen a sustainable R&D infrastructure to bolster preparedness and rapid response to future outbreaks and emerging epidemics underpinned by immediate and timely sharing of pathogens with pandemic potential and associated information to allow efficient delivery times for new vaccines, therapeutics, and diagnostics.
- 8. Recognise AMR and Non-Communicable Diseases such as Diabetes and Cardiovascular Diseases, as a global health security threat with a significant impact. Ensure learnings from the COVID-19 pandemic result in rapid action on tackling AMR and Sepsis. Implement pull



incentives, such as subscription models for antibiotics, other antimicrobials, and diagnostics, to enable sustainable and robust investment into antimicrobial R&D; continue to ensure leaders maintain funding for push incentives to support sustainable investment into R&D and recognise the role PDP's have played in supporting innovation.

- 9. Promote and enhance national capacities to drive the transformation of health systems and services for the digital age. Support global digital transformation, data sharing, and use to areas of highest impact for health outcomes and global health security by supporting global initiatives such as the WHO Academy and the Global Hub for Pandemic and Epidemic Intelligence.
- 10. Prioritise investing in enabling governance, policies and capacities that support digital transformations as investments fail due to underinvestment in the enabling environment. Commit to greater health equity and global trust through globally recognised ethical, person-centred guidance and standards for digital transformation and data solidarity.

The Heads of Government following the G20 London Summit in 2009 ensured that all the recommendations in that communique were implemented. We urge the G20 Heads of Government, Finance and Health Ministers to deliver on the recommendations on pandemic preparedness and health system strengthening with the same determination.

Yours Sincerely,

#### Sandro Gozi

Member of the European Parliament, Global Ambassador, G20HDP Elmar Brok

Former Member of the European Parliament and Senior Advisor to Munich Security Conference, Global Ambassador, G20HDP **Dame Angela Eagle** 

Member of the House of Commons, United Kingdom, Global Ambassador, G20HDP

**Didier Baichère** 

Member of Parliament, France Rt Hon. Lord Cunningham of Felling DL

Member of the House of Lords, United Kingdom, Global Ambassador, G20HDP **Hayat Sindi** 

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Senior Advisor to the President, Islamic Development Bank Global Ambassador, G20HDP

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Member of Parliament, Italy

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Convenor, The G20 Health and Development Partnership

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Chief Digital Officer; Director, Center of Digital and Data Excellence, PATH, Global Ambassador, G20HDP

## **Harald Nusser**

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## Jamie Bay Nishi

Director, Global Health Technologies Coalition, Global Ambassador, G20HDP

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Director of External Affairs, FIND, Global Ambassador, G20HDP











































#### **LIST OF HEALTH20 SUMMIT SPEAKERS**

**Dr Tedros Adhanom Ghebreyesus,** *Director General, World Health Organization* 

**Andreano Erwin**, *Director for International Cooperation, Minister of Health of the Republic of Indonesia* 

Tharman Shanmugaratnam, Former Deputy Prime Minister and Minister for Finance, Singapore; Co-Chair of the G20 High Level Independent Panel on Financing the Global Commons for Pandemic Preparedness and Response

**Davide La Cecilia**, G20 Health Sherpa, Ministry of Health Italy

**Alan Donnelly**, Convenor, The G20 Health and Development Partnership (Summit Host)

**Hatice Kücük Beton**, Executive Director, The G20 Health and Development Partnership (Summit Co-Host)

**Sandro Gozi**, Member of the European Parliament & Goodwill Ambassador of G20HDP

**Soumya Swaminathan,** Chief Scientist, World Health Organization

**Hanan Balkhy,** Assistant Director General, Antimicrobial Resistance, WHO

**Mariana Mazzucato,** Chair, Council on the Economic of Health for All, World Health Organization

**Dame Angela Eagle**, *Member of the House of Commons, United Kingdom* 

**Rudolf Henke**, Member of Parliament, Germany Mario Monti, President of Bocconi University; chair of the Pan-European Commission on Health and Sustainable Development; and Member of the Italian Senate of the Republic of Italy

**Baroness Patricia Scotland,** Secretary-General of the Commonwealth

**Donatella Conzatti**, Member of Parliament, Italy

**Didier Baichère**, Member of Parliament, France

**Peter Liese**, Member of the European Parliament, Germany

**Akif Çağatay Kılıç,** Member of Parliament, Turkey, Chairman of the Foreign Relations Committee.

Rt Hon. Lord Cunningham of Felling DL, Member of the House of Lords

**Elmar Brok,** Former Member of the European Parliament and Senior Advisor to Munich Security Conference

**Rifat Atun,** Professor, Global Health Systems at Harvard University, and the Faculty Chair for the Harvard Ministerial Leadership Program

**Anders Nordstrom,** Secretary of the Independent Panel for Pandemic Preparedness and Response (IPPPR)

**Dennis A. Ostwald,** Founder and managing director of WifOR Institute

Martha Newton, Deputy Director-General, International Labour Organization



**David Reddy,** CEO Medicines for Malaria Venture (MMV); Member of the Board, Coalition for Epidemic Preparedness Innovations (CEPI)

Joseph Fifer, President and CEO, HFMA

**Hayat Sindi,** Senior Advisor to the President, Islamic Development Bank.

**Harald Nusser,** Head Global Patient Solutions, Gilead Science and Global Ambassador G20HDP

**Henry Mwanyika,** Digital Health Regional Director, Africa, PATH

Wylecia Wiggs Harris, CEO, AHIMA

Andrea Fiumicelli, CEO, Dedalus

**James Musick,** Head of Personalised Health Care, Centre of Excellence, Genentech, Roche

Michikazu Koshiba, Head, Center on Global Health Architecture, Mitsubishi UFJ Research and Consulting Co., Ltd.

Martin Hirsch, CEO, AP-HP

**Sachin Agrawal,** *President, Corporate Development, Strategy & Data, RLDatix* 

Jamie Bay Nishi, Director, Global Health Technologies Coalition (Summit Co-Host)

**Andrew Jack,** Global Education Editor, Financial Times

Masood Ahmed, President of the Center for Global Development

Pater Singer, Special Advisor to the Director

**Peter Singer,** Special Adviser to the Director-General, World Health Organization

Mark Feinberg, CEO, IAVI

Greg Perry, Assistant Director General, IFPMA

**Abdulelah Alhawsawi,** Vice President of the Global Sepsis Alliance

Bill Rodriguez, CEO, FIND

**Bernard Pécoul,** Executive Director, Drugs for Neglected Diseases Initiative (DNDi)

**Mike Strange,** Head of Global Health Catalyst for Global Health R&D, GSK

**Hiroki Nakatani,** Chair and Representative Director, Global Health Innovative Technology Fund (GHIT)

**Stephanie Williams,** Ambassador for Regional Health Security, Australian Department for Foreign Affairs and Trade

**Ana Maria Harkins,** *Director of External Affairs at TB Alliance* 

**Monika Puri,** Head of Institutional Relations Roche, Global Ambassador G20HDP

**Dr Sylvie Briand,** *Director, Global Infectious Hazard Preparedness, World Health Organization* 

**Sergio Dompé,** B20 Health & Life Sciences Taskforce Chair

Francesca Colombo, Head of Health Division,

**Lutz Hegemann,** *Group Head for Global Health and Corporate Affairs, Novartis* 

**Konrad Reinhart,** Executive Committee Member, Global Sepsis Alliance

Philippe Duneton, Executive Director, Unitaid

**James Anderson,** Executive Director, Global Health, IFPMA

**Adam Zerda,** Senior Director, International Affairs, Becton Dickinson



Henry Skinner, CEO AMR Action Fund

**Anand Anandkumar,** *Co-founder and CEO, Bugworks* 

**Adrian Thomas,** Vice President Global Public Health, Johnson & Johnson

**Kevin Outterson,** *Executive Director, Carb-X* 

**Jeremy Knox,** *Policy and Advocacy Lead -Drug-Resistant Infections Programme, Wellcome Trust*