

# Breaking the “cycle of panic and neglect”: What donor countries are doing to prepare the world for the next pandemic

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This Donor Tracker ‘Insight’ provides an overview of what the largest Organisation for Economic Co-operation and Development (OECD) Development Assistance Committee (DAC) donor countries have done since the emergence of COVID-19 to **elevate pandemic preparedness globally**. It provides examples of how donor countries have begun strengthening **global health architectures**, investing in **global disease surveillance** capacities, financing **research and development (R&D)** on zoonotic diseases and health technologies, expanding **vaccine manufacturing** capacities for diagnostics, therapeutics, and vaccines, and increasing funding to **health system strengthening**. It also provides **recommendations** for what donors should do going forward, to **overcome current challenges** to pandemic preparedness including: 1) reform the pandemic preparedness financing architecture; 2) enhance the coordination and coverage of global disease surveillance; 3) continue to provide reliable support to multilateral partnerships and platforms; 4) support more equitable vaccine access through expansion of manufacturing capacities in partner countries; and 5) invest more heavily in health systems strengthening. If the global community hopes to “break the cycle of panic and neglect”, **significant investment in pandemic preparedness and system-level change** at local, national, and international levels needs to start now and continue into the years ahead, even as the immediate threat of COVID-19 begins to fade.

In December 2020, the Secretary-General of the World Health Organization (WHO), Dr. Tedros Adhanom Ghebreyesus, called on the world to invest in pandemic preparedness, to finally “break the cycle of panic and neglect” that has come to characterize the global community’s response to disease outbreaks. First, as emerging infectious diseases are discovered, governments rush to provide emergency funding and commit to building up structures that could prevent future outbreaks; often, however, the immediate responses are dominated by nationalistic rationales, they lack a coordinated global approach, and are driven by medium-term thinking. Once the immediate threat has been neutralized, commitments tend to dry up, newly set-up structures are not adequately maintained, and there is a lack of commitment to pursue a systematic approach to prevent future pandemics.

According to a [report](#) recently released by the Independent Panel for Pandemic Preparedness and Response (IPP; convened by the WHO to investigate the failures of the international COVID-19 response), the lack of sustained and systematic support for

pandemic preparedness that results from this approach is what left the world unprepared for COVID-19 and unable to prevent it from triggering health and socio-economic crises the world over. The report makes clear, to prevent future pandemics, significant investments are needed to transform the way the world prepares for and responds to global health threats.

Since 2009 there have been at least [11 high-level panels and commissions have published 16 reports](#) which have included specific recommendations for improving global pandemic preparedness. Despite these calls to action and policy recommendations, COVID-19 laid bare the failures of the global community to adequately prepare for a pandemic and to build the strong systems and institutions necessary to facilitate a just and equal recovery from such a crisis.

So, what are donor countries doing to support a better global response to the next potential pandemic? This Donor Tracker ‘Insight’ provides an overview of what the largest Organisation for Economic Co-operation and Development (OECD) Development Assistance

Committee (DAC) donor countries have done since the emergence of COVID-19 to elevate pandemic preparedness globally. This Insight does not intend to give a comprehensive summary of all initiatives launched since the start of COVID-19. Rather, it offers a snapshot of some of the main emerging donor responses to pandemic preparedness globally to provide advocates with a sense of which directions donor countries are taking, and which challenges lie ahead. This Insight aims to answer:

- How have donors contributed to global pandemic preparedness since the outbreak of COVID-19?
- What should donors do going forward to overcome current challenges to pandemic preparedness?

Pandemic preparedness refers to the ability to predict, prevent, detect, assess, and respond to disease outbreaks that pose a threat to human health. According to a May 2021 [report](#) by McKinsey & Company, Global pandemic preparedness depends on:

- Robust and responsive **global health architecture** at all levels (local, national, international), based on multi-sector collaboration between public and private, bilateral, and multilateral institutions;
- Sufficient global, national, and local **disease surveillance** capacity to detect the emergence of new global health threats;
- A strong **research and development** (R&D) landscape that advances innovation and knowledge around emerging infectious diseases;
- Enough global **production capacity** for diagnostics, therapeutics, and vaccines to ensure global coverage; and
- Resilient **health systems** able to provide essential services while responding to a pandemic.

## HOW HAVE DONORS CONTRIBUTED TO PANDEMIC PREPAREDNESS SINCE THE OUTBREAK OF COVID-19?

Since the outbreak of COVID-19, donor countries have not only provided emergency funding to contain the COVID-19 pandemic and mitigate its socio-economic effects but have also directed funding and developed policy toward future-oriented initiatives aimed at ensuring the world is better prepared for the next pandemic. To conceptualize these responses, this Donor Tracker analysis breaks donors' efforts down into the five key elements of global pandemic preparedness, outlined above.

## Strengthening global health architecture

OECD DAC donor countries have called to anchor pandemic preparedness more prominently in international treaties and establish shared principles to improve international collaboration in that field.

- At the Paris Peace Forum in November 2020, the President of the **European Council**, Charles Michel, first [called](#) for an **international treaty on pandemics**. At the World Health Assembly in May 2021, 194 WHO member states [passed a resolution](#) to negotiate such an international treaty which should help establish a global health architecture that is more resilient to pandemics. The treaty is set to be discussed at a special session in November 2021.
- In May 2021, the **World Health Assembly** adopted a [resolution on strengthening the WHO](#), which provided recommendations to both the WHO and member states for how to improve pandemic preparedness. It also laid the ground for a new 'Member States Working Group on Strengthening WHO preparedness and response to health emergencies'. The Working Group will develop a report including more recommendations for the WHO and member states, which it will present at the Seventy-fifth World Health Assembly in 2022.
- With the adoption of the '[Rome Declaration](#)' at the Global Health Summit on May 21, 2021 (co-hosted by the European Commission and Italy), **G20 leaders** and other states committed to a set of principles to elevate pandemic preparedness globally. These included improving early warning systems, supporting low-and-middle-income countries (LMICs) in building up vaccine manufacturing capacities, and investing in the health and care workforce.
- At the UK-hosted **G7 Health Ministers Meeting** on June 3-4, 2021, the G7 agreed on a set of [joint principles](#) for successfully combating future pandemics. Included in the agreement was the idea for a [G7 Therapeutics and Vaccines Clinical Trials Charter](#) that defines joint principles to accelerate the speed of clinical trials and to make it easier to share comparable data from vaccine and therapeutic trials.

New platforms, partnerships, and working groups on pandemic preparedness have been established to jointly tackle cross-border health threats.

- In January 2021, the leaders of the **G20** established a **High-Level Independent Panel** (HLIP) based on the proposal of the Italian G20 Presidency. The panel

was tasked with identifying pathways to fund global commons for pandemic preparedness and response. On April 2021, the panel provided a [progress note](#) with an update on its work. The panel will present its final recommendations in July 2021.

- In May 2020, the **South Korean government** led the [launch](#) of a **Support Group for Global Infectious Diseases Response** (G4IDR) at the WHO to combat contagious diseases such as COVID-19. That same month, the Korean Ministry of Foreign Affairs [launched](#) the **United Nations (UN) Group of Friends of Solidarity for Global Health Security** which serves as a platform to strengthen the UN's response and cooperation on global health security issues. Then, in December 2020, South Korea [launched](#) the **Northeast Asia Cooperation Initiative for Infectious Disease Control and Public Health**, to strengthen the regional cooperation on infectious diseases control.
- In April 2021, the **UK** government [formed](#) a new **International Pandemic Preparedness Partnership (PPP)** tasked with advising the UK G7 Presidency on how to accelerate the development of vaccines, therapeutics, and diagnostics through global cooperation on research, manufacturing, and data-sharing. In June, the PPP published the **'100 Days Mission to respond to future pandemic threats'** (100 Days Mission), which set out a roadmap on how to develop and deploy safe, effective diagnostics, therapeutics, and vaccines within the first 100 days of a pandemic. The public-private partnership brings together 20 members representing industry, international organizations, and leading experts in Global Health.

### Investing in global disease surveillance capacities

Donor countries have invested in new pandemic surveillance, rapid response, and alert systems in partner countries and at home, which will benefit the global community.

- In August 2020, the **UK** announced its plan to [replace](#) Public Health England (PHE) with a **National Institute for Health Protection (NIHP)**. NIHP will be modeled on Germany's Robert Koch Institute and be dedicated to protecting people from external health threats including pandemics, biological weapons, and infectious disease.
- In December 2020, the **European Centre for Disease Prevention and Control (ECDC)** and the **Africa Centre for Disease Control and Prevention (Africa CDC)** [launched](#) a new **partnership initiative to strengthen health security on the African continent**. The initiative aims to strengthen the Africa CDC's surveillance capacity and

to facilitate harmonized disease intelligence between Europe and Africa.

- **Australia** and **Japan** provided [US\\$15 million](#) and [US\\$50 million](#), respectively, to support the establishment of the **ASEAN Centre for Public Health Emergencies and Emerging Diseases**, which aims to foster greater collaboration in the region to prepare for, prevent, and respond to infectious disease outbreaks, for example, in the field of cross-border surveillance and contact tracing.
- The UK-hosted G7 Vaccine Confidence Summit in June 2021 resulted in a **partnership** between the **UK Health Security Agency (UKHSA)** and the **US National Center for Epidemic Forecasting and Outbreak Analysis**, run by the US Centers for Disease Control and Prevention (CDC), to [establish global early warning systems](#) to detect diseases. To this end, the UK will also build up a new **Centre for Pandemic Preparedness (CPP)** which will focus on genomic surveillance of human and animal infections that can be shared globally.
- In May 2021, the **WHO** and the **German government** announced the [launch](#) of a new **Global Hub for Pandemic and Epidemic Intelligence**, based in Berlin, to develop innovative tools in epidemic surveillance, intelligence, and data analytics. The Hub is expected to open its doors in autumn 2021.

### Financing R&D on zoonotic diseases and health technologies

Donors are promoting research focused on zoonotic diseases and 'One Health', a transdisciplinary approach to health security that recognizes the interdependence of human, animal, and environmental health.

- With a commitment of A\$220 million (US\$153 million) in April 2020, **Australia** will [elevate](#) the facilities of the Australian Animal Health Laboratory in Geelong, Victoria to the new **Australian Centre for Disease Preparedness**. The Centre will bring together animal and human disease protection and biosecurity responses. Additionally, the Australian government [announced](#) a A\$10 million (US\$7 million) investment over the next three years for the **One Health Systems Strengthening Program**.
- At the World Health Summit in October 2020, the **German Ministry for Economic Cooperation and Development (BMZ)** [committed](#) €30 million (US\$34 million) to set up a **One Health pandemic center in Kenya**. The One Health Research, Education and Outreach Centre in Africa (OHRECA) at the International Livestock Research Institute (ILRI) in Nairobi, Kenya, will address neglected

zoonotic diseases, antimicrobial resistance, food safety, and emerging infectious diseases on the African continent.

- At the One Planet Summit in January 2021, the **French Ministry of Higher Education, Research and Innovation** and the **Ministry of Europe and Foreign Affairs** introduced **PREZODE** (PREventing ZOonotic Diseases Emergence), a newly established initiative dedicated to detecting and preventing emerging zoonoses and pandemics by developing international R&D programs.
- In February 2021, the **Ministry of Foreign Affairs** (MOFA) of **South Korea** announced that it will provide US\$1 million to the International Atomic Energy Agency's (IAEA) newly established **Zoonotic Disease Integrated Action** (ZODIAC) initiative for global health security. ZODIAC was established in June 2020 by the IAEA to support countries in preventing and rapidly responding to zoonotic diseases.

Donors are also financing the development of new health technologies and innovative knowledge to better prevent and respond to emerging disease threats.

- In October 2020, **Norway's University of Bergen** (UiB) established its first **pandemic center**, which will research infection control measures and infections' stages, as well as on the socio-economic, legal, and ecological impacts of pandemics.
- The new **EU** research and innovation program 'Europe Horizon' (2021-2027) includes an **EU-Africa Global Health Partnership** (EDCTP3) aimed at delivering novel solutions for reducing the burden of emerging and re-emerging infectious diseases in 'sub-Saharan' Africa (the countries included in the African Union's categories of Eastern, Western, Central, and Southern Africa). By 2030, the program aims to have developed and deployed at least two new technologies and supported at least 100 research institutes in 30 countries.
- The **European Commission** has set up a new bio-defense plan, known as the **Health Emergency Preparedness and Response Authority** (HERA) **Incubator**, to identify and learn about variants more quickly, conduct research on adapting vaccines, facilitate the organization of clinical trials, ensure fast-track regulatory approval of updated vaccines, and contribute to the mass production of new vaccines. The HERA Incubator will lay the ground for a future bio-preparedness authority, which was announced as part of the Commission's November 2020 legislative package for **building** a stronger crisis response to health threats.

- In February 2021, the **Swedish International Development Agency** (Sida) and the **Canadian International Development Research Centre** (IDRC) announced that it will provide SEK232 million (US\$25 million) to the **Global South AI4COVID Program**. This new research program will support multidisciplinary research using evidence-based artificial intelligence (AI) and data science methods to strengthen low- and middle-income countries' readiness for future pandemics.

### Expanding vaccine manufacturing capacities for diagnostics, therapeutics, and vaccines

Donors are backing initiatives to expand vaccine production capacities on the African continent.

- At the Global Health Summit in May 2021, the **European Commission** announced the **launch** of a **Team Europe initiative on strengthening the manufacturing of vaccines, therapeutics, and health technologies** and improving access to life-saving health products on the African continent. The initiative is backed with €1.0 billion (US\$1.1 billion) and will support the establishment of regional manufacturing hubs. This is in line with the goals of the **Partnership for Africa Vaccine Manufacturing** — **launched** by the African Union, in cooperation with the Africa Centers for Disease Control and Prevention (Africa CDC) — which include boosting vaccine manufacturing in African countries.
- The **European Investment Bank** (EIB) and **European Development Finance Institutions** (DFIs), in coordination with the **European Commission**, have **set up** a new platform called **Sustainable Healthcare Industry for Resilience in Africa** (SHIRA) to boost private sector investment in health security and resilience on the African continent, in part by expanding vaccine manufacturing and supply capacity. The platform was announced at the Global Health Summit in May 2021.
- Also in May 2021, **Germany** committed €50 million (US\$56 million) to build up **South Africa's vaccine production capacity** to allow vaccine developers to award licensed production to manufacturers in the country. The goal is to **develop** South Africa into a vaccine production site for all of Southern Africa.

Donor countries themselves are working towards strengthening their R&D and vaccine production sites.

- With its '**EU-FAB**' initiative, the **EU** plans to establish emergency response production sites for both vaccine and drug manufacturing within Europe. The facilities should give the EU capacities to produce 500-700

million vaccine doses per year, with half of the doses ready for supply in the first six months of a pandemic. €40 million (US\$45 million) in EU funding are earmarked for the EU-FAB in 2021.

- In February 2021, **Germany** [established](#) a **Vaccine Production Task Force** to promote investment in vaccine production in Germany so that it can become a vaccine production site for the world.
- In May 2021, **Canada** committed to [investing](#) CAD200 million (US\$151 million) toward an **mRNA vaccine production plant** based in Canada. This project is expected to be completed in 2024 and to produce between "112 million and 640 million doses of mRNA product" annually, according to Innovation Minister François-Philippe Champagne. This plant will be the first of its kind in Canada, able to produce a sufficient vaccine supply to help meet the national and international needs.

### Increasing funding to health system strengthening

As part of their global COVID-19 response, numerous OECD donor countries have [supported](#) multilateral health organizations, such as WHO, Gavi, the Global Fund to fight AIDS, Tuberculosis, and Malaria. Funding for these organizations was aimed at both sustaining essential health services during the current pandemic and reinforcing health systems to make them more resilient for future pandemics. On top of multilateral commitments towards health system strengthening, donor countries have launched several new health systems strengthening initiatives both at home and in partner countries.

- As part of its TRUST (Transparency, Resilience, Unity, and Safety Together) Initiative, established in June 2020, the **Korean Foreign Ministry** (MOFA) launched a **COVID-19 Comprehensive Rapid Response Program** [providing](#) KRW36 billion (US\$31 million) in grants to strengthen partner countries' health systems.
- Strengthening and building resilient health systems presents [one of three pillars](#) of **Japan's** COVID-19 policy, which entails the reinforcement of core medical facilities, the improvement of disease surveillance, as well as strengthening human resources. According to Japan's Ministry of Foreign Affairs (MOFA), between March and December 2020, Japan [provided](#) ¥458.64 million (US\$4 million) in grants for **bilateral programs focused on health systems strengthening** in partner countries.
- In December 2020, **Team Europe** announced its plan to [provide](#) €200 million (US\$224 million) to the Association of Southeast Asian Nations (ASEAN) for a three-and-a-half-year **South-East Asia Pandemic Response and**

**Preparedness program.** The funding will strengthen health systems and the coordination of regional pandemic responses.

- In February 2021, **Norway** [announced](#) NOK500 million (US\$57 million) in funding for global health research dedicated to **strengthening systems for primary health care** in low- and middle-income countries.
- With its new **EU4Health program** which was launched in March 2021, the **EU** [allocated](#) €5.1 billion (US\$5.7 billion) from 2021-2027 to strengthen health systems, tackle cross-border health threats, and improve preparedness and response capabilities for future health crises within the Union.
- As part of its €1.2 billion (US\$1.3 billion) **COVID-19 – Health in Common Initiative**, **France** provides support to partner countries in building up more resilient health systems, to handle future pandemics more effectively.

### WHAT SHOULD DONORS DO GOING FORWARD TO OVERCOME CURRENT CHALLENGES TO PANDEMIC PREPAREDNESS?

Over the last 15+ months, the world has largely focused on the mobilization of resources and policies to support the recovery from COVID-19; however, as the examples above illustrate, donors have also started the push toward ensuring that COVID-19 is the last pandemic. Based on the Donor Tracker's analysis of donor responses so far, here are five key areas in which donor countries can and should do more to support pandemic preparedness.

#### 1. Reform the pandemic preparedness financing architecture

A sustainable and coordinated financing model that leverages resources beyond ODA from International Financial Institutions, public, private, and philanthropic sources will be essential to global pandemic preparedness. The funding system should provide **reliable and consistent funding** even without the pressure of an imminent disease threat and have the **capacity to quickly mobilize funds in the event of a disease outbreak**.

Donors should consider the proposal for a [Global Health Security \(GHS\) Challenge Fund](#). They should also monitor the findings and recommendations put forth by the G20's HLP (established in January 2021 to "identify solutions to financing the global commons for pandemic preparedness and response") and the PPP (established in April 2021 to advise the UK G7 Presidency on how to foster global co-operation on R&D), including its '100 Days Mission'.

## 2. Enhance the coordination and coverage of global disease surveillance

Detecting new disease threats and tracking their spread are essential first steps to preventing emerging infections from developing into global pandemics. Improving global disease surveillance will require the strengthening of systems at local, national, and global levels and improving the coordination between those systems. According to a May 2021 analysis by McKinsey & Company, this will require a total global investment of between US\$75 and US\$115 billion over ten years.

As this Donor Tracker Insight shows, only a few donors have begun investing in surveillance systems in partner countries and domestically; **greater financing will be needed** to support low- and middle-income countries in improving their foundational surveillance and outbreak-investigation capacities and to help them develop stronger pathogen surveillance, including on animal and environmental health and through genomic sequencing. The EU has provided some examples of how global disease surveillance could be improved through cross-continental collaboration and capacity building in partner countries. Although the benefits of preventative measures such as surveillance systems remain invisible until the next disease threat emerges, they should not be undervalued as they are essential to global pandemic preparedness.

## 3. Continue to provide reliable support to multilaterals

Multilateral organizations and partnerships have been vital to the international response to COVID-19, especially in the push to develop and distribute vaccines, diagnostics, and therapeutics. Ensuring that donors continue to **consistently fund these organizations**, even when we are not in the midst of a pandemic, is essential to ensuring preparedness in advance of disease outbreaks and facilitating a rapid response (in terms of both research and containment) to emerging disease threats.

The Coalition for Epidemic Preparedness Innovations (CEPI), a global partnership launched in 2017 to develop vaccines to stop future epidemics, has been central to the international COVID-19 response. CEPI is already looking ahead to the next pandemic: in March 2021, it launched a US\$3.5 billion pandemic preparedness plan for 2022-2026, which aims to cut the timeline for vaccine development to just 100 days. This is the target built upon in the PPP's '100 Days Mission'. Donors will have the chance to

step up their investments in CEPI at its UK-hosted replenishment summit in 2022.

Donors should also support the evolution of other multilateral tools developed to respond to COVID-19 into sustainable instruments for preventing and responding to future pandemics. There have been different suggestions for how to best institutionalize frameworks for responding to future pandemics. The WHO commissioned IPP report on ending COVID-19 and ensuring it is the last pandemic suggests that the Access to COVID-19 Tools Accelerator (ACT-A) should be transformed into a "global end-to-end platform for vaccines, diagnostics, therapeutics, and essential supplies". The PPP's '100 Days Mission' on the other hand, suggests that making ACT-A permanent would only add complexity and inefficiency to the global health architecture; the PPP recommendation is for the establishment of a Global Health Board, which, in the event of a pandemic, could oversee a network of international organizations (similar to ACT-A). Regardless of the details, there is broad-based agreement that global coordination through multilateral partnerships and platforms will be essential to preventing and responding to future pandemics.

## 4. Support more equitable vaccine access through expansion of manufacturing capacities in partner countries

COVID-19 revealed the need to scale up vaccine manufacturing capacities to ensure adequate supply of vaccines for the entire global population and highlighted the inequality of access that can result from an unequal distribution of these capacities around the world. In the case of COVID-19, the concentration of vaccine manufacturing in wealthier countries has resulted in what some are calling a "vaccine apartheid".

Currently the African continent imports 99% of its vaccines and 94% of its medicines, altogether has fewer than ten vaccine manufacturers based in five countries and has fewer than ten countries that are self-sufficient in terms of vaccine procurement. As the World Trade Organization (WTO) director-general Ngozi Okonjo-Iweala said, an intellectual property waiver alone will not be enough: "to solve the unacceptable problem of inequity of access to vaccines, we have to be holistic". In addition to **infrastructural development, technology transfer and pooled knowledge** will be essential tools through which donors can support partner countries in developing their pharmaceutical, biotech, and MedTech industries. As this analysis shows, donors can look to Germany and the European Commission, which have both commit-

ted to supporting expanded vaccine manufacturing and supply capacity on the African continent, for examples of how this can be done; **scaling up these efforts** will ensure the world is better prepared for the next pandemic.

### 5. Invest even more heavily in health system strengthening

As WHO Director-General, Dr. Tedros Adhanom Ghebreyesus [explained](#) “the greatest threat to global health security is the fact that billions of people lack access to essential health services. Universal health coverage and health security are two sides of the same coin.” Without investments in health systems strengthening — including infrastructure, human resources, health information systems, sustainable and reliable supply chains, and emergency funds — efforts toward pandemic preparedness will not be effective. **Strong and resilient health systems and universal coverage** are the foundation upon which global pandemic preparedness will be built and are crucial to ensuring that countries can continue to deliver on essential services, even while dealing with disease outbreaks.

Like the EU4Health program aimed at strengthening health systems in the European Union, donor countries should scale up their efforts to provide technical support and funding to build more resilient health systems in partner countries. Analysis from the WHO suggests that the financial investments needed to ensure strong health systems in low-and-middle-income-countries are larger than the gaps in funding needed to finance pandemic preparedness, meaning it is essential that donors **prioritize health system investments** to protect the global community from future pandemics, especially against the backdrop of constricting ODA budgets among major donors.

Establishing global pandemic preparedness will require significant investment and system-level change at local, national, and international levels. Donor countries will have a major role to play in closing the gaps in readiness that currently exists between rich and poor nations. If the global community hopes to “break the cycle of panic and neglect”, work needs to start now and continue into the years ahead, even as the immediate threat of COVID-19 begins to fade.