



HEALTH AND HEALTH CARE INNOVATION

Better Preparedness for the Next Pandemic

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Governance and Decision-Making in an Imagined Health Crisis

This week's Salzburg Global Fellows are familiar with navigating the complexities of global governance and public health challenges in their daily lives. However, are they able to make confident decisions when playing a different role?

On Wednesday, Fellows engaged in a role-playing game set in "Nusquam", an imaginary country in the Global South with unique geography, economy, and intricate political and health systems. Splitting into three smaller groups, Fellows assumed roles such as finance and health ministers, CEOs of fictitious non-profit organizations, and representatives of investment banks or immunization collaboratives.

Initially, "ministers" met in small groups to strategize and establish goals, priorities, needs, and potential partnerships. They devised a five-year budget plan to bolster their health system, manufacturing, and research facilities while safeguarding the population. Subsequently, negotiations began between the government and the international community. However, convincing

investors and donors was no easy feat.

After intense negotiations, Fellows reached agreements on their respective objectives and fund allocations. While some groups received generous donations from non-profit foundations, other funding came with strings attached. When all seemed well, an unexpected twist was introduced - the emergence of a new disease. This prompted groups to devise strategies, including selecting a vaccine and integrating it into their budget plans.

Following the intense discussions, groups presented their proposals to the wider group. A few creative players composed a national anthem for "Nusquam", others had minor accounting problems, and some created political slogans like "never say never" or "health equals wealth". Fellows put themselves in the shoes of their real-life counterparts and were able to draw parallels between situations they had experienced. Despite friendly competition, a consensus emerged on everyone's priorities: vaccination, pandemic preparedness, and children's health.



The Economics Behind Health and Equity

Insights from the Middle East and North Africa

Neeraj Tom Savio

Health, economics, and equity are inextricably linked in a post-pandemic world. Amr Elshawarby, an economist with the World Bank based in Cairo, Egypt, shares his opinions on the economics that underlie equitable health systems and vaccine availability.

Health Systems in MENA

Addressing the challenges faced by countries in the Middle East and North Africa (MENA) region, Amr noted that “one of the biggest challenges, particularly in low- and middle-income countries, is how they finance their health systems, whether it is tax-funded or whether it is through social insurance schemes, to reduce out-of-pocket expenditure on health, while improving health outcomes”. As the MENA region represents diverse economic backgrounds, ranging from low- to high-income countries, “Every country has a different type of challenge,” explained Amr. He emphasized that a financial response to these challenges must be “country-specific”.

Egypt’s Health Reforms

Proper health financing is a crucial component of the economics behind equitable health systems. Amr pointed out that Egypt had begun reforming its health financing at the time of the pandemic outbreak. Its prevalent public health system was largely tax-funded, with a low utilization rate that could benefit from improved service delivery mechanisms, and was characterized by significant out-of-pocket spending. To expand healthcare coverage and provide protection for the most vulnerable groups, the country embarked on an ambitious program to roll out a “universal health insurance system” that drew on multiple sources of funding, such as premium collection and government funding as well as earmarked contribution from tobacco taxes and road tolls, while also subsidizing premium contributions for their most vulnerable groups.



“They are trying to diversify the sources of financing to be able to develop stronger, more resilient, and a more responsive health care system that is able to better engage in pandemic situations,” described Amr.

Economics, Equity, and Vaccines

The COVID-19 pandemic highlighted the inequity between countries, particularly regarding vaccine access and distribution. According to the United Nations Development Program, high-income countries could vaccinate their citizens two months earlier on average than low-income countries. Amr highlighted the role of differential income in contributing to this inequity. He explained that wealthier countries have more indigenous investments in pharmaceutical research and development that help them get earlier access. “How [then] can we economically support low- and middle-income countries to get early access to vaccines?” asked Amr rhetorically.

The answer lies, at least partially, within economics. Vaccine production, Amr noted, “needs financial innovation to be able to provide a global public good, such as vaccines, to everyone equitably”. However, if done incorrectly, it may have its pitfalls. Amr added that “multi-lane procurement”

presented a huge challenge during the COVID-19 pandemic. In a bid to maximize vaccine delivery, countries pursued any available avenues. This, however, led to an “operational nightmare”, he remarked, as multiple vaccines were operational in a single country, with different vaccines having different requirements in terms of dose administration, syringe type, and cold chain requirement, all the while competing for storage space.

The Path Ahead

Amr likens the issue of inequity in vaccine procurement to climate change. He stated that it “is a global issue that requires getting together and trying to find a collective solution”. Drawing inspiration from this week, he commented, “this [program] brings [together] people from various backgrounds, from the private sector, people working in the pharmaceutical industry, people working in donor foundations, development partners, academia, governments, health sector, [and] lawyers in the health field. Understanding all these moving variables in one place was extremely helpful.” He concludes, “It is important for us to find ways to better address pandemics in the future”.

Local Solutions for Vaccine Access

Audrey Plimpton

In a series of Knowledge Café discussions, Fellows explored the potential utility of local and regional acquisition vehicles aimed at bolstering vaccine access across African nations. The discussions were led by Abebe Geneto Bayih, Acting Lead for Partnerships for African Vaccine Manufacturing (PAVM) with the Africa CDC, who commented that “governments should be willing to pay a premium for locally manufactured vaccines as the benefit of local manufacturing goes beyond health”.

The imperative for securing funding for pooled procurement mechanisms (PPM) and aligning PPMs on regional, continental, and global levels emerged. Fellows cautioned that creating a sub-regional PPM is counter-productive and it makes more sense to work together on a continental or regional level; regional PPMs should cultivate strong partnerships with the existing international PPMs.

The pros and cons of PPMs were discussed at length. While they offer the advantages of leverage, coordination, and speed, participants grappled with

the risks of negotiating uniform prices across different economic landscapes. A suggestion by a Fellow on tiered pricing within PPMs sparked a conversation on the diverse financial realities of market segments.

The discourse also underscored the need to differentiate between products with high and low production barriers, as a PPM is more appropriate for products with high production barriers. Fellows emphasized the imperative of early involvement of lower and middle-income countries in PPMs to avert their exclusion during emergencies.

The group suggested outlining clear scenarios for countries to evaluate their needs in different situations and determine the use case of an African PPM. Tailored procurement strategies should be adaptable, from increasing existing vaccine production to starting new production in unforeseen emergencies. Advanced planning remains pivotal in pandemic preparedness, such as having procurement mechanisms and regional research and development organizations in place before a health emergency arises.

Planning Partnerships

Neeraj Tom Savio

During the Knowledge Café, Fellows learned about the corporate and legal sides of vaccine development. They discussed the many parties involved in producing a vaccine from the innovation stage to its development, such as industries, academia, and governments. Each has a distinct interest in vaccine development; for example, while governments are likely to prioritize the public good, industries and academia might prioritize profit and licensing revenue. Planning these partnerships between various actors helps balance these interests and could be used to promote equitable access.

Julie Barnes Weise, Executive Director of the Global Healthcare Innovation Alliances Accelerator (GHIAA), highlighted the importance of contracts in vaccine development. Contracts are enforceable instruments that can guarantee equitable access, ensuring parties know their rights and how to enforce them.

A challenge surrounding vaccine development is that the paperwork involved is often murky, as Julie noted that “Nobody really understands how much paperwork is involved in vaccine development”. She explained that planning partnerships would have a cascading effect throughout the different stages of vaccine development, from discovery to distribution and adoption. However, it is important to develop equitable access plans and objectives to ensure that a vaccine is affordable, available, and sustainable.

Fellows raised the issue that vaccines often reach low- and middle-income countries much later than their wealthier counterparts. This was the reality during the COVID-19 pandemic, as confirmed by data provided by Gavi, the Vaccine Alliance. Better preparation for another pandemic necessitates better vaccine development strategies, which would not be possible without understanding and planning partnerships.

Sustaining Networks for Pandemic Preparedness

Edison Chung

COVID-19 was a global challenge on an unprecedented scale, but great crises often create great opportunities. From health workers on the frontline to international institutions, the fight against COVID-19 created a network out of a vast sum of moving parts. Countless connections were established, and it was evident in the Knowledge Café discussion that sustaining these networks would be a pivotal prerequisite for a speedy response to the next pandemic.

All successful relationships in life are built on trust, and trust is built on successful collaborations. The critical question is: How? One Fellow explained that “collective experiences and shared success” are the key. Indeed, the pandemic has already established networks of diverse stakeholders united towards a common goal. Another Fellow referred to these as “reusable networks”. Even though the pandemic has subsided, reusing, expanding, and strengthening these existing networks would naturally sustain them in preparation for the next pandemic by “maintaining the tempo”.

Though the tempo has slowed compared to the frantic days of the pandemic, there is still a multitude of unmet health needs around the world that Fellows identified. Malaria, tuberculosis, Mpox, and Ebola all demand the world’s attention, and with the networks established through the COVID-19 pandemic, the world is already better poised to respond.

Specific to pandemics, Fellows also explored the possibility of utilizing established networks to set up “international fire brigades” or “fire drills” to better coordinate existing connections for the next pandemic. Through regular exercises, networks can identify the shared interests and the gaps between groups. A Fellow added that the objective is to find the right contacts by “speaking to their area of expertise”. Successful networks depend as much on the unity of groups and the uniqueness of individuals. The pandemic has already mapped out precious networks. Now is the time to explore where they can take us.

Hot Topic:

“What is something new or surprising that you heard this week?”

Júlia Escrivà Moreno

“I’ve learned new things from the experience of end users in Africa. A well-funded, global, COVAX-type model with an emphasis on equity for the Global South remains a valuable option, alongside assessing the merits of regional procurement. We have immediate, low-hanging opportunities to strengthen existing health ecosystems in Africa, to protect lives NOW from the diseases that we know and be more prepared for future threats that we don’t.”

Harry Brady

Executive Director, International Vaccines Public Policy, United Kingdom

“One of the amazing things to me was how many times I heard the word ‘contract’, it being an impediment to getting vaccines, or to increasing the costs of getting vaccines from people before I ever brought the subject up. I’m usually the one that says equitable access to vaccines is highly contingent on the nature and quality of the contracts to get them.”

Julie Barnes-Weise

Executive Director, GHIAA, USA

“Something new that I learned from this week’s [program] is about nationalism. I also learned about how to get the vaccines and availability and how we can deal with that. We came up with different strategies on how best to deal with nationalism, including having a regional pool procurement system and regional or local manufacturing.”

Ntuli Kapologwe

Director of Preventive Services, Ministry of Health, Tanzania

“I appreciated the exchange, and I learned a lot. I appreciate the initiative to meet for better preparedness for the next pandemic, but also to figure out which kind of coordination nations, organizations, and governments must put in place to respond to the next pandemic. I would highlight vaccine procurement, which is crucial to ensure vaccine access to everyone in the world.”

Steve Mundeke Ahuka

Head of the Department of Virology, Institut National de Recherche Biomédical, Democratic Republic of Congo



#FacesOfLeadership

Edison Chung

“For me, being a leader means two things: empowering others to achieve their full potential and ensuring diverse voices. From the projects I’ve done in the past, I observed that the best outcomes come when you have a mix of people.

Surrounding yourself with people who bring these different ideas, even if you know they’re going to be different from your initial assumptions and hypotheses, is critical for being a good leader.

What links both things for me, as a queer man in the workplace, was about creating an environment of diversity where people can be their authentic self... because with any community, once you identify yourselves and organize, you have a voice. Bringing that voice out and helping others bring that out will contribute to building the next crop of leaders.”

Simon Allan

Head of Portfolio Management, COVAX, Gavi, The Vaccine Alliance, United Kingdom

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