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Health Systems and Equity Issues in Context of COVID-19

Date: December 17, 2020 | Time (2:30PM-4:00 PM) GMT

8:15PM NPT | 3:30PM CET | 7:30AM PST



Gabriele Koehler

Independent Development
Economist

Germany



Genevieve Fernandes

Research Fellow,
Usher Institute, University
of Edinburgh

UK



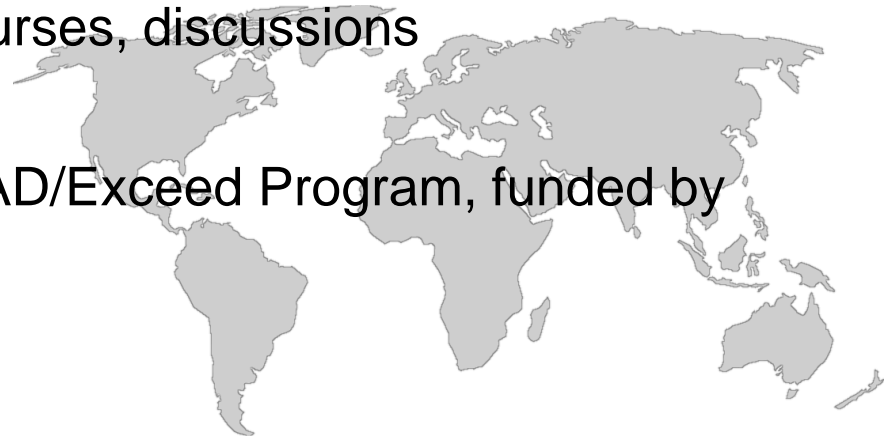
Stephen Hodgins

Assoc Prof,
School of Public Health
University of Alberta,

Canada

One Health Knowledge Café

- A collaborative effort of more than 11 individuals representing CIH partners and alumni
- Represents Asia, Africa, Europe, South America and North America
- Brings together the expertise and network of researchers and professionals from various disciplines, countries and expertise to enable cross learning, sharing and network building
- Monthly talks, webinars, online courses, discussions
- Supported by LMU^{CIH} through DAAD/Exceed Program, funded by BMZ





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COVID-19: on making good choices

Stephen Hodgins

Editor-in-Chief, Global Health: Science &
Practice

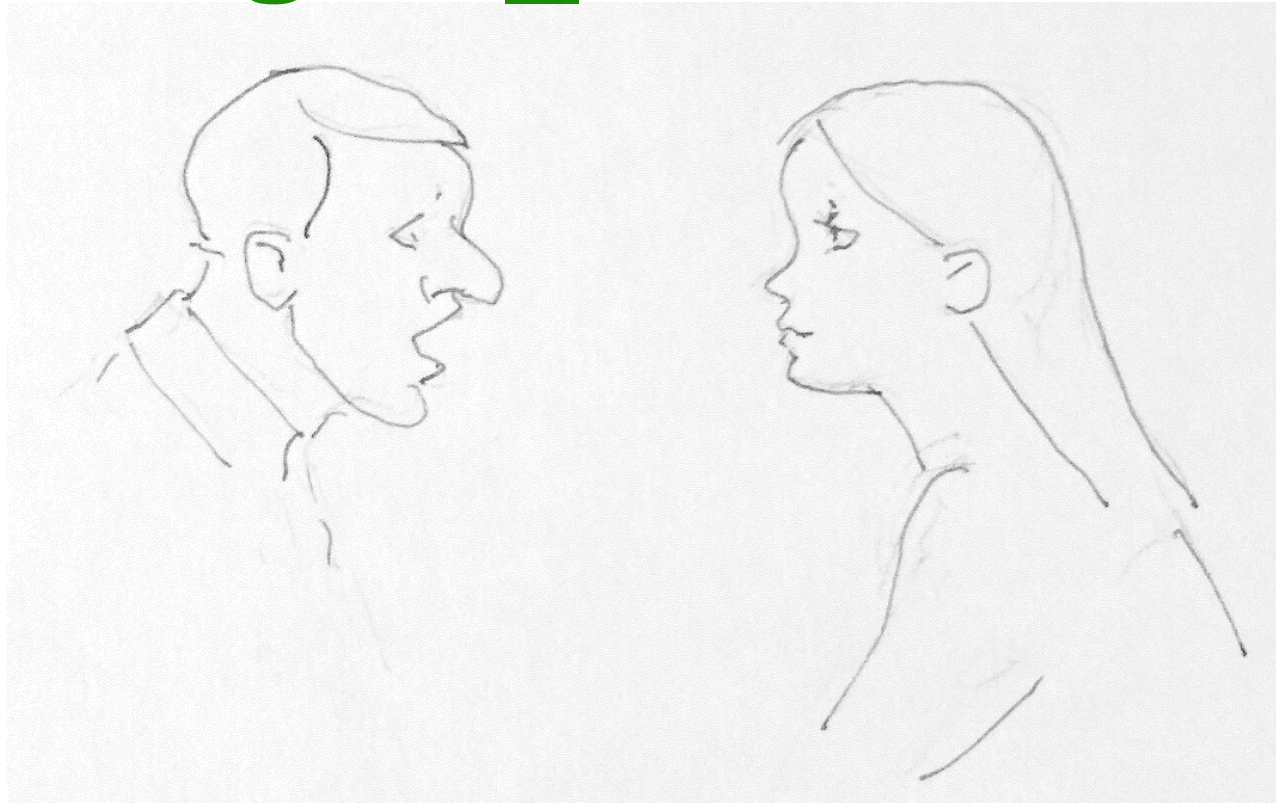
University of Alberta

shodgins@ualberta.ca

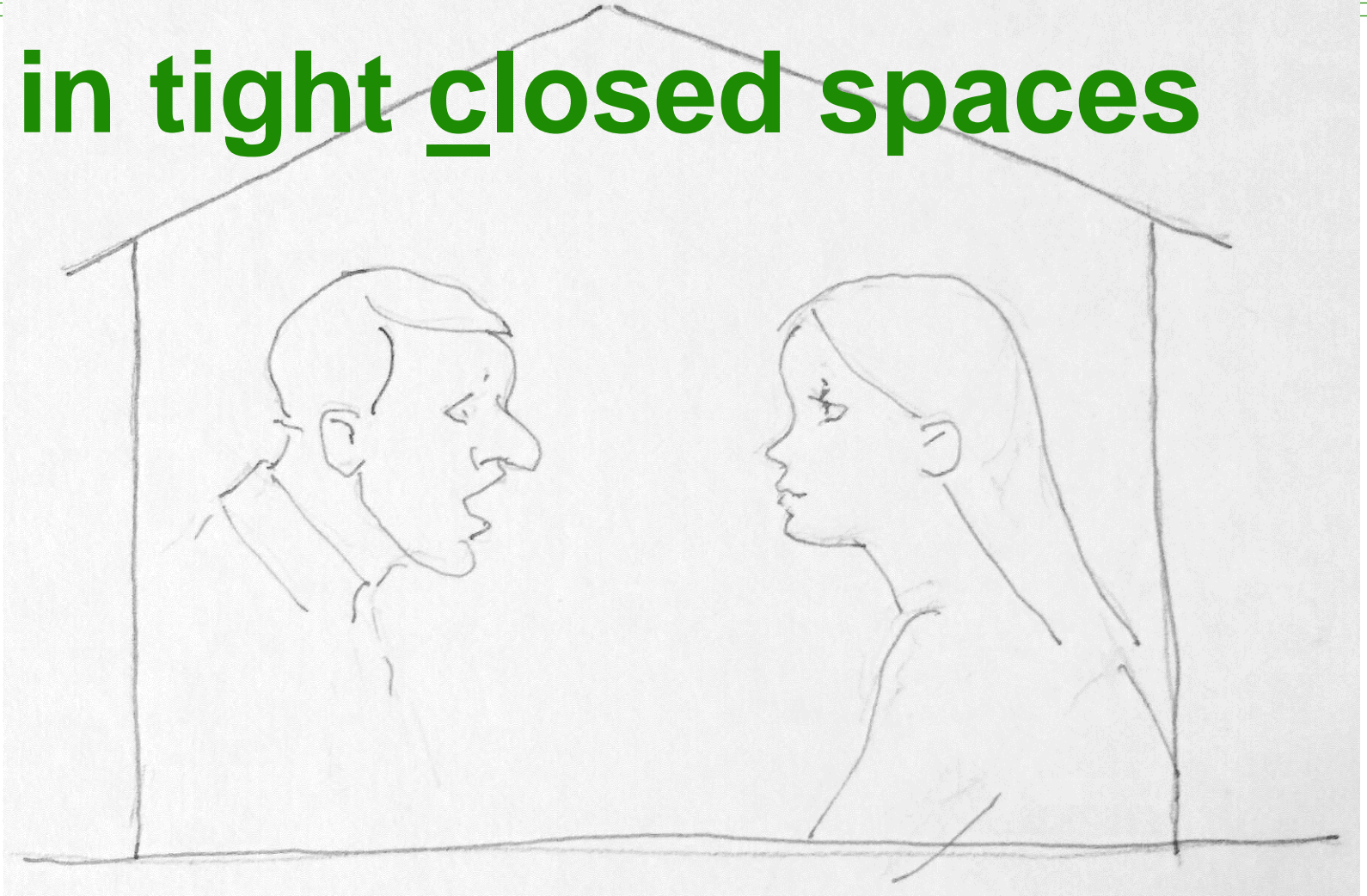
-
- I) What's driving propagation of the epidemic
 - The 3: C's
 - Network levels
 - The importance of clusters
 - II) Age & mortality risk
 - III) Between-region differences in mortality impact
 - IV) Implications for control strategy:
 - What does it mean to be cautious?
 - Tailoring strategy to context,
 - Considering impacts of control measures on non-covid outcomes,
 - Being strategic.

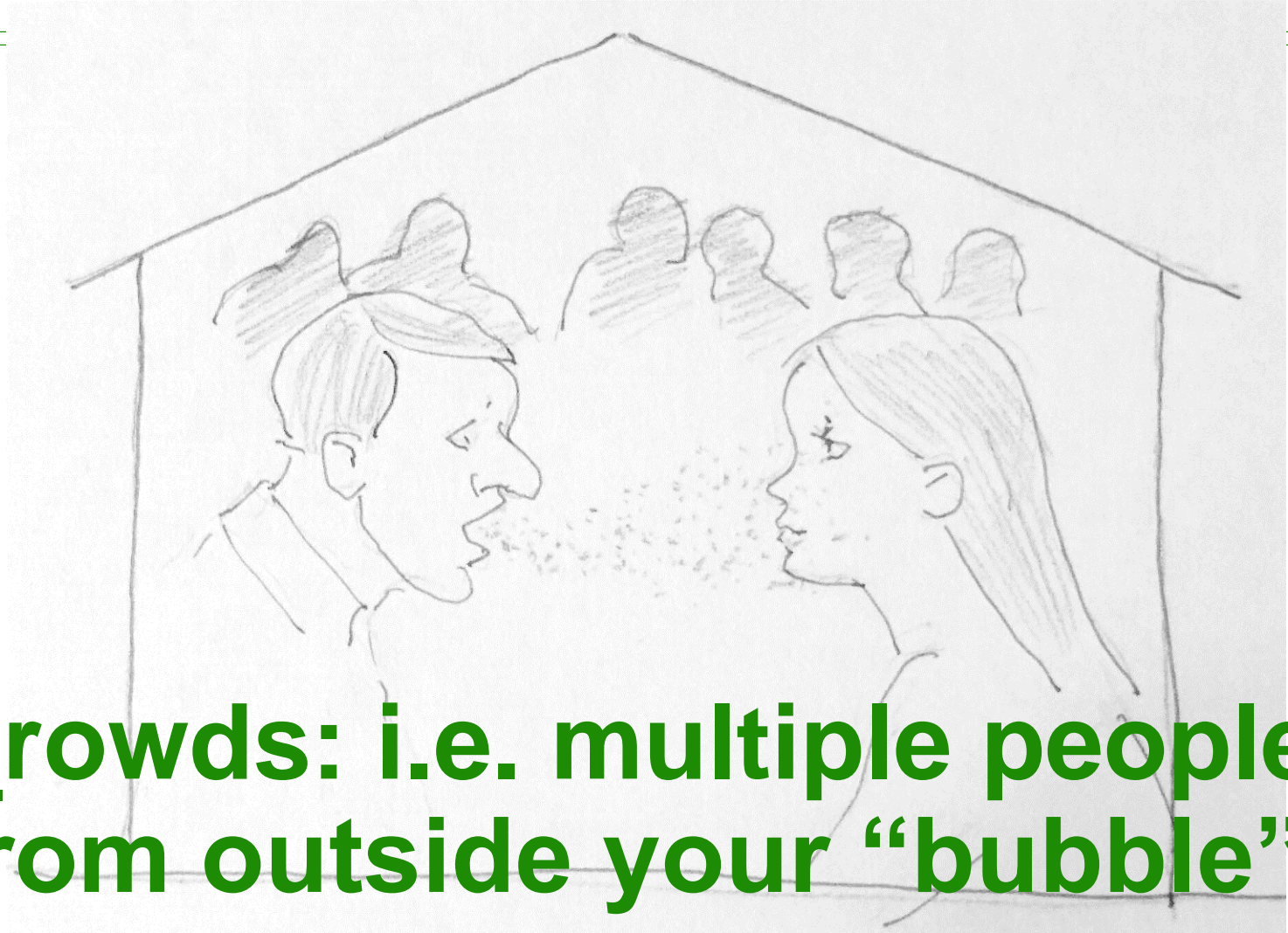
How to get COVID-19... the 3 Cs

prolonged close contact



in tight closed spaces



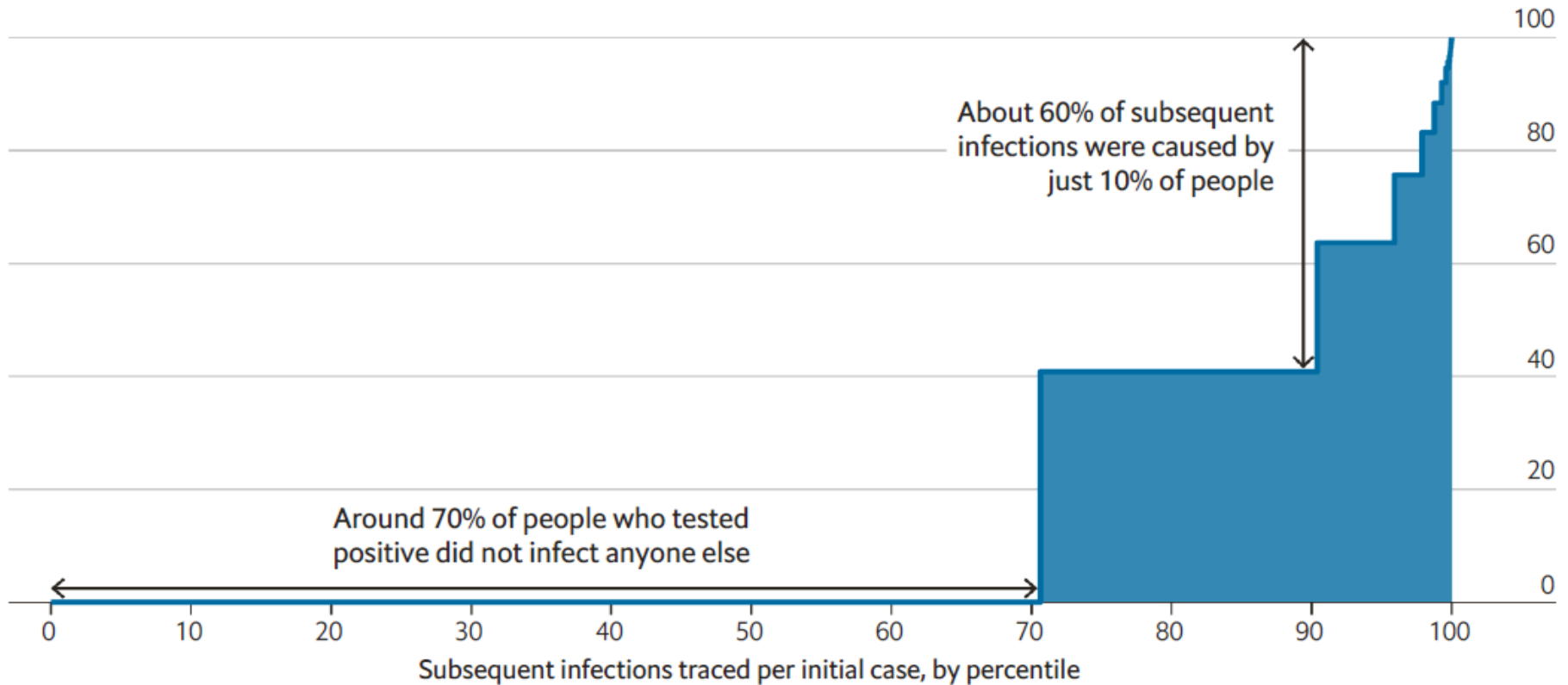


Crowds: i.e. multiple people from outside your “bubble”

Smooth or lumpy?

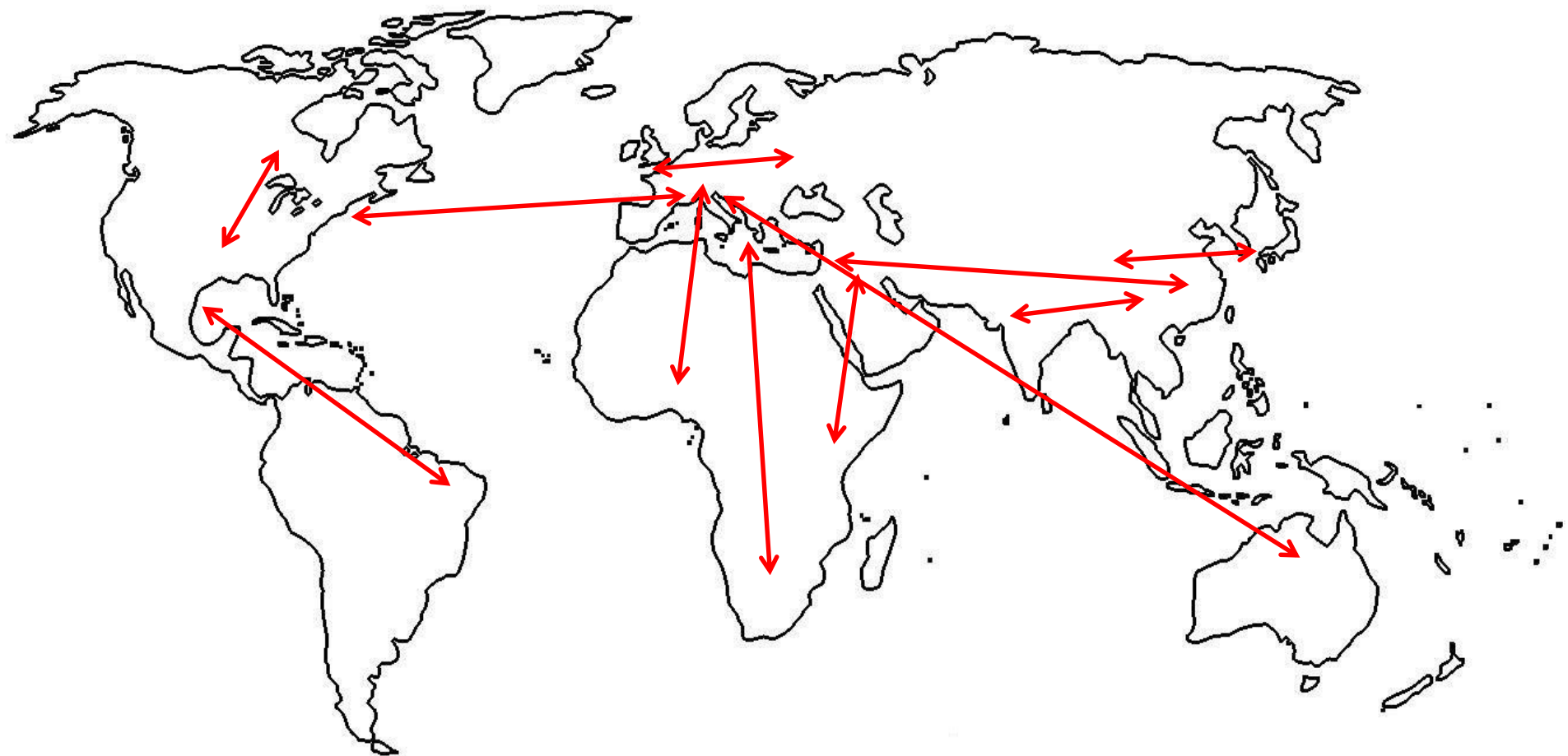
→ **A small share of the population is responsible for a majority of infections**

Cumulative share of subsequent covid-19 infections, %
India*, by percentile of subsequent infections per initial case



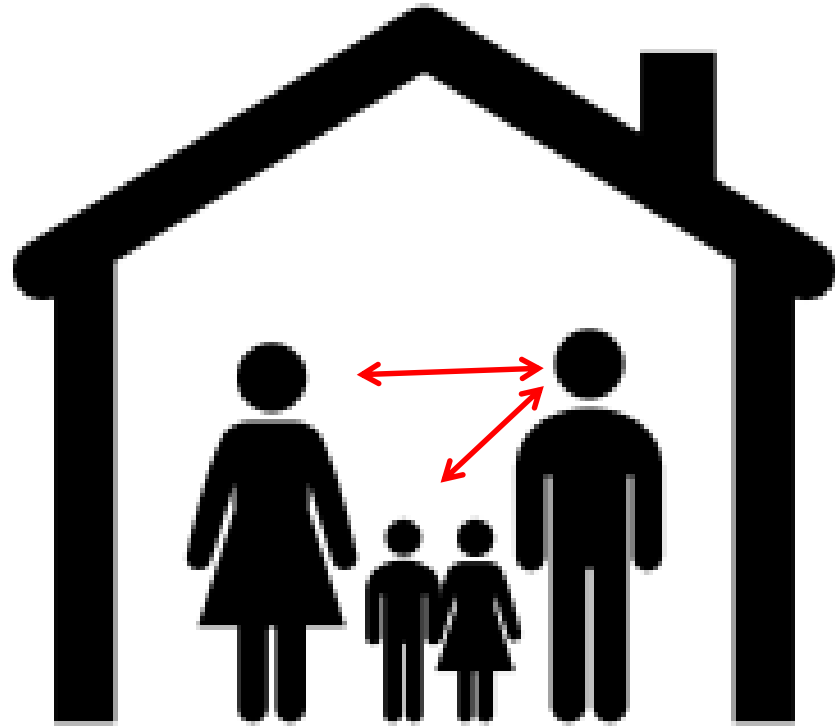
*Study in Andhra Pradesh & Tamil Nadu, March-August 2020







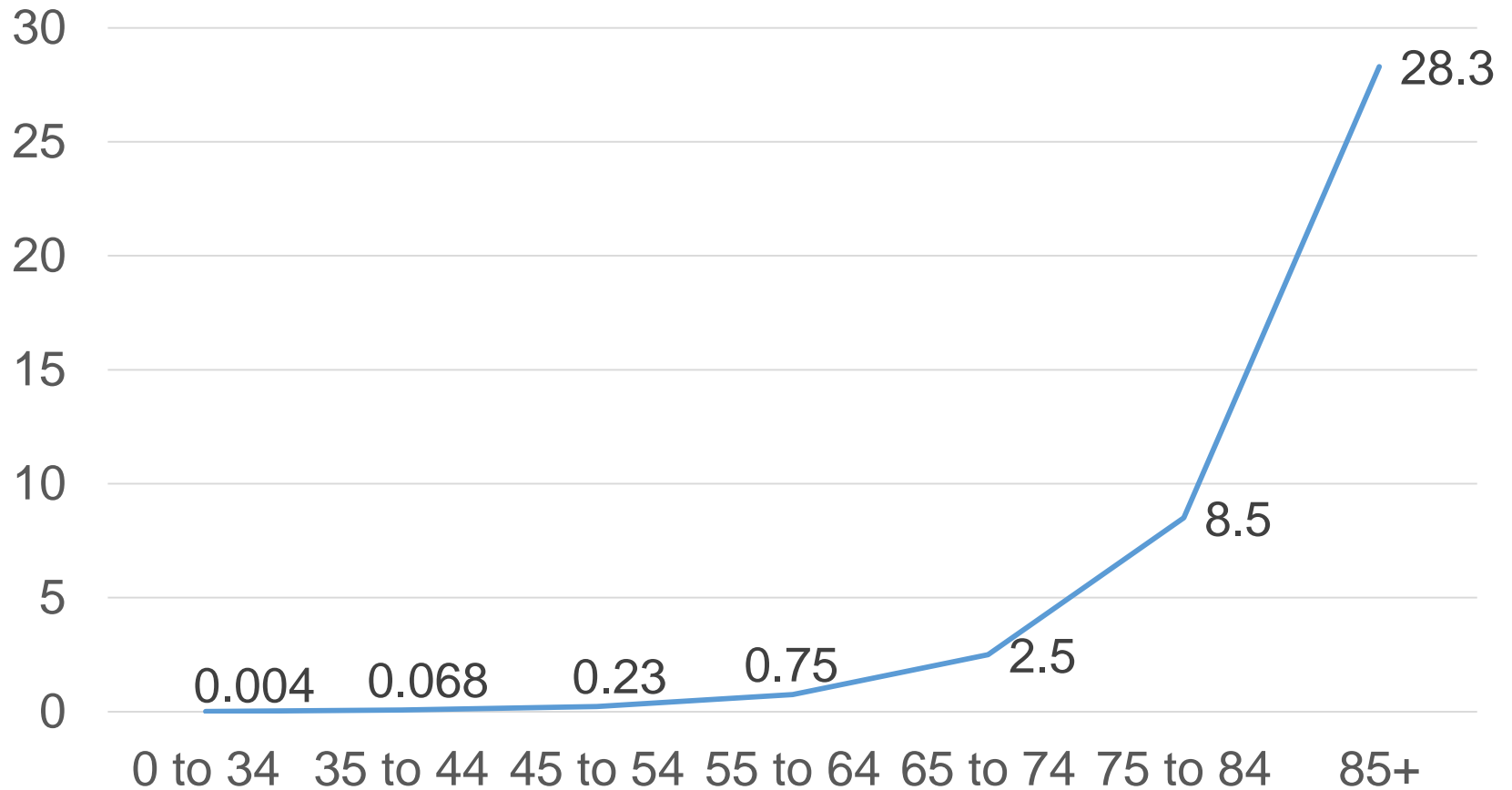
Within the community, driven mainly by super-spreading events



Infection fatality rate

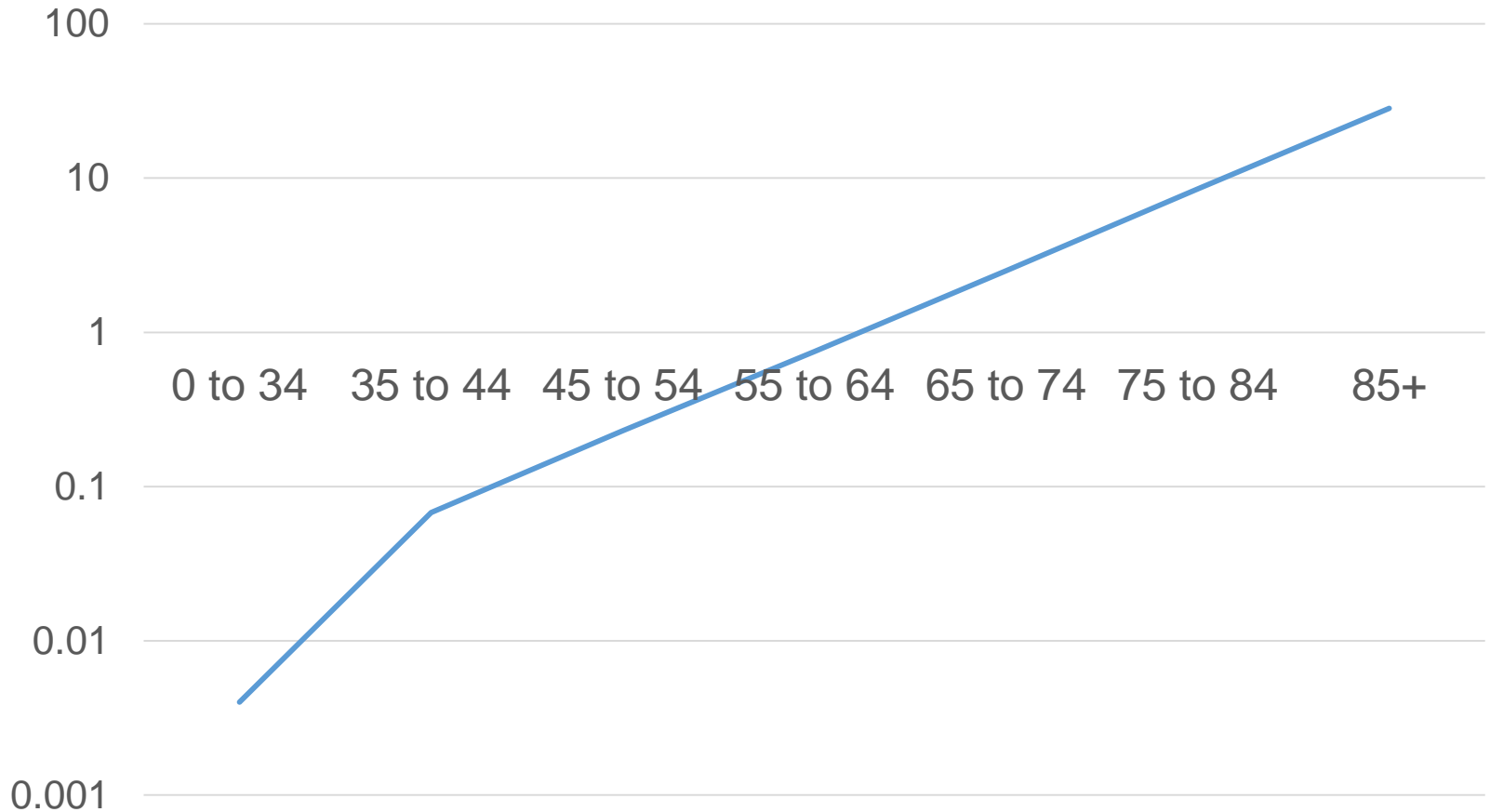
Who is at risk?

Age-specific infection fatality rate (%)



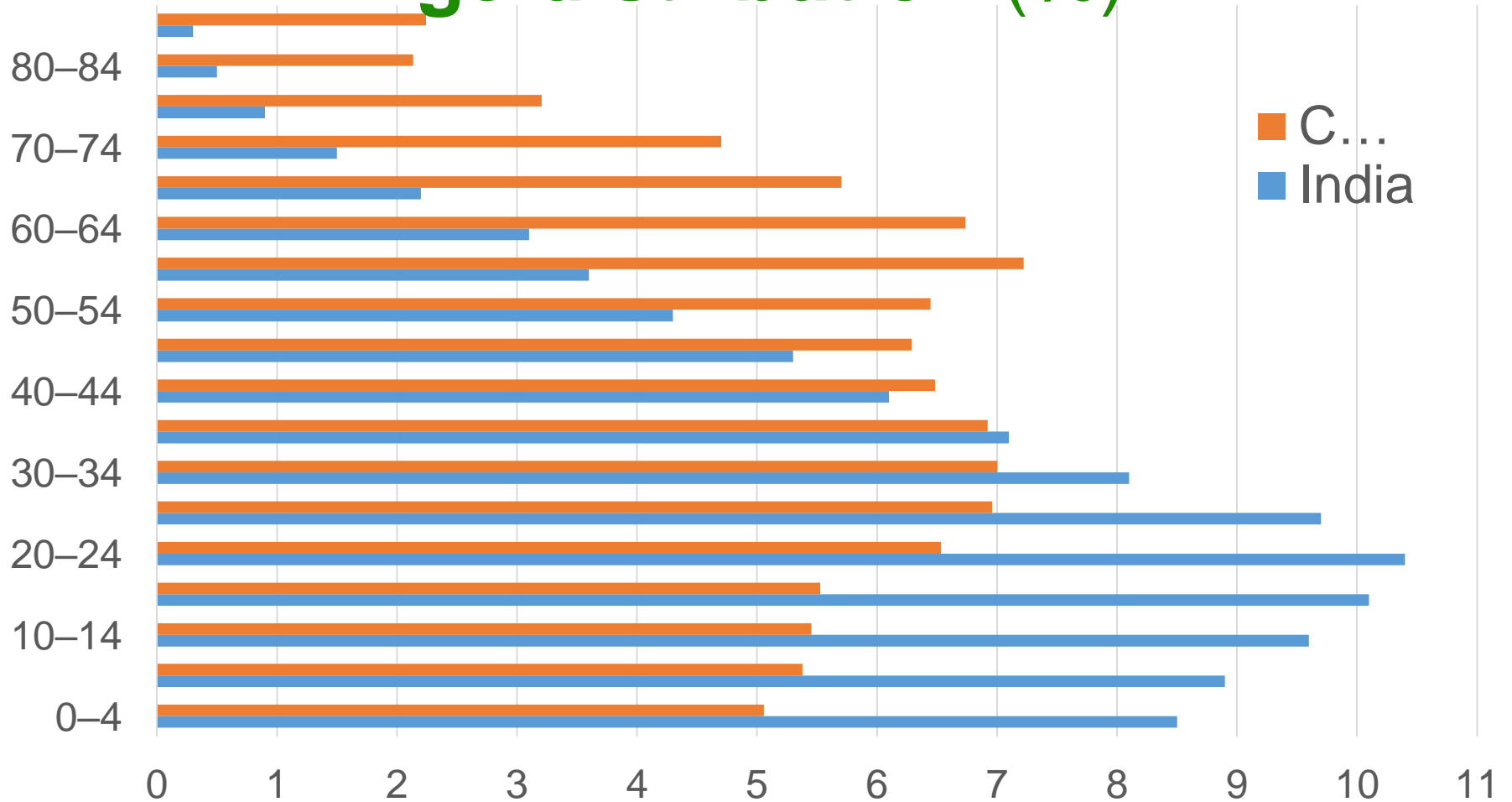
<https://www.medrxiv.org/content/10.1101/2020.07.23.20160895v7.full.pdf>

Age-specific infection fatality rate (%)

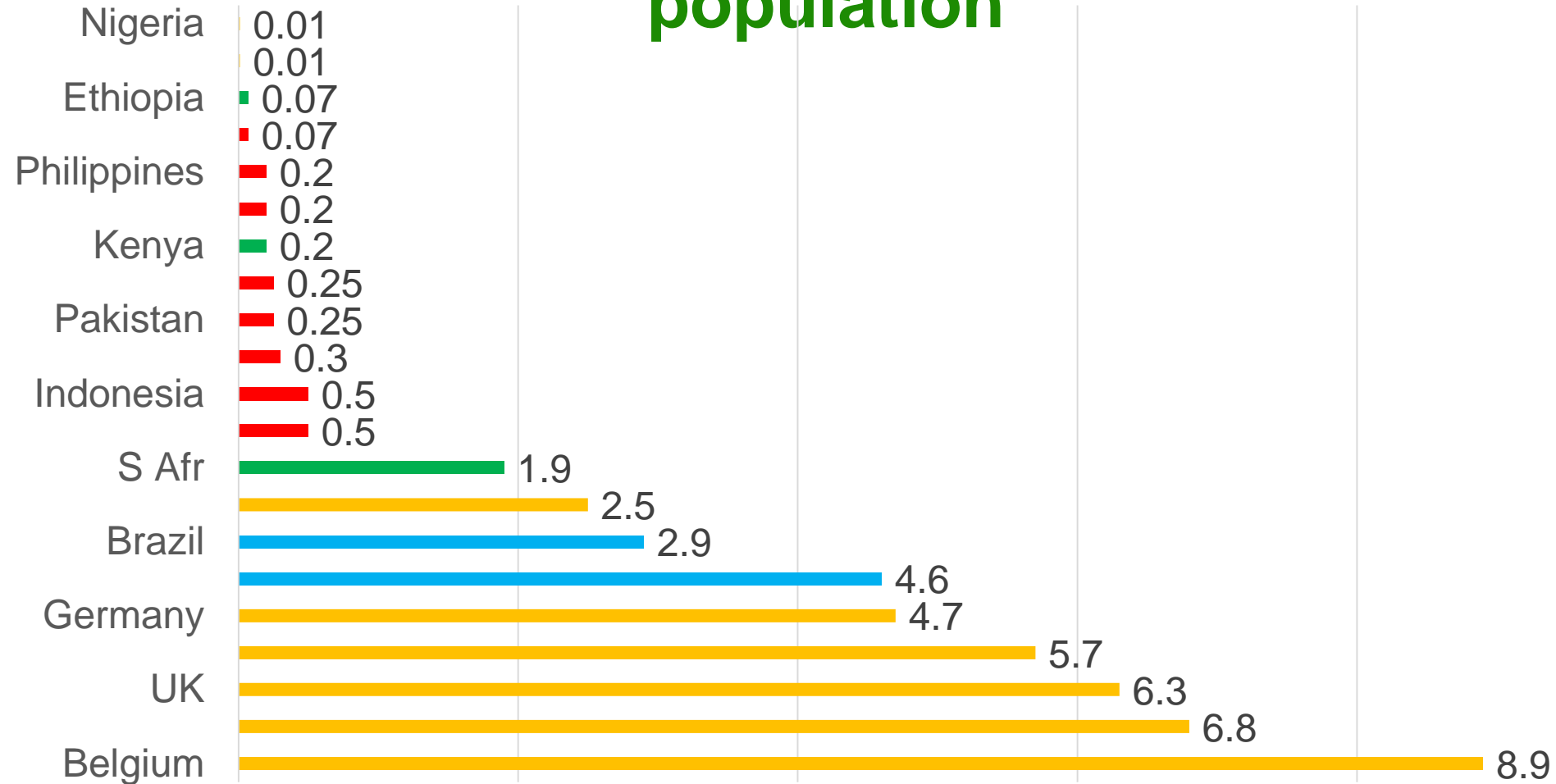


<https://www.medrxiv.org/content/10.1101/2020.07.23.20160895v7.full.pdf>

Age-distribution (%)

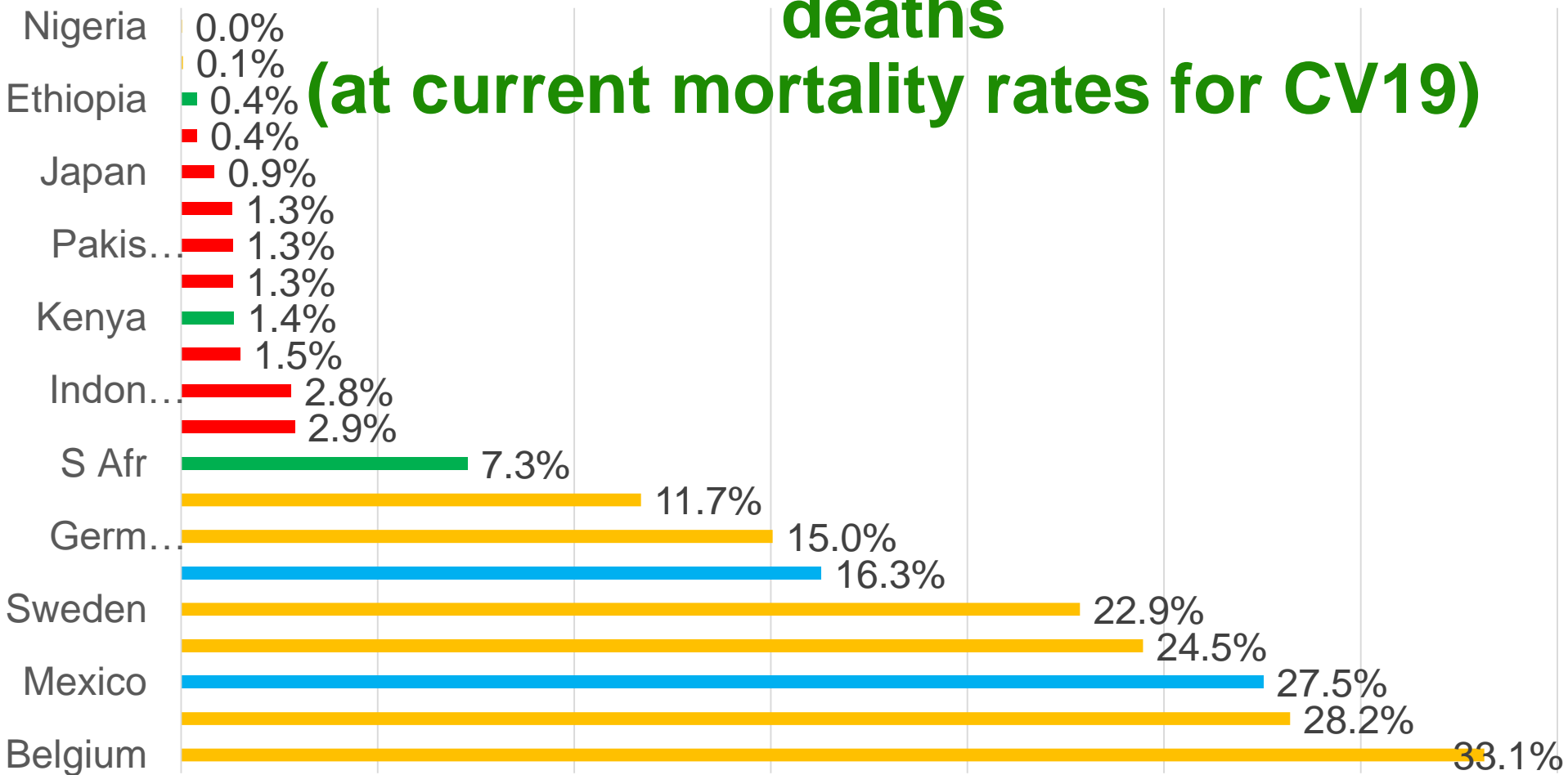


COVID-19 deaths per day per 1 million population



COVID-19 deaths as % of total expected deaths

(at current mortality rates for CV19)



**So what does all this mean for
strategy?**

**“Out of an abundance of
caution”**

or

“First, do no harm?”



An unfamiliar risk – alarm
versus
A familiar risk – discount

A one-size-fits all solution?

South & SE Asia, Sub-Saharan Africa

- Young
- Elderly in multi-generation households
- Mostly informal sector employment
- Generally fairly weak social-welfare protection
- More time in the open air

Europe, North America

- Old
- Elderly—couples, alone or *in institutional care*
- Mostly formal sector employment
- Generally much stronger social-welfare protection
- Cold-season, pushing people indoors







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Health Systems and Equity Issues in context of COVID-19: Building health system resilience

Genevie Fernandes

Research Fellow, Global Health Governance Programme, University of Edinburgh
United Kingdom

Indirect health effects of COVID-19



A woman wearing protective clothes walks past the entrance to a maternity hospital during the COVID-19 outbreak in Nairobi, Kenya. Photo by: Baz Ratner / Reuters

Indirect health effects of COVID-19

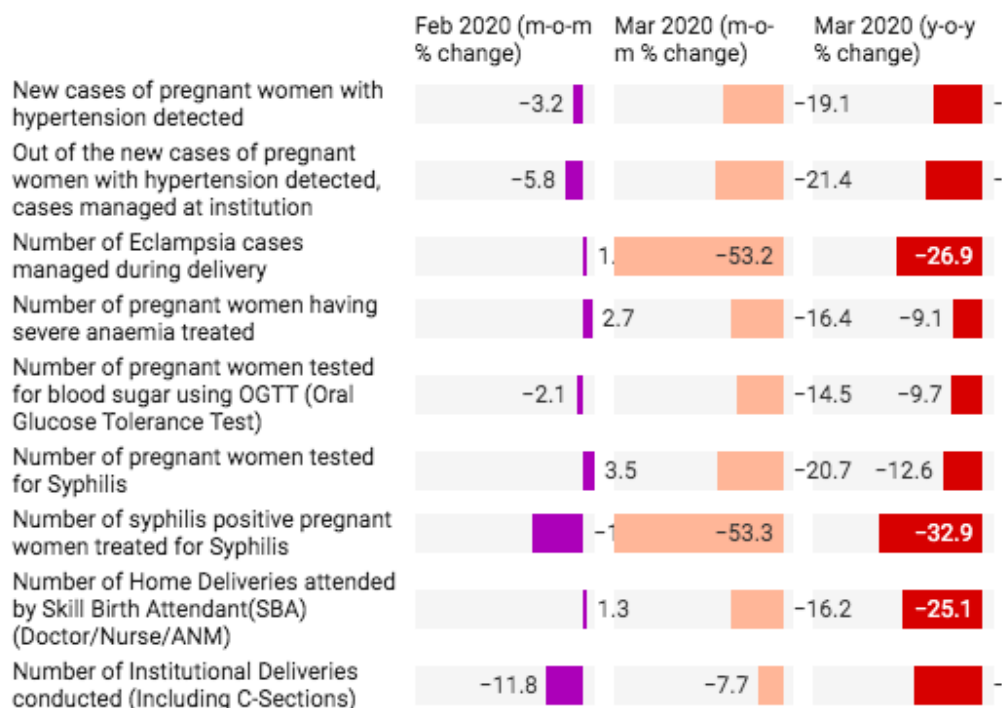


A woman wearing protective clothes walks past the entrance to a maternity hospital during the COVID-19 outbreak in Nairobi, Kenya. Photo by: Baz Ratner / Reuters

- **Sexual and reproductive health** – antenatal care, deliveries, postnatal care
- **Child health** – vaccinations, diarrhoea, acute respiratory infections
- **Infectious diseases** – tuberculosis, cholera, HIV, hepatitis, malaria, dengue
- **Non-communicable diseases** – cancer, asthma, COPD, mental health

Utilisation of health services in India

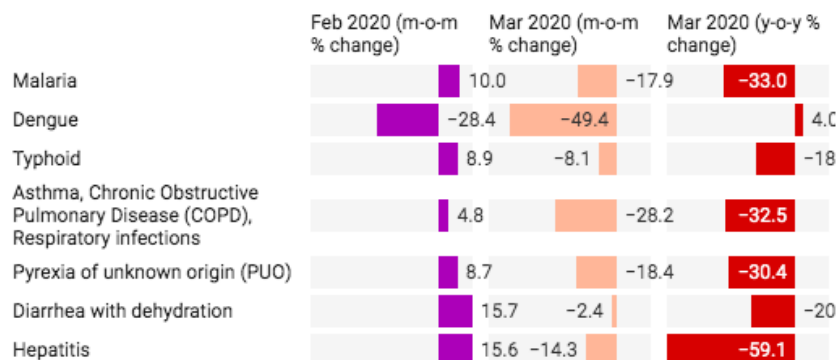
Sexual and reproductive health services



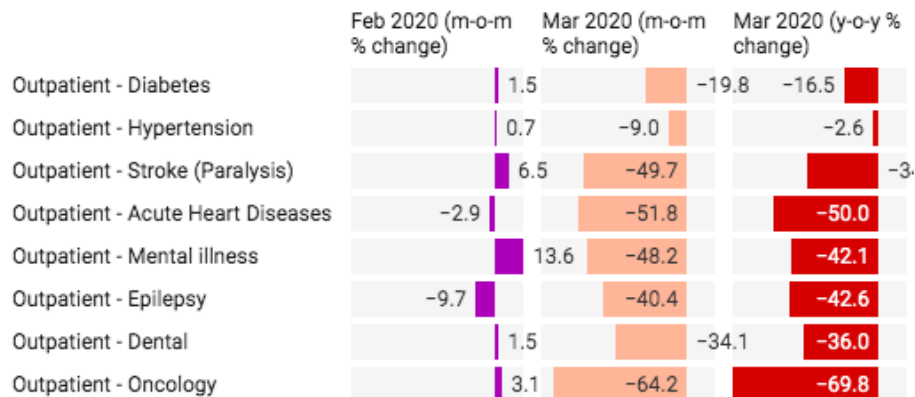
[National Health Mission March 2020](#)

Utilisation of health services in India

Infectious diseases



Non-communicable diseases



Health systems resilience

Capacity of health actors, institutions, and populations to:

- prepare for and effectively respond to crises;
- maintain core functions when a crisis hits; and,
- informed by lessons learned during the crisis, reorganize if conditions require it

Kruk, M. E., M. Myers, S. T. Varpilah, and B. T. Dahn. 2015. "What Is a Resilient Health System? Lessons from Ebola." *Lancet* 385 (9980): 1910–12.

1: Vigilant



President Tsai Ing-wen visits Taiwan's Central Epidemic Command Center for the coronavirus response during the early stages of the pandemic, Feb. 7, 2020.

Credit: [Flickr/ Presidential Office, ROC \(Taiwan\)](#)

2: Responsive



*Medical staff in protective gear in Yeungnam University Medical Drive-Through Centre in Daegu, South Korea, Mar. 3, 2020.
Credit: Kim Kyung Hoon, Reuters*

3: Flexible and Adaptive



An interior view of the temporary “shelter hospital” for COVID-19 patients with mild symptoms at Wuhan Sports Center, Hubei province, Feb. 12, 2020.

Credit: Cheng Min/Xinhua

4: Local community engagement



The Samoohya Sannadha Sena or Community Volunteer Force in Kottayam in Kerala working along with the police authorities in contact tracing and monitoring of isolation at the community level, June. 30, 2020.

Credit: [The News Minute](#)

5: Equitable



A public health worker takes a blood sample from a woman to be tested for malaria in Bo Rai district, Trat province, Thailand.

Credit: [Reuters](#)

Points for Q&A session

- How can we achieve financing for resilient health systems, especially in poor countries?



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Compounded inequities: Health systems and equity issues in the context of COVID-19

Gabriele Koehler

UNRISD; WECF

Home base: Germany



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1) Who is affected?

Direct covid-19 impact

- Persons w. vulnerable health conditions
- Health service professionals
- Key workers
- Marginalised persons
- People facing underequipped systems

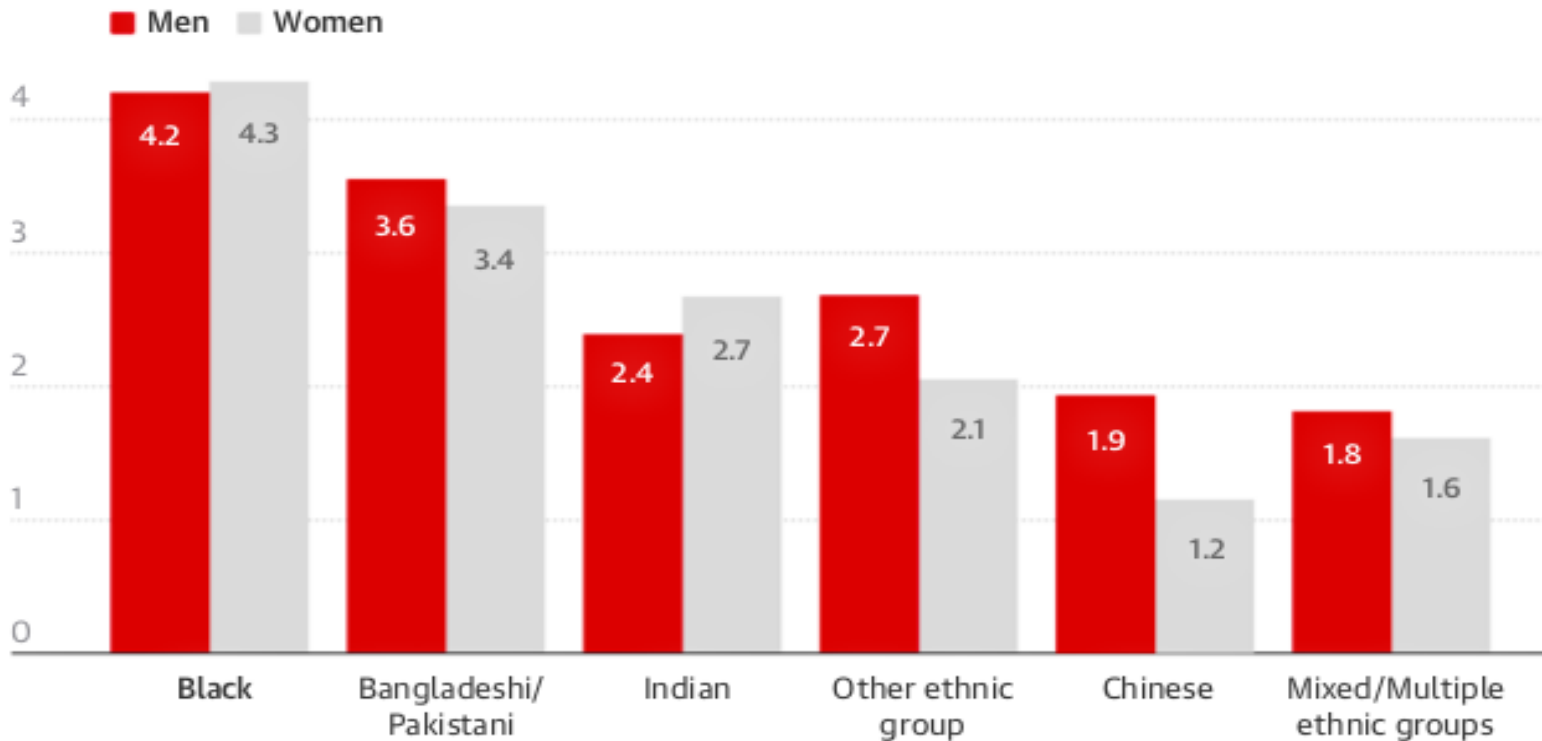
Secondary impact

- Precarious workers: 2.7 billion people without any public support
- 1.6 billion informal sector workers
- Migrant workers/remittance receivers
- Asylum seekers
- Socially excluded communities
- Prisoners
- Providers of unpaid care
- Women subjected to violence
- Children
- People in weak welfare states

Example: UK mortality differences by gender and socio-economic situation

ONS analysis shows that black men are 4.2 times more likely to die from coronavirus than their white counterparts

5 times more likelihood of dying from Covid-19 compared with white ethnicity



Guardian graphic. ONS. Note: Age-adjusted-odds ratios for the risk of death involving Covid-19 by ethnicity, 2 March to 10 April 2020



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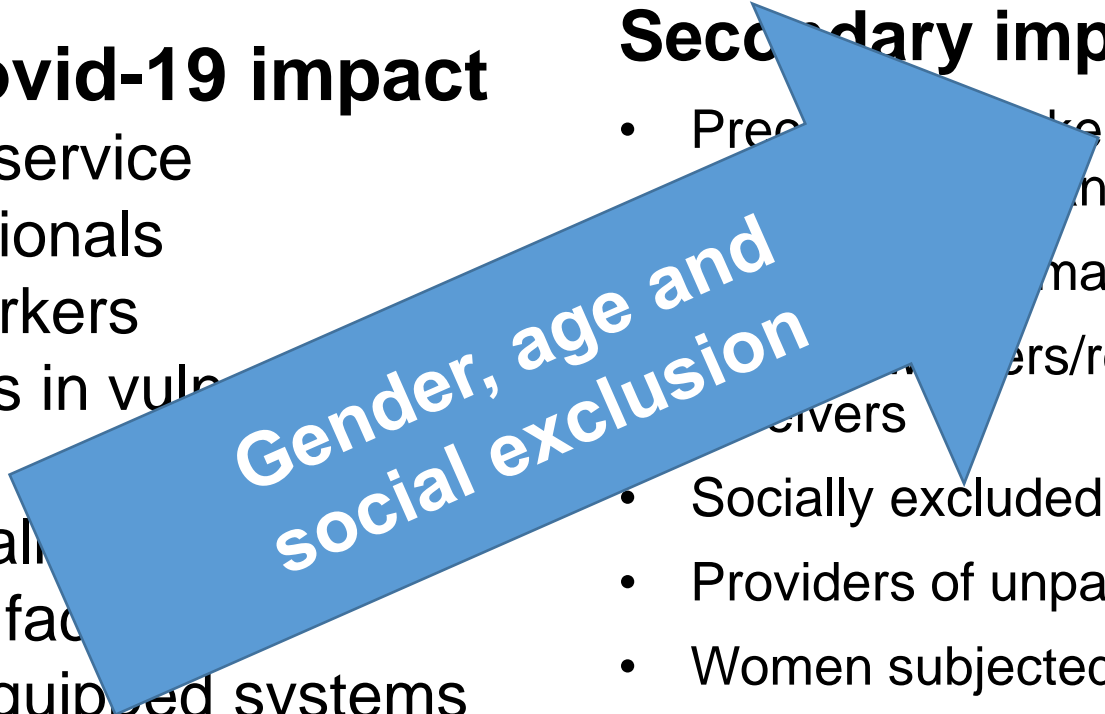
Who is affected?

Direct covid-19 impact

- Health service professionals
- Key workers
- Persons in vulnerable health
- Marginalized groups
- People facing underequipped systems

Secondary impact

- Precarious workers: 2.7 billion
- Lack of any public support
- Informal sector workers
- Migrants/remittance receivers
- Socially excluded communities
- Providers of unpaid care
- Women subjected to violence
- Children
- People in weak welfare states



Gender, age and social exclusion



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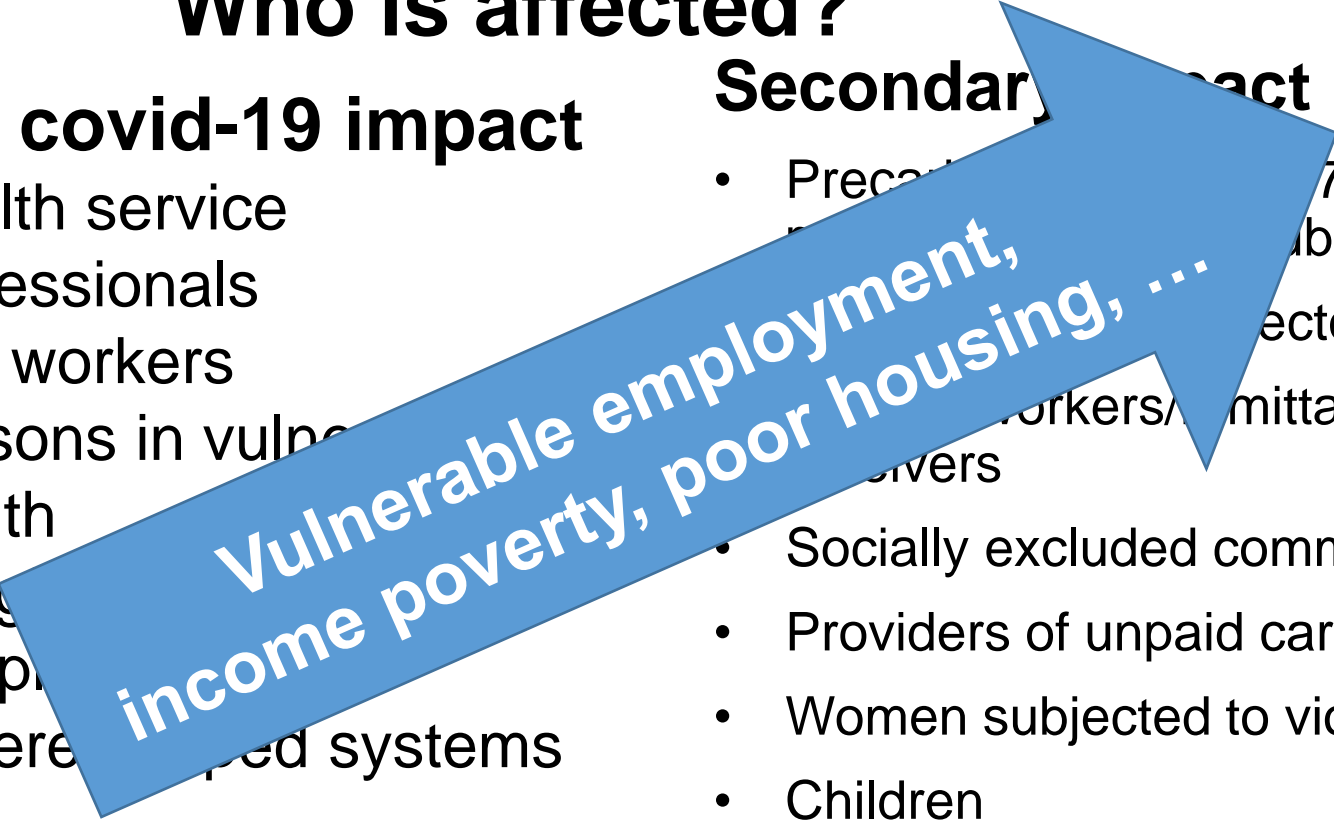
Who is affected?

Direct covid-19 impact

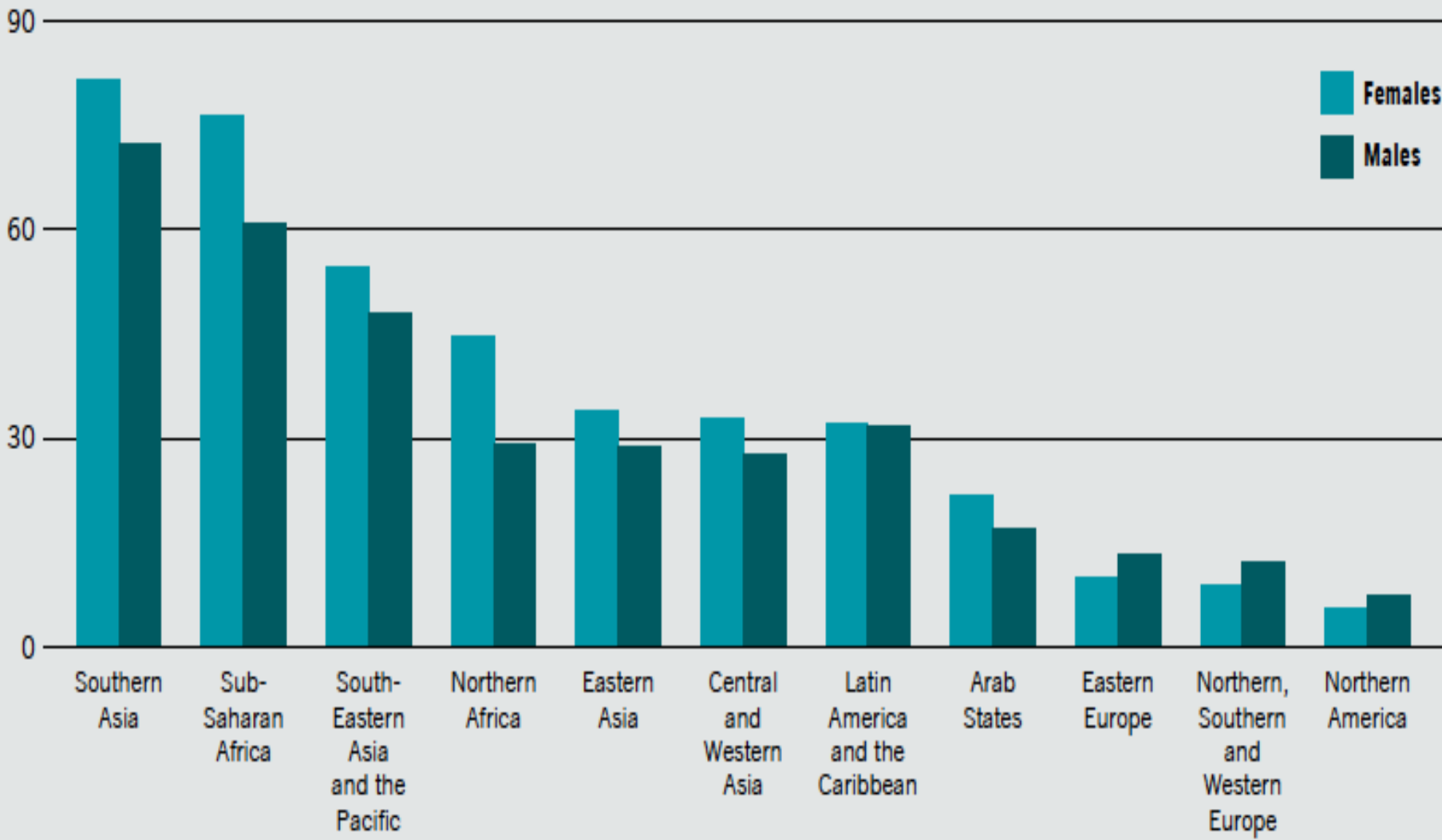
- Health service professionals
- Key workers
- Persons in vulnerable health
- Marginalized groups
- People in underdeveloped systems

Secondary impact

- Precarious employment, 7 billion
- Public support
- Sector workers
- Unemployment
- Socially excluded communities
- Providers of unpaid care
- Women subjected to violence
- Children
- People in weak welfare states



Vulnerable employment rates, by sex and region, 2016 (percentages)



Source: ILO Trends Econometric Models, November 2016.

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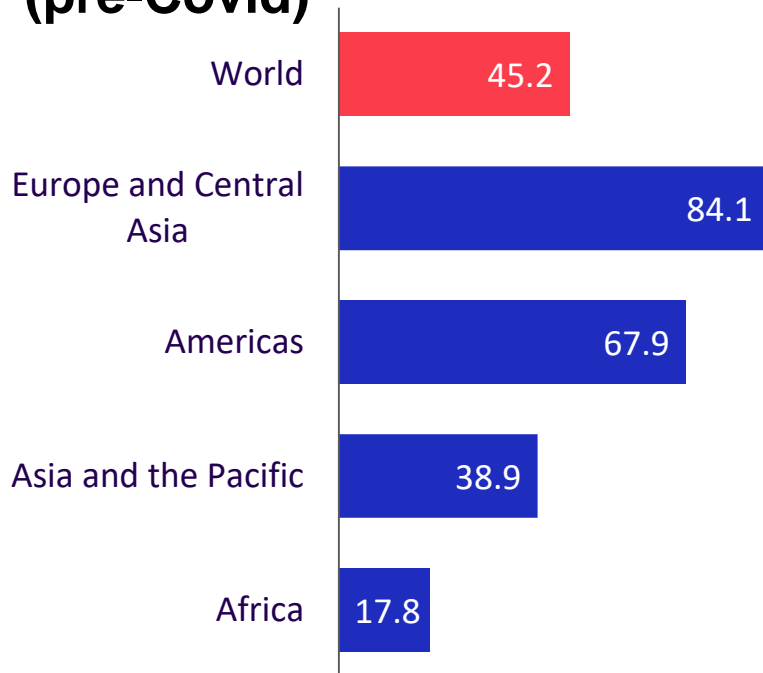


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2) What is happening?

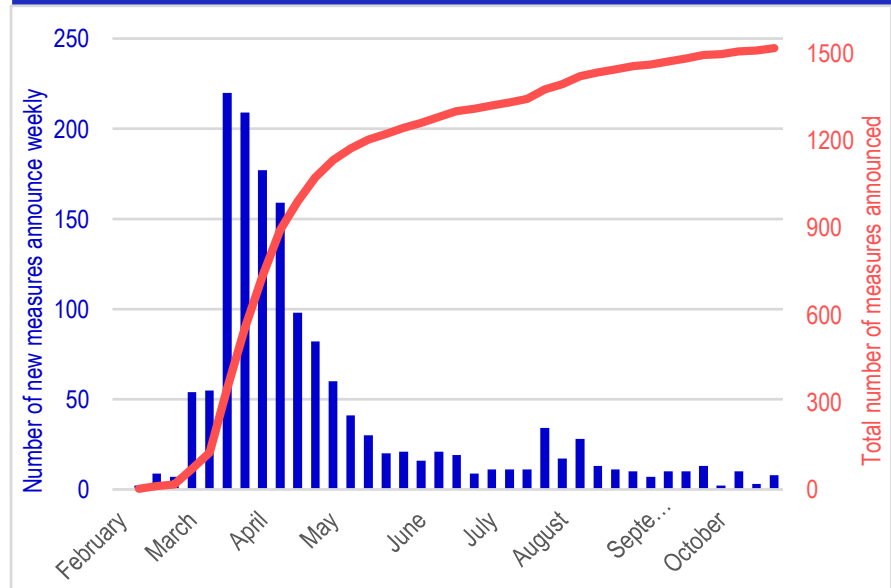
Social protection coverage (pre-Covid)



Source: ILO 2020

Covid-19: Surge in social transfers

Figure 2: Global number of measures announced by date, February – October 2020



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Surge, but:

- Social transfers are short duration
- Transfer amount insufficient
- Informal economy vastly under-covered
- Weak reach: Less than half the workers surveyed reported receiving cash or food in cities where governments announced relief measures.

Photo credit: Benjamin Forson

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\$10.8 trillion

spent on COVID-19 response
in high-income countries (Feb-July 2020)

2%

Financial relief allocated
directly to children
and to families
raising children



Fiscal stimulus
packages directed to,
or through, business

90%

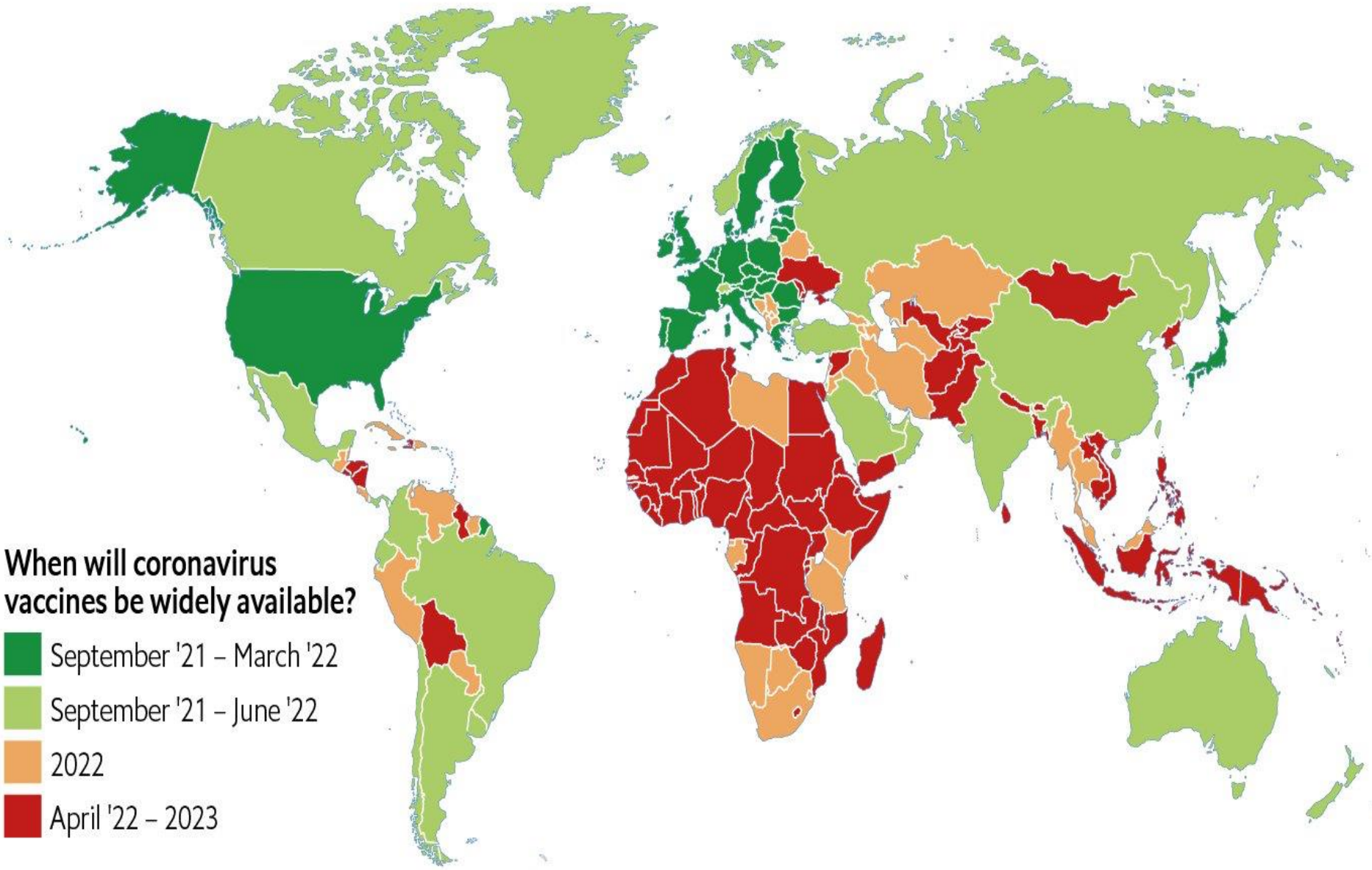
Need a better balance



Surge, but

- rich nations spent US\$ 9.8 trillion in support, much of it to businesses
- low-income countries spent only US\$ 42 billion
- 28 rich countries spent average US\$ 695 per person
- 42 low- or middle-income countries spent only US\$ 4 – US\$ 28 per person.

Rich countries will get access to coronavirus vaccines earlier than others



When will coronavirus vaccines be widely available?

- September '21 - March '22
- September '21 - June '22
- 2022
- April '22 - 2023

Source: The Economist Intelligence Unit.

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3) What do we want?

- **Universal right to health services and social protection: UN Bill of Rights & Conventions**
- **5 SDG targets relate to health coverage and social protection**



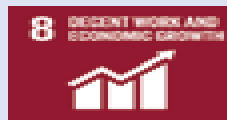
Target 1.3 – Implement nationally appropriate **social protection systems and measures for all**, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable.



Target 3.8 – Achieve **universal health coverage**, including **financial risk protection**, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.



Target 5.4 – **Recognize and value unpaid care and domestic work** through the provision of public services, infrastructure and **social protection policies** and the promotion of shared responsibility within the household and the family as nationally appropriate.



Target 8.5 – By 2030, **achieve full and productive employment and decent work for all women and men**, including for young people and persons with disabilities, and equal pay for work of equal value. *[Social protection is one of the four pillars of decent work.]*



Target 10.4 – **Adopt** policies, especially fiscal, wage and **social protection policies**, and **progressively achieve greater equality**.



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Overcome compounded inequities!

- ❖ **Integrated well-funded health systems & universal unconditional social protection**
With surge capacity for disasters & pandemics
- ❖ **Strong redistributive welfare states**
- ❖ **Social inclusion: agency, coverage**
- ❖ **Functioning parliaments and civil society to know, claim and monitor rights**
- ❖ **Intra-country and inter-country justice & global policy coherence**

Resources

Databases/toolkits:

Diyana Yahaya 2020. Feminist Response to COVID-19. Another World is Possible. A Toolkit

<https://www.feministcovidresponse.com/toolkit/>

ILO, 2020. Social protection responses to the COVID-19 crisis around the world. https://www.ilo.org/secsoc/information-resources/publications-and-tools/Brochures/WCMS_742337/lang--en/index.htm

UN Women, 2020. COVID-19 Global Gender Response Tracker . <https://www.google.com/search?client=safari&rls=en&q=COVID-19+Global+Gender+Response+Tracker&ie=UTF-8&oe=UTF-8>

Ugo Gentilini, 2020. Social Protection and Jobs Responses to COVID-19: A Real-Time Review of Country Measures : “Living paper”
<https://socialprotection.org/discover/publications/social-protection-and-jobs-responses-covid-19-real-time-review-country>

Papers:

Des Gasper, Richard Jolly, Gabriele Koehler, Tamara A. Kool, Mara Simane, 2020. Shake and Stir: Adding Human Security and Human Resilience to Help Advance the SDGs Agend. <https://www.jahss-web.org/single-post/journal-of-human-security-studies-vol-9-no-3-2020>

Gabriele Koehler. 2020. Creative Coalitions in a Fractured World. An Opportunity for Transformative Change? Occasional Paper No. 4/2020. [http://www.unrisd.org/80256B3C005BCCF9/\(LookupAllDocumentsByUNID\)/417FBF2DAFF3A3AF80258504005618D7?OpenDocument](http://www.unrisd.org/80256B3C005BCCF9/(LookupAllDocumentsByUNID)/417FBF2DAFF3A3AF80258504005618D7?OpenDocument)

Gabriele Koehler. 2020. Our Common Right to Health. [UNRISD Covid-19 series](https://www.unrisd.org/covid-19-right-to-health). 8 April 2020. <https://www.unrisd.org/covid-19-right-to-health>.

OXFAM 2020. Shelter from the storm. The global need for universal social protection in times of COVID-19 .
<https://oxfamilibrary.openrepository.com/bitstream/handle/10546/621132/bp-social-protection-covid-19-151220-en.pdf>

UNICEF IRC, 2020. Supporting Families and Children Beyond COVID-19. *Social protection in high-income countries*
<https://www.unicef-irc.org/publications/1165-supporting-families-and-children-beyond-covid-19-social-protection-in-high-income-countries.html>

UN Women 2020. Policy Brief: The Impact of COVID-19 on Women. <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/policy-brief-the-impact-of-covid-19-on-women-en.pdf?la=en&vs=1406>

WIEGO 2020. Informal Workers See a Long Road to Recovery Ahead — Unless Governments Act <https://www.wiego.org/blog/informal-workers-see-long-road-recovery-ahead-unless-governments-act>

Winnie Byanyima, 2020. We must have a #PeoplesVaccine, not a profit vaccine
https://www.unaids.org/en/resources/presscentre/featurestories/2020/december/20201209_we-must-have-a-peoples-vaccine



PowerPoint slides
and Webinar
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available via:

www.cih.lmu.de

Thank You !