

FIGHTING THE GLOBAL COVID-19 PANDEMIC

Even with the successful deployment of vaccines in the United States, Americans will not be safe and healthy, and our economy will not fully recover, until COVID-19 is under control around the world as new, more dangerous variants of the virus continue to spread around the world. USGLC's [Roadmap for U.S. Global Leadership](#): Report on Reports identified several areas of consensus on the U.S. global pandemic response in a review of recommendations by over 120 think tanks across the political spectrum ahead of the 2020 presidential election:

- Strengthening U.S. pandemic preparedness;
- Reforming multilateral efforts to prevent global pandemics;
- Ensuring global equitable vaccine distribution;
- Improving coordination across U.S. global health policymaking process; and
- Increasing investments in strengthening health systems in low-income countries.

BY THE NUMBERS:

- **\$16.1 trillion:** Estimated [global economic cost](#) of the COVID-19 pandemic, including lost GDP, premature death, and long-term health and mental health costs.
- **130 million:** The [UN warns](#) that three dozen countries could experience famines in 2021 due to humanitarian crises compounded by COVID-19, pushing an additional 130 million people to the brink of starvation.
- **228 million:** [60 mass immunization campaigns are currently postponed](#) in 50 countries due to COVID-19 disruptions, putting 228 million people, mostly children, at risk of preventable diseases such as measles, yellow fever, and polio.
- **2%:** Percentage of the population across the African continent that has received a COVID-19 vaccine.

STRENGTHENING U.S. PANDEMIC PREPAREDNESS

The COVID-19 global pandemic highlighted the need for investments in pandemic preparedness at home and globally ahead of future pandemics, including early warning systems, surge capacity for personal protective equipment and vaccine and test manufacturing, and strengthening local health systems.

Key Facts:

- Due to decreases in funding, the [number of countries in which the CDC was working fell from 49 to approximately 10](#), eroding local public health efforts and preparedness capacities around the world, and reducing critical early detection of disease events.
- More than 70 percent of production facilitators supplying critical products, such as masks, gowns, and APIs— the part of a pharmaceutical product that contains the active drug -- have moved offshore increasing the risk of shortages.

- The [Report of the Bipartisan Commission on Biodefense](#) included 87 recommended action items in response to the COVID-19 pandemic in March 2021: to date, the U.S. government has only completed 3, taken some action on 54, taken no action on 24, and taken emergency or crisis actions on 6.

REFORMING MULTILATERAL EFFORTS TO PREVENT GLOBAL PANDEMICS

In May 2021, an [Independent Panel for Pandemic Preparedness and Response](#) completed an eight month examination of the COVID-19 crisis and is finalizing recommendations for reforms to [the international treaty](#) that governs preparedness and response to health emergencies. Reforms include establishing a Global Health Threats Council, forming WHO's financial independence, and creating a new alert and surveillance system for outbreaks allowing WHO to immediately dispatch investigators and publish information without countries' approval, among others.

Key Facts:

- Since March 2020, WHO has shipped more than 289 million items of PPE, diagnostic, and medical supplies around the world and reached 1.3 billion people with crucial health information through the WHO website to combat the COVID-19 pandemic.
- WHO created a new repository for specimens to facilitate the voluntary sharing of viruses and the rapid development of medical countermeasures, [BioHub](#), in November 2020.
- WHO established the [One Health High-Level Expert Council](#) to analyze scientific evidence and policy responses to the more than 70% of emerging diseases discovered in recent years linked to animal-to-human transmission.

ENSURING GLOBAL EQUITABLE VACCINE DISTRIBUTION

As of June 2021, the entire continent of Africa had administered just [2% of the world's vaccine doses](#) and poorer countries, [including Haiti, have yet to receive a single vaccine dose](#). The United States is the largest donor to COVAX, coordinated by CEPI and GAVI, created to ensure equitable access to COVID-19 vaccines, and has committed [500 million doses](#) to ensure lower-income economies have equitable and prompt access to safe and effective COVID-19 vaccines.

Key Facts:

- For every \$1 spent on immunization, the [return on investment is \\$54](#) in terms of costs averted and people living longer and healthier lives.
- The ACT or Access to COVID-19 Tools Accelerator is making 120 million affordable, quality COVID-19 rapid tests available for low- and middle-income countries and has secured therapeutics for up to 2.9 million patients.
- [COVAX](#) has shipped over 88 million COVID-19 vaccines to 131 participating countries as of June 2021, including [250,000 to Syria](#) to inoculate the country's frontline health workers.
- The International Chamber of Commerce estimates failing to distribute vaccines equitable around the world could cost the global economy \$9 trillion.

IMPROVING COORDINATION ACROSS U.S. GLOBAL HEALTH PROCESS

20 U.S. departments and agencies currently carry out global health policy, overseen by multiple Congressional committees -- including the Departments of State, Health and Human Services, Defense, Agriculture, Treasury, Labor, Commerce and Homeland Security and agencies including the U.S. Agency for International Development, Centers for Disease Control, and National Institute of Health.

Key Facts:

- PEPFAR, run across eight U.S. government agencies, has saved 20 million lives in more than 50 countries since 2003 and provides life-saving treatment to 50% more men, women, and children than four years ago. PEPFAR was associated with a [13% increase in employment](#) among males.
- Over [10,000 U.S. Government-supported personnel](#) participated in the 2014-2015 Ebola response in West Africa by treating patients, facilitating the construction of 15 Ebola treatment units, tracing contacts, promoting safe burials, educating communities, airlifting more than 400 metric tons of PPE, and galvanizing over 62 countries to contribute more than \$2 billion.
- USAID responded to 42 outbreaks through the [PREDICT](#) initiative first launched in 2009, helping nearly 30 countries detect and discover viruses that could become pandemics.

INCREASING INVESTMENTS IN STRENGTHENING HEALTH SYSTEMS IN LOW-INCOME COUNTRIES

Many low- and middle-income countries lack strong health systems to prevent or respond to global pandemics. Evidence-based investments in the core functions of health systems has saved tens of millions of lives and builds resilience against future diseases, as shown in West African countries which had strong PEPFAR programs when faced with the Ebola crisis in 2015.

Key Facts:

- [83 countries still fail to meet the basic standard](#) for health care workers of 23 skilled professionals per 10,000 people.
- For each \$1 invested in improving health and disease prevention, a [McKinsey study](#) has estimated a potential economic return of between \$2 to \$4 in low-income countries.
- Early childhood deaths have [declined from 12 million per year to 5.3 million](#) since 1990, driven by USAID's multi-faceted and collaborative health systems strengthening approaches.

BIPARTISAN CONSENSUS:

- **Senator Bob Menendez (D-NJ):** “Families concerned about the novel coronavirus threat need to know the NSC has a dedicated, senior official with appropriate expertise and authority to address the domestic and global health threats from the virus. It is of paramount importance that this person approaches this role through a public health lens.”
- **Senator Jim Risch (R-ID):** “In order to better detect, deter, and contain infectious disease outbreaks before they become global pandemics, we need a strategically planned, carefully coordinated approach toward global health security that closes the gaps that threaten us all. I’m glad to introduce the GHSDA as a first step towards that goal.”
- **Rep. Gregory W. Meeks (D-NY):** “We also recognize that this coronavirus is the latest in a growing trend of outbreaks that threaten to spread rapidly and have devastating impacts. Recent outbreaks of SARS, Ebola, Zika, and COVID have all brought home lessons in pandemic preparedness, but they must be taken to heart. Global health security is in America’s interest - preparing now for what will inevitably come is essential for our national security.”
- **Rep. Michael McCaul (R-TX):** “Last year, I had the honor to meet with the President of Botswana. He told me that thanks to the PEPFAR program, the U.S. saved a generation of Botswanans from extinction. Very profound. We can, and should, be proud of America’s continued leadership on these issues.”