Meeting Report

AD HOC VIRTUAL MEETING ON COVID-19 CALLING FOR SOLIDARITY TO ENHANCE THE ROLE OF PARLIAMENTARIANS IN THE COVID-19 RESPONSE



23 April 2020 Manila, Philippines





AD HOC VIRTUAL MEETING ON COVID-19

Calling for Solidarity to Enhance the Role of Parliamentarians in the COVID-19 Response
23 April 2020

MEETING REPORT

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Annex 1. Programme

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Keywords: Coronavirus Infections / Infection Control / Disease Outbreaks / COVID-19 / Betacoronavirus

SUMMARY

On 23 April 2020, the Asia-Pacific Parliamentarian Forum on Global Health (APPFGH) convened an ad hoc virtual meeting towards enhancing the role of parliamentarians in the response to coronavirus disease 2019 (COVID-19). In all, 30 parliamentarians participated from 20 countries. The meeting was chaired by the Honourable Professor Keizo Takemi, President of APPFGH, with support from the World Health Organization (WHO).

The meeting objectives were:

- 1. to obtain updated technical information from WHO on the COVID-19 situation;
- 2. to share experiences on parliamentary actions relating to COVID-19; and
- 3. to consider how the Forum can support these efforts.

WHO provided updates on technical issues, the regional response to COVID-19 and support for Member States. Participants, with presentations from Fiji, Japan, Mongolia, the Philippines and the Republic of Korea, shared experiences of parliamentary actions relating to COVID-19 in their countries and considered how the Forum can support these efforts. They encouraged fellow parliamentarians to support national and regional efforts by: developing or amending legislation to address and enable COVID-19 responses; discussing plans and financing for COVID-19 responses, social protection and other economic measures; responding to issues raised by constituents in relation to COVID-19; strengthening institutional mechanisms within parliaments to coordinate COVID-19 issues; and collaborating with ministries to provide oversight on COVID-19 responses, including issues related to limitations on power, human rights, protection of marginalized populations and leaving no one behind. Participants called for solidarity among parliamentarians and countries in responding to COVID-19. Finally, participants emphasized the importance of countries collaborating with one another and with WHO to facilitate an effective, equitable, coordinated and sustainable response.

Moving forward, WHO welcomed engagement and input from parliamentarians on country actions to combat COVID-19 and committed to continue supporting the Forum by sharing technical information, providing technical guidance and facilitating communication between Forum members, particularly on legislative changes related to the COVID-19 response.

1. INTRODUCTION

The Asia-Pacific Parliamentarian Forum on Global Health (APPFGH) is a platform for parliamentarians to exchange ideas, build political will, strengthen capacities and foster collaboration in driving sustainable action for health. Established in 2015 with technical support from the World Health Organization (WHO) Regional Office for the Western Pacific (WPRO) and other partners, the Forum is open to the 30 countries comprising the Member States of the WHO Western Pacific Region and the Association of Southeast Asian Nations (ASEAN).

Strategically positioned to help align global health mandates with regional and domestic priorities and to facilitate national implementation of international health commitments, the Forum is an important part of WHO assistance to Member States in the Region in championing health beyond the health sector and taking a whole-of-government approach to enhance the rule of law in health governance and expand the role of law in health policy.

On 7 January 2020, Chinese authorities identified a novel coronavirus from a cluster of pneumonia cases of unknown etiology in Wuhan, the capital city of Hubei province. On 30 January 2020, WHO declared COVID-19 a public health emergency of international concern, then a pandemic on 11 March 2020. As of 22 April 2020, 2 237 511 cases and 165 327 deaths were reported globally.

Measures to control initial cases and localized outbreaks of COVID-19 involve active surveillance, contact tracing, isolation, quarantine and laboratory confirmation of each case. These measures are intense and challenging to sustain over time, particularly in resource-limited settings. Where the virus has spread widely in the general community, control measures are no longer practical. Instead, authorities focus resources on non-pharmaceutical interventions to reduce transmission and measures aimed at mitigating the impact on health-care systems and societies.

WHO has coordinated technical support to countries in responding to COVID-19. Member States of the Region are guided to strengthen core capacities for detection and response by the WHO Western Pacific Regional Action Plan for Response to Large-Scale Community Outbreaks of COVID-19 (2020). Strengthening these core capacities, as mandated by the International Health Regulations, or IHR (2005), has enabled the Region to be more prepared to manage the challenges posed by public health emergencies. These capacities and the systems they support will be tested in the months to come as the world prepares to manage large-scale community outbreaks of COVID-19.

1.1 Meeting organization

To enhance the role of parliamentarians in supporting the COVID-19 response, the Forum convened an ad hoc virtual meeting on 23 April 2020. The meeting was chaired by the Honourable Professor Keizo Takemi, President of APPFGH, with technical and administrative assistance by the WHO Regional Office for the Western Pacific as Secretariat to the Forum. The meeting was organized as a live videoconference through an online communications platform. The meeting programme is available in Annex 1.

The meeting was attended by 30 parliamentarians from 20 countries, including Australia, Cambodia, Cook Islands, Fiji, Japan, the Lao People's Democratic Republic, the Marshall Islands, the Federated States of Micronesia, Mongolia, New Zealand, Palau, Papua New Guinea, the Philippines, the Republic of Korea, Samoa, Solomon Islands, Thailand, Tonga, Tuvalu and Viet Nam. A list of participants is available in Annex 2.

1.2 Meeting objectives

The objectives of the meeting were:

- 1. to obtain updated technical information from WHO on the COVID-19 situation;
- 2. to share experiences on parliamentary actions relating to COVID-19; and

3. to consider how the Forum can support these efforts.

2. PROCEEDINGS

2.1 Block A: Opening

Dr Liu Yunguo, Director of Programme Management, WHO Regional Office for the Western Pacific, called the meeting to order and gave an overview of the meeting agenda.

The Honourable Professor Keizo Takemi, President of APPFGH, WHO Goodwill Ambassador for Universal Health Coverage and Member of the House of Councillors of the National Diet of Japan, delivered opening remarks. He said that he looked forward to the virtual meeting as a timely opportunity for parliamentarians to strengthen their solidarity to encourage the people and governments to collaborate in the battle against COVID-19. He also noted that the meeting will confirm the important role that WHO must play as a catalyst for government action, as well as a provider of technical assistance and medical supplies to countries.

Dr Poonam Khetrapal Singh, WHO Regional Director for South-East Asia, delivered opening remarks. She thanked parliamentarians for their support and engagement, which will be especially needed as Member States plan for the next phase. The national preparedness and response plans that WHO and Member States developed will be crucial. She urged the Forum to help familiarize and engage parliamentarians on these plans and strategies as part of its ongoing mission in these exceptional times. Given that parliamentarians are familiar with national health priorities and have significant health policy experience, they are well positioned to help ensure essential services are maintained, thereby protecting and defending progress. She encouraged the Forum to mobilize parliamentarians accordingly and to disseminate WHO's recently published guidelines on this vital need. She also noted that parliamentarians can make positive contributions to policy on the many factors that impact health, such as trade, industry, finance, education, agriculture and population movement. This crisis goes well beyond the immediate threat of the virus and will contribute to a range of health risks, from malnutrition due to food insecurity to the mental health impacts of unemployment and diminished economic prospects. Parliamentarians must be encouraged to marshal the full weight of their knowledge and expertise to get behind national responses. At this unprecedented moment, all countries must come together to identify and develop policy solutions that address the many issues that they face and that will enable them to deal with COVID-19 for as long as they need to. Solidarity is not only a moral good but also an operational imperative. She urged the Forum to continue to leverage the talent and skill of parliamentarians as part of a comprehensive, whole-of-government, whole-of-society approach to combating COVID-19.

Dr Takeshi Kasai, WHO Regional Director for the Western Pacific, delivered opening remarks. He expressed his sincere condolences to everyone who has been affected. He emphasized the need to be prepared should the next epicentre be back in this region, to continue efforts to suppress the outbreak and to prepare for large-scale community transmission. He recalled that the establishment of the Forum was led by Korean parliamentarians, who at the time had just experienced an outbreak of Middle East respiratory syndrome coronavirus (MERS-COV), and that the technical theme of the first APPFGH meeting was global health security. Now, countries are being challenged in ways that nobody could have expected, and health systems are being tested like never before. Since this outbreak began, a clear, common message from Member States has surfaced: We are in this pandemic together, and we can only get out together. Solidarity is needed to support countries that have limited capacity. Governments in the Western Pacific Region are making extremely complex decisions about introducing, enhancing, easing or lifting quarantine restrictions and physical distancing measures. Working together in this difficult time, health systems and approaches to stopping transmission must continue to adapt and evolve, along with the epidemic. This will require strong leadership of parliamentarians. He emphasized the long-recognized role of parliamentarians in achieving effective public health outcomes, which is true now more than ever before.

2.2 Block B: Technical updates on COVID-19

Dr Tran Thi Giang Huong, Director of Programmes for Disease Control and Acting Director of Health Emergencies, WHO Regional Office for the Western Pacific, delivered a presentation on the COVID-19 situation in Asia and the Pacific. She provided an update on global data, as at the time of the meeting, which showed more than 2.5 million cases and 170 000 deaths from 212 countries, the fatality rate reaching 7%. The spread is expanding with no signs of slowing in many parts of the world, the epicentre shifting from China to Europe and North America and likely to shift to other regions. In the Western Pacific Region, over 137 000 cases and 5800 deaths have been reported in 22 countries and areas, representing a fatality rate of 4.2%. In the South-East Asia Region, more than 22 000 cases and 1400 deaths from 10 countries have been reported. The so-called take-off curve in some countries, such as the United States of America, Spain, Italy and China, shows a doubling of reported cases every 3 days, while in other countries, such as Singapore, Japan, the Philippines, Indonesia and Thailand, the curve doubled every 10 days. After a sharp initial increase, countries including China, Australia and the Republic of Korea were able to "flatten the curve". Guam has reported fewer than 100 cases, which represent nearly 80% as a proportion of the population, while by comparison China has reported over 80 000 cases, which represent less than 6% of the population. Transmission occurs in three stages: Stage 1 includes primarily imported cases with no known epidemiological link; Stage 2 includes localized community transmission, with exported cases, increased cases with increased testing; and Stage 3 includes large-scale community transmission, with high proportion of occupied hospital beds and intensive care units, shortage of health care workers, leading to an overwhelmed health system. In some countries, such as China, the Republic of Korea, Australia and New Zealand, the epidemic curve was flattened. Other countries are fluctuating. For example, Singapore initially showed a successful reduction in spread but is now dealing with a second wave affecting foreign workers in dormitories. This reminds us that success still requires continued efforts in surveillance, early detection, contact tracing, isolation and quarantine, and other public health and social measures to prevent and prepare for large-scale community transmission.

Mr Martin Taylor, Director of Health Systems and Services, WHO Regional Office for the Western Pacific, delivered a presentation on WHO support to countries in responding to COVID-19. As set forth in the *Asia Pacific Strategy for Emerging Diseases and Public Health Emergencies* (APSED III), Mr Taylor described complex factors necessitating a renewed whole-of-health-system and whole-of-society approach for infectious disease control, such as technical innovations, evolution in access to information, urbanization, antimicrobial resistance, international trade, movement of people, social protection of the most vulnerable populations, as well as lessons from the MERS-CoV and Ebola outbreaks in recent years. Countries have taken unprecedented measures in responding to COVID-19, including closure of schools, workplaces, public events and public transportation, which buys critical time to prepare health systems for large-scale transmission. Countries have shown an unprecedented high level of commitment and solidarity between nations, as most recently exemplified at a virtual meeting of health ministers of the Western Pacific Region convened by WHO. Though not unique, Viet Nam is an example of coordinated government action led by the Prime Minister with multisectoral cooperation on surveillance, treatment, communications and logistics. WHO recently published the

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