The G7 Research Group presents the

**2021 G7 Cornwall Summit Interim Compliance Report**

14 June 2021 to 1 February 2022

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“We have meanwhile set up a process and there are also independent institutions monitoring which objectives of our G7 meetings we actually achieve. When it comes to these goals we have a compliance rate of about 80%, according to the University of Toronto. Germany, with its 87%, comes off pretty well. That means that next year too, under the Japanese G7 presidency, we are going to check where we stand in comparison to what we have discussed with each other now. So a lot of what we have resolved to do here together is something that we are going to have to work very hard at over the next few months. But I think that it has become apparent that we, as the G7, want to assume responsibility far beyond the prosperity in our own countries. That’s why today’s outreach meetings, that is the meetings with our guests, were also of great importance.”

Chancellor Angela Merkel, Schloss Elmau, 8 June 2015

G7 summits are a moment for people to judge whether aspirational intent is met by concrete commitments. The G7 Research Group provides a report card on the implementation of G7 and G20 commitments. It is a good moment for the public to interact with leaders and say, you took a leadership position on these issues — a year later, or three years later, what have you accomplished?

Achim Steiner, Administrator, United Nations Development Programme,
in *G7 Canada: The 2018 Charlevoix Summit*
Contents
Introduction ............................................................................................................................................. 3
Research Team ......................................................................................................................................... 4
  Compliance Directors .......................................................................................................................... 4
  Lead Analysts ....................................................................................................................................... 4
  Compliance Analysts .......................................................................................................................... 4
Summary ................................................................................................................................................ 6
  The Interim Compliance Score .......................................................................................................... 6
  Compliance by Member ...................................................................................................................... 6
  Compliance by Commitment .............................................................................................................. 6
  The Compliance Gap Between Members .......................................................................................... 6
Future Research and Reports ................................................................................................................. 6
  Table A: 2021 Priority Commitments Selected for Assessment ...................................................... 7
  Table B: 2020 G7 Cornwall Interim Compliance Scores .................................................................. 9
  Table C: 2020 G7 Cornwall Interim Compliance Scores by Member ............................................... 10
  Table D: 2020 G7 Cornwall Interim Compliance Scores by Commitment ....................................... 11
1. Health: Vaccines ................................................................................................................................. 12
2. Health: Vaccine Equity ...................................................................................................................... 44
3. Health: Disease Prevention ............................................................................................................... 55
4. Health: Indirect Impacts of COVID-19 ............................................................................................ 78
5. Climate Change: Zero Emission Vehicles ..................................................................................... 111
6. Agriculture, Forestry and Land Use ............................................................................................... 131
8. Environment: Halting and Reversing Biodiversity Loss ................................................................ 176
9. Environment: Marine Health and Litter ......................................................................................... 201
10. Energy: Renewables ......................................................................................................................... 226
11. Energy: Coal .................................................................................................................................... 249
12. Trade: Free Trade ............................................................................................................................ 276
13. Gender: Education Equality .......................................................................................................... 298
14. Democracy: China ........................................................................................................................... 315
15. Regional Security: Addressing Instability ................................................................................... 333
16. Development: Sustainable Growth in Africa ................................................................................. 368
17. Infrastructure: Build Back Better .................................................................................................... 386
19. Digital Economy: Open Internet .................................................................................................... 427
20. Macroeconomics: Strong, Resilient, Sustainable, Balanced and Inclusive Growth .................... 446
22. International Cooperation: Research and Knowledge Sharing .................................................. 530
3. Health: Disease Prevention

“We pledge to lead the way in building a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease, and to detect emerging health threats quickly.”

*G7 Carbis Bay Health Declaration*

**Assessment**

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**Background**

The continuous challenge of the coronavirus disease (COVID-19) has increased the necessity for health systems that can effectively respond to large scale pandemics. The importance of health systems and the prevention of emerging infectious diseases has been a consistent subject at the G7 Summits. The earliest health commitment on a Summit agenda was the response to the HIV/AIDS epidemic at the 1987 Venice Summit. The priority of this Summit was to prevent further escalation of the disease by “strengthening existing organizations by giving them full political support and by providing them with the necessary financial, personnel and administrative resources.” The G7 also looked to the World Health Organization (WHO), stating that “the World Health Organization (WHO) is the best forum for drawing together international efforts on a worldwide level to combat AIDS.” Since then, the WHO has worked with the G7 to establish quicker and more effective responses to emerging health threats.

The COVID-19 pandemic has highlighted the discrepancies in treatment and healthcare among different socioeconomic groups, with the United Nations declaring that “while the impact of the pandemic will vary from country to country, it will most likely increase poverty and inequalities at a global scale.” This has required more emphasis from the G7 to commit to facilitating a more inclusive and diversified health system as “attention will need to be placed on populations for whom this emergency compounds pre-existing marginalization, inequalities and vulnerabilities.” Accomplishing this will require learning from the current pandemic to better handle future infectious diseases in terms of being able to identify them and respond to them appropriately.

At the 2003 Evian summit, G8 leaders emphasized the importance of strengthening health systems as a framework for increasing access of the neediest populations of developing countries to health care, drugs and

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treatments. The G8 leaders committed to supporting and financing health care, stating that “these efforts are essential to improving access and quality of health care in poor countries.”

At the 2006 St. Petersburg Summit, G8 leaders formed a response to the threat of infectious diseases due to the emergence of highly pathogenic avian influenza, with the accompanying possibility of a human pandemic. The Summit also focused on least developed countries, particularly in Africa where there is limited access to healthcare resources, information, and workforce, as well as basic needs such as food, water, and sanitation. The G8 leaders thus committed to strengthening the Global Network for Surveillance and Monitoring of Infectious Diseases as well as increasing global preparedness for a human pandemic.

At the 2016 Ise-Shima Summit, the G7 leaders committed to take “concrete actions for advancing global health.” In response to the emerging Ebola and Zika viruses, the G7 leaders agreed to improve prevention of, detection of and response to public health emergencies. This involved recognizing that the WHO should play a key leading and coordinating role in the event of an outbreak, for prompt detection, containment and control of public health emergencies particularly in the early stage.

At the 2017 Taormina Summit, the G7 leaders committed to “strengthening health systems, preparedness for, and a prompt, effective and coordinated response to public health emergencies and long-term challenges.” They called for Health Ministers to follow up on these issues during the 2017 G7 Health Ministers’ meeting in November.

Following the G7 Taormina Summit, the G7 Health Ministers met in Milan to better prepare health systems to respond collectively to present and future threats. This included “encouraging health service delivery systems to be diversity-, gender- and age-sensitive,” as well as taking into consideration “cultural background without discrimination.” G7 Health Ministers aimed to “reduce global inequalities and to improve the health of all individuals throughout their life course through inclusive health services.”

At the 2018 Charlevoix Summit, G7 leaders committed to “supporting strong, sustainable health systems that promote access to quality and affordable healthcare.” G7 leaders also recognized the role of the WHO in health emergencies, as well as the need for further development and sustainable financing through the Contingency Fund for Emergencies and the World Bank’s Pandemic Emergency Financing Facility.

At the 2020 US Virtual Summit, G7 leaders met virtually due to the COVID-19 pandemic and pledged “to protect the health and safety of everyone in our countries.” This included enhancing efforts to strengthen health systems globally as well as supporting the WHO’s global mandate to “lead on disease outbreaks and emergencies with health consequences, leaving no geographical vacuum, and encouraging all countries,

international organizations, and the private sector to assist global efforts such as the Global Preparedness and Response Plan.”

**Commitment Features**

At the 2021 Cornwall Summit, the G7 leaders committed to take action on disease prevention. This commitment can be broken down into three parts and to receive full compliance, G7 members must take action in all aspects of the commitment. These parts are: 1) “building a resilient, integrated and inclusive global health system,” 2) this global health system needs to be “prepared and equipped to prevent the causes and escalation of disease,” and 3) this system must “detect emerging health threats quickly.”

The WHO suggests that “global health systems” should be based upon the core principles of primary health care as defined at the International Conference on Primary Health Care - Alma-Ata in 1978. These principles include: “universal access and coverage on the basis of need; health equity as part of development oriented to social justice; community participation in defining and implementing health agendas; and intersectoral approaches to health.” Issues and topics related to global health systems are: financing of the healthcare system, the global health workforce, providing adequate health information, and implementing pro-equity health policies. The benefits of such a system would be so all people have access to needed health services, when and where they need them, without financial hardship, thus ensuring better health outcomes for all members of society. Furthermore, research undertaken by the Bill & Melinda Gates Foundation and McKinsey & Company have shown that global health systems produce synergistic benefits for countries including attracting attention and funding for diseases, improving policy planning for the future, and strengthening program monitoring and accountability.

The term “building” is defined as: “to form by ordering and uniting materials by gradual means into a composite whole” and “to develop according to a systematic plan, by a definite process, or on a particular base.” In reference to building global health systems, we understand this to mean putting into place actions which will improve and/or reshape existing healthcare systems, both domestically and internationally. Building these global healthcare systems can be achieved by: “stronger prevention, public health, and pandemic preparedness capabilities; and addressing health disparities and the systemic inequalities that underlie them.”

The term “resilient” is understood to mean “able to become strong, healthy, or successful again after something bad happens” and “able to return to an original shape.” The term “integrated” as it refers to healthcare is defined by the WHO as “management and delivery of health services so that clients receive a continuum of preventive and curative services, according to their needs over time and across different levels of the health system.” Finally, the term “inclusive” is understood to mean “including everyone, especially allowing and accommodating people who have historically been excluded (as because of their race, gender,

sexuality, or ability).” Examples of weaker compliance actions include G7 members taking actions listed above in ways that address and investigate the causes and escalation of both communicable and non-communicable diseases. Communicable diseases include infectious diseases of pathogenic origins (i.e., SARS-CoV-2, hepatitis, HIV, tuberculosis, etc.). Non-communicable diseases include “heart disease, stroke, cancer, diabetes and chronic lung disease, as well as mental health disorders.”

Examples of strong compliance for the second aspect of this commitment concerning global health systems which are “prepared and equipped to prevent the causes and escalation of disease” would be actions which address and investigate the causes and escalation of both communicable and non-communicable diseases. To do so, G7 members can invest in global programs for data sharing or assemble investigative teams when/if new communicable diseases emerge. Furthermore, investment in domestic and international programs to prevent the increase in incidence of non-communicable diseases would constitute strong compliance. Finally, investment in strengthening existing preventative programs such as immunization and screening programs to alleviate the burden on the healthcare system, as well as taking actions to prepare for future pandemics such as building up stockpiles of necessary healthcare resources (masks, ventilators, medications, etc.). Compliance would be for domestic and international actions.

Examples of weaker compliance actions include G7 members taking actions listed above in ways that address either communicable OR non-communicable diseases rather than both. Additionally, as before, if G7

members only make announcements or sign declarations, but do not take direct action, then they will only receive partial compliance.

The term to “detect” is defined as “to discover or determine the existence, presence, or fact of” and it is relevant in the context of emerging health threats in this commitment.\textsuperscript{325} The concept of “emerging health threats” are understood to mean communicable and non-communicable diseases which pose a risk to the general population and the healthcare system. More specifically, emerging infectious diseases which fall under the umbrella of communicable diseases are defined as: “infections that newly appear in a population, or have existed but are [rapidly] increasing in incidence or geographic range.”\textsuperscript{326} The increase in incidence of non-communicable diseases such as heart disease, stroke, cancer, diabetes and chronic lung disease, particularly in low and middle-income countries are also considered emerging health threats.

Examples of strong compliance for this third part of the commitment: systems which “detect emerging health threats quickly,” would include investing and expanding research initiatives to study emerging health threats, entering into research and data sharing partnerships with other countries, or contributing to developing a global surveillance mechanism which can identify when a particular communicable pathogen may pose a global threat. Compliance actions can be aimed at detecting emerging threats that are both communicable and non-communicable in nature, but it is anticipated given the ongoing COVID-19 pandemic, that most efforts will surround communicable diseases.

In order to be in full compliance, the G7 member must take action to build a resilient, integrated and inclusive global health system, to be prepared and equipped to prevent the causes and escalation of disease and to be able to detect emerging health threats quickly. The absence of action in one or two of these three categories constitutes partial compliance. Examples of strong compliance are provided throughout these interpretive guidelines but are not an exhaustive list given the scope of this commitment. Non-compliance would mean that the G7 member did not take any action in any of the three parameters which make up this commitment.

### Scoring Guidelines

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<th>Score</th>
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<tbody>
<tr>
<td>-1</td>
<td>The G7 member has NOT taken ANY action to build a resilient, integrated and inclusive global health system OR is prepared and equipped to prevent the causes and escalation of disease OR has taken action to be able to detect emerging health threats quickly.</td>
</tr>
<tr>
<td>0</td>
<td>The G7 member has taken action in at least ONE of three areas: to build a resilient, integrated and inclusive global health system OR is prepared and equipped to prevent the causes and escalation of disease OR has taken action to be able to detect emerging health threats quickly.</td>
</tr>
<tr>
<td>+1</td>
<td>The G7 member has taken action in ALL three areas: to build a resilient, integrated and inclusive global health system AND is prepared and equipped to prevent the causes and escalation of disease AND has taken action to be able to detect emerging health threats quickly.</td>
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**Compliance Director:** Dorota Borowsky  
**Lead Analyst:** Eisha Khan

**Canada: +1**

Canada has fully complied with building a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease and to detect emerging health threats quickly.

On 14 July 2021, the Deputy Prime Minister and Minister of Finance Chrystia Freeland announced a CAD5 billion payment to provinces and territories, split evenly per population, to finance immunization efforts in order to ensure that Canadian healthcare systems remain strong and responsive to the needs of Canadians. The Government of Canada is allocating CAD4 billion in a one-time top up to the Canada Health Transfer. This money will go toward helping provinces and territories deal with urgent health-care demands, including clearing a backlog of medical operations, patient care, and primary-care access that has been halted due to the pandemic. Furthermore, the Canadian government is committing CAD1 billion to fund vaccine rollout efforts across the country, ensuring that Canadians receive their first and second doses as soon as possible. The funding supports a variety of vaccine-related costs, including recruiting and training immunizers, establishing herd immunity clinics, establishing mobile immune units, engaging Indigenous communities to promote vaccine adoption and reaching vulnerable populations through community-based immunization efforts.

On 16 July 2021, Minister of Health Patty Hajdu announced an investment of CAD7.5 million for 13 projects to support the health of substance users across Canada. The programmes will improve the number of qualified health and social professionals available to assist drug users. They will give peer-to-peer training, as well as produce and disseminate information and resources on harm reduction and treatment for people working in the health profession. These initiatives will work together to ensure that Canadians who use drugs have access to appropriate, timely and effective treatment during and after the pandemic.

On 28 July 2021, Minister of Innovation, Science and Industry François-Philippe Champagne and Minister Hajdu announced the launch of the Biomanufacturing and Life Sciences Strategy. The strategy will invest CAD2.2 billion over seven years from the 2021 Budget to ensure that Canada continues to build a robust and competitive sector, as well as ensuring that Canada is prepared for future pandemics. The strategy is motivated by two goals: building a robust, competitive domestic life sciences industry with cutting-edge biomanufacturing capabilities, while providing decent opportunities for Canadians, and ensuring that Canada is prepared for future pandemics and other health emergencies. This involves developing local ability to manufacture life-saving vaccines and treatments through investments and collaborations.

On 24 November 2021, Minister of International Development Harjit Sajjan announced a CAD325 million investment towards 11 initiatives involving Canadian health partners. With a focus on Sub-Saharan Africa, this investment will assist important partners enhance access to basic services, promote gender equality and alter decision-making institutions that reinforce and perpetuate inequality over the course of five to seven years. Moreover, the policy prioritises women and girls in its development initiatives, including ensuring that health systems are equipped to fulfil their needs by promoting comprehensive sexual and reproductive health and rights (SRHR). Women, adolescents, and children will benefit from the funded initiatives, which will focus on SRHR and enhancing the quality of and access to integrated health care.

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On 14 January 2022, Minister Duclos announced a Canada-Québec agreement for virtual health care services with a focus on the ongoing COVID-19 pandemic. Quebec will receive more than CAD28 million as part of this deal to enhance its virtual health care services. Quebec will use the federal funds to fund two projects: a virtual ophthalmology solution that uses artificial intelligence to diagnose and treat diabetic retinopathy in type 2 diabetes patients, and a virtual care and services platform that will administrate and integrate requests for all types of teleconsultations in Quebec.

On 14 January 2022, Minister Duclos announced the establishment of the Centre for Research on Pandemic Preparedness and Health Emergencies, which will get an annual funding of CAD18.5 million. Other federal ministries and organizations, as well as domestic and foreign stakeholders, will work with the Research Centre, which will be situated under the Canadian Institutes for Health Research (CIHR). It will concentrate on strengthening Canada’s research and knowledge mobilization capabilities in order to prevent, prepare for, respond to and recover from current and future pandemics and public health catastrophes.

Canada has fully complied with building a resilient, integrated and inclusive global health system by investing in pandemic preparedness programs, supporting investment into research for other non-communicable diseases and addressing the needs of vulnerable populations such as women. Additionally, Canada is prepared and equipped to prevent the causes and escalation of disease and has taken action to be able to detect emerging health threats quickly by strengthening health care systems and investing in future health threat research.

Thus, Canada receives a score of +1.

Analyst: Sarah Rashid

France: +1

France has fully complied with building a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease and to detect emerging health threats quickly.

On 15 June 2021, the Ministry of Solidarity and Health announced the reimbursement of rapid angina (tonsillitis) tests taking place in community pharmacies starting on 1 July 2021. The goal of this initiative is to reduce the use of antibiotics to treat viral infections for which antibiotics do not work, thereby reducing the development of antibiotic resistance.

On 18 June 2021, France and Mexico signed a bilateral cooperation agreement that allowed for the creation of an international joint laboratory called “El Dorado,” made up of researchers from the National Autonomous University of Mexico and from the French Institute of Development Research. France launched the agreement under President Macron’s Preventing Zoonotic Diseases Emergence (PREZODE) initiative.

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initiative, and the agreement seeks to research and innovate on the risk of pathogens in the region and increase the capacity to respond to pandemics.

On 21 June 2021, President Emmanuel Macron, South Africa’s President Cyril Ramaphosa and Director-General of the World Health Organization (WHO) Tedros Adhanom Ghebreyesus announced plans for Africa’s first mRNA technology transfer hub, which aims to scale up production and access to COVID-19 vaccines for the developing world.335

On 9 July 2021, France confirmed its investment of EUR1.8 million through the Agence Française de Développement (AFD) for the Manufacturing in Africa for Disease Immunization and Building Autonomy (MADIBA) project at the Institut Pasteur in Dakar, Senegal.336 The European Commission, the European Investment Bank and other European Union Member States similarly confirmed investments and signed grant agreements at this event.

On 30 July 2021, France announced that an initial batch of 750 oxygen concentrators out of a promised 3,000 units and 1.1 million surgical masks were sent to health care professions in the prior week to help Algeria deal with its recent COVID-19 outbreaks.337

On 9 August 2021, France announced a two-year, EUR24 million call for proposals for “participatory” health centres, in an effort to increase access to care for marginalized populations.338 The “participatory” health model attempts to increase access by reaching out to users, setting up spaces for discussion and initiating personalized care. The goal is for 60 such centres to be created by 2023/24, to provide “prevented and adaptive response” to access to care issues for marginalized people and increase their participation in the healthcare system which is often restricted due to financial consideration.

On 22 September 2021, President Macron’s PREZODE initiative and the International Atomic Energy Agency’s (IAEA) Zoonotic Disease Integrated Action (ZODIAC) initiative formally agreed to collaborate on tackling zoonotic diseases.339 Planned joint actions include capacity building, building a platform for sharing knowledge, a resource centre available for the One Health High-Level Expert Panel to produce recommendations for decision makers and a scientific framework to coordinate research projects. ZODIAC deploys nuclear-related techniques for the rapid detection of pathogens and will establish an information-sharing global network of national laboratories to help monitor, detect, and control animal and zoonotic diseases like COVID-19, Ebola, avian influenza and Zika virus.

On 26 September 2021, President Macron announced that France would double its COVID-19 vaccine sharing pledge to COVAX, for a grand total of 120 million doses by the end of the second quarter in 2022.340

On 29 October 2021, Minister for Europe and Foreign Affairs Jean-Yves Le Drian announced that France had successfully donated 67 million doses to 45 countries (30 of which are African countries).\(^{341}\)

On 30 October 2021, France announced a new partnership with the COVID-19 Vaccines Global Access (COVAX) facility, through Gavi, the Vaccine Alliance, and the United Nations International Children’s Emergency Fund (UNICEF) to increase immunization capacity in Africa, by tackling hesitancy and mobilizing domestic and international civil society organizations.\(^{342}\) The six-month pilot phase begins as early as November 2021, whereby the partners select two African countries with low vaccine uptake rates.

On 18 November 2021, France verbally affirmed its support for World Antimicrobial Awareness Week, organized by the WHO from 18 November 2021 to 24 November 2021, and committed to promoting essential interministerial positions on controlling antimicrobial resistance at European and international levels.\(^{343}\)

On 1 December 2021, France announced its support for the WHO’s decision by consensus to launch negotiations on a new treaty to prevent and respond to future pandemics, which would seek to improve fair access to tools combating epidemics and strengthen the WHO’s inter-agency health cooperation roles.\(^{344}\) France also announced that it supported instruments designed to more effectively financially mobilize the international community to prepare for pandemics.

On 1 December 2021, the Ministry of Solidarity and Health presented its second sexual health roadmap 2021-2024 for the implementation of the 2017 National Sexual Health Strategy.\(^{345}\) The second roadmap deepens the commitments made for 30 priority targets and 7 versions adapted to overseas departments, including diversifying access to screening and prevention tools for sexually transmitted infections and human immunodeficiency virus and by promoting sexual health training in all settings.

On 7 December 2021, Minister Le Drian set out France’s commitments on combating malnutrition for 2024 at the “Nutrition for Growth” summit, organized by Japan.\(^{346}\) These commitments included an allocation of 15 per cent of AFD’s funding towards water, hygiene and sanitation to eight priority countries in Africa, particularly in the Sahel region. Also, France dedicated 25 per cent of the French Muskoka Fund to nutrition which operates in Benin, Burkina Faso, Chad, Côte d’Ivoire, Guinea, Mali, Niger, Senegal, and Togo.


\(^{345}\) The Ministry of Solidarity and Health presents the second sexual health roadmap 2021-2024 for the implementation of the National Sexual Health Strategy, Ministry of Solidarity and Health (1 December 2021). Access Date: 21 January 2022. https://solidarites-sante.gouv.fr/actualites/presse/communiques-de-presse/article/le-ministere-des-solidarites-et-de-la-sante-presente-la-deuxieme-feuille-de

On 8 December 2021, France announced 10 million doses had been successfully delivered to at least 38 African Union member-states, including recent shipments to Ghana, Botswana, Egypt, Tunisia, and Lesotho.347

On 14 December 2021, France and Cuba signed agreements to fund two new public health projects worth EUR6.1 million, during the Sixth Session of the France-Cuba Economic and Commercial Commission and the Sixth Meeting of the Strategic Orientation Committee that manages the French-Cuban Counterpart Fund.348

On 16 December 2021, France committed EUR20 million to the Medicines Patent Pool (MPP), which will help the MPP expand its regular work of technology transfers and pursuing voluntary licensing agreements, towards COVID-19 treatments, diagnostics, and vaccines.349 The initial five-year project aims to address global inequities and the lack of secure supply as it pertains to COVID-19 technologies. The MPP is an UN-backed public health organization seeking to facilitate the development of life-saving medicines for developing countries.

On 23 December 2021, France enacted the Social Security Financing Act of 2022, which among other items, includes investments to reimburse contraception for all women under age 25, reimbursement of medical telemonitoring and access to free HIV screening tests without a prescription in laboratories.350

On 12 January 2022, France’s PREZODE initiative announced that it will use its first budget of EUR10 million, financed by the AFD, in part to support its first operational program of preventing the emergence and spread of zoonotic diseases while ensuring food security and livelihoods in Cambodia, Cameroon, Guinea, Madagascar and Senegal.351

France has fully complied with its commitment to build a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease, and to detect emerging health threats quickly. France helped build a resilient, integrated and inclusive global health system by, inter alia, investing in participatory health care centres and funding health projects in other countries such as Cuba and Senegal. France has helped prevent to prevent the causes and escalation of disease by, inter alia, increasing access to contraceptives to women under 25, donating vaccine supplies through COVAX and bilateral arrangements, and funding technology transfers through MPP. Finally, France has taken action to detect emerging health threats quickly by, inter alia, investing and expanding its PREZODE initiative and supporting efforts for legal instruments to prevent future pandemics.

Thus, France receives a score of +1.

Analyst: Ashton Mathias

Germany: +1

Germany has fully complied with building a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease and to detect emerging health threats quickly.

On 1 September 2021, Germany and the World Health Organization (WHO) established the Hub for Pandemic and Epidemic Intelligence in Berlin. This Hub will use extensive data and research to identify risk-inducing events and forecast potential threats, increasing global preparedness to deal with fast-spreading diseases. Aside from hosting the institute, Germany has provided initial funding of USD100 million to allow the hub to acquire the relevant analytic tools to forecast super spreader events.

On 8 September 2021, Germany delivered the first of 1.3 million vaccine doses set for developing countries to Mauritania, which received 213,600 doses. These were followed by shipments to Tajikistan, Uzbekistan, Sudan and Ethiopia in the following days. These donations were part of Germany’s pledge to donate 100 million vaccine doses that year.

On 26 October 2021, Germany delivered 163,000 doses of the AstraZeneca vaccine to Somalia. At the time of the donation, only 1.85 per cent of Somalis were fully vaccinated against the virus, but the effort to protect Somalia against the virus has been aided by Germany’s donation, a move to help lower income countries achieve immunity and contribute to the strength of the global system.

On 5 November 2021, Federal Minister of Health Jens Spahn agreed with regional health leaders that German citizens should receive a booster shot at least six months after their previous injections. As Germany deals with a steep uptick in cases stemming from the fourth wave, the country decided to administer booster shots to prevent the overwhelming health system and further spread of the COVID-19 disease.

On 7 December 2021, Germany pledged to donate EUR120 million in humanitarian aid to the United Nations High Commissioner for Refugees for 2022. The UNHCR provides humanitarian assistance to refugees and internally displaced persons, which includes services such as the provision of clean water, adequate housing and basic healthcare.

On 28 December 2021, Germany’s constitutional court established that disabled patients must still be protected by legally binding guidelines in the case that hospitals resort to triage systems due to the overwhelming of the healthcare system. The ruling is an impactful step in ensuring Germany continues to

develop its inclusive healthcare system and orders legislators to create legal frameworks to prevent disabled people from unfair treatment.

On 29 December 2021, Minister for Economic Cooperation and Development Svenja Schulze pledged to donate 75 million vaccine doses to various low-income and middle-income countries in 2022, in addition to the 100 million doses Germany committed in 2021. At the time of this announcement, Germany was preparing 53 million doses for shipment. These actions have been taken by Germany without the undermining of their own vaccination program.

Germany has fully complied with its commitment to build a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease, and to detect emerging health threats quickly. Within the compliance period discussed, Germany has made great financial and material contributions in ensuring that developing countries and vulnerable groups are taken care of by the global health system. Within its own borders, Germany is working to guarantee that its healthcare system is truly universal and prepared to deal with the consequences of infectious diseases. Germany also takes a leading role in researching pandemics and epidemics to enhance the detection of future threats.

Thus, Germany receives a score of +1.

Analyst: Mohammad Rasoul Kailani

Italy: 0

Italy has partially complied with building a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease and to detect emerging health threats quickly.

On 22 June 2021, Italy’s National Institute for Health, Migration and Poverty and the United Nations International Children’s Emergency Fund (UNICEF) signed an agreement to boost the “safeguarding of the health of minors, women and families from the migrant community.” The goal of the agreement is to strengthen the two organization’s actions aimed at training social and healthcare professionals on issues such as immigration, violence, gender-based violence, poverty and social exclusion. The agreement is intended to promote better health education with respect to the differing needs of different migrants based on age, gender, culture and country of origin.

On 24 August 2021, Prime Minister Mario Draghi announced during a G7 video conference that Italy would redirect resources to humanitarian aid that were originally for Afghan military forces. Prime Minister Draghi also asked the other member states to join in that effort for a successful outcome.

On 22 September 2021, Prime Minister Draghi stated at the Global COVID-19 Summit, organised by the 76th General Assembly of the UN, that Italy stood by the pledges it had previously made to various vaccine programmes and that it was ready to make “more generous ones.” Italy also offered “adequate logistical support to ensure that vaccines reach those who need them the most” and tripled its efforts in vaccine donation by 30 million additional doses by the end of 2021, reaching 45 million vaccine doses in total.

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On 8 October 2021, the Ministry of Health announced that Italy had given the green light for the COVID-19 vaccine booster (third dose), after at least six months after the second dose, for those over age 60 and anyone considered to be immunocompromised.\textsuperscript{362}

On 1 December 2021, Italy approved COVID-19 vaccinations for children aged five to eleven.\textsuperscript{363} Italian health authorities consider vaccination of children and teenagers to be an important step in responding to the COVID-19 global pandemic and in disease prevention.

On 6 December 2021, Italy tightened restrictions on the unvaccinated population with a new COVID-19 super green pass.\textsuperscript{364} Italy’s previous basic green health pass could be used by anyone who was vaccinated or recovered to access concerts, theaters, indoor restaurants, and major sporting events. The new COVID-19 green health pass is now needed to also access public transport.

On 14 December 2021, Italy extended its January 2020 COVID-19 state of emergency until 31 March 2022.\textsuperscript{365} The country now also requires a pre-departure COVID-19 swab test to be taken by European Union visitors from 16 December 2021 to 31 January 2022. Additionally, the Health Ministry has imposed a requirement that anyone who has not been vaccinated must quarantine for five days on arrival.

On 15 December 2021, the Ministry of Foreign Affairs and International Cooperation announced that medical equipment were sent to Libya’s Health Ministry to help prevent the spread of COVID-19.\textsuperscript{366} On 14 December 2021, more than 10 tons of medical equipment including ventilators, surgical masks and personal protective garments arrived in Libya.

Italy has partially complied with its commitment to build a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease and to detect emerging health threats quickly. Italy has taken various measures to build a resilient, integrated and inclusive global health system, by investing in domestic and international initiatives, with a particular emphasis on vulnerable populations. However, Italy’s focus remains on mitigating the spread of COVID-19 and has neglected to address other non-communicable diseases or put any programs in place to detect emerging health threats.

Thus, Italy has received a score of 0.

\textit{Analyst: Miranda Boci}

\textbf{Japan: +1}

Japan has fully complied with building a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease and to detect emerging health threats quickly.


On 1 July 2021, Japan delivered 1 million doses of the AstraZeneca vaccine to Malaysia.367

On 23 July 2021, Japan delivered 330,000 doses of the AstraZeneca vaccine to Cambodia through the COVID-19 Vaccines Global Access (COVAX) program, as part of Japan’s pledged 1 million vaccine doses.368

On 24 July 2021, the Japan International Cooperation Agency signed a grant agreement with the Government of Senegal to provide grant aid up to JPY514 million to establish an effective and safe vaccination system in Senegal, including the provision of cold chain and medical equipment.369

On 11 August 2021, the Ministry of Economy, Trade and Industry committed JPY150 million to companies specializing in women’s health products, allowing them to develop products to alleviate medical issues specific to their gender, such as menstruation, pregnancy, infertility treatment and menopause.370 This is a step forward in building a more inclusive health system in general and one that serves the needs of women in particular.

On 25 August 2021, Japan committed a USD2.75 million grant to set up a grassroots project in Vietnam.371 It is dedicated to strengthening Vietnam’s preparedness, threat detection and response capacities to potential outbreaks including the current COVID-19 pandemic. The three-year project will be implemented in three provinces and will reach 270,000 people, including 3,500 vulnerable people. Included in the latter group are elderly people in urban areas, ethnic minorities, informal workers, people living with HIV/AIDS, drug users, and female sex workers. Japan’s impactful initiative to expand the healthcare capabilities of another country is an action that covers all aspects of the commitment.

On 6 October 2021, Japan donated 23 Viral Ribonucleic Acid Test Kits valued at USD43,411, which are expected to conduct around 5,750 tests, to the Caribbean Public Health Agency.372 Additionally, Japan also donated USD267,274 to the Association for Promotion of International Cooperation so that Jamaica, Suriname and Guyana can purchase test kits to conduct around 72,090 tests.

On 13 October 2021, the Japan announced a JPY500 billion economic package aimed at firms developing vaccines and new drugs for infectious diseases.373 It was the first fund announced by Prime Minister Fumio Kishida’s government. The “university fund” was also expanded to JPY600 billion, as Japan aims to be a lead contributor in medical research and strengthen its domestic health sector.

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On 24 December 2021, Japan extended an Emergency Aid Grant of USD28.95 million to refugees and internally displaced people in Syria and neighboring countries. The assistance will be delivered through services provided by the United Nations High Commissioner for Refugees, the World Food Programme, the United Nations International Children’s Emergency Fund (UNICEF) and the United Nations Relief and Works Agency for Palestine Refugees in the Near East. The expected outcomes of the aid include the provision of food to 320,000 people, provision of health services to 190,000 people, and the provision of medical services to 600,000 people.

On 31 January 2022, Japan announced grant assistance to strengthen the vaccine cold chain system in Nepal with collaboration UNICEF. This grant includes nine walk-in coolers, 38 vaccine refrigerators, 1,109 long-range vaccine carriers and 53 cold boxes to ensure effective vaccine rollout in Nepal.

Japan has fully complied with its commitment to build a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease and to detect emerging health threats quickly. Japan has done so through leading initiatives aimed at constructing a global health system, contributing important resources and technology to different countries to fight COVID-19 and funding relevant research to detect future threats.

Thus, Japan receives a score of +1.

**United Kingdom: 0**

The United Kingdom has partially complied with building a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease and to detect emerging health threats quickly.

On 27 June 2021, the Department of Health and Social Care announced an additional GBP250 million for people in care homes or people cared for at home. The fund consists of GBP142.5 million in infection control funding and GBP108.8 million in testing. This fund will protect British citizens in adult social care by continuing to cover the cost of stringent infection prevention and control measures as societal restrictions ease, and by supporting regular rapid testing of staff to reduce COVID-19 transmission.

On 17 July 2021, the Department of Health and Social Care and the National Health Service (NHS) launched preparations to give enhanced flu vaccinations, as well as any COVID-19 vaccine boosters, as part of a larger fall and winter plan centered on saving as many lives as possible. Flu vaccinations will be offered to over 35 million individuals starting in September 2021, including all secondary school kids up to year 11 for the first time. Additionally, the Government of the United Kingdom is planning a COVID-19 vaccine booster program, and the Joint Committee on Vaccination and Immunization (JCVI) has issued interim guidance on who should be given priority for the possible third shot starting in September 2021. The JCVI’s final advice

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will focus on ensuring that millions of people most vulnerable to COVID-19 will continue to have the protection they need ahead of the winter and against new variants.

On 28 July 2021, Foreign Secretary Dominic Raab announced that to combat the epidemic, the UK will begin shipping 9 million COVID-19 vaccinations throughout the world this week, including to Indonesia, Jamaica, and Kenya. The UK will donate 5 million doses directly to the COVID-19 Vaccines Global Access (COVAX) facility. COVAX will distribute them to low-income nations as soon as possible, using an equitable allocation method that prioritizes giving vaccines to those who need them the most. Another 4 million doses will be sent directly to developing nations. Indonesia will receive 600,000 doses, Jamaica will receive 300,000 doses, and Kenya will receive 817,000 doses, among other nations.

On 6 September 2021, Prime Minister Boris Johnson and Health Secretary Sajid Javid announced that the NHS would receive an extra GBP5.4 billion over the next six months to boost its response to COVID-19 and help reduce waiting lists. This includes GBP1 billion to deal with the COVID-19 backlog, GBP2.8 billion to cover related expenditures including improved infection control measures to keep staff and patients safe from the virus, and GBP478 million to maintain the hospital discharge programme, which frees up beds.

On 7 September 2021, Prime Minister Johnson announced a GBP36 billion investment to reform the NHS and the adult social care system. Over the next three years, the money will go toward clearing backlogs created by the COVID-19 pandemic, reforming adult social care, and bringing the health and social care systems closer together in the long run. Patients will benefit from the NHS’s largest catch-up initiative in history, ensuring that they do not have to wait long for treatment and offering more appointments, treatments and operations.

On 30 September 2021, Secretary Javid announced an extra funding of GBP388.3 million to combat infection in social care settings, including GBP25 million to help care staff get COVID-19 and flu vaccinations over the winter months. This will guarantee that social care workers who need to travel to get their COVID-19 or flu vaccines are paid their regular salaries and are reimbursed for travel expenses.

On 8 December 2021, Secretary Javid announced that thousands of the UK’s most vulnerable patients would be among the first in the world to get life-saving, cutting-edge antiviral and antibody treatments. People who are immunocompromised, cancer patients, or those with Down’s syndrome who test positive for the COVID-19 virus will be able to obtain molnupiravir or the new monoclonal antibody Ronapreve outside of the study starting on 16 December 2021. This will guarantee that the treatments can help protect those who are most vulnerable to the virus during the winter months, reducing the number of hospitalizations and thus, pressures on the NHS. This is particularly important for people with weakened immune systems, for whom immunizations may be less effective.

On 9 December 2021, the Department of Health and Social Care announced the Workforce Recruiting and Retention Fund, which will help local governments manage adult social care workforce capacity issues in their region through recruitment and retention activities. This is a GBP162.5 million grant that will be given to local governments in two installments. The first installment, worth GBP97.5 million (60 per cent), will be processed as quickly as possible and paid out in November 2021. The second installment, costing GBP65 million (40 per cent), will be paid in January 2022, subject to local governments submitting a report to the Department of Health and Social Care by 14 January 2022.

On 29 December 2021, the UK Government announced an extra GBP60 million top-up to local authorities to benefit the adult social care sector in 2022. This is on top of the GBP388 million funding already being provided to prevent infections and provide testing. The additional GBP60 million will help protect both those who receive care, the family and friends who support those receiving care as well as the adult social care workforce. Additionally, local authorities can use the funding to support the sector and protect people from COVID-19 infections. This includes investing in improved ventilation, increasing the use of direct payments, which are offered to people with eligible social care needs so they have choice and control over their care and support arrangements or paying for COVID-19 sickness and self-isolation pay for staff.

On 30 December 2021, Foreign Secretary Affairs Liz Truss announced a UK emergency aid grant of up to GBP105 million to help vulnerable countries to combat the Omicron COVID-19 variant, with a special focus on African countries. The funding will help the world’s poorest nations combat Omicron and other COVID-19 variations, benefiting millions of people by supporting steps to decrease transmission, scale up testing and increase oxygen supply.

On 13 January 2022, the UK Government extended the provision of free personal protective equipment (PPE) for another year for England’s frontline health and social care workers. The UK Government is also working on a new platform for procuring personal protective equipment that would be faster and easier to use. Health and social care providers have been asked to try out the new platform and contribute to the creation of a service that is tailored to their needs. Quick ordering options and status updates will be possible thanks to the new and upgraded features.

The United Kingdom has partially complied with building a resilient, integrated and inclusive global health system by funding healthcare systems and resources for vulnerable populations and frontline workers. Additionally, the United Kingdom is prepared and equipped to prevent the causes and escalation of disease by investing in pandemic preparedness and disease prevention through boosting vaccinations and medical equipment domestically and internationally. However, the United Kingdom has failed to take any action to detect emerging health threats quickly.

Thus, the United Kingdom receives a score of 0.

Analyst: Sarah Rashid

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**United States: +1**

The United States has fully complied with building a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease and to detect emerging health threats quickly.

On 3 September 2021, President Joe Biden released a plan for transforming the United States’ capabilities to prepare for and respond rapidly and effectively to future pandemics and other high consequence biological threats.\(^{387}\) This plan, titled “American Pandemic Preparedness: Transforming our Capabilities,” is a core element of the larger strategy to bolster and resource pandemic readiness and biodefense. In addition, President Biden reaffirmed the need to strengthen the American public health system, reinvigorate the public health workforce and prevent the public health inequities exposed by COVID-19 pandemic.

On 13 September 2021, the Department of Health and Human Services (HHS) issued an additional USD25.5 billion for COVID-19 relief funding.\(^{388}\) This relief funding includes USD8.5 billion for rural providers from the American Rescue Plan. The remaining USD17 billion goes to providers who can prove revenue losses associated with the COVID-19 pandemic.

On 20 September 2021, the Centers for Medicare & Medicaid Services (CMS) awarded USD15 million in planning grants to 20 states to aid expansions of community-based mobile crisis intervention services for Medicaid beneficiaries.\(^{389}\) Grant funds can be used to support states’ assessments of their current services; strengthen capacity and information systems; ensure that services can be accessed 24 hours a day, seven days a week; provide behavioral health care training for multi-disciplinary teams; or seek technical assistance to develop State Plan Amendments, demonstration applications and waiver program requests under the Medicaid program.

On 5 October 2021, United States Agency for International Development launched a new project working with partner countries and the international community to build better preparedness for global health threats in the future.\(^{390}\) The five-year USD125 million project, called the Discovery & Exploration of Emerging Pathogens - Viral Zoonoses (DEEP VZN) project, is expected to strengthen the current global capacity to better withstand another pandemic by helping to identify unknown viral threats.

On 21 October 2021, the House of Representatives passed the Strengthening America’s Strategic National Stockpile Act of 2021 (H.R. 3635), which alters how the Strategic National Stockpile is administered and managed.\(^{391}\) This bill temporarily authorizes the HHS to transfer supplies from the national stockpile to any federal department or agency, until 30 September 2024. The HHS must also keep track and maintain domestic reserves of certain supplies by entering into cooperative agreements or partnerships with producers of such supplies. The HHS may also temporarily award grants to states to maintain stockpiles of certain medical equipment for use during any public health emergency.


On 19 November 2021, the Food and Drug Administration amended emergency use authorizations for the Moderna and Pfizer-BioNTech COVID-19 vaccines. Booster doses of both vaccines are now authorized for use for individuals aged 18 and older, at least six months after completion of the primary vaccination series of the Moderna COVID-19 Vaccine or Pfizer-BioNTech COVID-19 Vaccine, or at least two months after completion of primary vaccination with the Johnson & Johnson (Janssen) COVID-19 Vaccine.

On 30 November 2021, the Centers for Disease Control and Prevention (CDC) asked labs around the United States to start tracking the Omicron variant of the COVID-19 virus. Various labs in the country have ramped up their efforts in genetic sequencing to better track the variant, as well as potential breakthrough infections.

On 7 December 2021, the HHS announced that it was “taking steps to improve maternal health and support the delivery of equitable, high-quality care for pregnancy and postpartum care” through the CMS. The CMS is also encouraging states to take advantage of the American Rescue Plan’s option to provide 12 months postpartum coverage to pregnant individuals who are enrolled in Medicaid or the Children’s Health Insurance Program. These two programmes are designed to address ongoing disparities that exist in pregnancy-related morbidity and mortality.

On 7 December 2021, the CDC awarded a total of USD22 million to 27 organizations around the world to combat antimicrobial resistance and other healthcare threats through the launch of two new networks: the Global Action in Healthcare Network and the Global AR Laboratory and Response Network. These two networks will collaborate to tackle threats identified in the CDC’s Antibiotic Resistance Threats in the United States 2019 Report and other healthcare-related infections. The organizations that will be receiving funding include: American Society for Microbiology; American Type Culture Collection; American University of Beirut; Association of Public Health Laboratories; Columbia University; Duke University; Family Health International; FIOTEC; Global Scientific Solutions for Health; Health Security Partners; Johns Hopkins University; Koperasi Jasa Institut Riset Eijkman; Northwestern University; Pakistan National Institute of Health; Pan American Health Organization; The Ohio State University; U.S. Civilian Research & Development Foundation; Universidad de Desarrollo; University of Campinas; University of Cantabria; University of Nairobi; University of Oxford; University of Pennsylvania; Vanderbilt University; Washington State University; Washington University in St. Louis; and World Health Organization.

On 20 December 2021, the HHS announced USD282 million in investments for suicide prevention and crisis care services, through its Substance Abuse and Mental Health Services Administration. This funding is for assisting the transition of the National Suicide Prevention Lifeline.
digit number to a three-digit dialing code: 988. Around USD105 million of this funding will be used to increase staffing across states’ local crisis call centres.

On 20 December 2021, the HHS announced that 15 digital health startups are joining the 2022 PandemicX Accelerator cohort, specifically to address health inequities and send resources to mitigate the effects of the COVID-19 pandemic.397 The HHS advised that “throughout the program, champions in government, mentors, judges, and other stakeholders will listen and offer public information for startups as they develop targeted action plans to address each challenge statement” and put plans into action.

On 28 December 2021, the HHS announced that it was working with states to encourage access to Medicaid services for people with mental health and substance use disorder crises.398 This commitment was part of the Biden-Harris Administration’s priorities to make major investments in behavioral health and crisis care services.

On 28 December 2021, the HHS announced that the Biden-Harris Administration would make health coverage more accessible and affordable for millions of Americans in 2023 through the Notice of Benefit and Payment Parameters 2023 Proposed Rule.399 The commitment was part of the Administration’s “ongoing efforts to ensure an equitable health care system” by helping to improve access to healthcare for low-income and medically underserved consumers, particularly through essential community providers.

The United States has fully complied with its commitment to build a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease and to detect emerging health threats. The new DEEP VZN project promises much in the global effort to develop better means of identifying unknown viral threats, which should help to prevent another pandemic. Additionally, the Biden-Harris Administration’s decision to provide more affordable and accessible coverage for low-income and medically underserved Americans is another significant step in the fight against global disease and inequity. Finally, the CDC’s move to award USD22 million to various health research organizations around the world will prove to be pivotal in combating healthcare threats.

Thus, the United States has received a score of +1.

**Analyst: Miranda Bocci**

**European Union: +1**

The European Union has fully complied with building a resilient, integrated and inclusive global health system prepared and equipped to prevent the causes and escalation of disease and to detect emerging health threats quickly.

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On 22 June 2021, the European Commission endorsed the European Parliament and the Council of the EU’s political agreement on the Health Technology Assessment (HTA) Regulation. The Regulation would increase the availability of novel health technologies for patients in the European Union, such as innovative medicines and certain medical equipment, while also ensuring resource efficiency and improving HTA quality throughout the EU. Medicinal items, medical equipment, and diagnostics are examples of health technology. The Regulation will need to be formally adopted by the Council and the European Parliament before it enters into force.

On 23 June 2021, the European Commission launched the Coronavirus Global R&I Collaboration Portal, a new research and innovation site that connects scholars and research projects working on the socioeconomic elements of the COVID-19 pandemic from across the world. The portal reaffirms Europe’s commitment to a degree of global openness that is required to foster excellence, pool resources for scientific advancement and create thriving innovation ecosystems.

On 30 June 2021, the European Commission launched the first flagship initiative executed under Europe’s Beating Cancer Plan, called the Knowledge Centre on Cancer. The Knowledge Centre is a new online platform that collects evidence and coordinates initiatives to combat Europe’s leading cause of death among people under the age of 65. It will compile the most up-to-date cancer research, offer healthcare recommendations and quality assurance schemes and track and forecast cancer incidence and death trends across the EU. It is also a platform where everyone fighting cancer can exchange best practices, communicate and organize to maximize collective knowledge and evidence-based research.

On 9 July 2021, Team Europe and Senegal launched along with other assistance measures, the Institut Pasteur in Dakar, to support large-scale vaccine manufacturing. The new production unit is expected to lessen Africa’s 99 per cent reliance on imported vaccines and boost the continent’s future pandemic resilience. The agreement is part of a major package of investment in vaccine and pharmaceuticals production in Africa announced by Team Europe in May 2021, which brings together the European Commission, EU Member States, the European Investment Bank, and other financial institutions, in accordance with the EU’s Africa Strategy, the Africa Centers for Disease Control and Prevention’s strategy and the Partnerships for African Vaccine Manufacturing’s strategy.

On 22 July 2021, the European Commission shortlisted 11 new projects worth EUR120 million from Horizon Europe, the largest European research and innovation initiative (2021-2027), for assisting and allowing critical research on the COVID-19 virus and its variations. This funding is part of a broad range of research and innovation efforts to combat the coronavirus, and it supports the European Commission’s overall strategy to prevent, mitigate and react to the virus and its variants’ impact, as outlined in the HERA Incubator, a new European bio-defense preparedness plan. 312 research teams from 40 countries are involved in the 11 short-listed projects, including 38 members from 23 countries outside the EU.

400 Commission welcomes the move towards more innovative health technologies for patients, European Commission (Brussels) 22 June 2021. Access Date: 14 January 2022.
403 Republic of Senegal and Team Europe agree to build a manufacturing plant to produce vaccines against COVID-19 and other endemic diseases, European Commission (Brussels) 9 July 2021. Access Date: 13 January 2022.
404 Coronavirus: Commission steps up research funding with €120 million for 11 new projects to tackle the virus and its variants, European Commission (Brussels) 22 July 2021. Access Date: 10 December 2021.
On 16 September 2021, the European Commission launched the European Health Emergency preparedness and Response Authority (HERA) to recognize, prevent and respond quickly to public health emergencies.\textsuperscript{405} HERA will gather intelligence and establish the required reaction capabilities to predict threats and possible health emergencies. When a disaster strikes, HERA will oversee the research, manufacture and distribution of medications, vaccinations and other medical countermeasures like personal protective equipment that were frequently absent during the beginning of the COVID-19 pandemic.

On 14 October 2021, the European Commission launched the gradual implementation of the new In Vitro Diagnostic (IVD) Medical Devices Regulation, to avoid disruptions in the supply of these critical healthcare devices.\textsuperscript{406} The IVD Regulation alters the regulatory landscape for in vitro diagnostic medical devices such as human immunodeficiency virus testing, pregnancy tests and SARS-CoV-2 tests. Conformity assessment bodies or “notified bodies,” will play a bigger role in the EU market, as they will independently evaluate whether IVD medical devices meet the safety and performance criteria.

On 22 October 2021, the European Commission established a portfolio of 10 possible COVID-19 medicines.\textsuperscript{407} The list was compiled using independent scientific advice and focuses on COVID-19 therapy options that are expected to be approved and hence available on the European market in the near future. If the European Medicines Agency (EMA) confirms their safety and effectiveness, these treatments will be available to patients across the EU as soon as feasible.

On 28 October 2021, the European Parliament and the Council of the EU reached a political agreement on the EMA’s strengthened role in preparing for and responding to health crises.\textsuperscript{408} The revised EMA mandate will enable the agency to closely monitor and mitigate medicine and medical device shortages during major events and public health emergencies, as well as play a key role in facilitating the development and faster approval of medicines that could treat or prevent diseases that cause public health crises.

On 24 November 2021, the European Commission announced the allocation of Recovery Assistance for Cohesion and the Territories of Europe (REACT-EU) resources for 2022.\textsuperscript{409} All 27 EU Member States currently have around EUR11 billion available for Cohesion policy programming. These funds will be added to the almost EUR40 billion set aside in 2021. EU Member States will be able to continue implementing recovery measures through improving healthcare, business resilience, and assistance for the most vulnerable populations, while also contributing to green and digital initiatives for a smart, sustainable, and coherent recovery. REACT-EU resources are aimed at addressing the evolving socio-economic impacts of the COVID-19 pandemic.

On 30 November 2021, the European Parliament and the Council of the EU agreed on the European Centre for Disease Prevention and Control’s (ECDC) expanded mission mandate.\textsuperscript{410} The expanded ECDC mission

will enable the agency to play a more active role in assisting the EU and its Member States in the prevention and control of communicable disease risks, as well as improving European readiness for future health issues.

On 13 December 2021, the European Commission adopted the Regulation on HTA, a deliverable of the EU Pharmaceutical Strategy. The new laws will make essential and novel health technologies more readily available, such as innovative medications, certain medical devices, medical equipment and preventative and treatment strategies. This Regulation will also ensure resource efficiency, improve the quality of HTA throughout the EU, prevent national HTA organizations and industry from duplicating efforts, reassure businesses and secure the long-term viability of EU HTA cooperation.

On 17 December 2021, the European Commission proposed to safeguard the long-term supply of pharmaceuticals from the United Kingdom to Northern Ireland, as well as to address ongoing supply issues in Cyprus, Ireland and Malta. This implies that, in the case of the Protocol on Ireland/Northern Ireland, the same medications will be accessible in Northern Ireland at the same time as they are in the rest of the UK, but particular criteria will prevent UK-approved medicines from entering the European Single Market.

On 20 December 2021, the Council of the EU obtained a political agreement on the Regulation authorizing the HERA to activate immediate and targeted medical countermeasures during public health emergencies in the EU. The procurement and purchase of crisis-relevant medical countermeasures and raw materials, the activation of reserved industrial facilities for flexible vaccine and therapeutic manufacturing, the formation of a Health Crisis Board with Member States and the formation of rapid monitoring mechanisms are among these measures.

On 12 January 2022, the European Commission proposed to turn the European Monitoring Centre for Drugs and Drug Addiction into the European Union Drugs Agency in order to improve the mission of the European Monitoring Centre for Drugs and Drug Addiction. The proposed reforms will allow the agency to play a greater role in detecting and resolving existing and future illicit drug concerns in the EU. This involves providing notifications when harmful chemicals are intentionally supplied for illegal use, monitoring the addictive use of substances taken alongside illegal narcotics and establishing EU-wide preventive efforts. The EU Drugs Agency will also take on a larger international role.

The European Union has fully complied with building a resilient, integrated and inclusive global health system and is prepared and equipped to prevent the causes and escalation of disease by investing in both domestic and international pandemic preparedness, medical and pharmaceutical programs. Additionally, the European Union has taken strong action to be able to detect emerging communicable and non-communicable health threats quickly by expanding research and investments for emergency preparedness, health technology and medical resources.

Thus, the European Union receives a score of +1.

Analyst: Sarah Rashid

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