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5 minute speech at 51st Union World Conference on Lung Health

**Plenary Session 2: COVID-19: heeding early lessons and preparing for the future**

Thursday, 22 October 2020

**Session description:** *How might we have been better prepared? What can we learn from our responses? And how can we use this opportunity to address historical inequalities that have been thrown into relief during this time?*

**MVK’s presentation:** ***Global response to COVID19*** *-**What did we get right, and what did we get wrong? How will this prepare us better in the future? What has been the impact on other*

*health care priorities such as TB control? What needs to happen now?*

Thank you for having me. It’s a pleasure to address you all today, especially as we are marking the 100th anniversary of the Union this year.

We are now in the 10th month of the COVID-19 outbreak, dealing with a new virus that has affected the lives of everyone on this planet.

We have taken this virus seriously since day one, and WHO has worked around the clock to support countries to prepare and respond to it.

Our first set of guidance, based on our previous experience with respiratory pathogens, was issued on 10-11 January, 10 days after learning about this new virus.

Within days after the full genome sequence was shared by China, and together with our technical partners, we published the first protocol for developing a PCR test. At the same time, we worked to expand testing capacity around the world, leveraging existing infrastructure and building capacity where it was lacking.

Since then, we have expanded and updated our guidance as the pandemic evolved, the response needed the science grew.

We have worked hard with partners to address the global supply chain challenges and ensured supply of essential equipment, medicines, tests to countries around the globe.

We continue to coordinate the international and global scientific community; to harness robust science and develop guidance and advice, to deliver the trainings, technical support, PPE, tests, treatments and vaccines the world needs.

While we are responding to COVID-19, WHO is also working with countries to ensure other essential health services continue undisrupted.

At this pivotal moment, with COVID-19 still spreading, many people who need counselling for tobacco cessation, and treatment for TB, cancer, diabetes, asthma, and COPD, are not receiving the health services and medicines they need.

A WHO [survey](https://www.who.int/publications/i/item/WHO-2019-nCoV-EHS_continuity-survey-2020.1) from August found that

* Almost every country had experienced a disruption in essential services
* 70% of countries reported a disruption of services for non-communicable diseases,
* 55% for cancer diagnosis and treatment
* Over 45% of countries had disrupted their services for diabetes and asthma
* And 42% of countries reported disruption of TB detection and treatment.

All this implies that more people may suffer and die from other diseases that in many cases are treatable and curable.

A modelling study done by WHO with partners showed that even a partial 25% disruption in TB detection and treatment could lead to 13% more deaths from TB this year. This would be and is unacceptable.

We need to act with urgency to reinforce health services and increase investments in resilient public health systems worldwide, even in the midst of a pandemic.

In fact, one of the lessons of this pandemic for us has been that investment in health systems and preparedness pays off. Countries that have done well in dealing with this pandemic have done precisely that.

When this virus hit us, many countries were able to leverage existing capacities – be it the influenza surveillance system or the molecular diagnostic capacities of TB programmes – to respond more effectively to COVID-19. Countries have used their experience in community health workers, strong engagement with populations; clear, open and honest communication, a strong work force for contact tracing to fight other infectious diseases to identify and fight this outbreak.

These past investments have been critical in countries’ success in responding to COVID-19.

Another lesson has been the resilience we have shown in the face of this pandemic.

The last months have required us to make many changes in how we interact with each other. Many of us have changed our behaviours and are keeping a distance, wearing a mask when we cannot, cleaning our hands regularly.

In the same manner, health systems too have had to be agile and resilient. The use of digital technologies has increased and programmes like the ones for TB have adapted with small innovations like delivering medicines closer to patients.

These small innovations can make all the difference and save lives.

We have to keep people at the centre of the care we deliver. This has long been WHO’s vision and this pandemic has underscored its importance.

It has taught us is that there is no substitute for a strong public health system, be it for COVID-19, asthma, COPD, cancer or TB. People’s lives depend on it.

This urgency continues to motivate WHO’s work with countries, even as we push forward the global search for a COVID-19 vaccine.

Thank you.