

Stepping Up to Prevent Epidemics

Background

Epidemics are a rising threat, increasing in intensity and frequency, spreading more quickly, and threatening economic growth and prosperity. There is an urgent need to improve countries' capacity to prevent, detect and respond to public health threats to ensure their health, stability and economic prosperity.

After the West Africa Ebola epidemic (2013- 2016), several new and innovative tools for epidemic prevention and response were created. However, dedicated funding to prevent epidemics has remained limited, and this has resulted in slow progress.

The cost of response and economic loss from a pandemic is estimated to be as much as \$60 billion per year.¹

In contrast, The International Working Group on Financing Preparedness estimated that \$4.6 billion per year, or 0.65 cents per person, would be needed to address current capacity gaps in epidemic readiness.

There is a need to accelerate investment and catalyze progress to improve health security.

Existing Financing Mechanisms

The World Bank has played a leading role in partnering with low- and middle-income countries on the road to greater health security. The International Development Association (IDA) has supported the Regional Disease Surveillance System Engagement (REDISSE) program, but much more must be done. The CRW has been an effective mechanism, but has neither the authority nor the funds to support preparedness.

Mobilizing resources to substantially reduce the risk of epidemics requires increases in both external and domestic resources. This can be achieved in several ways including:

- Dedicated World Bank resources for preparedness.
- Promoting "buy downs" that convert World Bank credits to World Bank grants if countries reach valid and pre-agreed performance measures.
- Increase domestic budget allocations to ensure sustainability, especially for ongoing costs.

Investments in preparedness are central to achieving universal health coverage. Unless core public health functions such as disease surveillance, laboratory networks, trained community health workers, infection control, and emergency operations centers are functional, health systems will be burdened by avoidable illness and will not be effective at protecting and improving health.

1 Modeling the economic threat of pandemics <https://www.nap.edu/read/21891/chapter/11>

Call to Action



DECEMBER 2018: Health screening site set up at the Mpondwe point of entry from DRC in Uganda as part of their Ebola preparedness effort.

1

Request the World Bank Board of Directors identify a vehicle for increased, dedicated grant funds for epidemic preparedness. The most likely vehicle for this might be to expand the authorization and financing of the Crisis Response Window so that it becomes the Crisis Readiness and Response Window.

2

Advocate for the IDA deputies to approve dedicated grant IDA funds amounting to US\$1 billion per year for the public good of epidemic preparedness.

3

Increase domestic budgets for investments in health security.

4

Call on global partners to support countries in developing and implementing practical, specific plans to step up preparedness and reduce epidemic risk ensuring cost-effective implementation and return on investment.