

ROBERT SIGAL

Chief Executive Officer of the American Hospital of Paris

Michel Kazatchkine, former Executive Director of the Global Fund to fight AIDS, tuberculosis and malaria, Senior Fellow at the Global Health Centre of the Graduate Institute for International and Development Studies, Geneva

Let us now turn to health systems and a perspective from health systems and healthcare workers from Robert.

Robert Sigal

Allow me first of all to thank Thierry de Montbrial and the staff of the World Policy Conference. It is a great pleasure to be physically present and to meet the colleagues, individuals and experts that I had the chance to meet in Marrakesh.

I will give the standpoint of healthcare providers. I am a physician and the CEO of a hospital that has had to take care of thousands of patients since February last year and I would like to share our perspective with you. I would like to emphasize three points. One, is the importance of having coordination between healthcare providers. Two, is the question of anticipation of what might be a pandemic. Three, is the importance of technology.

Before going on to that, I must say that we have to be grateful to all the nurses and doctors who were at the forefront of the pandemic. In my hospital, I had 20- or 22-year-old nurses straight out of school and they had to fight in the first line of this war. More than 100 of our doctors and nurses were ill, some of them very seriously but very fortunately, no deaths, but there were some deaths in other healthcare institutions, so we have to be very grateful to these people.

Let us now look at the coordination of healthcare providers. What makes the fight effective is coordination between general practitioners and hospitals, and less obviously, between the private and public sector. Most important, was the coordination orchestrated by public agencies. In France, in the Paris region, which has approximately 10 million people, you have the Regional Healthcare Agency. It played a key role in distributing drugs and masks when there were shortages, directing patients to the appropriate hospitals and at some point, making the decision to evacuate some of them from the Paris area to other regions, etc. and this was key to prevent submersion of hospitals, especially of the Intensive Care Units.

Second is anticipation: by the law, each hospital must prepare an emergency plan, so we need know how to deal with an influx of wounded or dead., These plans appeared to be very effective during the terrorist attacks in November 2015,. As was the case with all French hospitals, we had to reactivate this so-called White Plan for the pandemic. The second element of anticipation is of course equipment, respirators and drugs, and personal protection

equipment. I remember very well that at some point in our hospital we did not have enough masks for everybody, and I can tell you I felt very bad at the thought that doctors and nurses would be sent into patient rooms without masks – but fortunately this did not happen. Even more important is infrastructure anticipation. In 2020, when it came to intensive care beds per 100,000 of population, Germany had 34, France 16 and Italy 8.6. Of course, whether or not to increase the number of beds is essential because this is an infrastructure you either have or not. Added to that and even more important in terms of anticipation are skills. You can have respirators and beds, but you need the properly trained nurses, intensivists or doctors working in reanimation, and they take seven to 10 years of training, so it is a long run.

Number three is technology: everyone understands that getting the vaccines under a year was unprecedented. Jean just alluded to big data, digitization, data governance and it is very clear that it played a role and will play an even more important one in the future. We all know that medicine progresses through and is a beneficial side effect of wars. I remember very clearly that during the First Gulf War they sent medical imaging, CTs, literally from the battlefield to US navy vessels with hospitals and from there to Germany. This made it possible to triage patients better and evacuate them. The years after, the US army healthcare system invested one in every two dollars in digitization. Today, hospitals are completely digitized, and we share images and data, and this was a really very important move that was a clear benefit from the war.

I would like to conclude on another point, which is the weight of politics on healthcare providers. Of course, if you are in charge of a hospital the most important thing is how much money a nation will spend in terms of GDP. If you are less than 10% or more than 10%, then of course it has an impact, and we all understand and follow year after year how much the government will invest in healthcare. In the case of the pandemic, the effect of political decisions were much more immediate and consistent, for example, in mandating vaccination for healthcare teams. For whatever cultural reasons, France has been resistant to vaccinations and before the summer the level of vaccinated healthcare staff in French hospitals was around 60%. Then the government and Macron mandated vaccination for all healthcare staff in hospitals and today we have reached 96-97%, so the effect of politics was absolutely immediate.

A second example, as Jean said, is the fight against disinformation. Today, the reality of intensive care units in France is that the majority of patients arriving have often refused to be vaccinated for all sorts of crazy reasons, so it is vital to fight this disinformation effectively. Of course, we also have to reinforce cooperation at international level, as Juliette said, because we know that if we do not help and work with Africa, we will see the consequences in the future of that failure to work properly with our African colleagues.

I would like to add a final comment that of course, what we have learned over the last year and a half is that states have reinforced their role and certainly rightly so. However, in the future, we should not fight the previous battle. The GAFAs are now emerging very rapidly and although they are not prominent healthcare players today, they will be in the next five to 10 years and they will play a very important role. We should not forget things like that and just fight past battles, we also need to fight the battles of the future.



Michel Kazatchkine

Thank you very much, Robert, for among other things stressing again the importance of anticipation and preparedness, which other colleagues have also discussed. Clearly, too many national plans have been underfunded and too many countries have lacked solid preparedness. This is a key issue, and many countries have preparedness plans, but they are not funded. This is why one of the first aims of this international financing facility the G20 is discussing and that the Independent Panel has been proposing, is to fund preparedness across the world. Then, in an interdependent world we need to be mutually accountable for how we prepare. This is why, on the initiative of France and Germany among others, we are now discussing in Geneva a peer review of preparedness in a UN driven mechanism, similar to what is happening at the Human Rights Council, where countries would be reviewed by peers every year or second or third year on how they are doing on preparedness. Thank you very much again.