Submission of Public Services International (PSI) and European Federation of Public Service Unions (EPSU) as representative bodies of the L20 in the G20 Health Working Group, to the Global Health Summit Consultation with Civil Society Organisations, held online on Tuesday 20<sup>th</sup> April 2021.

The COVID-19 pandemic highlighted and exacerbated health and social inequities which have been driven by privatisation and marketisation of health, social care, public services, and the global commons. The costs in lives, social dislocation and economic downturn have been awesome. To build back better and ensure pandemic prevention, preparedness and recovery world leaders have to take and sustain bold steps which clearly put people over profit and health before wealth.

What is required at global, regional, and national levels to ensure effective multilateral, multisectoral co-operation to prevent, prepare for and respond to global health crises?

There is the need for a new global compact which **unambiguously puts people over profit and health before wealth**. The economic policy prescriptions which have defined, first the Washington and the post-Washington consensus have been part of the problem and thus cannot be part of the solution.

The needed new global compact will include a pandemic treaty but cannot be limited to this. It would have to include agreements for a new global economic order, a radical world economy where production and supply systems put needs (of people and the planet) first.

Public services are central to running society, including providing the multisectoral bedrock for prevention, preparedness, and response. **Austerity measures have failed**, contributing significantly to the lack of preparedness and adequate response to the COVID-19 pandemic. Cuts in public funding, trade liberalisation and privatisation undermined needed public sector capacity.

Governments have to properly fund quality public services, including integrated public health and care services, and make these universally accessible. They should be ringfenced from international trade agreements.

## Trade rules reforms need to be put in place to ensure:

- Regionalisation of global supply chains and domestic production as much as possible of key medical equipment, devices, and supplies such as PPEs
- Reversal of free trade in health and other public services. These are not commodities; they are public goods and our global commons,
- Waiver of patent rights should be automatically triggered with the consideration of an outbreak as a Public Health Emergency of International Concern (PHIEC) by the World Health Organization
- Such waivers of trade-related intellectual property rights need to be accompanied with sharing of know-how and technology and institutionalised structures for solidarity with the least developed countries that are not reduced to charity.

What is needed to secure in a sustainable way, countries' public health capacities and health systems' preparedness and response at global, regional, and country levels?

Global health and care crises cannot be treated as stand-alone phenomena. The necessary capacities for prevention, preparedness, and response can be established only on **the solid bases of well-funded, universally accessible, and adequately staffed integrated public health and care systems**.

The pandemic sheds light on **the social care crises** (with residents of care homes and our members who are staff being severely affected) and **the need for an integrated approach to health and care funding and governance**.

Sustainability equally requires governments to strengthen universal public social protection systems. These will help ensure availability of food, decent housing and clean water for their populations. Development agencies and IFIs need to support developing countries to be able to provide these instead of concentrating on vertical health projects for example.

**Health and care workers constitute the backbone of national health and care systems.** They are also frontline workers during public health emergencies. We need to have adequate numbers and the right mix of health workers. They must enjoy decent work, including adequate remuneration and safety at work.

- Governments are urged to implement the recommendations of the United Nations High-Level Commission on Health Employment and Economic Growth, to arrest the projected 18 million global shortage of health and care workers.
- **Tripartite social dialogue** as advocated in the 70<sup>th</sup> World Health Assembly's Working for Health Five Year Action Plan should be upheld by governments. The organising and bargaining rights of health workers and their unions must be respected.
- Governments should **expand education and training of nurses, doctors and other health workers**. Encouraging health worker migration from developing countries to fill the gaps in the global North should be discouraged.
- **Occupational safety and health** should be included in the Declaration of Fundamental Principles and Rights at Work.
- **The precautionary principle** should unsparingly be brought to bear in pandemics, to limit the exposure of health and care workers whilst scientists try to better understand such novel infections.

One major lesson from the COVID-19 pandemic is that we do not wait until there is an outbreak before planning for surges. Intensive Care Unit beds need to be increased drastically, particularly in lower-and middle-income countries. Requisitioning private hospitals and clinics ICU beds when necessary, during health emergencies should also be institutionalised as a public health measure and not on forprofit basis.

How can the necessary resources, both domestic and global, be mobilised to address the challenges of sustainable health security preparedness and response at global, regional and country levels?

We need a reform of the global financial architecture. Governments (and multilateral institutions), not private corporations must drive resource mobilisation *as duty bearers*. Steps that could be taken include:

- **Removal of IFIs conditionalities** which limit the fiscal policy space of governments by placing caps on public sector wages or funding of social services.
- **Debt cancellation for LDCs, debt relief for LMCs** and the removal of artificial debt ratios for developed countries.
- **Institute a global multinational corporation tax reform** to ensure that corporations pay their fair share. Illicit financial flows must be curbed to help expand domestic resource mobilisation in several LMCs.

The world can no longer simply watch \$427 billion in tax being lost to tax havens while money is needed to provide public health and ensure preparedness. This amount alone is double what the world needs to address the global health workforce shortage according to the UN.

Corporate taxes should equally be raised, and a wealth tax implemented. Those companies that have made super profits during the pandemic need to be made to contribute to raising the funds necessary to prevent a situation like this recurring. This is how to make them show that we are in the same boat.