Date: Monday 16 November 2020, 16.00-18.00 CET online on Zoom

Programme:

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<td>16.00 - 16.10</td>
<td>Welcome by the moderator, Flemming Konradsen</td>
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<td>16.10 - 16.30</td>
<td>Keynote speech by Ib Christian Bygbjerg: “On chronic and acute crises in health systems - 5 decades’ experiences of serving, researching and teaching in low- and high-income countries”</td>
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<td>16.30 - 17.10</td>
<td>Panel 1: Declining use of health services in times of crises</td>
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Panel 1: Declining use of health services in times of crises

Fatima is 16 years old and pregnant with her first child. She lives in a village 4 hours away from the nearest hospital.

During an epidemic five years ago, Fatima’s parents fell ill. Health authorities took them to a treatment camp. Fatima was not allowed to visit her parents and did not receive any information until their passing. She was not allowed to attend their burial either.
Fatima experiences stomach pains that have intensified over the last 24 hours and she is convinced she is in labor. However, the country has recently declared the nation in a state of emergency once again – warning the population against a pandemic disease.

Fatima is becoming more and more unwell, but she is afraid to go to the hospital in case she contracts the new disease or is taken away like her parents were. Fatima decides to go to the local traditional birth attendant for help instead.

Fatima lives in Sierra Leone, a country with one of the highest maternal mortality rates in the world. She is in the high-risk group as a teenage pregnancy is associated with higher risk of fatal outcome. During epidemics the resources tend to be allocated to the immediate preventive and curative demands arising from the infectious epidemic disease. However, the need for prevention and treatment for pre-existing health challenges persist. By re-focusing health services exclusively to the epidemic response and due to changing treatment seeking by patients, the indirect health consequences of a crisis may become bigger than the crisis itself.

**Audience voting via Zoom poll function: How do we ensure access and quality health services for Fatima during an epidemic?**

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**Panel 2: Local and global distribution of future COVID-19 vaccines**

Due to the far-reaching consequences of the COVID-19 pandemic, the need for a vaccine is paramount.

Given the unprecedented nature of the COVID-19 pandemic, attempts are made to cut the vaccine development, testing and approval time from 10 years to 18 to 24 months. More than 240 vaccine candidates are at various stages of development with yet unknown risk and effectiveness profiles. Many worry that this accelerated process and the many unknowns will influence the public acceptance of a vaccine. Vaccine hesitancy might undermine the effectiveness of vaccine programs.

Governments around the world are in fierce competition to ensure access to vaccines and the WHO Director General, Tedros Adhanom Ghebreyesus, has urged countries to avoid COVID-19 “vaccine nationalism” as this would only prolong the pandemic. Vaccine nationalism would undermine a fair global distribution of future vaccines.

Beyond the registration of an effective vaccine, it is essential to agree on global and national implementation strategies - also in low-income countries. Implementation strategies should consider vaccine surveillance, logistics, communication, human resources and other elements of a vaccine delivery system. But how do we strengthen such a system in a low income setting and humanitarian contexts, ensuring marginalized communities equal access to the vaccine?

**Audience voting via Zoom poll function: What advice would you give Tetros Adhanom Ghebreyesus to ensure equal access to a COVID-19 vaccine in low-income countries?**

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### Panelists

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<td><strong>Heaven Yeshaneh</strong></td>
<td>Medical Doctor and volunteer for SHEBA and SHE Matters, Ethiopia</td>
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<tr>
<td>Siddhartha Sankar Datta</td>
<td>MD, MPH, Programme Manager, Vaccine-preventable Diseases and Immunization programme, WHO Regional Office for Europe</td>
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<td>Susanne Haas</td>
<td>Medical Doctor and Chairwoman of Masanga</td>
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**Heaven Yeshaneh**

Heaven Yeshaneh is a 25 years old Medical Doctor who graduated from Addis Ababa University. She volunteers and coordinates programs related to adolescents and women like SHEBA and SHE Matters, Ethiopia, and has held various positions in Ethiopian Medical Students Association, InciSion Global and International federation of medical students association. Heaven is passionate about global health and medical education and wants to contribute her share in the field of global health equity and women empowerment. It is her life goal and mission to see gender equality and quality healthcare delivery systems in Africa. Currently, she is the IFMSA Standing Committee of medical education regional assistant for Africa and Co-Chair of Gender equity initiative in Global surgery.

**Siddhartha Sankar Datta**

Siddhartha is a medical doctor with a masters in public health, working as a programme manager for the Vaccine-preventable Diseases and Immunization programme, Division of Health Emergencies and Communicable Diseases at WHO Regional Office for Europe. Siddhartha has been involved in the field of immunization since 2004 when he joined the National Polio Surveillance Project, WHO India followed by his assignment with routine immunization programme in the same project. He joined WHO Papua New Guinea in 2010 and thereafter served in WHO Lao PDR as Immunization Team Lead until 2016. Upon his relocation to Vaccine-preventable Diseases and Immunization programme in WHO Europe in 2016, he has served in the Accelerated Disease Control team and has managed the Immunization and Surveillance Data team. Since Jan 2019, he took over the role of Programme Manager. He has around 20 publications to his credit until date in peer-reviewed journals on various aspects of the vaccine-preventable diseases.

**Susanne Haas**

Susanne Haas, a medical doctor, specialized in abdominal surgery and with a PhD in anal physiology. She has been an active member of the Masanga project and organization since shortly after the beginning, joining in 2008. She has been working for brief periods in Masanga and a member of both the national (Masanga Dk) and international board of the Masanga Hospital rehabilitation Project since 2010. In 2016, she became chair of the Danish organization. During her work with the Masanga project, it has survived the Ebola outbreak of 2014-2016, a Lassa fever outbreak in 2019 and most recently the COVID-19 pandemic. Susanne forms part of a group of doctors consulting with our medical staff on ground on the Management of these situations. In Denmark, she is based in Aarhus, working at Randers Regional hospital. The COVID-19 pandemic so far has been manageable in these parts but as any working doctor, Susanne deals with aspects of the pandemic on a daily basis.
Dr. Mohamed Falilu Jalloh is a behavioral epidemiologist with the U.S. Centers for Disease Control and Prevention (CDC). He recently worked in CDC’s Global Immunization Division where he designed, implemented, and evaluated interventions to improve the global demand and uptake of life saving vaccines. He led various behavioral surveillance efforts during the 2014-2016 Ebola outbreak response in Sierra Leone including measuring national trends in Ebola-related protective behaviors, acceptability of Ebola vaccines, and trends in death reporting during and after the epidemic.

Helle Samuelsen is an associate professor at the Department of Anthropology, University of Copenhagen. Her research focuses on medical anthropology and global health with special focus on health systems and the relationship between citizens and the state. Her research is based on more than 20 years of research engagement in Africa, particularly in Burkina Faso. She is currently responsible for the project "EMERGING EPIDEMICS: Improving Preparedness in Burkina Faso" (funded by the Danish Ministry of Foreign Affairs). It is a multidisciplinary project that seeks to develop an ethically and culturally sensitive smart foresighting system in relation to new epidemics.

Dr. Jorge Castilla is the senior emergency coordinator for health emergency response at the World Health Organization. During the course of his 30 years of medical humanitarian assistance experience, Castilla has served in a wide array of positions spanning the globe and was involved in the response to conflict, natural disasters and outbreaks. He worked as a general physician, district health director and regional director of epidemiology in Colombia. He also served as a country medical coordinator for humanitarian projects in Sudan, worked on sleeping sickness in Uganda and was the country manager for humanitarian medical programs in Mozambique for returnees. Through his work, Castilla also helped with refugee reception in Uganda and DRC, and helped handle epidemics of cholera, meningitis, measles and Ebola. He has worked with the European Commission for Humanitarian Aid, Médecins Sans Frontières and the WHO. Castilla has a master’s in public health from Tulane University and a medical degree from Universidad del Rosario.

Ib Christian Bygbjerg is the founding father of global health in Denmark and has spent a lifetime treating and caring for people in many places. His key-note speech is titled:

"On chronic and acute crises in health systems - 5 decades of serving, researching and teaching in low- and high-income countries"

About the speech: Health systems are like people, some are young others ageing, some are underweight others overweight, some are acutely ill others chronic and disabled. Being responsive, resilient and recovering when challenged by a double burden of acute infection in chronic ill ageing populations requires new thinking and approaches. Can we learn from
Moderator

Flemming Konradsen, Professor, Global Health Section, University of Copenhagen

Flemming Konradsen, professor of global environmental health at the University of Copenhagen, has more than twenty five years of research and programming experience in the field of environmental health and global health. He is the director of the School of Global Health, University of Copenhagen. Professor Konradsen focuses his research on human health related to water supply, sanitation and hygiene; acute pesticide poisoning; and control of vector borne diseases in Asia, Africa and Europe. Professor Konradsen is responsible for a number of programs aimed at building research capacity at university level in Asia and Africa and has significant involvement with educational programs in East Africa, South Asia and the Nordic region. Flemming Konradsen has worked for international research organisations, universities, development NGOs and national research organizations.