



EXECUTIVE SUMMARY

On October 23, 2020, Meridan virtually convened more than 40 world leaders to explore solutions to shared challenges at The Meridian Summit on The Rise of Global Health Diplomacy. The Summit was comprised of eight sessions of over nine hours of content, on topics ranging from global health security, healthcare equity, supply chains, the role of private-public partnerships in economic recovery efforts and health innovations in the time of COVID-19. Each session featured leaders in the health and diplomatic spaces from across sectors and borders, whose conversations presented salient emerging themes and key takeaways. Below is a summary of these overarching themes and takeaways from each session.

1. GLOBAL HEALTH DIPLOMACY IS NATIONAL SECURITY. COVID-19 is an imminent threat to every government in the world and knows no borders. As a national security risk, the pandemic has heightened the need for cooperation across sectors to promote community buy-in for an effective, holistic response to global health. Governments and companies alike must restore public trust in health institutions and systems to respond to the crisis and ensure an equitable, sustained recovery.

2. SUPPLY CHAIN RESILIENCY IS ESSENTIAL. Just as the coronavirus affects all people, all countries' health and economic recovery are dependent on effective global supply chains. To improve the resiliency of local and international medical supply chains, both the public and private sectors must make a more concerted effort to coordinate how they manufacture and purchase goods. Manufacturing could improve by expanding production of personal protective equipment (PPE) and pharmaceuticals, which tend to be made in the same areas, to other countries and regions. Governments and private companies should also be more intentional about diversifying the sources where they purchase goods and services.

3. COOPERATION IS KEY. "This virus did not start in one country and stay there, and the solution will not start in one country and stay there," noted Fred Hochberg, former Export-Import Bank Chairman. A diversity of perspectives is essential to accrue better solutions and spur innovation, and sustained global cooperation will ultimately create more opportunity for everyone, as



opposed to dividing the world into “haves” and “have nots.” By focusing on bilateral, regional and international cooperation, both with other governments and with the private sector, governments can create more opportunities for manufacturing and bolster the global economy.

4. GLOBAL SOLUTIONS NEED LOCAL APPLICATIONS. The magnitude of a public health crisis like the coronavirus requires collaboration between citizens and government leaders to design localized solutions to this global challenge. It is imperative to recognize that these solutions will likely come from the local population that will take into account the cultural and environmental factors when developing practical responses that meet the unique needs of its impacted people and communities. In-country actors must support their local health workforce and empower local leaders to drive robust and sustainable local solutions that also build and restore public trust.

5. INVESTING IN EQUITABLE HEALTH CARE CAN'T WAIT. Generations to come will feel the ramifications of today's broken health system. Mental health issues will continue to rise, small and minority-owned businesses will continue to fail, and populations disproportionately affected by the virus due to the history of oppression will continue to be set back. This pandemic has caused the most inequitable recession in our American history, with financial insecurity rising among Black and Hispanic communities hit hardest by the coronavirus. As the coronavirus knows no borders, today's globalized economy cannot afford for there to be winners and losers if a future pandemic arises—the time for equitable health care is now.

PLENARIES

The Call for Global Health Diplomacy Plenary

1. WE NEED A MULTILATERAL APPROACH TO GLOBAL HEALTH. COVID-19 has brought to light inadequacies in preparedness and response, holes in supply chains, and weaknesses in communication and data sharing. This is not a challenge that can be confined or solved by one group. As Sally Susman, Executive Vice President and Chief Corporate Affairs Officer at Pfizer pointed out, there's a symbiotic relationship between business, public health, and diplomacy – and we need to draw upon the expertise from each sector to develop a multi-lateral approach to better position ourselves for the next global health crisis.

2. GLOBAL HEALTH DIPLOMACY AS AN ECONOMIC SOLUTION. “COVID has shown that the globe is smaller now, no disease is more than a day's plane ride from your front door,” U.S. Surgeon General Jerome Adams emphasized. Public health has often been characterized as anti-business, for example pitting pollution against job creation, but the greatest expense for Fortune 500 companies is healthcare. Communities that are unhealthy cost businesses absenteeism, turnover and lower production. When businesses invest in the health of their communities and workforces, it boosts the bottom line.



3. THE FIRST CHALLENGE TO TACKLE IS GLOBAL SUPPLY CHAIN AND EQUITABLE DISTRIBUTION. Elise Labott, Founder of Twopoint.o Media, joined Ambassador Ulrik Vestergaard Knudsen, Deputy Secretary-General with the OECD, in a conversation on the impact of a global health crisis on diplomatic efforts. COVID has been an amplifier of mega-trends, with both positive and negative implications. Digitally we've leaped ahead, but there's an undeniable — and possibly permanent — negative impact on globalization and trade. Knudsen cautioned against a nationalist approach to producing medical equipment and supplies, pointing out the key challenge is ensuring equitable distribution between developed and less-developed countries in terms of supplies and vaccines.

4. IMPACT OF GLOBAL HEALTH DIPLOMACY IS HARD TO MEASURE. Although health diplomacy as a field is new, it is quickly becoming as important as public diplomacy in the considerations of foreign policy. Speakers were quick to point out the difficulty in evaluating something we haven't seen before with less obvious markers of success. How do you sustain political will in planning — and budgeting — for a worst-case scenario when the indicator of success means that it never happens? Resiliency in recovery must be top-of-mind for decision-makers.

5. U.S. NEEDS DIVERSE PERSPECTIVES IN PUBLIC HEALTH DECISION-MAKING. Representatives Gerry Connolly (D-VA) and Chrissy Houlahan (D-PA) spoke with Carmen Paun, Health Reporter at POLITICO, on the need for diversity in Congressional decision-making. Quoting John Donne, "No man is an island to himself," Connolly pointed out that the U.S. needs to lean into international collaboration to address international challenges, while also working to diversify our reliance on imported medicine and equipment. Praising the current Congress as the most diverse in history, Rep. Houlahan underscored that more perspectives lead to better decisions that reflect everyone's differing realities.

Leadership in Times of Crisis Plenary

1. HEALTHCARE WORKERS NEED A SEAT AT THE TABLE, said Dr. Tomislav Mihaljevic, CEO of the Cleveland Clinic. Involving health workers who are on the ground in decision-making at all levels of government creates a safe environment in which these workers can share best practices with the global community so that we may all emerge stronger together.

2. THE POWER OF INCLUSIVE LEADERSHIP. Dr. Wayne Frederick, President of Howard University, discussed the power of inclusive leadership, including listening to all viewpoints, leading with compassion and going beyond our comfort zones to foster a better understanding. This approach is incredibly valuable as we tackle important issues, such as racial injustice and the effects of COVID-19.



3. LOOKING TO REAL-LIFE EXAMPLES OF LEADERSHIP. David Rubenstein, Founder and Co-Executive Chairman of The Carlyle Group, explored leadership through times of crisis with real-life examples, from parents to teachers to CEOs. Rubenstein synthesized the similarities of all great leaders in a few key points: they display humility, have a desire to support a mission that is bigger than themselves through giving and philanthropy, and have a bit of luck on their side.

4. TWO GLOBAL HEALTH LEADERS RECOGNIZED. Meridian honored two leaders in science for their dedication to global health. Pfizer's Chairman and CEO, Dr. Albert Bourla, recipient of the Meridian Corporate Leader Award, was optimistic that Pfizer will rise to the challenge. "Science will win this battle against COVID-19, just as it has won so many battles against disease in the past. When it does, we need to commit to continuing the spirit of partnership and diplomacy that Meridian so strongly exemplifies and is enabling us to advance breakthrough science at an unprecedented pace," he said. Dr. Rebecca Richard-Kortum of Rice University, recipient of the Meridian Global Citizen Award, was a proponent of exchange programs like the one she experienced throughout Africa, which opened her eyes to finding more equitable solutions and improving access to technology across the board.

5. A NEW CENTER FOR GLOBAL LEADERSHIP. Ambassador Stuart Holliday, Meridian's President and CEO, announced the historic, newly-created [Meridian Center for Global Leadership](#). This center will provide a platform for global leadership networks to exchange knowledge, insights and best practices, strengthening Meridian's deliberate approach in tackling some of the greatest obstacles facing our country and the world.

SOLUTION SESSIONS

Harnessing Momentum to Build Global Health Security

1. DECLINING PUBLIC TRUST IN GOVERNMENT. [Only 17% of Americans and 29% of people worldwide trust medical and health advice given by their national governments.](#) According to Gallup's Joe Daly, "Great efforts need to be made from a communications and educational standpoint if we truly want a vaccine to have the effect it can." Dr. Jonathan Margolis of the U.S. State Department believes that in order to gain more trust, the federal government needs to engage with NGOs and the private sector to have a variety of perspectives represented, heard and responded to.

2. PREPARATION IS KEY. Hatice Küçük of the G20 Health and Development Partnership stated "Every time a crisis happens, we are acting like disaster relief." As an alternative approach, Küçük suggested learning from the COVID-19 pandemic to create future preventative measures and set clear global mechanisms to ensure a quick international response to future international crises because "what you can't measure, you can't fix."



3. THE CASE FOR HEALTH INVESTMENT. Küçük also noted that nations need to look at health investment strategies and make the case for why investment into healthcare, including long-term and mental health, is a positive investment for the economy. The pandemic has shown the value in investing in and strengthening health systems, and countries need to strategically make these arguments to bring in the private sector and private investment.

4. LESSONS FROM THE PANDEMIC. COVID-19 has exposed holes in the global healthcare system, underscoring the importance of quick responses and preparedness to protect public health, Huda Al-Katheeri, Senior Director of Qatar's Ministry of Public Health, emphasized. Küçük added another important lesson was to put aside political conflicts and collaborate with global organizations like the World Health Organization to portray the same message across populations.

Reconceptualizing and Retooling the Global Health Workforce

1. GROWING SHORTAGE OF HEALTHCARE WORKERS. The World Health Organization projects there will be a shortage of 18 million healthcare workers by 2030 if there is not sufficient investment to make these career pathways more accessible across the world. Global leaders need to expand their recruitment pools and fund health education and training efforts to address gaps in representation across demographic groups. Without widening access to the healthcare field for more individuals, under-served communities will feel the brunt of lower-quality care and insufficient support.

2. DIVERSITY IN GLOBAL HEALTH LEADERSHIP MUST BE A PRIORITY. There must be collaboration across the public and private sector to advance diversity, equity, and inclusion efforts. Every country and region needs a diverse and qualified workforce to provide quality healthcare, and it is critical that we include diverse voices in order to more equitably provide for diverse communities and build trust between these communities and the health system.

3. EMPOWERING THE LOCAL HEALTH WORKFORCE. Cross-cutting management and partnerships are important for supporting the local healthcare workforce. We must recognize that solutions will likely come from the local population, who consider the cultural and environmental factors in developing practical, relevant solutions. In-country actors need to create economic opportunities and career paths for the local health workforce to develop local solutions that are more robust and sustainable for their communities.

4. SHARING INFORMATION AND EXPERTISE STRENGTHENS SUPPLY CHAINS and creates more efficient healthcare delivery systems. USAID's COVID-19 response has focused on sharing expertise through the training of its healthcare workforce on systems management and preventative measures to develop more sustainable systems globally. Similarly focused on partnerships,



the Cameroonian volunteer organization ASCOVIME hosts medical missions where healthcare professionals and medical students provide supplies in exchange for valuable experience providing care in challenging circumstances by treating patients in Cameroon.

5. STRENGTHENING LOCAL-NATIONAL COORDINATION. When citizens hold their governments responsible for the response to COVID and other public health issues, coordination between citizens and their local governments strengthens. This relationship allows government leaders to respond to the unique needs of the local community and develop solutions tailored to a local context.

Advancing Equitable Access to Healthcare Worldwide

1. THE LARGEST INEQUITABLE RECESSION TO DATE. According to recent studies, mentioned by Brad Knox, Senior Vice President and Counsel, Federal Relations to Aflac, the current global crisis has contributed to the largest inequitable recession to date. Financial insecurity has been one of the primary contributing factors to inequity in the healthcare system, specifically in Black and Hispanic communities. Despite the losses, there is hope that moving forward, trends can be reversed with an opportunity to work together on a global scale to find solutions.

2. THE EUROPEAN APPROACH. “COVID-19 has highlighted what we knew all along,” that we must work across borders to effectively address a global crisis, said His Excellency Stavros Lambrinidis, Ambassador of the European Union to the U.S. While explaining the universal healthcare system of Europe, which grants coverage to all regardless of class, race, gender or ethnicity, the Ambassador emphasized that “healthcare is a human right.” However, Ambassador Lambrinidis said there are still disparities within a universal healthcare system. He explained that before health and healthcare can be understood, these five areas need to be understood: economics, society, governance, the environment and world leadership. The European Union has been using these areas to formulate action plans in the COVID-19 pandemic, and more importantly to provide healthcare and financial relief to countries that may not have the infrastructure or capacity.

3. PULLING BACK THE CURTAIN ON HEALTHCARE DISPARITIES. The pandemic has shined a light on and exacerbated the historic disparities vulnerable and underserved communities have lived with globally and across the United States. Black, Latinx and Indigenous Peoples in the U.S. are bearing a greater burden during the pandemic, specifically in terms of mortality rates which are highest among those communities. Dr. Webb Hooper discussed that the NIH has launched the Rapid Acceleration of Diagnostics (RADx) program to encourage scientists and organizations to test innovative approaches and strategies to scale up COVID 19 testing, which aims to prioritize the most vulnerable and underserved communities across the U.S.



4. A NATIONAL BEHAVIORAL RESET TOWARD MENTAL HEALTH is needed to address specific needs and the underlying culture and local barriers that have developed in Black and Latinx communities throughout the United States. Dr. Monica Webb Hooper, Ph.D., Deputy Director of the National Institute on Minority Health and Health Disparities at National Institutes of Health, spoke on the importance of creating a support system that can aid underserved communities in ways that reach beyond the COVID-19 pandemic because, “marginalized communities are on the frontline for both COVID and mental health.” In order to destigmatize mental health within these communities, Dr. Webb Hooper suggests that behavioral strategies be implemented in order to address psychological conditions and to gain control of a large scale, national, behavioral reset.

5. RACISM AND HEALTH CONVERGE. Due to “the collision of COVID-19 and other disturbing social justice events, we are in what has been described as a racial reckoning,” says Dr. Webb Hooper. This confluence of events has brought an opportunity for stakeholders across the healthcare industry to have conversations about how the issues of racism and health care intersect. Dr. Webb Hooper hopes the U.S. can leverage this opportunity to work toward and achieve health equity. By using a “multi-level model” Dr. Webb Hooper is hopeful that equitable partnerships are possible between the healthcare system and underserved communities.

The Private Sector’s Role in Rebuilding a More Equitable Economic Recovery

1. BUSINESSES THAT DO WELL, DO GOOD. Suzanne Clark, President and CEO of the U.S. Chamber of Commerce, spoke about the need for the private sector to expand their view of doing good to more than just corporate social responsibility initiatives, but also to providing jobs that bring food, security, housing to more communities. JP Morgan Chase has achieved this through their Advancing Black Pathways program, which seeks to accelerate economic empowerment in the Black community through understanding the connection between education, wealth and career opportunities.

2. THE IMPACT OF INTENTIONAL SPENDING. During these tough times when small businesses are struggling, now more than ever it is essential that bigger companies look at the smaller businesses they employ and partner with. When possible, large companies should look to support and invest in people-of-color owned businesses and businesses in underserved communities in order to provide the necessary economic stimulus for an equitable recovery in the wake of the pandemic.

3. EQUITY, DIVERSITY AND INCLUSIVITY IS GOOD FOR BUSINESS. As companies seek to invest in under-served communities and implement meaningful equity, diversity and inclusion initiatives, it is important for them to understand the long-term economic potential of their investments.



Sekou Kaalund from JP Morgan Chase expressed his belief that setting goals provides the space for his CEO to understand this impact. He also noted that his success in creating inclusive and equitable growth in communities will provide a greater number of customers for the future.

4. MINDING THE GAP. When it comes to corporate social responsibility, companies should not always seek to do something new and innovative, but instead look at what other companies are doing and find ways to coordinate efforts. Suzanne Clark underscored the importance of collaboration on philanthropic initiatives, saying that it benefits the communities and helps to “fill the holes” that are missing in this work.

Trading Up: Rethinking International Health Supply Chains

1. “SUPPLY CHAINS ARE NOT A ZERO-SUM GAME,” Prashant Yadav, Senior Fellow at the Center for Global Development, said, emphasizing that a sustained global cooperation will ultimately create more opportunity for everyone. “You don’t necessarily lose by letting other countries have more. You gain.” There must be a more concerted effort to coordinate countries’ manufacturing of goods and how they purchase them. Multiple panelists referenced COVAX — the vaccines arm of the World Health Organization’s Access to COVID-19 Tools (ACT) Accelerator — as a model of collaboration that more regionalized networks should strive to emulate. Panelists also acknowledged that much still needs to be done in addressing issues of access to vaccines and other supplies amongst the most under-resourced communities, particularly in the Global South.

2. US–CANADA RELATIONSHIP AS A MODEL. Ambassador Kirsten Hillman of Canada highlighted how while the pandemic has forced much of regular cross-border activities to slow down or stop, bilateral trade of goods and services has kept to and surpassed pre-pandemic levels (approximately \$2 billion daily). This encouraging statistic includes the exchange of essential medical supplies like personal protective equipment (PPE), medicine, and other medical devices. She pointed to the strong bilateral relationship between the United States and Canada as a model for how economic activity and exchange of goods can continue despite the pandemic.

3. PUBLIC-PRIVATE COMMUNICATION IS ESSENTIAL. In order to truly ensure a robust and lasting supply chain that reflects the needs of all stakeholders, governments must continue to work closely and transparently with the private sector. Terrance Brick of Boston Scientific noted that governments should not hesitate to turn to private companies for their experience and professional opinion on matters related to strengthening supply chains, and all agreed that open, frequent communication amongst all stakeholders is one of the key ways the previous pandemics and other global health crises were eventually resolved.



4. DIVERSE SUPPLY CHAINS ARE RESILIENT SUPPLY CHAINS. In order to improve the resiliency of local and international medical supply chains, all panelists agreed that both the public and private sectors must undertake a concerted effort to better diversify where goods are both produced and purchased. This means taking a critical look at why certain products, such as personal protective equipment (PPE) and certain pharmaceuticals, tend to be made in the same areas, and seeing if production can be expanded to other countries, and whether governments and companies can be more intentional about where they purchase goods and services.

Global Health Innovations in the Time of COVID-19

1. URGENCY ACCELERATING ARTIFICIAL INTELLIGENCE INNOVATIONS. COVID-19 has uncovered gaps in health coverage and accessibility, prompting the development of new technological applications to solve urgent issues. Artificial Intelligence is helping monitor emergencies experienced by elderly people in California and alert their healthcare providers, and Spot, the robotic dog, has been deployed in parks throughout Singapore to spread social distancing reminders. Advancing robotic and digital health technologies requires investment in research, diagnostics and development, underscoring the need for governments to develop industry and academic partnerships to best implement these cutting-edge technologies.

2. MEETING DEMANDS FOR A CHANGING HEALTH LANDSCAPE. As COVID-19 has continued to upend lives, health professionals and companies have pursued more efficient means of obtaining and distributing necessary supplies without compromising quality. The National Institute of Health (NIH) has invested over \$450 million to removing barriers to testing and creating tests that are faster, cheaper and more reliable and accessible. There has been a similar push to shorten the manufacturing process for vaccines to meet growing demand by improving coordination. Biotechnical companies like Gilead Sciences have turned to creating additional health advancements like a six-month injectable treatment for HIV, which would help reduce trips to medical facilities that may be less accessible during the pandemic.

3. BUILDING PUBLIC TRUST. Without actively cultivating public trust in public and private institutions, civil society may fail to buy into life-saving technologies. One example of this is the public response to CRISPR genetic technology, which has generated weariness for its ability to edit the human genome, even though its innovations recently won the 2020 Nobel Prize in Chemistry. Strong trust in institutions, however, can lead to collective implementation, like in Singapore where 40% of the population has downloaded the contact-tracing application TraceTogether which has helped Singapore achieve the lowest COVID-19 death rate in the world with only 27 deaths to date across 57,000 COVID-19 infections.

