Child Health Task Force - PSE Subgroup

Meeting Date: June 25, 2019

Presenter: James White
Attendees: Elizabeth Streat, Michel Pacque, Nancy P. Harris, Catherine Clarence, Suzanne, Alfonso Rosales, Ashley Schmidt, Debra P., Anna Wadsworth, Kate Gilroy, Rashed

- SHOPS Plus was asked to prepare a review/framework that summarizes global evidence on engaging and involving the private sector in the global response to emergencies/natural disasters

- The “Whole Approach” is essential to health systems emergency preparedness and effective and prompt responses

- Core challenge: the private sector has a crucial role to play in helping health systems and communities remain resilient during emergencies, but how can public/private responses be optimized?

- Traditional disaster preparedness approaches struggle to detect and react appropriately and responses are often marred by poor communication

- Three priorities emerged from the review: the need for more partnerships, the need for better partnership structures, and the need to act early and holistically
  - Partnerships: communicating who does what in case of an emergency
  - Partnership structures: defining partnership structures and building coordination systems between public and private sector entities prior to emergencies occurring is essential
  - Acting early and holistically: act early while thinking of long term outcomes, what are the early intervention areas that the private sector could participate in?

- What works when engaging the private sector? Proactive funding for partnerships, effective and transparent communications, ensuring that partnerships are mutually beneficial, and identifying a public sector stakeholder that can lead and champion engagement

- Barriers to successful engagement of private sector:
  - Barrier 1: Historically weak partnership structures- in the case of the SARS outbreak, hotels were engaged at too late a stage
  - Barrier 2: Responsibility and legitimacy issues- identifying and assigning who is responsible for what, addressing concerns around the privatization of emergency aid
  - Barrier 3: Funding Concerns- funding is not proactive until the crisis is truly “ramped up”
- Barrier 4: Lack of Systems Alignment- as local communities and business mobilize, what is the role of supranational entities?

- Barrier 5: Poor Communication- lack of communication or poor communication strategies can lead to cascading issues and dysfunctions

- Barrier 6: The Complexity and Diversity of Health Emergencies and Disasters- there is a need to have multiple emergency preparedness plans in place (Indonesia has multiple emergency preparedness responses)

**Discussion points:**

- Lack of partnerships during emergencies: what is the role of funders?

- Examples of successful engagement of the private sector can be drawn from developed countries- for example, New Hampshire disaster preparedness

- Business continuity management- can we pull lessons from corporations (Waffle House, Home Depot) to think about how disasters can be managed?