## 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

 $\circ~$  Partnerships: communicating who does what in case of an emergency

 $\,\circ\,\,$  Partnership structures: defining partnership structures and building coordination systems between public and private sector entities prior to emergencies occurring is essential

 $\circ$  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:

 $\,\circ\,\,$  Barrier 1: Historically weak partnership structures- in the case of the SARS outbreak, hotels were engaged at too late a stage

 $\,\circ\,$  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"  $\,\circ\,$  Barrier 4: Lack of Systems Alignment- as local communities and business mobilize, what is the role of supranational entities?

 $\,\circ\,$  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:

 $\,\circ\,$  Lack of partnerships during emergencies: what is the role of funders?

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

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