

A Special Article on: The Global South and COVID-19 Crisis

Collaboration, Co-operation and the costs involved between countries and WHO



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This pandemic stands to be a testimony of solidarity among the people of the Global South, who can show the way to all, that regardless of all the shortcomings in their economies and infrastructure, the Global South can still stand together and face the issues thrown towards it, when it matters the most.

Introduction

The World Health Organisation declared the Coronavirus outbreak as a pandemic on 11th March 2020. Yes, people, it is that bad. However, at the time of writing, it is going to get worse, much worse. This article looks at International collaboration in the fight against coronavirus, the idea is to shed light at how countries are fighting this pandemic, the ways of, and the costs involved in making the cure and finally the efficiency of collaboration between countries along with the role of technology in combating the pandemic. Richard Kozul-Wright, the Director of Division on Globalisation and Trade Strategies at United Nation's trade and development agency (UNCTAD) stated that the countries most affected by the virus, including China, where the outbreak first took place, would likely introduce "expansionary measures".

This is because the predicted slowdown in the global economy is likely to cost at least one trillion, thus meaning that the focus would be on increasing spending or tax cuts to make up the economy. Economic Co-operation and Development have

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stated that “Global growth could be cut in half to 1.5 percent in 2020”, definitely not

The Pandemic and the South Asian approach to deal with it

Combating this pandemic, the South Asian countries have been focusing on technology for ensuring public health. South Korea is a leading example of using technology for conducting rigorous testing (Economic Times, 2020), which has been over 20,000 people per day since the 25th of February. The approach, also taken up by Singapore and Taiwan involves Real-time integrated tracking and analytics of infected and the potential infected (Firstpost, 2020). Co-operation between South Asian countries can be seen in the form of the videoconference that took place on the 15th of March between Narendra Modi and eight-member countries, spanning the South Asian region. Known as the South Asia Association for Regional Co-operation (SAARC), the unofficial summit saw the participation of leaders from seven countries while Pakistan was represented by its health minister. The meeting enabled the Prime Minister of India to launch a COVID-19 emergency fund. National leaders of South Asian countries proposed different ways of combating coronavirus. Afghanistan suggested the need for a

a good sign for various industries (World Economic Forum, 2020).

telemedicine framework to ensure healthcare reaching remote areas. Sri Lanka emphasised on creating social awareness and having a central depository for disseminating information. Pakistan, meanwhile, offered holding a videoconference of all SAARC health ministers to enhance co-operation and allow effective collaboration for dispensing and exchanging key information and data (World Bank Blogs, 2020). China, despite being the country where the virus originated from, is supplying masks and medicines to both Iran and Italy, at a profit.

The Chinese Way: A study in using technology as a tool for ensuring normalcy

The achievements by the Chinese to contain the spread of the virus in China, provides an avenue to the future. Tencent, a Chinese internet technology company has had its industrial internet service provider focus on primarily business and industry during these trying times. This has ensured normalcy, as it's provided society a platform to keep functioning. The industrial internet incorporates technologies, including 5G, artificial intelligence and cloud computing among others. This helped in building the

Huoshenshan and Leishenshan Hospitals in just ten and twelve days respectively, both of which contain state of the art facilities. The industrial internet has assisted hospitals and institutes to use Digital tools like Building Information Modelling (BIM). This tool helped in bringing together hundreds of designers across the nation. Thus resulting in hospital design plans and construction drawings being produced in twenty-four and sixty hours respectively (Industrial Internet, 2020). This kind of well-organized structure was on full display at Onsite construction where thousands of machines were monitored and coordinated real time through the platform. Taking quick action against the spread of the virus, Chinese companies had incorporated medical supplies into their business scopes. Vertical online healthcare platforms such as DXY began offering public remote healthcare services by mid-February. The “Health QR Code”, introduced in China, allows users to submit information about travel to major epidemic outbreak regions enabling people to provide details of infected and those in close proximity of the infected. For simplifying virus prevention and control, a three-colour scale is with the people who are part of the QR code. This indicates the person’s health history, thereby helping in better ways of prevention. China also has

around 276 million students learning online. It is essential to note that this process was started in February itself and has only been made possible by the collaboration of the government with industrial internet based educational platforms, that function free of cost. While keeping the economy functioning somehow is a major concern, countries are still in a race against time to find a cure for ensuring normalcy.

The WHO and the need for international collaboration

The World Health Organisation (WHO), sees the virus as highly communicable and the need to combat it, is a top priority. For the same, the WHO has announced a megatrial of the most promising coronavirus treatments. Called SOLIDARITY, it is to test the capabilities of drugs to find whether they can stave off or potentially cure infections. To combat the onset of patients suffering severely from the disease, treatment centres are looking to repurpose drugs that have been approved for other diseases. The two main reasons for this are that it may take years to develop and test drugs for coronavirus by using compounds from scratch and the fact that the approved drugs are largely safe. The drugs that the WHO will be using in

the trial are Remdesivir, Chloroquine, Ritonavir and Lopinavir (Kupferschmidt K., & Cohen, J, 2020). It must be seen though that bringing a COVID-19 vaccine will require assistance from a private-sector pharmaceutical company as it'd have the capacity to conduct clinical trials and manufacture millions of doses. The WHO has also included a “myth buster” section on its website to deal with unsubstantiated theories and treatments for Covid-19, which would help in preventing online circulation of sensitive information and money, which people may indulge in to make gains, taking advantage of the current situation.

The Solution and the costs involved

However, even if a vaccine is developed, companies would face an overwhelming amount of political pressure to ensure that it is available cheaply. The solution seems to be bolstering legal protection for making life-saving medical treatments and cures (Mosoff A., 2020). Presidential Candidate Bernie Sanders recently pointed out “Once a vaccine for coronavirus is developed, it should be free”. The statement essentially moves price control out of the window, which would have acted as an incentive for the pharmaceutical companies. According

to me, the solution lies in providing for cash prize incentives, which only be payable in case a firm makes vaccines available to the patients at low or zero costs. The most successful example of such a solution is the modern-day partnership is between the Bill & Melinda Gates foundation along with several national governments to incentivize development and dissemination of vaccines against pneumococcal disease (Hemel D., 2020). Currently, in the U.S., Regeneron Pharmaceuticals are in a deal with the federal Biomedical Advanced Research and Development Authority (BARDA) where preparation of a vaccine is in advanced stages. In the deal, the federal BARDA agreed to pay 80 percent of the development and manufacturing costs for the vaccine. However, the catch is that the deal doesn't include the requirement of the product being actually affordable. Even remdesivir, one of the aforementioned drugs that is part of the megatrial, developed by taxpayer-funded money, sees Gilead Sciences holding exclusive rights to the drug, allowing them to set pricing structures accordingly. The capitalist proclivities of this industry are ensuring that the ideas of Democratic lawmakers to push towards stronger access and price affordability of such drugs cannot go beyond the realms of a faint possibility.

This is eschewed by America's Health Secretary Alex Azar's recent statement that he could not guarantee coronavirus treatments or vaccines being affordable despite the influx of money by the taxpayers (Mazzucato M., 2020). Chile, however tells a different story. Concerned about the access to treatments of the coronavirus, the lower house of Congress in Chile passed a nearly unanimous resolution permitting the government to issue compulsory licenses for medicines, vaccines or diagnostics for aiding the combat against coronavirus (Silverman E. 2020). It isn't known though whether the resolution in actuality is binding on the government or not. The advantage of countries collaborating with WHO can be seen when the French biomedical research agency announced that they will co-ordinate an add-on trial in Europe, by the name of Discovery. Following the WHO example, it would include patients from seven different countries. The good news is that, as I'm writing, Efforts are being made worldwide to fight against this virus. It is essential to bear in mind that it will take time, but we need to note that the way forward will necessitate medical collaboration and acceptance of technological advancements.

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