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Analysis

Disappointing Results from the G20 Health Ministers' Meeting

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On April 19, 2020, G20 health ministers met by videoconference to follow up on the work and instructions of their leaders at their extraordinary virtual summit on March 26. The health ministers produced a deeply disappointing result from a badly divided group. The only outcome document was a short 253-word press release issued by the Saudi secretariat, and the concluding press conference was cancelled, leaving the world wondering what that meant. The press release made no reference to the now glaring gendered dimensions of the COVID-19 crisis, nor did it mention any support for the work of the many international, national, sub-federal governments, businesses and non-governmental organizations that have mobilized to combat the disease and find a cure.

In many ways the message was all too clear. The press release made only one firm commitment — that the ministers will meet again if they decided to. This was a sharp contrast from the March 31 meeting of finance ministers and central bank governors, who made six commitments — five referring to COVID-19 and two specifically related to health. It was fewer than the G20 trade ministers, who made five commitments on health of their 14 overall, when they met on March 30. It was also much fewer than their leaders, who made 20 commitments on health, of the 47 overall, when they met at their emergency virtual summit on March 26.

The loudest message from the G20 health ministers came from their greatest silence. Not once did the press release refer to the World Health Organization, even though its director general Dr. Tedros Adhanom Ghebreyesus was present to make important remarks. The Saudi host reported that the ministers discussed creating an innovative task force and a knowledge-sharing hub. If so, they ignored the fact that these already exist, at the WHO, which since its creation in 1948 has been one of the world's most developed scientifically professional information-sharing body, with an vast network of regional organizations and country representatives. It was the organization that abolished smallpox at the height of the Cold War between the United States and the Soviet Union. It was on the verge of eradicating polio in the world and Ebola in the Congo before the COVID-19 pandemic and ensuing politicized controversies diverted resources and attention elsewhere.

The entire press release exuded complacency rather than urgency, even as the global COVID-19 death toll soared and a second wave erupted in Japan and Singapore that had recently controlled it. G20 leaders collectively said on March 26 that COVID-19 was their "absolute priority." The health ministers noted that they wanted "to protect lives, tackle illness, strengthen global health security, and alleviate the socio-economic impacts resulting from COVID-19."

At the end of that sentence lies the clue about the causes of the great change from the G20 in late March and the health ministers now. Just before the G20 health ministers met, U.S. president Donald Trump said he wanted to open up the beaches, restaurants and workplaces of the United States and supported what some saw as civil disobedience against those state governors who resisted his call. Simultaneously, President Jair Bolsonaro of Brazil, who still said that COVID-19 was merely the "sniffles" from seasonal influenza, dismissed his highly respected, professionally competent health minister and replaced him with a political subordinate guaranteed to argue the president's case. And as Easter celebrations started in Russia, President Vladimir Putin said COVID-19 was totally under control in his country, even as the infections and deaths there steadily

rose.

There currently seems little chance that the health professionals in the G20 Health Working Group can ignite a bottom-up process of needed action that will convince their political ministerial masters to act. For its third meeting, held just before the ministerial, the working group's agenda faithfully followed the priorities set by the Saudi host on December 1, 2019, before the COVID-19 pandemic and its death toll appeared. The BRICS cannot be counted on, with both Brazil and Russia in varying degrees of COVID-19 denial. The G7 can possibly do better, especially with Japan in a national state of emergency due to the pandemic. Yet when its leaders met on April 16, with Donald Trump in the host's chair, they could not agree even to release a public report of what was done.

At the moment there remain two catalysts that could produce change. As the weeks unfold, the U.S. death toll will continue to soar and spread to the states formerly parts of Trump's political base, his approval ratings will continue to drop, the presidential election on November 3 will approach, and his effort to blame others for the deaths of so many American lives, jobs, incomes and hopes for greatness will fail. He might then turn to international cooperation, perhaps when he hosts the G7 summit on June 10. In the meantime, the world will have to rely on the WHO, and strengthen it as COVID-19 kills more people in the rich G7 and the poorest in Africa and elsewhere. The G20 was created at the dawn of the globalized world in 1999 to compensate for the failures of the major multilateral organizations designed and launched from 1944 to 1948 for a very different world back then. Now the WHO, recently reformed under Dr. Tedros's vision and leadership, will have to do the job until a few G20 leaders, with no medical or health credentials or experience, will be forced to defer to the WHO's world-leading expertise.

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