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country report

Multilateral Dialogue Geneva



Geneva Telegram

**Weekly overview of developments in multilateral Geneva on COVID-19
(27 March - 2 April)**

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The „Geneva Telegram“ analyses current developments in the multilateral organizations in Geneva relative to current events. During these weeks, it focuses on developments in the Geneva-based organizations related to COVID-19. The pandemic does not only have a health dimension but also substantial consequences for the future of the global economy, world trade, work, flight and migration, the humanitarian sector and human rights. It also affects the multilateral system as a whole.

From the discourse in Geneva it is apparent that the international community is competing on many fronts against time: whether this is through strengthening health systems to give them the necessary testing capacities and equipment, preparing countries likely to be infected, dealing with the threat of a humanitarian catastrophe as a result of the spread of COVID-19 in conflict areas, or procuring urgently needed financial help to fend off economic and social consequences.

WHO: first lessons, a race against time, worries about health systems

At the beginning of the week the World Health Organisation (WHO) held a virtual meeting involving around 15 health ministers. In particular, China, Japan, the Republic of Korea and Singapore shared their various experiences. A common recognition was arrived at: the determining factor is early recognition and tracing of contacts, including isolation of affected persons. It is also very important that measures be taken to build confidence and engage the local community. The importance of the latter measure is often underestimated, despite it being a co-determining factor in containing the disease. There was also agreement on the fact that the worldwide lack of personal protective equipment remained one of the most urgent threats. The WHO therefore called on the G20 countries to work closely with the private sector to increase production and to assure the free traffic

of health products and equitable distribution according to need.

The WHO is itself working intensively with various partners to significantly improve access to lifesaving products like diagnostics, protective equipment, medical oxygen and ventilation devices, etc. To date the WHO has sent two million sets of personal protective equipment to 74 countries and prepared a similar amount for dispatch to 60 more countries. Yet, current needs are far higher. Director General Tedros Ghebreyesus reiterates, in mantra fashion, the need to intensify production and testing capacities. This is a race against time: the WHO is preparing in the coming weeks for the possibility that the pandemic will overrun Africa and South and South-east Asia, where home working and social distancing are hard to implement whilst in many countries lockdowns are slowly being lifted. In this context, the provision of as many testing capacities as possible will be decisive when combating the crisis.

The rapidly rising requirement for health personnel and shared facilities in turn will often lead to overloading of health systems. Earlier outbreaks have shown that where the health system is overloaded, treatable illnesses and those that are preventable through inoculation increased dramatically.

Nonetheless, continuation of key health services is essential: the WHO has therefore published guidelines for health systems on the reaction to COVID-19 that allows for fundamental health services to

be kept intact. The guidelines include a handbook on setting up treatment centres.¹

We cannot expect the crisis to suddenly depart. According to the WHO as well as GAVI, the Global Alliance for Vaccines and Immunisation, a vaccine is as much as 12 to 18 months away. There is therefore an urgent need for therapeutic agents for treating patients. In Norway and Spain, the first patients were included in the solidarity trial launched by the WHO, in which the safety and effectiveness of four different medicines and combinations of medicine to combat COVID-19 were compared. Since then the number of countries taking part in the study has risen to 45. The more countries join in, the faster the results will be seen. The WHO expressly asks all countries not to apply any therapy which has not been shown to be effective in treating COVID-19. A therapy should only be used for illnesses for which it has been proven effective.

A positive sign is the financial solidarity that so far has been shown to exist between states and private actors: the COVID-19 Response Fund has received more than 622 million US dollars and is thus not far from achieving its goal of 675 million US dollars. Most of the money comes from the democratic countries of the global West.

An additional troubling challenge, according to WHO representatives, is combating misinformation. The WHO is itself a victim of cyber-attacks; and certain parties are posing as WHO experts and even as Director General Tedros.

Warnings of humanitarian drama

Calls for help in the humanitarian sector become ever more desperate: a joint letter from the WHO, the UN refugee agency UNHCR, the International Organisation for Migration (IOM) and the office of the High Commissioner for Human Rights (OHCHR) warns of the increased danger particularly vulnerable groups like refugees, migrants, prisoners and stateless persons may face. For example, border closures should not be instigated at the expense of international protection standards for refugees and migrants. Many experts fear an imminent outbreak of COVID-19 in refugee camps.

UN representatives repeatedly ask that better protection be afforded for older members of the population; other voices mention the growing instances of domestic violence, which affect women and children in particular. IOM and UNHCR placed special emphasis on the situation of refugees and migrants from Venezuela and called for an intensification of humanitarian aid. A total of five million people are affected.

The President of the International Committee of the Red Cross (ICRC), Peter Maurer, raised alarm in an opinion article.² The ICRC also pointed to the troubling situation in Africa. Without immediate action, the outbreak will have devastating consequences there. Several countries are already overwhelmed by the demands of coping with measles and malaria; and many countries rely on imports of food. Travel restrictions imposed by many governments are increasingly posing a danger to labour forces. The situation in war zones worldwide is critical in particular: it will apparently be almost impossible to fight COVID-19 in conflict areas unless there is immediate action by states and humanitarian agencies. The ICRC estimated financial needs at 800 million Swiss francs.

According to the International Commission of Inquiry (CoI) on the Syrian Arab Republic, the situation in Syria continues to be worrying. Medical personnel have been attacked by all parties in the conflict, but in particular by pro-government forces.

According to the WHO, 70% of health workers have left the country and only 64% of hospitals and 52% of primary medical care stations are still in place. According to the United Nations' Agency for Coordinating Humanitarian Affairs (OCHA), the virus could unleash a catastrophe in the entire country. There was a high risk that Syria would not be able to contain the pandemic. The announcement by the Syrian Democratic Forces (SDF) that military action was being deferred because of the pandemic was welcomed. The UN Secretary General's call for a global ceasefire has found only limited acceptance.

The UN High Commission for Human Rights criticised the Hungarian government for governing by decree and for threatening prison sentences of several years for the dissemination of misinformation.

¹ The guidelines are available [here](#).

² The opinion article can be found [here](#).

Free movement of goods – a warning about the consequences of uncoordinated trade

More and more, the importance of maintaining the normal movement of goods is taking centre stage. The Secretary General of the World Road Transport Organisation (IRU), Umberto de Pretto, warned in an interview³ that uncoordinated border closures would pose a threat to the supply of foodstuffs and medicines. Long queues could lead to the spoiling of goods and thus to supply bottlenecks. It is said that countries like Afghanistan, Turkmenistan, Pakistan and Iran have closed their borders completely. According to the IRU, road transport has declined by 30 to 40% as a result of uncoordinated border closures.

In a similar statement on 31 March, representatives of the Food and Agriculture Organisation (FAO), the WHO and the World Trade Organisation (WTO) said that trade might be restricted and that this would influence food delivery chains, whether through limited freedom of movement of agricultural workers or those in the food sector, or as a result of waiting times for food containers.⁴

At the same time, WTO Director General Ricardo Azevêdo welcomed the promise by G20 finance ministers to guarantee cross-border trade in important goods and to share trade-related information with the WTO.

Demands for economic and social solidarity

As was the case last week, various organisations demanded a more inclusive social system and world economic system. The message was that we should not repeat the mistakes of 2008. This is reflected, among other things, in the report of UN Secretary General Antonio Guterres⁵, who describes the COVID-19 crisis as the greatest test ever faced since the UN's foundation. To help lower and middle income countries, the Multi-Partner Trust Fund: "COVID-19 Response & Recovery Fund" was founded.

On the basis of a report from the United Nations Conference for Trade and Development (UNCTAD), an investment fund of 2.5 billion US dollars will be provided for the mitigation of the worst consequences: the funds will be composed of: one billion via access to the IMF's Special Drawing Rights; a further billion for debt relief or debt moratoriums; and 500 million from the Public Development Cooperation.⁶ Here too – as is currently the case in the EU – there is mention of a Marshall plan, be it on a global level. Various organisations are voicing the demand for debt relief for particularly badly affected countries. The message: solidarity is in the self-interest of every country, since the crisis will not be overcome unless the most vulnerable countries are economically and medically protected.

The World Economic Forum (WEF) called on companies to contribute to the fight against the virus. WEF President Klaus Schwab recruited companies to a "COVID-19 Action Platform"⁷ to observe so-called "stakeholder principles", which include worker protection, the continuity of delivery chains, fair and stable prices, government and social support and the assurance of long-term survivability for companies. To back these statements up, the WEF published an initial paper with guidelines for entrepreneurs and recommendations for handling the workforce.⁸

The International Labour Organisation (ILO) called for social dialogue between governments, employees, and employers on controlling the crisis. They could not allow the 2020s to be a repeat of the 1930s. Director General Guy Ryder proposed unprecedented fiscal and political measures to prevent the current decline from turning into a long-term recession. At the same time, he praised the meeting of G20 countries as a step in the right direction.

The crisis will also affect climate monitoring

Week by week, it becomes ever clearer how far the ripples of the coronavirus crisis are spreading. It was now the turn of the World Meteorological Organisation (WMO) to express concern about the

³ The interview is available [here](#).

⁴ The statement can be found [here](#).

⁵ The report can be found [here](#).

⁶ The report is available [here](#).

⁷ Please find more information on the platform [here](#).

⁸ Workforce Principles for the COVID-19 Pandemic Stakeholder Capitalism in a Time of Crisis can be found [here](#).

consequences of the pandemic on the quality of weather forecasts and climate monitoring. One of the reasons is the reduction in flights; a not inconsiderable amount of data is gathered from measurements taken during flights.

Comment – the WHO has an irreplaceable source of information and expertise

The role the WHO has played and continues to play as a platform for expertise in this crisis is often underestimated. Its role is significant, despite its limited funds and dependence on the goodwill of member states. It should be taken seriously as the primary source of facts and recommendations.

In addition to its press conferences, the WHO provides very well-explained and -presented information on COVID-19⁹. For instance, it explains which chronic illnesses make people more vulnerable to a severe case of COVID-19, why smoking and the consumption of alcohol increase the risk of infection, and it also gives instructions on maintaining physical and mental health during quarantine. In addition, it provides facts on the illness and corrects "fake news", such as statements that it is not possible to have a 10-second breath test for the virus and that COVID 19 is not airborne. The WHO gathers the latest information and findings and makes it public directly.

The WHO has published more than 40 guideline documents with detailed evidence-based recommendations for governments, hospitals, health personnel and the general population. There is also a free online course by the WHO on COVID-19, which has already been followed by more than a million people around the world.¹⁰ The WHO also plays a coordinating role and is a strategic platform for finding answers for the likely course of the crisis in the coming months.

Reading recommendations

Peter Sands (Director of the Global Fund to fight AIDS, TB and Malaria):

Rethinking Global Health Security:

<https://www.theglobalfund.org/en/blog/2020-03-27-re-thinking-global-health-security/>

⁹ The information is available [here](#).

¹⁰ Courses are available [here](#).

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