



Putting Clothes on the Emperor: Opportunities for Healthcare and Research in the COVID Aftermath

**Virtually CAHSPR Conference
May 29, 2020
From Melbourne, Australia**

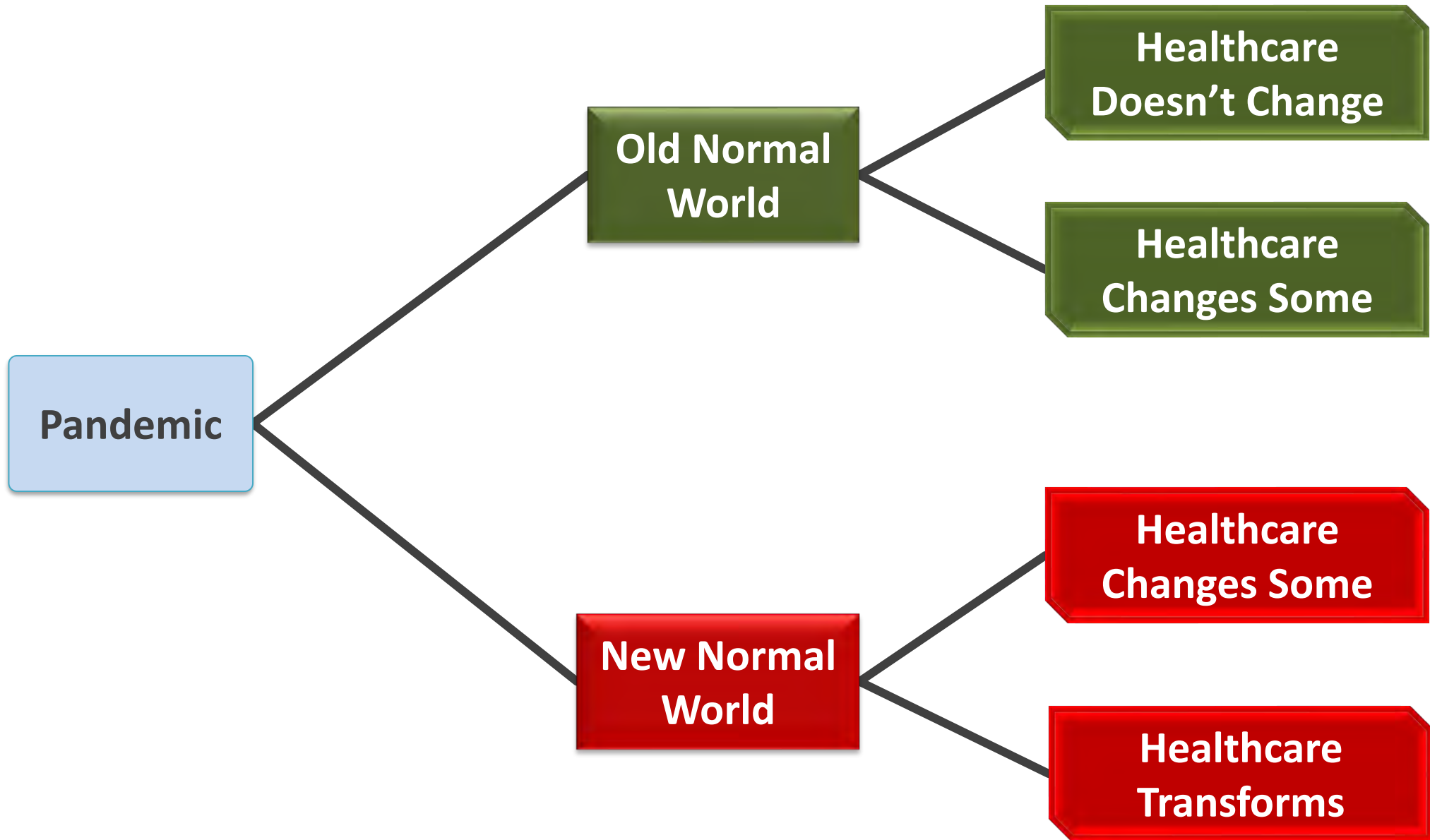
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Why the Naked Emperor Metaphor?

- We knew it wasn't whether, but when there would be a pandemic
- We knew the skeletons in the long term residential care sector closet
- We knew our supply chains and global trading system would be vulnerable in a crisis
- We knew there was insufficient global vaccine, test, and anti-viral treatment development capacity
- We knew pandemics strike disadvantage hardest
- We knew that economic inequality would create huge future health problems but didn't articulate or mitigate the trade-offs

This Is An Agenda, Not A Prediction

- I'm not predicting what *will* happen – I am not an Oracle
- Nothing is inevitable – Canada and the world have choices to make
- New conversations should take place. Maybe they will, maybe they won't
- It is easier to identify things that are increasingly obsolete/untenable than to describe what their replacements will look like
- The Big Question: is the standard deviation of “normal” permanently enlarged?
- If the world's problems are now fundamentally different, our approach to solving them will also have to be different



Part I

Opportunities for Canadian Healthcare: Has the Time Finally Come for Accelerated Change?

Things We've Known for 10 to 50 Years

- The basic architecture of Canadian medicare is outdated, a relic of the 1960s and poorly aligned with contemporary needs
- High-performing health care systems have shown that virtual care is both effective and desirable – from a patient perspective
- Primary care needs to be more comprehensive, timely, and effective
- Mixing a profit motive with nursing home care is a moral hazard waiting for an opportunity to do serious damage
- Fee for service is a peculiar way to pay anyone.
- Countries that chase low tax rates will lack the infrastructure to deal with novel and rapidly emerging threats

Early Lessons from the Pandemic

- Virtual care makes sense and many patients prefer it
 - Just like Kaiser Permanente (60% of visits virtual pre-pandemic)
- Pandemic control is crude and highly disruptive
- The intelligence system needs a lot of work
 - Over-reliance on case fatality rates
 - Undercounting of some deaths
 - No reliable prevalence data
 - No standardized rates of infection or mortality
- The golden century of increasing life expectancy may be over

Early Lessons from the Pandemic (cont'd)

- Very difficult to get a complete picture of individual and environmental risk factors and relative risks
- The system can mobilize and innovate quickly in a crisis
- People by and large trust government and do what's asked of them – in a crisis
- No country spent a lot preparing for a viral outbreak
 - Contrast with Y2K where concern about catastrophic computer crashes resulting from clocks turning over to the new millennium unleashed an estimated \$460 billion US (2019 dollars) in spending

Part II

Opportunities for Canadian Health Services and Policy Research

Research and Publication Can Speed Up When They Have To

- A May 24 Google Scholar search for (“COVID-19” and “research” and “pandemic”) yielded 16,000 hits for 2020 alone
- Incredible number of models and impact estimates produced and published around the world
 - Google Scholar search for (“COVID-19” and “model*” and “epidemiol*” and “impact” and “pandemic”) produced 850 matches May 24 for 2020 alone
- Journals have reviewed and published articles and commentaries in record time
- *Health Affairs* published an [evaluation of containment interventions](#) in the US in mid-May using county-level data

The Pandemic Raises New Research Questions

- What are the long term impacts of economic shutdown on physical and mental health?
- How do people perceive pandemic risks and how does risk perception change:
 - Over time
 - In response to incidence, prevalence, morbidity and mortality data
- How long will behavioural change last post-pandemic?
- How do strong safety nets affect people's well-being during pandemics?
- How will the pandemic affect government funding priorities in the near and longer term?

Unpacking the COVID-19 Story

- To what extent do each of the following variables explain jurisdictional experiences with COVID-19?
 - Political culture (trust in government, adherence to directives)
 - Level of investment in public health
 - Contact tracing scale and effectiveness
 - Testing criteria and volumes
 - International travel restrictions
 - Domestic travel restrictions
 - Mass gathering lockdowns
 - Educational institution closures
 - Random patterns of dispersion and/or luck

A Major Program In Adaptation and Resiliency?

- A “new normal” is not inevitable but it is possible
- If the world has to reimagine how it produces, distributes, consumes, moves, educates, cares for, and congregates, we will need to understand:
 - The psychological impact of permanent physical distancing
 - How people can adapt to periodic major disruptions in their daily lives
 - How economic effects can be smoothed out for jurisdictions, enterprises, and individuals
 - The most cost-effective ways to adapt architecture, urban spaces, transit, etc. to the needs of a more contagious world

Strengthening Data Design, Collection, and Use

- More and better longitudinal data to study the impact of a world broken free of path dependency
- Biological data to study why pathogens have differential effects on seemingly identical people
- Development of indicators that serve as markers for early identification of risks and impact
- Surveys on risk perception and behaviour change:
 - How the public understands risks and trade-offs
 - Whether and how perceptions are modifiable
 - How risk perception affects mental health and behaviours

Towards *Glasnost* and *Perestroika* (Opening and Restructuring)

- **Organize and maintain rapid response capacity to furnish the best available evidence and insight to decision-makers**
- **Create an “intelligence reserve army” that can be mobilized to address novel issues**
- **Create interdisciplinary centres and institutes dedicated to the study of systemic shocks**
- **Train researchers to work rapidly in teams to address complex questions and inform decision-making under conditions of uncertainty**
- **Refine rapid cycle processes for planning, funding, and conducting real-world, real-time studies**

Humans Have Short Memories

- The Black Death killed a third or more of people in Europe but little changed
- World War I was supposed to be the war to end all wars
- 2008 was supposed to permanently change the regulation of the world's financial system
 - So was the Dutch tulip bubble of the 17th century
- SARS was supposed signal a new era of sustained long-term public health investment
- “This changes everything” is a premature conclusion
- Most of us don't like change. Let's hope we don't have to except in ways we've wanted do but not achieved