Support investments that assure equitable continuity of access to high-quality preventive, primary, and secondary medical care for all that meets people where they live.

Invest in public health systems and workforces at national, state, and local levels to enhance and sustain timely detection, reporting, and knowledge sharing on existing and emerging infectious disease threats. Enhance data reporting and analyses through development of robust national uniform data systems for reporting and tracking high-consequence pathogens and drug resistant-microbes.

Address the current and growing crisis of antimicrobial resistance, the need for innovation in the development of new antimicrobial treatments, vaccines, rapid diagnostics, the sustained commitments required to make an impact, and the threats posed by rise in vaccine hesitancy, mistrust in science, and misinformation.

Address the needs of front-line health care workers, including:
- Workforce shortages in public health, primary care, infectious disease, and eldercare; and
- The need for protective equipment and real-time, accurate information on spread, prevention, and treatment options.

Encourage continued public and private collaboration in monitoring and early warning systems, sharing key learnings and best practices, data sharing where appropriate, and developing solutions to better prevent and manage infectious disease threats.

Research and anticipate the disproportionate burden of infectious disease outbreaks on vulnerable people and communities. Conduct economic impact analyses critical for resource mobilization.

Anticipate and address impact of isolation and ongoing and increased demand for behavioral health care and access challenges associated with infectious disease outbreaks.

Develop streamlined information sharing and communication system that anticipates and addresses needs for timely, credible, accessible, and actionable information, including levels of uncertainty, to empower informed decision-making for health care and public health workers, medical researchers, policymakers, and the general public.

Close the digital divide by supporting and enabling broadband access to telehealth services, remote learning, telework, and social connectivity.
To preserve life and health for all during a pandemic, we as a nation need to develop, implement, fund, and evolve an effective strategy to ensure we are better prepared to prevent, respond to, and recover from future epidemic and pandemic threats. People’s lived experiences, including the disparities in health and economic impacts, should guide the development of an effective National Pandemic Strategy to focus not only on the novel infectious pathogen, but also existing systemic challenges associated with the growth of antimicrobial resistance (AMR) that we can anticipate and must address. National health emergencies threaten everyone, but pose a particularly acute danger to those with chronic and underlying conditions, those facing barriers to accessing care and other health disparities, and marginalized and otherwise vulnerable individuals and communities.

BACKGROUND

The United States, like the rest of the world, was unprepared for the COVID-19 pandemic. Resulting delays and shortages in supplies required significant investments to ramp up our capacity to respond. Time lost in building the capacity to respond resulted in preventable spread and significant illness, as well as contributing to the deaths of one million residents in the U.S. alone. The pandemic had profound impacts on our health system and on patients who rely on ongoing treatment and access.

Being well-prepared to anticipate and respond to infectious disease threats saves lives and livelihoods for everyone, but that depends upon partnership, cooperation, and trust at multiple levels – including internationally. That collaboration can take many forms, but COVID-19 has left no doubt that there are significant gaps that must be addressed. Early warning and forecasting systems at a global level are critical to anticipating threats, preventing outbreaks and their spread, and deploying resources effectively to contain epidemic and pandemic threats while minimizing the human toll of infectious illnesses.

An effective National Pandemic Strategy (NPS) must deal not only with a novel infectious agent, but enable effective infection control strategies that work to prevent infection and transmission of known pathogens and development of resistance. We must also recognize and mitigate collateral social, economic, and health care issues a pandemic can produce. It necessitates planning and implementation with a long-term focus on sustainability and with success potentially defined by identifying, controlling, and addressing emerging threats to limit the human and economic toll of infectious disease outbreaks in the future. Understanding the impacts these policies and these health crises have on the patient community must be central to any plan development or implementation.

COVID-19 is just one example of a large number of infectious diseases that can kill regardless of health status, especially if a vaccine to prevent or a drug to treat the virus is not available. Antibiotics are used in medicine to treat secondary bacterial infections that can arise from a primary infectious disease like COVID-19. Unfortunately, these critical medicines are becoming less effective the more they are used due to increasing resistance. Even though we have access to antibiotics today, more than 2.8 million antibiotic-resistant infections occur in America each year and more than 35,000 in the United States die as a result. If resistance to our current supplies of antibiotics is allowed to continue, we lose not just treatments for serious infections, but also face significantly increased risks from many medical services that rely upon the effective prevention and treatment of infections. Cancer treatment, maternal and infant health, complex procedures like organ transplantation, and common procedures like dialysis and joint replacement all become riskier with the growth of antibiotic-resistant pathogens.

Faster Cures has developed principles to help guide policymaker decision-making, highlight key considerations for success, and offer initial steps and immediate actions for realizing such a coordinated global system.1

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1. A Global Early Warning System for Pandemics.pdf (milkeninstitute.org)
Concerningly, the pipeline of new antibiotics is sparse, and the AMR threat is growing. To support the development of new antibiotics and other antimicrobial products, policymakers must create strong financial incentives for investing in new treatments paired with policies that address stewardship and surveillance, stabilize the current market through payment and reimbursement reforms, and address barriers that prevent patients from getting access to the appropriate medicines. Recently, the National Academies of Sciences, Engineering, and Medicine released a consensus study report highlighting the critical importance of addressing the rising threat of antimicrobial resistance, noting “The COVID-19 pandemic has forced society to confront human vulnerability to microbial pathogens (including viruses, bacteria, parasites, and fungi) in a way that has not been necessary in much of the world for a century.”

The PASTEUR Act seeks to accomplish many of these important reforms to spur the development of new antibiotics and antifungals while encouraging stewardship.

A National Pandemic Strategy should facilitate safe, ongoing, and uninterrupted access to health care for America’s most vulnerable National health emergencies threaten everyone but pose a particularly acute danger to those with chronic and underlying conditions and those facing challenges in accessing care and other health inequities. The COVID-19 pandemic exposed how woefully unprepared we have been in this regard.

Consider that as of June 2020, 41% of adults had avoided medical care due to COVID-19. For Black and Hispanic Americans, as well as those with underlying conditions, barriers to accessing health care during the pandemic have been even greater. A successful national strategy should include provisions for ensuring individuals facing the greatest threats are successfully supported in the event of a pandemic, including access to insurance coverage, closing gaps in benefit designs, and assuring adequate provider access and reimbursement, including telehealth services. Clear, consistent communications and information resources to this end are also critical.

The need to rely on the internet for work, school, and access to medical services during the COVID-19 pandemic exposed the significant gap in broadband access that made health, educational, and economic disparities worse for many already vulnerable communities. Bridging this digital divide is critical to eliminating disparities made worse by the lack of broadband access.

Other socioeconomic factors resulting in health inequities in health care coverage and access and a higher prevalence of chronic conditions have contributed to disproportionately higher number of infections, hospitalizations, and deaths associated with COVID-19. A National Pandemic Strategy must anticipate and address these disparities and reduce the toll on populations facing higher risks of illness and death from infections.

2. Antibiotic resistance in the patient with cancer: Escalating challenges and paths forward (wiley.com)
3. Combating Antimicrobial Resistance and Protecting the Miracle of Modern Medicine | The National Academies Press (nap.edu)
An effective National Pandemic Strategy must also address the behavioral health impacts associated with infectious disease outbreaks. COVID-19 has had tragic mental and behavioral health effects resulting from social isolation, anxiety, and depression related to the health threat and economic fallout, and increased challenges in access to behavioral health care services. During the 2020 pandemic, overdose deaths exceeded 80,000\textsuperscript{5}, reversing recent trends. Plans must factor in the social and emotional needs of the population, especially older adults and others living alone and with chronic conditions, and provide training and support for those caring for them, during and after recovery from the pandemic.

To enable communities to respond more readily and enable people to be more aware of the threats in their community, we need to enhance our state and local public health workforce. We must also invest in innovative data collection, monitoring, and tracking technology – like the CDC’s National Healthcare Safety Network\textsuperscript{6}. Opening the process for determining which infections are monitored to public comment and stakeholder engagement would provide opportunity for public awareness and engagement in prevention and stewardship activities. Doing so will help prevent the spread of future outbreaks and enable resources to be shared equitably in response to the immediate risks presented and be adjusted as needed.

Access to credible information from reliable, trusted sources empowers people to make informed decisions. In its absence, misinformation drives people’s decisions and causes avoidable harms. Information should be presented so that it is culturally relevant, understandable, and actionable. Helping people understand the uncertainties, risks, and benefits relating to recommendations made and the process in developing those recommendations can help people make decisions that they feel confident in to protect themselves, their families, and their communities.

While we continue to combat the current pandemic, it is imperative that we do so with a forward-looking approach that will better prevent and help us be prepared for the inevitable health crises of the future. Failure to take lessons learned from COVID-19 and to act now to protect our communities is not only severely shortsighted but will be a grave disservice to all those who have worked tirelessly to innovate and deliver on the front lines of health care and across communities throughout the United States.

\textsuperscript{4} Pledge for Equity, Diversity, and Inclusion - Sepsis Alliance
\textsuperscript{5} https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm
\textsuperscript{6} https://www.cdc.gov/nhsn/index.html