CITIES on the FRONTLINE

MANCHESTER 1824
The University of Manchester

RESILIENT CITIES NETWORK

Bi-weekly Manchester Briefing #32– 27 May 2021

Cities for a Resilient Recovery:
International Lessons on Recovery from COVID-19

This week, we consider how youth participation, visualising risk communication, and private sector support for an equitable COVID-19 vaccine programme can play a key role in the response and recovery from COVID-19.

International Lessons

- The role of young people in reducing and responding to shocks (Canada, Philippines, Chile)
- Joining the Sendai Framework Voluntary Commitments Initiative (UNDRR)
- Private sector support for an equitable COVID-19 vaccine programme (global)
- Measures for the recovery of health- and social care service recovery (UK)
- Visual approaches to risk communication (Canada)
- Reviewing the EU's priorities for recovery (European Union)

Considerations for Vaccine Passports

Useful Webinars

INTERNATIONAL LESSONS

Health and Wellbeing: Everyone living and working in the city has access to what they need to survive and thrive.

Consider measures for social care service recovery. The health and social care system is complex, spanning a broad range of services delivered by both statutory and third sector organisations. COVID-19 has had a significant impact on society and on health and social care services. A recent impact assessment 'Health and Social Care in Wales COVID-19: Looking Froward' presents "high level expectations" for NHS and social care recovery. It also identifies the challenges and constraints ahead, and priorities for each part of the system. Social care services are one of the key priorities, recognising the critical role that social care workers (including unpaid carers) have played in frontline responses to COVID. Consider:

- Learn lessons from the pandemic. **Assess and identify the "hidden harms" caused by COVID-19** and implement services that can mitigate the longer term impacts of COVID on communities and individuals
- Facilitate opportunities for families to "identify and own solutions to challenges brought about or exacerbated by COVID", to support families to remain together
- Identify and address the impacts of 'Long COVID', work to understand the effect of this on people who receive care and support, including unpaid carers and the social care workforce
- Introduce strategies that tackle the disproportionate impacts of COVID-19 on unpaid carers, focusing particularly on challenges related to "respite and support for carers"
- Recognise that the **Local Authority Hardship Fund has been central to the continuity** of many critical social care organisations during the pandemic. "Ensure that commissioners of care and support services, in local

authorities and health boards, use this financial support in ways that enable them to match the provision of services to changing population need" as the full impacts of the pandemic play out
- **Introduce the 'Real Living Wage' across the social care sector**, to support wellbeing and mental health
- "Build on and improve the collaborative working that has been evident across the health and social care sector throughout the pandemic"

Sources:
https://tinyurl.com/jxarwn37

Economy and Society: The social & financial systems that enable urban populations to live peacefully, and act collectively.

Consider the role of young people in reducing and responding to disaster risk. A recent study found that the Canadian disaster news media framed young people in five different ways: "1. the vulnerable status of youth; 2. youth as passive bystanders; 3. children as a burden on adults; 4. youth as active agents; and 5. youth as a 'legitimizing criteria' in disaster response" (where certain response and recovery resources/actions are prioritized to enable young people to "bounce back" following crisis). The findings of this research highlight a need to shift the narrative and change how young people are framed in emergencies, to recognise their assets and potential roles in disaster risk reduction, emergency response and recovery efforts. Consider:
- **Meaningful, inclusive, collaborative and creative strategies to engage young people in all stages of disaster risk and risk management,** e.g. Colombia: The school of our dreams where young people create music videos to teach others about the value of protective and protected schools:
  o Enable "Self-driven participation" (youth-owned and led engagement) where young people take ownership and identify risks, and manage the process and outcomes, supported by adults when necessary
  o **Establish "Collaborative participation" (adult-owned and youth-led engagement)** where adults establish collaboration and invite young people to support the identification of issues. Partnerships are established between adults and young people in a form of "inter-generational collaboration", a partnership which allows young people to increase their levels of self-directed action over time
- In the Philippines, children are participating **in "school-watching programmes"** where they gather information about risks that can be addressed by local school authorities. The children create hazard maps which can be shared to educate other students on risk and safety information
- **Recognise the role of young people in creating resilience in communities**, e.g. Injuv (The National Youth Institute in Chile) who focus on ways in which young people can be involved, activated and mobilised in emergency response during crisis. They have been working to establish and ecosystem of permanent local youth volunteers, and connect young volunteers directly with voluntary organisations through an online volunteer platform (Transform Country Network)
- **Utilize the media to amplify the voices and efforts of young people** as catalysts for change in their communities, to create a platform through which young people can share their ideas, opinions and concerns

Sources:
https://tinyurl.com/ydnr9aph
https://tinyurl.com/4dm6wfh7
https://tinyurl.com/2j87dp2h
https://tinyurl.com/t8v4rrbw

Consider ways in which the private sector can support an equitable COVID-19 vaccine programme. Global distribution of the COVID-19 vaccine is essential to ensure that all lives are protected. As a result of vaccine shortfall, people in many parts of the world may need to wait up to three years to get the vaccine, during which time COVID-19 will continue to mutate and spread. In addition to protecting human life, global distribution of vaccines is required to protect the economy, which could be "deprived of up to $9.2 trillion" if not (International Chamber of Commerce). **Low and middle income countries are reliant on the work of COVAX to provide global equitable access to COVID-19 vaccines.** However, mobilising the necessary support from donors is a challenge. "Greater public-private sector collaboration is required to ensure rapid and fair distribution". Many private sector companies are looking for ways to support the global vaccination effort but are unsure as to how exactly they can do this. The World Bank advises to consider:

- **Aggregate funding to mobilize donors**, e.g. introduce a pool fund or matching commitments, which can establish a coordinated approach from public and private donors and increase the number of and size of donations from diverse co-funders
- Establish **"concessional financing" to support local businesses** to develop and improve their service delivery and supply chains to better meet the needs of local vaccine programmes (e.g. small and medium sized businesses in disadvantaged sectors and locations)
- **Introduce "results-based finance to improve accountability and outcomes** per dollar spent on the vaccination support, as traditional grant funding is tied to inputs, not achievement of outcomes"

Sources:
https://tinyurl.com/6beyw49j

Leadership and Strategy: The processes that promote effective leadership, inclusive decision-making, empowered stakeholders, and integrated planning.

The Sendai Framework Voluntary Commitments Initiative, UNDRR. Our Recovery, Renewal, Resilience project has recently been recognised by UNDRR (United Nations Office for Disaster Risk Reduction), joining the global Sendai Framework Voluntary Commitments initiative for disaster risk reduction. This initiative was developed in response to the General Assembly resolution 68/211 (2013) to support the development of partnerships at all levels to implement the Sendai framework. The Sendai Framework VC initiative provides specific encouragement to academic, scientific, and research entities in regards to their contribution to disaster risk reduction. The Voluntary Commitment highlights our projects 'Sendai Priorities for Action' including:
- Understanding disaster risk;
- Strengthening disaster risk governance to manage disaster risk;
- Investing in disaster risk reduction for resilience;
- Enhancing disaster preparedness for effective response, and to 'Build Back Better'

The Sendai Framework Voluntary Commitment platform showcases a wide range of work from different organisations and groups across the world, all working to build resilience. The platform serves as a "mechanism to mobilize, monitor and take stock of commitments from multi-stakeholders for the implementation of the Sendai Framework until 2030". You can explore the various projects from across the world or register your own project on the platform here.

Sources:
https://tinyurl.com/64e5cm4

Consider approaches that visually communicate risk. The complexity of COVID-19 has meant that the risks have often been difficult to predict and understand, thus creating uncertainty and a challenge for those responsible for public risk communications. "When scientific uncertainty appears in public settings, it could reduce the perceived authority of science" (Zehr, p.11). **Effective communication of uncertainty is essential,** to ensure that individuals and communities are well-informed, are better able to make decisions about their well-being and respond to/mitigate the impacts of risk. Consider:
- **Create a visualization of risk, to generate a deeper and more relevant understanding of the facts and insights often concealed in abstract data,** e.g.; 'The risk characterisation theatre', a visualisation approach using a seating chart (like those used when booking seats in a theatre) which "visually displays risk by obscuring a share of seats that correspond to the risk" (see example below)
- This approach generates a visual of the likelihood of the risk, and enables a visual communication of rare risks that are often challenging to represent and communicate effectively
- This approach also enables an individual to relate a risk with a level and within a context that they can naturally associate to. By not stating exact figures, this approach tackles the "big issue" of uncertainty in risk
- Other examples of visualizations of risk include; displaying the impact of "long COVID" as places in a bus, e.g. "a figure such as 22% of patients discharged from hospital after COVID-19 reporting hair loss could be depicted as 11 individuals on a bus full of 50 people who have left hospital after receiving care for the virus".

This is a scenario that anyone familiar with a bus can easily imagine. The data becomes immediately less abstract.

The below visual depicts the number of additional people experiencing cardiovascular events when taking a certain pain relieving drug and is based on a comparison to 1,0000 people not taking this medication (Rifkin and Bouwer, 2007, p.76)
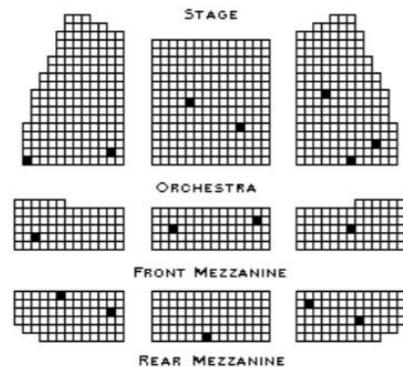
Rifkin, E. and Bouwer, E. (2007) The Illusion of Certainty : Health Benefits and Risks. Boston, MA: Springer US.

Sources:
https://tinyurl.com/ssrhv8vm
https://tinyurl.com/24tsmrjd

CONSIDERATIONS FOR VACCINE PASSPORTS

TMB Issue 30 discussed **the potential ethical issues associated with varying restrictions on individual liberties based on possession of a vaccine certificate**. Digital vaccination passports have generated a complex debate across the world, as understanding of the COVID-19 virus and the effectiveness of current vaccines is still developing and digital vaccine passports are an "evolving science". Introducing infrastructure that has the potential to create "segregation and risk scoring at an individual level, enables third-party access to health information, brings profound risks to individual rights and concepts of equity in society". The Ada Lovelace Institute recently released 'Checkpoints for vaccine passports' which strives to support governments and developers to work through the important steps to examine the evidence available, understand the design choices and the societal impacts, and assess whether a roll-out of vaccine passports could navigate risks to play a socially beneficial role. Below we replicate content from that report which explains their six vaccine passport system requirements:

1. Scientific confidence in the impact on public health
As scientific knowledge on the effectiveness of current COVID-19 tests, vaccines and antibodies is still developing, governments and public health experts should:
- "Establish scientific pre-conditions', to include the level of reduced transmission from vaccination that would be deemed acceptable to permit their use;
- Create a model and test the behavioural impacts of different digital vaccination passport programmes (e.g. in combination with or in place of social distancing);
- Conduct a comparative analysis of different vaccine passport schemes to other public health measures in terms of necessity, benefits, risks and costs;
- Develop and test public communications with regards to what certification should be understood to mean in terms of uncertainty and risk;
- Set out the permitted pathways for calculating what constitutes lower risk individuals, including vaccine type, test types, antibody protection and duration of reduced risk following vaccination, testing and infection;
- Outline public health infrastructure requirements for successful use of a passport scheme, which may include access to vaccine, vaccine rate, access to tests, testing accuracy, or testing turnaround"

2. Clear, specific and delimited purpose

To mitigate the potential risks of vaccine passports (e.g. barriers to employment, stigma and discrimination), the following measures should be considered:

- "Specify the purpose of a vaccine passport and clearly communicate the specific problems it aims to address;
- Conduct a comparison of alternative options and existing infrastructure, policy or practice to evaluate if any new system and its overheads are proportionate for specific use cases (e.g. care home visitations);
- Clearly define where certification will be permitted and set out the scientific evidence on the impact of these systems;
- Clearly define where the use of certification will not be acceptable, and whether any population groups should be exempted (e.g. children, pregnant women or those with health conditions);
- Consult with representatives of workers and employers, and issue clear guidance on the use of vaccine passports in the workplace;
- Establish clear aims, measures to assess success and a model for evaluation"

3. Ethical consideration and clear legal guidance

Ethics and law relating to the permitted and restricted uses of vaccine passports, and mechanisms to support rights and redress and table illegal use should be considered:

- "Publish and require the publication of, impact assessments – on issues including data protections, equality and human rights;
- Offer clarity on the current legality of any uses, specifically laws regarding employment, equalities, data protection, policing, migration and asylum, and health regulations;
- Create clear and specific laws, and develop guidelines for all potential user groups about the legality of use, mechanisms for enforcement and methods of legal redress for any vaccine passport scheme;
- Support cooperation between relevant regulators that need to work cooperatively and pre-emptively;
- Make any changes via primary legislation, to ensure due process, proper scrutiny and public confidence;
- Develop suitable policy architecture around ay vaccine passport scheme, to mitigate harms identified in impact assessments – which may require employment protection and financial support for those facing barriers to work on the basis of health status"

4. Sociotechnical system design, including operational infrastructure

Consider how the vaccine passport system design will function in practice and link with other systems:

- "Outline the vision for any role vaccine passports should play in COVID-19 strategies, e.g. whether developing own systems or permitting others to develop and use passports;
- Outline a set of best-practice design principles any technical design should embody – including data minimisation, openness, ethics by design and privacy by design – and conduct small-scale pilots before further deployment;
- Protect against digital discrimination, by creating a non-digital (paper) alternative;
- Be clear about how vaccine passports link or expand existing data systems (in particular health records and identity);
- Clarify broader societal issues relating to the system, including the duration of any planned system, practical expectations of other actors in the system and technological requirements, aims, costs, and the possible impacts of other parts of the public health system or economy informed by public deliberation;
- Incorporate policy measures to mitigate ethical and social risks or harms identified"

5. Public legitimacy

Public confidence in vaccine passports will be crucial and consideration should be given to local contexts:

- "Undertake rapid and ongoing public deliberations as a complement to, and not a replacement for, existing guidance, legislation and proper consideration of issues;
- Undertake public deliberation with groups who may have particular interest or concerns from such a systems, e.g. those who are unable to have the vaccine, those unable to open businesses due to risk, groups who have experienced discrimination or stigma;
- Engage key actors in the successful delivery of these systems (business owners, border control, public health experts)"

6. Protection against future risks and mitigation strategies for global harms

Consider the longer-term effects of vaccine passport systems and how they might shape future decisions or be used by future governments:

- "Be up front as to whether any systems are intended to be used long term, and design and consult accordingly;
- Establish clear, published criteria for the success of a system and for ongoing evaluation;
- Ensure legislation includes a time-limited period with sunset clauses or conditions under which use is restricted and any dataset deleted – and structures or guidance to support deletion where data has been integrated into work systems for example;
- Ensure legislation includes purpose limitation, with clear guidance on application and enforcement, and include safeguards outlining uses which would be illegal;
- Work through international bodies like WHO, GAVI and COVAX to seek international agreement on vaccine passports and mechanisms to counteract inequalities and promote vaccine sharing"

Sources
https://www.adalovelaceinstitute.org/report/checkpoints-vaccine-passports/
https://www.adalovelaceinstitute.org/
Ibid.

USEFUL WEBINARS

Key past and upcoming webinars on how cities are building resilience in the face of the pandemic and other shocks & stresses.

Date	Webinar Title (Click to register or to access materials)
Previous	
06 May	Resilient Cities Network, World Bank: Cities on The Frontline Speaker Serie - Assessing Risk Through Data-Driven Decision Making
07 May	TIEMS: COVID-19 Resilience Planning & Emergency Management
Upcoming	
27 May	Resilient Cities Network, World Bank: Cities on The Frontline Speaker Series- Resilient Infrastructure
07 June	British Standards Institute: Continuity & Resilience Series
10 June	Resilient Cities Network, World Bank & University of Manchester: Cities on The Frontline Speaker Series- Advancing Community Resilience

Produced by The University of Manchester, UK (Professor Duncan Shaw, Róisín Jordan, Alan Boyd and Dr. Simos Chari) in partnership with the Resilient Cities Network (Femke Gubbels, Archana Kannan)

What is the weekly briefing on Cities for a Resilient Recovery?

Every fortnight the University of Manchester brings together relevant international practices and examples on recovery from COVID-19. The bi-weekly briefing is curated by the Resilient Cities Network to bring key lessons and examples targeted for resilience officers, emergency planners and other city practitioners. The structure of the briefing follows the City Resilience Framework – specifically the four drivers that cities have been identified as mattering the most when a city faces chronic stresses or sudden shocks - Health & Wellbeing, Economy & Society; Infrastructure & Environment; and Leadership & Strategy.

For more international examples please register @ ambs.ac.uk/covidrecovery
***Join the Coalition of Cities for a Resilient Recovery* here**

If you would be willing to contribute your knowledge to this briefing series (via a 30-minute interview) please contact Duncan.Shaw-2@manchester.ac.uk

Give us Feedback!

Help us to improve The Manchester Briefing on COVID-19 recovery and renewal. Complete our 3–4 minute feedback survey here.

Thank you for subscribing to The Manchester Briefing, our fortnightly bulletin containing information and learning about COVID-19 recovery and renewal. We want the briefing to be as useful as possible to you. To help us improve the briefing, please complete our brief feedback survey here by 9th June 2021. The survey takes only 3-4 minutes and is anonymous. It asks how you use the briefing, what value you get from it, and how we could improve it. If you would like to discuss with us in more detail how we can improve the briefing, please get in touch with roisin.jordan@manchester.ac.uk