TRANSCRIPT
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“Panel 1 – The New Normal”

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FEATURING
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Hi, everyone. Thank you for joining us. I’m Steve Morrison. I’m Senior Vice President here at CSIS, where I run our Global Health Policy Center. And I’m delighted to be here today with this remarkable panel. And a special thanks to Greg Poling and Ted Osius for pulling this whole program together. Those of us – those of you who are joining online, you can submit questions, and please do. And we’ll curate those and bring those forward in the course of the discussion. We don’t have that much time, right? We’re going to go to about 40 after the hour. So we’re going to hear from our speakers in quick succession.

This is a panel on the new normal. It’s one that’s looking at the questions of how do you reopen Southeast Asia? How do you reopen safely, and continue to be prepared for the uncertain possibilities that lie ahead in terms of the pandemic? How do you reopen, what is this going to mean in economic terms and with respect to air traffic, and tourism, and return to growth in this period? So we have deliberately put together a very impressive panel. I’ll quickly introduce the speakers in the order that we’ll hear from them.

Melissa Brown’s with us. Welcome, Melissa, and thank you. She’s the Deputy Assistant Secretary of State for Southeast Asia at the Department of State.

We’re joined by – from the – from the Indonesian Embassy the Deputy Chief of Mission Ida Bagus Made Bimantara, otherwise known as Sade. Sade, welcome. Thank you for being with us.

Jennifer Young, Senior Director and lead on policy and public affairs and emerging Asia at Pfizer. Thank you so much, Jennifer.

And Faith Colvin, Vice President, Global Public Policy and International affairs at the Marriott International. So we have a terrific and very diverse group here today with us.

Just a few quick remarks. You know, this is an upbeat panel. This is a positive panel. This is one that’s optimistic, while being cautious. And it kind of contrasts so sharply with what we’re reading in the papers around Hong Kong, the tragedies there, the struggles within China, DPRK, in terms of zero COVID. This is really a case where the pandemic response has been, in many cases, quite successful, in others fallen short. But nonetheless, we’re reaching a point where the changing nature of the pandemic, the arrival of antivirals, success on getting vaccination levels up, is leading to this search for what is the new normal. How do we define it? What does it mean?

And of course, it does mean continuing to think about the continued threats. We know we have – as we are struggling with here – we have questions of the new variant, BA.2, we have the waning immunity of those elderly and
immunocompromised populations that remain very vulnerable. And so, it’s a complicated moment. The debate that’s going on is not that different, fundamentally, from the debate we’re having here in our own country where, as you know, we’re struggling to make sure we have adequate budgets and policies in place to reopen safely.

So with that, let me turn over to Melissa to kick things off, followed by Sade, Jennifer, and Faith. Over to you, Melissa.

Melissa Brown:

Great. Thank you so much. It’s funny, in terms of the search for the new normal, because I just came back from a trip. I went to the Philippines, Vietnam, and Japan last week. Got back late Saturday night. So I feel like I am a living experiment of what traveling in the new normal is. And it gave me a little bit of a sense of whiplash because each country approaches things so differently – whether it be how people conduct themselves in meetings or just passing through the airport and immigration. So certainly moving onto that next phase, but it was honestly a bright reminder that COVID is not over, and that it’s much – very much a new normal.

A big thank you to U.S.-ABC and CSIS for having me here today. I think it’s a great joy to be here in person. I think we all feel the energy to see folks in person versus on the screen, although a big hello to those who are joining us online. Just two years ago the Indo-Pacific was absolutely in a very different situation. I think one thing that we’ve all be taught is that there is no such thing as a local health crisis. In fact, this ongoing regional and global health crisis and challenge, it demands cooperative regional and global solutions. So I thought I would talk a little bit about how the State Department, the Biden administration, and the whole of the U.S. government is committed to addressing these challenges across the Indo-Pacific.

So first, when we’re talking about the global action plan, we’ve learned over the past two years what we definitely need to do is get control over COVID-19’s spread, whether it be the new variants or what got this all started. The desire to prioritize saving lives and protecting those at the highest risk with targeted vaccinations, with tests, with treatments. But we also need to address something that’s quite dear, I think, to many in the audience, is the last-mile issues. It’s the supply chains. It’s the information gaps. It’s the spread of false information, in order to get those shots in arms and improve access to testing and treatment.

We also are going to have to build for the future by committing to build sustain and finance the global capacity that we now know is necessary for an emerging COVID-19, the new variants, and for future health crises, whatever they might be. So Secretary Blinken, he’s noted before, this is not just a health crisis. This is also a humanitarian, a development, and a security crisis. And to quote him, health security is now national security. So just in
February Secretary Blinken joined together with 18 other nations and organizations. And they launched the COVID-19 Global Action Plan.

And the goal there was to intensify international coordination to end the acute phase of the pandemic in 2022, and then also to address the challenges that are hindering progress towards meeting the global target of the 70 percent vaccination in all countries. This action plan builds on President Biden’s earlier global COVID-19 summit. And it's the themes of vaccinating the world, saving lives now, and building better health security. So the call to countries is to step up and support six lines of effort.

Number one, get shots in arms. The idea is to coordinate efforts to improve vaccine readiness and logistics, to increase donations and procurement. And, again, that goal of 70 percent of the population being fully vaccinated.

The second one is to bolster supply chain resilience, to ensure sufficient and steady supplies of critical products and material, something we saw was a real flaw early on in the pandemic.

Third, to address the information gaps. That’s aiming to enhance vaccine confidence, and also combat the spread of false information across the board.

Number four, support health-care workers, and also increasing the training and the numbers of health-care workers.

Number five, ensure acute nonvaccine interventions. That’s to better collaborate to provide other treatments – therapeutics, testing regimes and oxygen.

And then finally, number six, strengthen the global security architecture. That’s looking ahead to how we can join together to deal with future emergencies.

One thing the U.S. government is really proud of is the efforts to help catalyze more vaccine donations. The U.S. continues to lead the way. I think sometimes that’s not well-known in the region, but the United States has donated over 503 million doses to more than 110 countries and economies. Looking at the East Asia and Pacific region, where I focus, we’ve donated more than 117 million vaccine doses to 14 countries and entities. The number keeps increasing. Frankly, sometimes we have more doses than countries are able to receive. Very proud of those efforts. And the goal there is to save lives in the short term.

So let me just briefly give two further examples. The Philippines, we've donated more than 33 million doses there, but in addition to those doses
we’ve addressed the cold chain support side of the system. And that was focused on pediatric vaccine storage and movement. Our medical unit at the U.S. embassy provided training on how to administer vaccines to children. And they did some interesting things, like holding a vaccination clinic at the zoo with characters, and balloons, and candy-filled backpacks, to try to convince kids that this was something that they were going to feel comfortable in seeking out.

In the meantime, USAID in the Philippines is also working to support the planning and registration of future clinics, and also campaigning to address some of the school issues. We realized school is not quite fully open in the Philippines, so that’s something we’re working together, shoulder to shoulder, to try to achieve. And then, DCM Sade will appreciate this, in Indonesia we’ve worked really hard to train 6,300 health workers to work together. There’s quite a number of mobile and temporary vaccine sites that we’ve had to stand up. And together, we’ve been able to administer a number of doses, but from the United States there’s been more than 35 million contributed to Indonesia.

But stepping back, what we want to do is we want to help people get vaccinated and save lives now in the short term. When we look to travel, we are working on advancing international travel and ensuring that people have the health and safety protocols in place to do so. Turning to APEC, there’s the APEC safe passage taskforce, which is chaired by Thailand as the 2022 host. And this was established to coordinate resuming cross-border travel. So just last year the United States joined with a number of other APEC economies to adhere to these international best practices so that air crews, for example, could continue to serve so that supply chains and essential workers could continue to move across the region.

The good news is the United States is hosting APEC in 2023. And this is one of these areas where we want to continue to move forward Thailand’s priorities. And then those of you who know me well know I have to talk about ASEAN. You know, specifically, the United States has partnered with ASEAN to launch the U.S.-ASEAN health futures initiative. And the idea there is to look at where the U.S. has a strategic advantage. And we’ve committed to provide up to $40 million in new efforts for joint research, to strengthen health system capacity, and to develop the next generation of health capital in leaders. This contributes to – when you do some complicated math – more than $3.5 billion that the United States has spent over the last 20 years across ASEAN on these health initiatives. But that’s something we’ll hopefully be able to celebrate soon, with an ASEAN health ministers meeting coming up.

Lastly, I’m just going to mention, you know, back in February you all saw Secretary Blinken was able to fully launch the Indo-Pacific strategy that the president had initiated. And it very clearly outlined our vision of where the
region is headed. And it emphasized that we’re aiming for a free and open, connected, prosperous, secure, and resilient region. And I think for this conversation today, it’s that resiliency that’s something that we really need to stress. Whenever there are transnational challenges – whether they be health, whether they be climate change – they’ve hindered our economic development and they’ve demonstrated the need for friends, partners, allies to join together to address these challenges.

So as the United States aims to build back better, we aim to work with, again, those friends, those partners, and those allies to address the current challenges and those that might come up next. Thank you.

Dr. Morrison: Thanks so much, Melissa.

Sade, DCM, Embassy of Indonesia? You’re going to speak to us both about ASEAN and Indonesia.

Ida Bagus Made Bimantara: Yes. Thank you, Stephen. And this is a great opportunity, I think, for me to be in an in-person meeting finally, after a couple of years of only looking through the Zoom. And this – I think this is my first time sitting with a live audience, yeah? So congratulations for U.S.-ABC and also CSIS for organizing this. And I have five minutes, right, to go through my talking points?

Dr. Morrison: Go for it.

Mr. Bimantara: So they asked us to speak about efforts for proposed pandemic recovery for Indonesia and also ASEAN. And just to give a little bit of context that this pandemic for the last two years has devastated the economy of Indonesia. In the past decade, we have grown about 5-6 percent. But in 2020 and also 2021, we contracted our economy more than 7 percent. So for example, our per-capita GDP in the last 10 years or so grew from 19 percent of OECD average to 29 percent of OECD average. And our ASEAN GDP grew from 17 percent of ASEAN to now about 35 percent contribution. And in 2019 we grew about 5 percent, but in 2020 and 2021 contracted about 7-something percent. So this fall added an additional of 10 million people into poverty in Indonesia.

And the second thing is that the pandemic exposed a number of weaknesses in our health system – much like in ASEAN countries and all around the world, I’m sure – in R&D, in manufacturing, in supply chain and medicine and medical devices. And particularly in vaccine production. The third point is that the pandemic devastated our tourism sector. Bali and the Riau province – Riau Island province contracted double digit number. And this was the deepest contraction for any provinces in Indonesia because of their economic structure that relied on tourism.
Now, we didn’t – we didn’t let the crisis go to waste, yeah, in Indonesia. So we learned the hard way. And we took concrete steps to – for economic recovery, to strengthen our health system, and to recover our tourism sector and also in parallel to contribute to ASEAN’s efforts. Now on the economic recovery, for example, we – in the past two years we rolled out about $100 billion U.S. in a number of programs and initiatives in health, social protections, priority programs for SMEs and also labor-intensive initiatives in Indonesia. And on top of that, in 2020 the Indonesian government rolled out an aggressive and deep set of economic reforms which we called the omnibus law, which consolidated 79 separate laws on economic matters into just one law.

Now, this story has not been told and heard, I think, around the world enough. If you – if we look at the depth and the span of this law, so to improving the region’s investment and business climate, and this law among others simplify law procurement processes, business licensing progresses, reformation of labor regulations and tax regulations, and also to enhance the attractiveness of a number of special economic zones in Indonesia. And the second thing that we did was to strengthen our health system, including in increasing our domestic capacity, in R&D, in manufacturing, supply chains for medicine and medical devices, PPE, and vaccine production. And we are – of course, are collaborating with the U.S. and also with the private sectors around the U.S. and around the world as well to achieve that. And we collaborate internationally to build a more robust international health architecture. And also we’ve participated in the global summit – global COVID summit that the U.S. initiated. And recently also the WHO has designated Indonesia as one of the only two hub to manufacture mRNA vaccines around the world. So we want to do our part to contribute to the region in manufacturing mRNA vaccines. For example, our companies can manufacture about 3 billion vaccines per year, 14 different types of vaccines. And we hope to be able to manufacture more vaccines in years to come.

And the third steps that we took is to recover our tourism sector. During the pandemic, for example, we gave direct financial assistance to those businesses and SMEs in distress. And I know – I know that many, for example, in Bali and Riau provinces, they had to sell their assets. They had to go back to their kampung and they have to sell their land and motorcycles even. And it was really devastating for them. So we rolled out a number of programs to increase the capacity and prepare for the tourism in the new normal, and preparing the strategies to reopen border and tourism. And we are happy now to have our borders open and visa on arrival for Americans as well, and for other 42 countries. So welcome to visit Bali and Indonesia anytime now, and perhaps the next conference can be in Bali, Stephen. (Laughter.)
And a fourth step that we took is to contribute regionally with the ASEAN efforts. We led the way for a collective response to 2019 coronavirus, this outbreak. And we set up the mechanism for it, DSM strategic framework for public health emergencies, for example. And also we set up a COVID-19 response fund together with the ASEAN countries, and all of our partners, including the U.S. as well.

So just – I think my five minutes is up. Just to recap, the crisis gave us this opportunity to transform ourselves. And we took concrete steps to improve Indonesia’s investment and business climate for economic recovery, and to build the resiliency and the capacity of our health system, which we did but it is a work in progress. And, third, to strengthen our tourism sector. And, lastly, to contribute to ASEAN’s efforts for a collective response, build a mechanism for a stronger global health architecture, and establish a COVID response fund. Stephen, back to you.

Dr. Morrison: Thank you very much. That was terrific, Sade.

Next speaker is Jennifer Young from Pfizer. Of course, Pfizer terribly important on both mRNA and antivirals today. It’s great to have you with us, Jennifer. Thank you.

Jennifer Young: Great. Thanks so much, Stephen. And just a big thank you to the U.S.-ASEAN Business Council and to CSIS for the invitation.

When I think about the new normal, I think about the way in which the pandemic has triggered us to rethink the way that health-care systems operate, not only in terms of how companies like Pfizer partner to innovate and deliver breakthroughs that changes patients’ lives, but also how we can reach patients more effectively and efficiently, harnessing the power of science. So today I would like to highlight two things. First is the importance of public-private partnership in spurring investment in innovation, particularly as health care and digital ecosystems are converging in the post-COVID landscape. And secondly, how digital health is shaping the future in ASEAN.

So COVID-19 has shone a spotlight like no other on the importance of public-private partnerships, in particular to manage the most significant public health crisis that any of us have faced in our lifetimes. The global community and ASEAN member states have stepped up, and it has become clear that all of us have a role to play. For our part, Pfizer remains focused on where and how we can make the greatest impact, finding innovative ways to expand access to our science. Our purpose at Pfizer is breakthroughs that change patient's lives. And I can't think of a more important breakthrough that has had the opportunity to change lives than the COVID-19 vaccine in recent times.
From day one of our vaccine development program, we’ve been working with global governments, including the U.S. government, and international health leaders to ensure fair and equitable access to COVID-19 vaccines. Through supply agreements with governments and partnerships with international collaborators – for example, COVAX – the Pfizer and BioNTech vaccine has been able to reach more than 178 countries to date. And that includes all of ASEAN member states, and that reach only continues to expand. This also includes the 2 billion doses that we have pledged to low and middle-income economies through the end of this year to help bring an end to the pandemic.

Over this difficult time, we've seen the power of public-private collaboration. And as health care and digital ecosystems converge in ASEAN, there are increasing opportunities to pursue partnership approaches. Our perspective is that innovation is a combination of invention plus adoption. There’s plenty of innovation out there, and I think we’ve identified that an important role that we can play is to enable and drive adoption through partnerships across the health system. One example of how Pfizer is doing this is through corporate-to-corporate R&D partnership. And this is where we’re able to leverage our respective strengths – for example, the Pfizer-BioNTech COVID-19 vaccine development.

Overall, public-private partnerships during the pandemic have played a key role in spurring investment and innovation and building a pipeline of more than 750 therapies and vaccines in development quickly. It’s been truly amazing from the biopharma industry perspective to see how we’ve been able to come together and respond do rapidly, due to the strong scientific and development infrastructure that’s already in place. And this highlights also the need to ensure and nurture innovation ecosystems going forward.

It’s also worth noting that the pace of adoption is key. And one thing that COVID has taught us is that invention can take place in one part of the world, be produced in another, and ultimately be adopted at a very rapid pace elsewhere. And this can occur if we continue to remove roadblocks to adoption. And the way to do this is to build a system of global reliance so that we can avoid duplication of processes and bring new technology to the world faster. We should also extend this concept beyond COVID for life-saving drugs, for cancer therapies, and for rare disease therapies.

At Pfizer we’ve been driving the adoption of innovative treatments within health-care systems and pathways for many, many years. And we can apply this experience to the technology space and use our global scale to really help smaller companies as well bring their breakthroughs to a much wider audience. We have formed health-care partnerships between our digital innovation centers, accelerators, and incubators. And, as mentioned, we have many partnerships across the health-care ecosystem.
But it’s important to note as well that an enabling environment for local innovation is also important to drive socioeconomic development. It’s important that in addition to partnerships with foreign innovators, governments continue to nurture their own talent and look at setting up structures for them to benefit from their own innovation in-country and beyond their own borders.

So lastly, I’ll turn to how digital health is shaping the future in ASEAN. As a result of the pandemic, the whole health-care system has been forced to seek new ways of operating, and we’ve all become much more familiar with how to operate in this new digital ecosystem. This shift presents an opportunity for us to consolidate many of the behaviors that we’ve learned as a result of COVID, to establish new ways to help deliver health care more efficiently and effectively to improve patient outcomes and experiences.

While we continue to build our digital mindset internally at Pfizer, our ultimate goal is to continue to produce safe and effective therapies for patients. Some of the efforts that we have underway include expanding the coverage of vaccination programs for flu and for pneumococcal disease, for helping to promote healthy behaviors – for example, smoking cessation. We’re also helping to further enable telemedicine by removing regulatory barriers, working in close cooperation with regulators and governments. And we’re also trying to enable dispensing of medicines for longer durations for chronic treatment.

So looking ahead, I think it’s clear that telehealth and digital therapeutics will continue to gain significant traction in ASEAN, specifically digital delivery interventions that can augment drug therapies and help support adherence. As well, AI and machine learning, data science in general, is a gamechanger, not only for deep personalization of digital companion applications but also for drug discovery and disease detection.

So in summary, despite the challenges of COVID which we’ve all endured for far too long, I believe a future is bright in ASEAN. And this will be driven by partnership across many health-care ecosystem players. And at Pfizer, such innovation-driven collaboration helps us to continue to deliver on our purpose which, again, is breakthroughs that change patients’ lives. Thank you.

Dr. Morrison: Thank you so much, Jennifer.

Faith Colvin, Marriott International.

Faith Colvin: Thank you. Good morning, everybody. And I’m sure my company would second Sade’s idea of having the second annual Indo-Pacific summit in Bali.
(Laughter.) So thank you so much for the opportunity to serve on today's panel. It’s an honor to be here. Thank you to the U.S.-ASEAN Business Council and also to CSIS for the opportunity.

I certainly share that this is an optimistic panel. Obviously, it’s an exciting new stage as we enter this new normal and countries across the region start to reopen their borders for international travel. I’m pleased to be here today representing Marriott international. Our company has a robust presence in the region with 470 properties currently open in ASEAN countries, and 280 additional properties in the pipeline. We’re present in seven, soon to be eight, of the ASEAN countries and are really excited about the opportunities for growth.

Before the pandemic, as many of us are aware, Southeast Asia was the fastest-growing region in the world for international tourism. So in 2019, the last full year before the pandemic, there were 139 million international arrivals in the region. Now, unfortunately, last year in 2021 that number dropped to just 3.3 million, which represents 2 percent of that record total in 2019. So obviously, as Sade and others have shared, for economies that are heavily reliant on tourism it had significant economic impacts. So slowed economic activity, increased unemployment, and increased poverty.

I think the good news is that in this new normal period of economic recovery, travel and tourism has the potential to serve as a significant driver of economic growth across the region. Travel is trade, and its dividends are significant. For every $1 generated by the travel and tourism industry directly, there are more than $2 generated indirectly. When foreign visitors travel into ASEAN countries, they inject new money into local economies by staying at the hotels, eating at the restaurants, shopping in the stores, and conducting business. These are all travel exports, and all of this spending is critical to economic growth and recovery.

The good news we’ve seen is that consumer demand for travel is incredibly resilient. Even though we’ve all been at home – or, especially because we’ve all been at home for the last couple of years, as vaccination rates continue to rise and restrictions ease, we’ve seen travel rebound quickly, often led first by leisure and domestic travel in many markets, with significant potential for growth as international and business travel continue to return.

To capitalize on this renewed and growing demand for new travel experiences from consumers industry must join governments and policymakers to ensure that the right conditions are in place to welcome travelers as they’re ready to travel, in particular across international borders. We see the role of the private sector as continuing to adapt to new consumer preferences, elevating best practices in health and safety, and
delivering digital solutions for a more seamless, personalized travel experience.

When governments put in place policies to facilitate international travel, we’ve seen that demand is there, oftentimes almost immediately. For example, after the governments in Mexico and the Maldives reopened their borders for international travel, our company’s properties in those countries saw their best years ever on record in 2021. And that’s exceeding pre-pandemic levels. In Indonesia just this year, we’ve seen occupancy rates at our properties soar as the government has reopened international borders and, just as importantly, international flights have increased.

Vaccination and mass vaccination in particular plays an incredibly important role, both for COVID-19 mitigation as well as boosting confidence in reopening borders. And the great news is that the vaccination rate in ASEAN countries, as some other panelists have discussed, is on the rise. In Singapore now, for example, 95 percent of the eligible population is fully vaccinated, which is a number I know many countries in the world would emulate. The rest of the region ranges anywhere from 40 to 70 percent fully vaccinated.

We see governments in the private sector, including the U.S.-ASEAN Business Council and its members, of which Marriott is one, partnering together in the following ways to support travel and tourism in this new normal time period. Number one, boosting confidence in travel. And this is done by developing and implementing clear science-based protocols for screening, testing, hygiene, and quarantine. Two, digitizing the process to verify and authenticate health records, and making sure that these technical solutions are interoperable, not just between countries but also, of course, between institutions within a single country. So making sure the ministry of foreign affairs and the ministry of tourism, for example, can use and access the same digital documents.

And then number three is continuing to harmonize protocols across the ASEAN countries. A lot of work has already been done in this respect but continuing that process would go a long way towards the development of a true regional travel corridor. And this is important for two reasons. Number one, we know from experience that a lot of international travelers in the ASEAN region tend to visit multiple countries and multiple destinations within a country. So it would help facilitate those visits. But then also to facilitate travel within the region by ASEAN citizens themselves. And this is important, in part, due to the changing composition of visitors to the region as a result of COVID.

So before the pandemic we know that China was the number-one source market for international tourists in the region. And we don’t see Chinese travelers returning in large numbers in the near to medium term, in large
part because of the two-week quarantine requirement upon return to China. Japan, South Korea, Australia all continue to have relatively restrictive travel restrictions in place. So it’ll be more and more important for ASEAN citizens to be able to travel freely within their own region.

In conclusion, we’ve seen how countries and regions now compete for international tourists and travel and business, just like companies do. And the ones that we think will win in this new normal time period will be those that put in place effective policies, streamlining cross-border travel, leading to greater economic growth and recovery. Thank you so much. I look forward to the questions.

Dr. Morrison: Thank you.

I want to pose a broad question for all of you to answer, but I also want to direct some specific questions to each of you. The broad question is that the pandemic has gone through major changes. We’ve got new tools with the arrival of antivirals. People are feeling more optimistic. But there’s also two other things happening as a result of that. One is the risk that we’re in a cycle of crisis followed by complacency. I mean, we’ve seen here in the United States the supplemental, the international aid falls out. And there was a previous debacle on the omnibus bill.

What does that signal? Does that signal exhaustion, that people are moving beyond, that the level of interest – we know on health security, pandemic response crises that there’s a pattern. It’s very difficult to sustain the political will and the dynamism of this response. And we’re seeing that manifest in very dramatic ways, and it’s raising lots of questions around – the global vax program at USAID has run out of money, for instance. I mean, there’s some real hardships created by this.

The other thing that’s happening that’s more positive is that there’s a real rethink going on across the world around what’s the strategy. People are questioning 70 percent vaccination goal, does that make sense? Should we shift to a vaccination level that the countries themselves set individually, that focuses on the most vulnerable? Do we need to elevate the emphasis on test and treat, the manufacturing hubs? All of those things are now very important, along with putting a focus on vaccine disinformation, misinformation, hesitancy, refusal – a dimension that is profound in so many places, underestimated.

So, the question I want each of you to try and touch on is how is your thinking taking account of this risk that people are going to walk away from their commitments, that we’re going to – that the exhaustion, the longevity of this pandemic, is leading people to want to exit engagement? How are you
going to work against that? And the new strategies that were emerging. I'm sure, Sade, you can tell us a bit about how Indonesia itself.

On the specific questions, I want to ask Melissa to tell us a bit about this – update the status on the Quad and the Quad commitments. And if you could speak to that, you know, the billion dose, and now we have excess capacity of – excess supply of vaccines. What's – if you can tell us a bit about that. Sade and Jennifer, it would be good for each of you to tell us a little bit about what can we expect in terms of creation of manufacturing capacity in these hubs in the next two, three years? What are we expecting to see in terms of the new partnerships? Because there's enormous excitement and enormous interest. And both of you are actively engaged in that respect.

And, Faith, I wanted you to tell us a bit about the way in which the hotel industry has changed in this period. Because obviously there's heightened focus on ventilation and improving ventilation. There's heightened focus on all sorts of other practices that will lure those customers back, feeling more confident about the environment that they're entering. And if you could say a few words about that. So let me ask Melissa to kick things off with a response to the broad question, but then give us a bit of an update on the Quad.

Ms. Brown:

Thanks. I think in terms of the broad question, I noted briefly earlier but, frankly, from traveling around over the last couple weeks I'll say the United States seems like the country where we're tending towards moving on and kind of forgetting that there was a pandemic, while it feels absolutely in Southeast Asia as well as in Japan that the eye is still very much on the ball. So that's, you know, my personal observation.

I think specifically with ASEAN, one of the reasons we're investing in things like the U.S.-ASEAN Health Futures Initiative is to create these institutions and frameworks so that we don't kind of move on from the pandemic and put it behind us and move onto the next hot new crisis. Instead, it's that longer-term investment and training of people and identifying longer-term resources and creating those sort of partnerships. One of the things that this administration, we've made very clear is also we would like to reinvest in multilateralism and, again, as I mentioned earlier, joining with those friends, with those partners, with those allies to see what could be done.

So the Quad is a great example. You know, the design of the Quad is not to substitute for other mechanisms. You know, for instance, all Quad members have a very important key relationship with ASEAN. And by creating the Quad, that is not meant to put those relationships aside. Instead, it's designed to complement that. And so the idea is to look as well at where initiatives and visions for the future, where there's a lot of convergence. That's a very popular word these days in D.C. But the thinking there is we often have more in common with others than we have in terms of difference.
So, what we're trying to achieve with the Quad, it plays off what we as individual countries are doing when it comes to vaccines and to the donations, whether they be through COVAX or done so bilaterally, whether it be done with public-private partnerships. So the Quad thinking is – in addition to donating vaccines, it’s creating the new mechanism, I think, in particular with the role of India and their ability to play to their strength. And so that’s the thinking when it comes to what we can achieve. We recently had our ministerial in Australia. Hopefully in the – in the coming months we’ll be able to have a Quad summit at the leaders’ level and continue to move that forward. But that’s something that all four countries are working on day in and day out to make that – those billion doses a reality.

Dr. Morrison: Melissa, there’s one question from the audience around COVAX.

Ms. Brown: Yeah.

Dr. Morrison: And the question, I think it’s really about –

Ms. Brown: It’s an excellent question.

Dr. Morrison: OK, the donations of the – of the Pfizer mRNA goes through COVAX. How is the delivery achieved? And is the identity of the donor known in the course of that? Are we – are we getting sufficient credit for the diplomacy and – the vaccine diplomacy?

Ms. Brown: Yeah, it’s really an excellent question. I think this one was tricky because, as many of you know, in the last administration we were not participating in COVAX. And that was a very early decision by President Biden to make sure that we were present and really investing a lot. I think the public diplomacy and putting those American flags on the deliveries was a little bit late in coming, but it was something we did – we did recognize. Throughout we’re very clear that the United States provides vaccine donations with no strings attached.

That’s absolutely nonnegotiable. And trust me, there have been times when we wanted to give them. (Laughter.) You know, you’re thinking, oh, there’s a great strategic reason. And quickly we’re told, no, that’s not the goal of this. So it very much is absolutely no strings attached, but that doesn’t mean without credit. So I think we’ve done a better job over the last six, nine months to make sure that that tie to the United States is made. And that’s often through public diplomacy.

This question also addresses are the populations aware that they’re coming from the United States? I’ll tell you where it’s most clear, it’s where – it’s
Vietnam. And that’s where – within the government we joke sometimes about you don’t want to have the actual outcome being a visit. You know, some really important person went to the country, oh look at that outcome. On the other hand, when vice – the vice president made her trip out to the region, I can tell you in particular with Vietnam, one of the reasons that that linkage to the United States to Pfizer was made was because of the star power that the vice president does have.

So again, that’s a great question, because I think it’s something we didn’t do well at the beginning and I think we’re doing better now, that we can support COVAX but also take credit for what the United States is doing.

Dr. Morrison: Thank you.

Sade, in Indonesia are you struggling with this change of the – the change of the pandemic, the changed perceptions, the fatigue factor, people arguing they want to move on? Are you seeing that? And what can we expect on the manufacturing hub in the next couple years?

Mr. Bimantara: Yes, Stephen. At some level we are seeing that. But before I go and answer that question, I just want to add to what Melissa said about the COVAX and U.S. donation. John Brandon asked, from the Asia Foundation, before coming here I was at the team also to handle the vaccine donations from throughout the world. And we are grateful to receive 28 million vaccines from the U.S. And I and my team, we personally go to the airport and pick those vaccines up. And we make sure that we give credit to the U.S. and also to COVAX as well. And we have put the – those shots in about 200 million Indonesian arms already. Both vaccines that we procured ourselves and the vaccines that have been donated.

So back to your question, Stephen, about the cycle of crisis and then followed by complacency. And also Indonesians being really tired about wearing masks and having their nose poked in, and PCR, and everything. We are seeing that as well. But I think the government is succeeding in ensuring that shots get in arms. And we are up to about 76-something percent. And soon we will reach our target of 200 vaccine – 208 million vaccines. And we are not rethinking on the strategy. I think 70 to 75 percent is a good number. And we of course refer to the WHO for that strategy as well.

And we do have vaccine misinformation and disinformation going on in Indonesian, in remote areas in Indonesia. And we do all we can, you know, to have all hands on deck and be very well-informed about the benefits of vaccines, about the benefit of social distancing, and also locking in those gains that we have. And I think that, like what Melissa has said, is that we want to build the institution so that it is more resilient going forward in the future. So even though there are partisanship about the details of the
strategy, but the main goal, I think, remains the same, which is we want an Indonesia, or we want a region that is prosperous and healthy. And without health, I think we cannot be prosperous.

And in order for us to achieve that, we have to have a strong institution. And through locking in those gains, including in our budget, in our system, in our infrastructure, I think that’s the way to go. And it’s really hard to turn back the clock once it is locked in like that. That includes the creation of manufacturing capacity, which we are partnering with a number of international biopharma companies, and also international – other countries as well, in order to build our manufacturing capacity in vaccines and other medicines as well.

Dr. Morrison: What does that mean? What can we expect to see in, like, two years, would you say?

Mr. Bimantara: In two years, for example, we have one of our company, Biopharma, which can now manufacture about 3 billion doses of vaccines, 14 different vaccines. And they export to 150 countries. We are expecting for them to expand their capacity, to have the capacity to manufacture mRNA vaccines not just for COVID but for future pandemic or other disease down the line as well. And we have a good logistical – advanced logistical network to distribute those vaccines in Indonesia and throughout Southeast Asia. So we’re expecting the next couple of years to build that capacity together with our partners.

Dr. Morrison: Thank you.

Ms. Young: Jennifer, are you seeing this phenomenon of a rethink and a higher risk of slipping into complacency? And what do you see as the creation of these new capacities in distributed hubs around the world? And what’s Pfizer’s role going to be?

Sure. Thanks for the question, Steve. I think with respect to, you know, kind of where we go from here and what the rethink looks like, it’s becoming increasingly important for us on the private sector side to really have a good understanding of where government’s needs are. So we are in very close and continual communication with governments throughout the region to understand really what do the COVID metrics look like, what does the uptake look like in terms of vaccination, as well as the need in terms of therapeutics.

One of the things in particular that we found, you know, kind of optimistic is that we’re increasingly seeing a breakdown of siloed thinking and conversation between health and finance ministries, such that, you know, even if some of the multilateral fora, ASEAN conversations with ADB, et cetera, and within APEC, you know, we’re seeing that there’s a lot more discussion around the importance of health preparedness as a prerequisite
for driving future economic growth in the region. So this is something that from the private sector perspective we are very keen to continue to support, including with respect to the G-20. Obviously, which Indonesia is the host of this year.

So I would say looking ahead, you know, we very much want to be a partner with governments to help them support the pandemic preparedness and potential future pandemic preparedness efforts. On the question of manufacturing capacity and what the future looks like, what I would say here is, you know, one of the reasons that Pfizer was able to mobilize so quickly to respond to the current pandemic situation is because of utilizing a very streamlined manufacturing process. As folks know, you know, we've never brought a vaccine to market as quickly as we've done – in history – as we've been able to do with the COVID vaccine. And that was intentional because we were able to, you know, really mobilize our internal capabilities and really bring to bear the full suite of global resources we have around the world.

I think, you know, with that being said, we're continuing the R&D, the clinical trials with respect to new and emerging variants, including BA.2. And we're expecting, you know, additional data readouts in the very near future on those. And I would also note that even beyond vaccines, you know, we are continuing to partner from a manufacturing perspective on the therapeutic side. So I think as many are aware we have a product, Paxlovid, which is an antiviral product for the treatment of COVID. And we have announced partnership with the Medicines Patent Pool, whereby we have now, in partnership with MPP, there's been an announcement that we're supporting sub-licensing for that technology to enable greater access globally – including in some of the low and middle-income countries in ASEAN.

Dr. Morrison: Thank you. Yeah, those licensing arrangements are quite helpful that were just announced. I wanted to just mention, your boss, Albert Bourla, just published “Moonshot,” his memoir of this period. And we're hoping to host him this month on an online conversation around that, and we're excited about that.

Faith.

Ms. Colvin: Well, I think on the first question, as far as sort of how if we're all becoming too complacent and sort of now that we've largely gotten through this crisis, I mean, I think for whatever the next crisis is around the corner, you know, the industry has long had the perspective – like other panelists have said – that private sector governments, institutions, international organizations should continue to come together to put in place the kinds of protocols and standards that would allow us to respond to a future pandemic, a natural disaster, you know, a man-made crisis, whatever it is as far as these
challenges we have to our economies and to the industry. So I think that would be our response on the first question.

As far as how the industry has changed in the last couple of years, you know, we’ve seen traveler preferences change. Like I’d said earlier, you know, demand for travel remains quite high and quite resilient, but the new flexibilities, for example, in work arrangements allow for different kinds of trips. So there’s this new category that’s called Bleisure travel, so business and leisure combined, that’s emerged. People are tending to take longer trips. They’re not tied to the office necessarily for that Monday through Friday nine to five workweek. And so being responsive to that.

I think there’s also a piece, again, the private sector working with governments and educational institutions on reskilling and upskilling the workforce and making sure that those who are coming into the industry now are able to – they have the skills, and they have the technical capabilities to be able to deliver sort of the latest as far as health and safety practices and the things that the consumers are requesting.

Dr. Morrison: Thank you. Thank you all.

We’re at the end of our time. I apologize, we could continue, I think, fruitfully, for quite a bit longer. So please join me in thanking our four esteemed guests here. (Applause.) Thank you.