HEALTH AT A GLANCE: EUROPE 2020

How resilient have European Health Systems been to the COVID-19 crisis?

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Europe has become one of the hotspots of the COVID-19 pandemic.
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Source: ECDC.
The first wave mainly affected Western European countries but the second wave has spread more widely across European countries.

Source: ECDC.
Mortality from COVID-19 so far has been higher in several Western European countries and Sweden.

Covid-19 deaths, per million population

- Less than 100
- 100 – 300
- 300 – 500
- 500 +

Note: Data comparability is limited due to different reporting practices. Source: ECDC, last update on November 16th.
Mortality from COVID-19 was under-estimated in several countries at the beginning of the pandemic because of limited testing.

Note: Data display the total for EU countries. Data on excess deaths only available until end of August at time of writing.

Source: ECDC (for COVID-19 deaths), OECD based on Eurostat data (for excess deaths).
Some countries have done better in managing the pandemic

**Finland**
- Low population density
- Greater preparedness to disruptive events
- Greater trust and compliance in government rules and recommendations
- Strong pre-existing culture of teleworking (facilitated by highly digitalised society)

**Norway**
- Low population density
- Rapid and effective testing strategy
- Greater trust and compliance in government rules and recommendations
- Strong pre-existing culture of teleworking (facilitated by highly digitalised society)

**Korea**
- Greater preparedness and fear among citizens (based on MERS and SARS experience)
- Effective testing, tracing and isolation policies
- Greater trust and compliance in government rules and recommendations

**New Zealand**
- Low population density
- Political commitment to adopt an eradication strategy (facilitated by geographic situation)
- Greater trust and compliance in government rules and recommendations
Most Western European countries put in place a first general lockdown during the first wave to reduce the effective reproduction rate of the virus. It took about a month on average to bring down the R below 1, but with huge variations across countries, reflecting different timing and effectiveness in containment policies.

Most European countries have implemented measures to contain the second wave of the pandemic.

Note: “Full lockdowns” refer to national stay at home orders. “Partial restrictions” cover regional confinement measures and/or curfews, closure of non-essential shops and bars/restaurants. “Limited restrictions” refer to the less stringent policy measures.

Source: OECD
Testing capacity was expanded, but a stronger testing/tracing/isolation strategy is needed

- Limited testing capacities hampered early large-scale population testing, but capacity has increased since.
- Fast processing of test results, and tracking, tracing and isolation of infected people has proven more challenging.
- The new antigen diagnostic tests have increased the testing toolbox.
- Recent news on vaccines give great hope, but solid strategy to control the virus, including testing, tracing and isolation, and social distancing, will continue to be essential until herd immunity is reached.

Note: For testing figures, there are substantial differences across countries in terms of units, whether or not all labs are included, the extent to which negative and pending tests are included and other aspects.

Source: Official data collated by Our World in Data.
Health workforce has been the biggest constraint in responding to the peak in demand for care.
Countries have adopted policies to increase capacity of health workforce, hospitals

**Health workers**: Countries that adopted policies to boost the supply of health workers in response to COVID-19, during the first wave of the pandemic

- Mobilising health care students (medical, nursing, other)
- Mobilising retired and non-practicing health workers
- Mobilising foreign health workers (already in country or coming from abroad)
- Existence of official reserve list (before COVID-19 or new list during the epidemic)
- Transfer of health workers to localities with greater needs

**ICU capacity**: Countries that adopted policies to boost surge capacity response to COVID-19, during the first wave of the pandemic

- Transformation of wards into ICUs
- Creation of field hospitals
- Transfer of patients to localities with spare capacity
- Partnerships with private hospitals
Need to maintain access to care for non COVID-19 patients

Reduction in the volume of primary care consultations during the first wave

Reduction in cancer care

- In **France**, the number of cancer diagnoses decreased by 35%-50% in April 2020 (as compared to April 2019)

- In the **Netherlands**, the number of cancer diagnoses decreased by 26% in April 2020 (as compared to January 2020)

Note: In Belgium and France, data on consultations compare April 2020 with April 2019; in Germany March 2020 is compared to March 2019. In Norway and England, reductions between the end of March 2020 compared with early March 2020.
Preliminary lessons from the experience in Europe and beyond

- More **effective testing, tracing and isolation policies** that people can easily follow
- Improved **social distancing measures** (avoid mass gatherings, mandating mask wearing, encouraging teleworking)
- Need to pay special attention to **prevent transmission in nursing homes** and among other vulnerable populations
- Create **additional reserve capacity of human resources** that can be quickly mobilized to support existing staff
- **Strong primary care and mental health services** are essential for both Covid-19 and non-Covid-19 patients
News on vaccines are very good, but we need to remain vigilant

- Pfizer-BioNTech and Moderna vaccines estimated efficacy of 90% or more exceeds expectations.
- More good news about these vaccines:
  - mRNA technology can be quickly scaled-up; and
  - other vaccines target the same area of the virus, so it’s likely they will also work.
- Some caveats and challenges remain:
  - development caveats include: the uncertainty around the efficacy estimate, its ability to block transmission or prevent severe cases, and a full safety evaluation; and
  - some logistic challenges are that at least one of them needs to be stored at -70°C, both require two jabs, and 2/3 of the population would need to be vaccinated for herd immunity.
- Most people will not be seeing a vaccine until at least the mid-2021, even in OECD countries.
Thank you

Report released on
November 19th 2020

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https://ec.europa.eu/health/state/glance_en

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