"The COVID-19 pandemic caught us off guard. It has served as a wake-up call for improving our preparedness for not only health-related crises but also other challenges and crises. We need to strengthen international cooperation, coordination and solidarity. It is important to learn and share experiences and information to reduce risks and make our systems more resilient. While improving our global crisis prevention and response systems, there is an urgent need to accelerate development, production, as well as equitable and affordable global access to new vaccines, medicines and medical equipment. We applaud all health-care and other front-line workers who put their own safety at risk when saving others, and pledge to put people at the centre of our response."


Preparedness requires preventing inequality including through “adapting social protection frameworks to incorporate support to small and mid-size enterprises as well as the informal sector, informed by a better understanding of ‘cascading and systemic risks’ that result in the vulnerabilities exposed by the COVID-19 pandemic... leveraging the potential of community-driven approaches to reach the most vulnerable...”

*Pathfinders for Peaceful, Just and Inclusive Societies, USA, mixed ages and professions, mostly women.*

---

**UN75 DATA ON THIS COMMITMENT**

<table>
<thead>
<tr>
<th>UN75 dialogues</th>
<th>UN75 survey</th>
<th>Media analysis</th>
<th>Research snapshot</th>
</tr>
</thead>
</table>

We organize the relevant UN75 data gathered across 2020 according to the UN75 Declaration’s 12 commitments. For the full methodology, see the UN75 report “Shaping Our Future Together.”
WHERE WE ARE NOW

Participants overwhelmingly observed that COVID-19 was a compelling reminder of our fragility and our interconnectedness, that only multilateral cooperation would be enough to reign in the pandemic, recover from it, and learn its lessons. Participants were disappointed with the inward-looking governmental responses that failed to consider the basic needs of citizens globally, especially for access to vaccines and access to accurate, timely information, essential health services, and hygiene facilities.

“The international community is focused on the first principle of protecting its own people, but it is urgent to work to respond to Corona 19 as one.”

Goriul Youth Culture House, Republic of Korea, ages 16-30, mixed genders, managers and professionals.

“Covid-19 might be a learning experience for our communities for the urgency of sustainable development for our local and global communities.”

Youthinkgreen, Egypt, ages 16-30, mixed professions and genders.

Inequality was a recurring issue raised by participants, exacerbated by the pandemic:

• Unequal health effects for certain groups, and unequal access to healthcare services.
• Unequal jobs and livelihoods loss for those working in certain sectors.
• Unequal gender impact, with women losing their income at higher rates than men; women bearing a larger portion of unpaid care generated by lockdowns; and girls missing education.
• Unequal generational impact, as the elderly suffered both health and isolation effects; and young people who lost education and employment opportunities, and who will bear the economic effects.
• Higher safety risks for precarious and essential workers unable to work from home.
• Unequal impact between those at a medically higher risk.
• Unequal access to government support, including for many migrants and refugees, and those working in the informal economy.
• Unequal access to clean water and sanitation – essential during a pandemic.
• Increased domestic violence disproportionately affecting women and children.

Participants expressed concern about misinformation undermining public health messaging. They saw the rapid spread of misinformation through social and other media channels, alongside populist political movements as undermining the trust of expert scientific opinion leading to poorly informed decision-making, response and prevention policies, which cost lives.

Participants were daunted by the immense task of recovery, concerned that many have been forced into destitution irrespective of their countries level of development, and that whole sectors of the economy representing the livelihoods of millions of people had been lost.

1. This report contains a summary of the analysis of 1,141 UN75 dialogue summaries received from 94 countries between 2 January and 7 November 2020. The dialogue summaries were analyzed in partnership with the Graduate Institute of International and Development Studies. For the full methodology, see the UN75 report “Shaping Our Future Together”.
Particular concerns were raised about the high mental health cost of the pandemic, with participants noting the myriad of stressors people faced, whether through bereavement, isolation, caregiving, job and business losses, among other factors. Participants noted that recovery would require a strong mental health recovery plan.

“The need for human connection is so great that even during this pandemic people are risking their lives by congregating in unsafe ways. This human need to belong and connect must be acknowledged in all COVID-19 relief efforts and policies, and mental health should be mainstreamed throughout UN analytical and policy setting frameworks.”

WHERE WE WANT TO BE

“The group felt the world would be better by 2045 if a shift in values and priorities could be sustained and augmented to support greater societal cohesion and resilience, leading to fairer and sustainable societal and economic conditions for all.”

More positively, participants viewed the pandemic as a wake-up call with hidden opportunities – a chance to ‘build back better’:

- The potential for collective action in the face of climate change and other environmental crises.
- The chance to defeat inequalities at the root of much of the suffering, with more flexible workplaces that better respect caregiving responsibilities.
- Increasingly decentralized workforces with the potential regeneration of dying communities and reduction of population pressures on urban centres.
- Greater acceptance of virtual connections that bring together new actors.
- A stronger appreciation of the necessity of free and universal health care and strong public welfare systems.

Participants across regions, age groups and sectors emphasized that pandemic management and recovery requires sustained and collaborative multilateral cooperation in the short and long term. Many noted that in this interconnected world, nothing less than global collaborative action will be sufficient for ensuring our collective resilience to future global shocks and crises.

“One country can recover from epidemics only if their neighbors and other countries recover.”

Asia Culture and Art Association (Asia Culture House), Afghanistan, mixed ages, professions, genders.
HOW WE CAN GET THERE

Participants wanted a collaborative, collective response to COVID-19. There was a great deal of commonality across regions and age groups. Participants called for a COVID-19 response that will lead to a more equal and resilient world. They offered suggestions for COVID-19 preparedness, acute crisis management and recovery, and how to leverage unexpected opportunities and lessons learned from the pandemic for other threats and risks, such as the climate change. Many proposed strengthening cooperation between countries and the role of international institutions in pandemic preparedness, management and recovery.

“In the 21st century, where people are more connected than ever, it is not enough to cure COVID-19 in your own country of residence and then shut down the borders. This is a global problem that requires cooperation on the part of all nations.”

Kim 2020, Republic of Korea, ages 16-30, mixed professions, mostly women.

Ensuring preparedness

Suggestions for strengthening the UN System to ensure better preparedness in the future:

- Solidarity should underline international efforts to control COVID-19. UN Member states can strengthen international cooperation and the role of the World Health Organization. Countries should adopt a collaborative approach, guided by the World Health Organization.

“Resilience has replaced efficiency as the most desired quality, whether in government systems or business.”

Pathfinders for Peaceful, Just and Inclusive Societies, USA, mixed ages, professions and genders.

- The UN system can adopt a ‘One Health’ approach to avoid different organizations competing for funds and to ensure coherent preparedness for and response to pandemics and health crises.
- International and multilateral organizations can allocate more resources to public health as an emerging priority for the 21st Century.
- Governments and multilateral funds should assist lower human development countries strengthen national health systems and infrastructure to better manage health crises.
- The UN can create better pandemic management coordination mechanisms, including joint health surveillance technologies to better regulate cross border movement during pandemics.
- The UN could encourage Member States to establish an International Solidarity Fund for Pandemics, for example through a small tax on masks and hand sanitizers. Funds could support solidarity, preventive research, and addressing pandemic related risks of the wild animal trade.
- The UN can improve oversight of health projects, to avoid corruption and mismanagement.
- The UN can increase support to hospitals and government health centres in lower human development countries, and provide
access to healthcare for all, especially persons at risk.

- The UN can take further steps to lead in the fight against COVID-19 induced human rights abuses.
- Countries can better cooperate for the adequate distribution of personal protective equipment.

“Access to health for everybody and strengthening the health system is necessary. The COVID-19 pandemic caught many countries, particularly developing countries, unawares. The health systems need to be strengthened; a lot of investment is needed to deal with the effects of COVID-19 and prepare for future pandemics because it is clear that this may not be the last serious and damaging pandemic.”

*Dialogue organized by UN Eswatini, ages 46-60, mixed professions, mostly men.*

**Suggestions for cooperation for research and development:**

- Countries should put more resources into monitoring emerging zoonoses and share information transparently and in a timely way.
- Structures should be created for countries to cooperate on research and vaccine development.
- The international community should create a team of medical experts for the purpose of rapid vaccine development. This team should be established not only for the current pandemic, but to be ready to react to future pandemics and emerging disease risks.

*Asia Culture and Art Association (Asia Culture House), Afghanistan, mixed ages, profession, genders.*

**Suggestions for need for countries to share information:**

- Member States can strengthen solidarity and better communicate on new knowledge about the pandemic, with greater transparency on data, results of treatments, and research on vaccines.
- Systems for cooperation and information sharing between health systems can be strengthened.
- A common statistical instrument should be created to clearly expose the evolution of the pandemic and the number of cases in every country.
- Assessments can pre-determine which elements of pandemic preparedness, management and recovery can be managed centrally, and which are best carried out locally.

“Health issues should not be politicized. It is vital that the international community support low-income economies through financial aid, monitoring, and vaccines access in the future”

**Suggestions for cooperation for vaccine equality:**

- The international community must ensure vaccines are shared, and not monopolized by individual, wealthier countries.
- Structures for countries to distribute vaccines equitably and at not cost will require collaboration between governments and private manufactures, with no preference to any particular country.
• Vaccine producing countries and vaccine manufacturers should join global efforts to ensure that vaccines and other treatments and technologies reach citizens in lower human development countries, including through sharing intellectual property and technology, and not insisting on intellectual property rights.

“Mongolia cannot manage to supply the prospective COVID-19 vaccination by itself to its entire population without potential assistance expected from the UN and WHO”

Dialogue organized by the UN Resident Coordinator Office, Mongolia, mixed ages and genders, government agencies.

Suggestions for health policy making:

• Countries’ finance ministers could allocate higher budgets for primary health care facilities (ones that treat all irrespective of economic status) to prevent current and future disease spread.

• All UN Member States were urged to implement free and universal health coverage.

• Governments need to ensure fair distribution of medical personnel, tools, and medicines across all regions, especially in remote and poor areas.

• Governments and schools can strengthen health education as a tool to eliminate ignorance about health issues, so that individuals can engage in discussions, understand the rationale for health measures put in place, and to create immunity to misinformation.

• Governments and the private sector should prioritize funds and incentives for future research and development on health technologies.

Suggestions for Policy Making:

• Defeating inequality, which requires political will, was viewed as critical for preparedness, with inequality driving much of the human suffering resulting from the pandemic:

  • Investment in universal and equitable health care, education and social protection systems (including cash based and in-kind support to improve resilience to shocks).

  • Social protection systems that include small and mid-size enterprises and those in the information sector, as well as vulnerable groups without legal recognition in their country of residence.

  • Leverage community-driven approaches to reach the most vulnerable.

  • Fiscal measures to reduce inequality, including fair corporate taxation, reduction of tax evasion, reigning in excessive profits and addressing under-taxed sectors, and inequality assessments in budgetary decision-making.

  • Ensuring access to essential services and information for remote communities. Ensure access to safe public/private spaces that support human wellbeing in cities.

  • Governments should ensure daily public service supplies in the event of pandemics.

  • Governments should integrate urban and rural health services and strengthen health coordination networks in rural areas.

  • Governments should institute strong welfare systems and strong worker protections to minimize disruptions for populations when they are required to comply with stay at home orders.

  • Create incentives for health care workers to work in rural environments.
Participants noted that what is considered important work has shifted during this pandemic, with essential workers often least recognized and least remunerated. Courier drivers, public transport workers, cleaners, supermarket staff, childcare workers, nurses and doctors have all taken significant risks for little reward, at times costing them their lives. Ensuring their rights, protections, recognition and fair remuneration will safeguard us all in future pandemics.

Suggestions for individuals, communities and other actors:

- International, national and local level actors should foster a culture of volunteerism and community building in development policies to mobilize community-wide responses to pandemics.
- Governments, NGOs and educational institutions can increase health awareness so that people are better prepared, with necessary support, infrastructure and information.
- Parents and teachers can encourage children to be inclusive and discuss basic health.
- Local authorities can conduct drills to assist in community readiness for future pandemics and other crises and disasters.

Suggestions for disaster preparedness:

- Future UN reforms should focus on strengthening disaster management capacity and forecasting systems, in view of environmental degradation and climate change increasing risks of future pandemics and intensifying frequent natural disasters.
- Governments and the UN system must ensure universal access to clean water and sanitation.
- Governments should establish long-term science and technology cooperation by expanding IT and technological training and capacity-building, promoting industrial technology projects, and supporting
the establishment of scientific and technological systems.

- Local governments in rural areas could adopt online platforms and social networking that minimizes risks of disruption to food and other essential supplies.

**Acute crisis management**

**Suggestions for multilateral action:**

- The UN should condemn the blame game among certain countries regarding the pandemic.
- All developed countries should voluntarily increase their contributions to WHO.
- The Secretary-General should continue to advocate for a global ceasefire during the COVID-19 crisis, and it should be adopted by resolution.
- An information sharing system should be established for the transparent sharing of real-time information by countries on their current pandemic status.
- Countries should ensure adequate prevention policies and public health measures are in place, in line with WHO guidelines.
- Partnerships with development agencies should ensure all COVID-19 health advisories and information reach people at every level, including remote and underprivileged communities.
- Particular strategies should meet the needs of Indigenous peoples and communities.
- Higher human development countries should provide support, masks, and other relevant prevention supplies to lower human development countries.
- Multilateral funds and bilateral donors must prioritize health aid to vulnerable countries.
- International campaigns can help spread public health safety messages, countering misinformation. The UN could build on preventive campaigns led by the UN and PAHO such as “Stay Home” to reach communities where access to information is scarce or non-existent.

**Suggestions for health policy making:**

- COVID-19 vaccines should be free of charge and accessible by all.
- International travel should be limited to essential travel.
- Each nation should create a set of preventive guidelines and regularly update them.
- Governments should put in place strong oversight of compliance and use legal sanctions in the case of violations of preventive measures.
- Awareness and acceptance around mask wearing is essential. To change negative ideas on mask wearing, national leaders and celebrities should come out and state their support.
- To ensure the well-being of all medical staff, governments should increase support to ensure the physical and mental health of health care and hospital workers on the front line.
- Personal Protective Equipment should be procured for all those who need it.
- Those who are most at risk should be prioritized in this and future pandemics.
- Governments should continue to implement strong test, trace, isolate and treatment protocols.
- The use of telemedicine can provide health services for individuals who may be unavailable to access local health services or to assist under-trained medical staff.
Suggestions for the needs of marginalized groups:

• Governments and NGOS should address the needs of refugees and asylum seekers in recipient countries, with their legal status often leaving them without government support, in isolation, and susceptible to job loss. Ensuring their access to the internet should be prioritized.

• Ensure government safety nets for individuals without legal status during a pandemic because access to community groups, NGOs and charities is not always guaranteed.

• Local community support groups can foster communication between the government and people. This will combat misinformation, panic and fear and will foster dialogue during recovery.

• To the extent compatible with critical public health goals, schools and childcare facilities should remain open, and/or caregivers should be supported to facilitate parents who are working from home. Women and vulnerable children suffer most, and schools and education can reduce this.

• Governments and school authorities should better support teachers to effectively deliver online education where necessary, noting the extra time and resources it requires, and ensuring internet connectivity and access to computers for all students.

Suggestions for individuals, communities and other actors:

• Participants called for people to act as responsible citizens, protecting others through adherence to preventive measures.

• Individuals should take their personal hygiene seriously by wearing masks, avoiding gatherings, washing hands, and disinfecting surfaces.

A fair and just recovery

“[...] Usually, if the state found itself in a situation akin to one it faces now it could rely on foreign aid. However, due to the truly global nature of the pandemic and with no end in sight, foreign states have resorted to reducing any resource allocation that was being used as aid, leaving Afghanistan to deal with the crisis at home on its own for the first time in the 21st century.”

The Dais, Mandate Project, Rana University and Jami University, Afghanistan, ages 16-30, mixed genders.

Suggestions for multilateral action:

• Ensure recovery efforts focus on reducing inequalities.

• Governments should provide financial support to poorer countries to support recovery. They should assist indebted countries to fully invest their resources to mitigate the economic, social, health and psychological side effects of the current crisis on the most vulnerable groups.

• The IMF should provide partial debt relief to assist developing countries during the pandemic.

• The UN should be positioned as a ‘special purpose vehicle of transformation’.

• The UN Secretary-General and actors throughout the UN system can organize high-level events and campaigns to give greater attention to bolster health services in COVID-19 recovery.
Suggestions for economic recovery:

- Government-mandated funds at low interest rates should be made available for small and medium businesses that are experiencing financial difficulties.
- Focus efforts on recovery for the tourism industry, which was disproportionately affected.
- Support some form of ‘Global Marshall Plan’ to facilitate global recovery.
- Financial support should be directed towards families, vulnerable groups and small businesses.

Suggestions for education in recovery:

- The UN and other actors should support quality education through increased access to online/ remote education, especially in countries where internet access is low.
- Laptop and tablet banks offered on a library like basis for use at home can support poorer students access technology, as has been effectively launched in some pilot projects in India.

Suggestions for individuals, vulnerable groups, local communities and other actors in pandemic recovery:

- Create multi-institutional initiatives between local authorities, local housing authorities, community organizations, non-profits, government agencies, and researchers to provide local community support for food banks, shelters, online and responsive education.
- Countries should put in place a rehabilitation plan for migrant workers, with participants noting that if we want to build back better, we need to ensure migrant workers are treated with dignity, that they have access to education, health facilities, and portability of rights.
- Individuals and governments can assist in the financial recovery of the charity and non-profit sectors to ensure they can contribute their skills and expertise in ensuring an equitable recovery and reaching marginalized and vulnerable groups.
- Local authorities can support and encourage local communities share local values and goals for the healing and rebuilding of their communities.

Opportunities arising from the pandemic, and not losing sight of emerging risks

“Technological change that supports a just transition and a pro-equality, environmentally-friendly agenda combined with active labor market policies. Unless abated, current technological and demographic trends may worsen existing inequalities and tensions between groups. However, there are promising steps that can be taken...investing in physical and soft digital infrastructure...offering protections to those who may lose out from automation and digital change... utilizing technologies to expand rights and protections... making a shift to renewable energy.”

Pathfinders for Peaceful, Just and Inclusive Societies, USA, mixed ages and professions.

Suggestions for policy making on the future of work:

- COVID-19 has transformed the workplace, and with it, workplace expectations. The big lesson of the pandemic – that employees
can be relied upon to work remotely - has the potential to bring about change at a pace previously unseen. More flexible workplaces were seen to benefit those with caregiving responsibilities, those in remote locations, regional and rural areas, alleviating pressures on cities, and bringing together people from across the world more easily, increasing understanding, tolerance and a sense of global community.

- Young people were vocal about more flexible workplaces, asking that employers "let their parents work from home".
- To capitalize on these nascent trends, participants called for action from the research community, the private sector, UN Member states, and the UN system.

**Suggestions for scientific and technical readiness and technology development as a public health strategy:**

- Future investment in and development of medical technology (such as genetic engineering, nanotechnology, robotic, autonomous vehicles, and artificial intelligence) were viewed as having the potential to contribute to public health and safety and reduce risks associated with pandemics and health crises. Participants also called for research on their potential risks.
- Young participants asked the UN and other actors to invest in space exploration, the development of satellite technologies and artificial intelligence, while simultaneously understanding their impact and risks, for example the impact of robots and mechanization on the future of livelihoods.
- Participants urged greater preparedness for the anticipated risks that come along with scientific and technological developments, such as biological warfare and cybercrime.

“Greater cooperation among the actors of the international community, taking advantage especially of the advantages of technology to maintain a greater closeness with society in a direct way, while using it in a positive way to improve the quality of life of people and protect the environment at the same time.”

Dialogue organized by UN Resident Coordinator Office, Venezuela and Bolivia, ages 16-30, students, mixed genders.

- The pandemic demonstrated that a contactless culture is convenient, and that it can be used to combat tax evasion, and as part of public health strategies, warranting further investment.

**Suggestions for climate change preparedness:**

- As more fully explored in Commitment 2, We will Protect the Planet, participants observed that the COVID-19 pandemic has taught us that our response to the immense and critical challenge of climate change has been inadequate and slow. Old excuses are not good enough anymore. The pandemic has shown that the global community can act with urgency, decisiveness, and that leaders can make difficult decisions, previously considered unthinkable.
- Young participants called for short, annual lockdowns to ask everyone to 'pause for a moment' to remember, from the 2020 lockdown, that we can reduce emissions, and we can act with urgency to create real, lasting and transformative change.
The pandemic dominated conversations about health in the media across all regions, followed by health systems and non-communicable diseases

Unsurprisingly, media coverage around health issues was largely dominated by COVID-19 in 2020. Health systems (ranked second) and mental health (ranked fifth) also had strong pandemic-related angles.

Health systems were prominently covered in the media in Latin America and the Caribbean, North Africa, Western Asia, and Sub-Saharan Africa, with some coverage also noted in Europe and North America.

In Asia, the issue of health systems’ capacity was prominent, while access to health services was a key driver in North Africa and Western Asia. In Sub-Saharan Africa, particularly in Nigeria and South Africa, a narrative emerged about the media being alarmist about the robustness of systems.

In Latin America and the Caribbean, coverage focused on the extent to which governments followed WHO guidelines. In North America, the pandemic’s impact on the economy and future structure of health systems was a prominent media conversation topic.

### New diseases and the pandemic dominated media coverage in all regions

<table>
<thead>
<tr>
<th>New diseases, pandemic</th>
<th>41%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health systems and (infra)structures</td>
<td>15%</td>
</tr>
<tr>
<td>Non-communicable diseases</td>
<td>15%</td>
</tr>
<tr>
<td>Mental health</td>
<td>12%</td>
</tr>
<tr>
<td>Sexual and reproductive care, family planning</td>
<td>11%</td>
</tr>
<tr>
<td>Antimicrobial resistance</td>
<td>3%</td>
</tr>
<tr>
<td>Early warning systems for global health risks</td>
<td>1%</td>
</tr>
<tr>
<td>Child and maternal mortality</td>
<td>1%</td>
</tr>
<tr>
<td>Affordable vaccines and medicines</td>
<td>1%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Region</th>
<th>1. New diseases, pandemic</th>
<th>2. Non-communicable diseases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asia &amp; Australia</td>
<td>1. New diseases, pandemic</td>
<td>2. Non-communicable diseases</td>
</tr>
<tr>
<td>Europe &amp; Central Asia</td>
<td>1. New diseases, pandemic</td>
<td>2. Non-communicable diseases</td>
</tr>
<tr>
<td>Latin America &amp; Caribbean</td>
<td>1. New diseases, pandemic</td>
<td>2. Health systems &amp; structures</td>
</tr>
<tr>
<td>Middle East &amp; North Africa</td>
<td>1. New diseases, pandemic</td>
<td>2. Health systems &amp; structures</td>
</tr>
<tr>
<td>North America</td>
<td>1. New diseases, pandemic</td>
<td>2. Sexual &amp; reproductive care</td>
</tr>
<tr>
<td>Sub-Saharan Africa</td>
<td>1. New diseases, pandemic</td>
<td>2. Health systems &amp; structures</td>
</tr>
</tbody>
</table>

Edelman Intelligence Discovery+ | All languages | Media review in 70 countries | Date range: May 2019 - May 2020.

---

2. Edelman Intelligence analysed the global media landscape to gain insights into how megatrends are covered, including the perceived role of international cooperation and the United Nations. They analysed print, broadcast and online media, including social media, in 70 countries, covering the period May 2019 and May 2020. For the full methodology, see the UN75 report “Shaping Our Future Together.”
RESEARCH SNAPSHOT

Academic publications

- Lipscy, P. 2017 Renegotiating the World Order: Institutional Change in International Relations.

Policy research & reports

- Arjomand, B. et al. 2020 UN 2.0: Ten Innovations for Global Governance 75 Years beyond San Francisco, Stimson Center.
- Centre for International Governance Innovation 2020 Modernizing the World Trade Organization.
- Council of the European Union 2019 EU action to strengthen rules-based multilateralism.

3. This research snapshot includes a selection of top cited publications identified in the broader UN75 research mapping of academic and policy research focused on multilateralism, the United Nations, and the UN's areas of work, covering the six official UN languages. The research mapping was conducted in collaboration with the Graduate Institute of International and Development Studies. For the full methodology, see the UN75 report “Shaping Our Future Together”.


Commentaries & opinion pieces

• Ban, K. 2020 “Returning to Multilateralism” Project Syndicate.

• Brundtland, G. H. 2020 “The UN @75: The Future of Partnership and Multilateralism” Global Governance.

• Cui, H. 2020 “中欧应当合作共建开放、包容的多边主义” World Knowledge.


• — 2020 “Secretary-General’s closing remarks at High-Level Interactive Dialogue with Heads of Regional and Other Organizations” United Nations.

• Lissovolik, Y. 2020 “Could There Be Multilateralism Across Regional Integration Blocs” Valdai Discussion Club.

• Maas, H. & Le Drian, J. 2019 “Who, if not us?” German Federal Foreign Office [Alliance for Multilateralism].


• Mattoo, A. & Narlikar, A. 2020 “Resuscitating multilateralism with India’s help” The Hindu.

• Sathirathai, S. 2020 “China and other Asian powers must stand up for multilateralism and peace in a divided world” South China Morning Post.

• Scotland, P. 2019 “Multilateralism remains a powerful agent of positive change, says Secretary-General” Commonwealth of Nations.

Data resources & tools


• The Good Country Index.