**The Lancet:** *19th February 2021*

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As Arundhati Roy has highlighted, “Historically, pandemics have forced humans to break with the past and imagine their world anew. This one [COVID-19] is no different. It is a portal, a gateway between one world and the next. We can choose to walk through it, dragging the carcasses of our prejudice...and dead ideas…Or we can walk through lightly, with little luggage, ready to imagine another world. And ready to fight for it.” Pandemics spread along fault lines created by the way we live: inequities in wealth, health, social protection, and access to basic services.  Through concerted efforts the knowledge and technologies to respond to COVID-19 are being amassed. Whether we are up to the challenge of avoiding the next global crisis is another question.

The COVID-19 pandemic has been described by Reinhard Mechler and colleagues  as a manifestation of “compound, systemic and existential” risks, resulting from multiple inter-related determinants, threatening coping capacities and jeopardising livelihoods for whole societies. Epidemics, along with other interconnected systemic risks, such as hunger, food insecurity, economic meltdowns, climate-related disasters, and large-scale involuntary migration, are likely to increase in frequency and severity in the future.

In July, 2020, the *Lancet* COVID-19 Commission issued a statement to assist governments, civil society, and UN institutions in framing their response to the COVID-19 pandemic, setting out “practical solutions” and some radical ideas on deep restructuring of global finances, strengthening international collaborations, driving a green recovery, and accelerating the adoption of the Sustainable Development Goals (SDGs) and the Paris Agreement.

As we deliberate on how such ideas can inform policies in the current global context, it is instructive to consider the past. Previous pandemics led to revolutionary reforms: improved living and working conditions for labourers in Europe after the 14th-century epidemics of plague, transformations in sanitation systems in the UK after the 1832–66 cholera epidemics, and the introduction of affordable public housing in New York after the 1918–19 influenza epidemic. But such transformations are not inevitable. Cholera epidemics since the late 20th century have not secured safe water and sanitation consistently across global risk zones, but resulted in effective biomedical interventions such as oral rehydration solutions, antibiotics, and vaccines. A decade ago, it was suggested that the HIV/AIDS pandemic in Africa might drive radical social change processes to mitigate individual and population vulnerability; instead, technical innovations such as drug therapies and diagnostics have largely dominated the intervention repertoire.

The COVID-19 pandemic offers what Ulrich Beck termed a “cosmopolitan moment”, when the existing order is destabilised to open up a new arena of moral and political responsibility. In this cosmopolitan moment, the global community could come together to create new institutions or mechanisms to address the structural causes of global inequity and promote the wellbeing of people and the planet.

Multilateral organisations historically have faced instability during global wars and economic strife, particularly when organisations focus on issues like security or trade.  A recovery pathway that focuses on reanimating the SDGs and the Paris Agreement, each reliant on international cooperation, is necessary but not sufficient for the social transformations needed to prevent the next global crisis. The COVID-19 pandemic has revealed the dysfunctional system of global governance and exacerbated other barriers and bottlenecks to achieving the SDGs and the Paris Agreement, because the economic reforms to enable them come into conflict with powerful global actors pursuing their own economic goals, national security, and sovereignty.

 Even before COVID-19, international support for the SDGs was tenuous, premised as it was on assumptions of rising economic growth and positive international cooperation, including wealthy countries contributing 0·7% of the gross domestic product for official development assistance. COVID-19 and the priorities of some politicians have led to a further contraction in funding for development assistance, partly due to investment diversion to technological solutions (eg, vaccines, drugs, and therapeutics) and emergency preparedness and response.

Systemic risks require systemic responses. We need a major shift in global governance to address global inequities and the political determinants of health. This shift should facilitate an inclusive and democratic global economy to counter the disproportionate political and economic power exerted by state and non-state actors in framing policies that perpetuate inequities in global health.The moral imagination—seeing the world from different stances to envision a wider spectrum of possibilities for a post-COVID-19 world—requires us to examine how problems and their solutions are framed. A gender or human rights lens, for example, enables us to focus on the multiple ways in which COVID-19 has particularly impacted on women and marginalised communities, and how they are elided in many national responses. A lens on race may highlight the undue discourse of blame often applied to racial minorities. A political economy lens clarifies that inequalities in the distribution of power and wealth undermine efforts to develop a sustainable future for humans in their environments.

To drive our moral imagination, policy making should articulate diverse perspectives and avoid the too-early consensus or broad-brush solutions that can characterise expert panels. Influential idea-generators, multilateral agencies, advocacy coalitions, and philanthropists should incorporate clear articulation of the values that underpin the framing of problems, solutions, and challenges, and consciously seek out and present dissenting views. Health leaders and policy makers are likely to make better decisions for the aftermath of COVID-19 if they are presented with a range of voices, including those from outside the political and economic centre, that propose contesting, viable pathways to recovery for a healthier and more equal future for people and the planet