

# UNAIDS EXECUTIVE DIRECTOR SPEECH

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OF STATE FOR HEALTH MATT HANCOCK



Thank you Secretary of State for health.

I am Winnie Byanyima, I lead the United Nation's work on AIDS. Thank you for your support for our work.

Nine months ago, world leaders declared that any COVID-19 vaccine would be a global public good, a People's Vaccine.

Yet 9 in 10 people in the poorest countries are set to go without a vaccine this year. A small group of rich nations representing just 14% of the global population have bought up most of the supply of leading COVID-19 vaccine contenders until the end of 2021.

The South African government has called this a new global Apartheid.

The problem is not just that there is not enough money, and not just that the vaccines are being allocated unfairly. It is that there are not enough vaccines being made.

Our best chance of all staying safe from COVID-19 is to have vaccines, tests and treatments that are available for all. Instead, pharmaceutical companies are protecting their monopolies on technology and intellectual property and thus restricting production. Pharmaceutical companies have not joined the WHO COVID-19 Technology Access Pool (C-TAP). And the proposal presented by the Governments of South Africa and India to the World Trade Organization's Trade-Related Aspects of Intellectual Property Rights (TRIPS) Council for a temporary waiver of certain TRIPS obligations has been blocked by rich countries.

Not all producers are the same, and we welcome that Oxford/ AstraZeneca has pledged to provide 64% of their doses to people in developing nations. Yet they can still only reach 18% of the world's population next year at most.

Even rich countries face challenges over production quantities in 2021. You will be aware of the extremely worrying production delays to both Pfizer and Astra Zeneca creating fear and tensions.

We know how to solve this problem. Open up production.

We know this from the painful lessons from the early years of the AIDS response, when millions of lives were needlessly lost, because life saving treatment remained out of reach for poorer countries. Let's not repeat these mistakes.

This is not only about justice for the poor. The longer that the virus is left to ravage developing countries, the longer people in the G7 countries will remain at risk. The virus is mutating, which threatens the efficacy of vaccines. And the economic cost will be huge. The International Chamber of Commerce's research this week predicts that delays to vaccine access in poorer nations will cost the global economy an estimated \$9 trillion, with nearly half of that in wealthy countries.

These vaccines were developed with public money. These companies depend on government support.

The UK's chairmanship of the G7, and its position as a base of the pharmaceutical industry, make the UK key in overcoming the global COVID-19 crisis.

So, my questions to the Secretary of State are these: Support for COVAX is welcome, but cannot on its own solve the supply problem. How will the UK help ensure that constraints on licensing and know-how no longer obstruct mass production of COVID-19 vaccines? How will they help make companies take part in C-TAP, and how will they help speed up agreement on a waiver at the WTO? How will they ensure that enough vaccines are produced in 2021 to ensure that no one is left behind?

Thank you.

