

WINNIE BYANYIMA

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How can the G7 end the COVID-19 pandemic?

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Thank you for inviting me to be on this panel. It is taking place on day one of the United Nations High-Level Meeting on AIDS.

Let me be frank and state it as it is:

The G7 – the world’s wealthiest and most powerful countries – are failing in their duty to provide global leadership to end the COVID-19 pandemic for everyone everywhere.

More than a million people have died from COVID since the G7 leaders last met back in February, when they pledged to increase the global vaccine supply.

Of the 1.77 billion doses of COVID vaccines given globally, 28% have gone to G7 countries. In contrast just 0.3% of COVID vaccines have gone to low-income countries.

COVID-19 related deaths are increasingly concentrated in low- and middle-income countries. Yesterday I got the news that my friend’s brother in Uganda had died of COVID and he had both vaccines. We can see the new variants taking their toll in the global south.

The scale of this inequality is not an accident. It was predictable months ago. President Ramaphosa called it “vaccine apartheid” – and it is.

We commend the scientific developments that led to effective COVID-19 vaccines, with governments – including many of the G7 countries – investing more than \$100 billion on their development. We welcome vaccine donations through Covax, but this can only meet a small immediate need. Critically, the power to decide how many vaccines are made, who they get sold to and at what price, was left to private companies.

Let me share two examples to highlight the stark inequality:

Pfizer committed months ago to give 40 million doses to COVAX. But to date they have delivered just 1.25 million doses – less than one day’s production for them.

Meanwhile, at least nine people have become new billionaires since the beginning of the pandemic, thanks to the excessive profits that pharmaceutical corporations with monopolies on COVID vaccines are making. Their total wealth could vaccinate every single person in the world’s poorest countries, if governments committed to protecting people rather than billionaire profits.

A year ago, the barrier to battling this cruel disease was the science. Today it is monopolies.

The People's Vaccine Alliance calls for three urgent actions:

Firstly, technologies need to be openly shared with every competent manufacturer in the world. I respectfully and strongly disagree with those who argue against the sharing of the vaccine know-how with developing countries. We must not fall into the trap of assuming that all global knowledge and expertise are locked up in a handful of rich nations. We succeeded in challenging these mindsets to ensure that people have access to life saving HIV treatments. We must do it again now. The WHO COVID-19 Technology Access Pool is a mechanism to facilitate such sharing and it is the only way to immediately ensure production of vaccines and COVID-19 tools where they are most needed. The G7 must put their weight behind it.

Secondly, world leaders, especially the G7 and the EU, must follow President Biden's leadership and support the proposal by India and South Africa at the WTO [World Trade Organisation] to waive intellectual property rules on COVID-19 tools, including vaccines and treatments. The TRIPS waiver would allow removal of artificial barriers that are impeding developing nations to access the vaccines.

And finally, while all this is important to scale up secure supply of vaccines and drive vaccine prices down to sustainable levels, these actions must go hand in hand with a clear financing plan with burden sharing according to GDP to vaccinate the world – with the G7 taking the lead and on their fair share. Money is needed.

Many lives have been lost. But G7 leaders can still choose a different path, one based on public health, not private wealth. A People's Vaccine and an effective Pandemic Treaty that includes the recommendations of the IPPR, co-chaired by Helen Clark, are crucial to end COVID-19.

Thank you.

