



## **Statement of Global Health Advocates for the Global Health Summit: A political landmark for bold progress in the COVID19 response and achieving global health equity**

While it is important to learn from our mistakes and begin preparing for the next health crisis, we must not forget that we are not out of the current one yet. The COVID19 pandemic has exposed major gaps in the world's capacity to prevent and respond to epidemics and our collective failure to put equity at the heart of the response.

### **1. Urgently filling ACT-A funding gap**

Despite a plethora of compelling cases for investment into the global response, **the financing gap for the ACT Accelerator stands at more than \$19 billion in 2021.** This amount is too low compared to what the pandemic has already cost. The truth is that financial and political investments in preparedness as well as universal health coverage have long been insufficient despite numerous commitments.

### **2. Correcting policy incoherence: taking bold actions towards health equity**

There is a striking need to design policies that do not adversely affect the prospects of resilience and preparedness, especially in LMICs. An incoherent policy would be one which provides ODA to support a country's health systems while continuing to promote international policies that negatively affect the ability of governments to invest in health. Currently, regional and international trade agreements set obligations that are conflicting with health goals, like equitable access to essential health services, medicines and vaccines.

Europe is taking significant actions to make its contribution to containing health emergencies (e.g. through the establishment of HERA), but it can only work if **conditions on affordability, availability, accessibility, socially responsible licensing and transparency are attached to public funding for research and innovation.** Another strong signal would be to get explicit support to other critical initiatives - **the COVID19 Technology Access Pool (C-TAP) and the TRIPS waiver** – where we have a decisive multilateral solution on the table that would help to make health a global public good a reality.

### **3. Increased health systems capacity and avoidance of global health fragmentation**

**The G20 should promote better alignment between health security and universal coverage in strengthening health systems.** It would be a mistake to focus the COVID-19 response solely on the development and provision of technologies or products. **Effective solutions lie in strengthening the capacities of health structures and increasing investments in human resources, including communities.** COVID-19 tools can only be universally accessible if countries are able to deliver them to their populations. At the same time, maintaining the safe provision of all other essential public health functions and services is key and relevant for both prevention and preparedness. The current crisis encourages us to widen our understanding of preparedness to make environmental, social, and economic sectors increasingly pandemic proof. This multi sectoral approach will be key for prevention.



#### 4. Enabling a stronger and more accountable global governance

We welcome your commitment to enabling a much-needed conducive global cooperation. We feel it is important to clarify how the Global Health Summit principles will be translated into concrete milestones for further discussions and lasting changes. We welcome the intention to move forward in setting renewed rules for the global management of global health threats. The challenge may not only be to change international rules but to ensure their implementation (eg: the International Health Regulation). Moving forward as a global community, we must first ensure that existing multilateral cooperation is strengthened and is able to deliver for global health security. For this process to be more efficient, we believe that actors responsible for the management of global health risks and pandemic response (including the private sector) should be tied to a **shared accountability model**. Such a model should urgently be developed and include equitable access, transparency and inclusivity criteria.

#### 5. Meaningful civil society and community inclusion

Political leaders have a responsibility to avoid top-down policy making and ensure a wide variety of civil society organisations (CSOs) and communities are included, especially smaller, locally based ones. Those actors will be on the frontline, implementing principles agreed at the Global Health Summit. We must move away from the global North-South divide towards a more equitable version of multilateralism, which means that CSOs and communities from developing countries should be at the forefront of these discussions. **CSOs and communities must also be given the tools they need to give meaningful input, and should be proactively involved before, during and after the Summit.**



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[Global Health Advocates](http://www.actionsantemondiale.fr) is a French organization, member of the ACTION global health Advocacy Partnership, that works on the French and EU level with the mission to carry out political advocacy to ensure policies and resources are effectively addressing health inequalities. [www.actionsantemondiale.fr](http://www.actionsantemondiale.fr)