Dear heads of state and government of G20 countries,

# CALL FOR A COORDINATED, EQUITABLE, AND HUMAN RIGHTS-BASED GLOBAL RESPONSE TO COVID-19

We, the undersigned 99 organizations and 40 individuals, call upon you to ensure a robust, coordinated global response to the coronavirus disease 2019 (COVID-19) pandemic that is humane, equitable, based in the universality of human rights, and meets the needs of countries and people who are most vulnerable and have the fewest resources.

We recognize that we are in an unprecedented situation of a colossal need for sharing and solidarity even as many of world's wealthiest and best-resourced nations are experiencing their own severe public health emergencies. And we applaud governments that, even with domestic health emergencies, have offered support to other countries.

Yet these actions are far from commensurate with the scale of the pandemic and global need, especially of the most vulnerable people and people in the most vulnerable countries. We fear a looming catastrophe, especially in countries where even before COVID-19, health systems were overstretched, and for populations who were already highly vulnerable to health risks, including people living in poverty, people with disabilities, the elderly, and refugees, internally displaced persons, and migrants.

Accordingly, we issue this urgent call for coordinated global action, undertaken through the leadership of your governments, and working closely with civil society organizations, the public health community, and international organizations to:

# 1. Provide countries with the financial and expert resources required for a response that is maximally effective and protective of vulnerable populations

Many lower-income countries will require significant external support to effectively contain, respond to, and recover from COVID-19, and to mitigate its social and economic cost. We therefore call upon your governments to:

- o Immediately fully fund COVID-19 humanitarian appeals, including:
  - The UN emergency appeal for \$2.01 billion less than 0.1% of what wealthy countries are spending on emergency domestic COVID-19 responses and any future such appeals. This should not reduce support for other humanitarian appeals, which also require full funding.
  - WHO's COVID-19 appeal, and any future such appeals.
  - National COVID-19 response plans and any other national funding requests.

- Provide the necessary funding to meet the urgent needs of health, social, and economic systems in lower-income countries, as called for by the 6 April 2020 letter sent to you by Gordon Brown and 164 other global leaders<sup>1</sup>
- o Provide significant new resources to international, national, and community-based civil society organizations responding to COVID-19
- o Ensure full transparency of contributions and their use
- o Make available technical expertise to support international and national need

# 2. Suspend debts of lower-income countries and increase debt relief

Countries need all available domestic resources to respond to COVID-19, and will need significant funding for their longer-term recovery. We therefore call upon your governments to:

- Immediately suspend debt payments of countries eligible for International Development Association financing, as called for by the World Bank and IMF; all African countries, as requested by African ministers of finance; and other countries experiencing extraordinary circumstances
- o Provide significant, sustained additional debt relief to countries eligible for the Heavily Indebted Poor Countries (HIPC) initiative

# 3. Maximize supply and share health resources globally, equitably and based on need

Higher-income countries have insufficient necessary medical supplies and equipment, yet shortfalls in lower-income countries are far greater still, with a lack of personal protective equipment putting large numbers of health workers at preventable risk, and causing countless avoidable COVID-19 patient deaths. We therefore call upon your governments to:

- Use the full authorities under your law to demand the utmost efforts of manufacturers to maximize the supply of critically needed medical supplies and equipment
- Support WHO in developing a global pool of intellectual property rights for technologies for preventing, detecting, controlling, and treating the COVID-19 pandemic, to make the intellectual property needed to manufacture these technologies and secure their regulator approval freely accessible or available through licensing at reasonable and affordable terms, as proposed by the government of Costa Rica

2

<sup>&</sup>lt;sup>1</sup> The funding called for in the 6 April 2020 letter (<a href="https://www.project-syndicate.org/commentary/a-letter-to-g20-governments-by-erik-berglof-et-al-2020-04">https://www.project-syndicate.org/commentary/a-letter-to-g20-governments-by-erik-berglof-et-al-2020-04</a>) includes:

<sup>•</sup> An immediate COVID-19 response package of \$100 billion, including new financing and debt relief, plus \$50 billion for 2021, as requested by African finance ministers

<sup>• \$35</sup> billion that WHO estimates is required to support countries with weak health systems

<sup>• \$8</sup> billion that the Global Preparedness Monitoring Board estimates is required for vaccines, therapies, and WHO

<sup>• \$7.4</sup> billion that Gavi, the Vaccine Alliance, requires for its next replenishment

- o Implement your 26 March 2020 commitment to ensure medical supplies are widely available at affordable prices, on an equitable basis, where most needed, and as quickly as possible, through all necessary actions, which may include:
  - Supporting WHO in developing guidelines to determine where supplies and equipment should be distributed based on these principles; supporting WHO in developing a platform to facilitate needs-based, equitable distribution; and adhering to WHO guidelines
  - Agreeing to donate a significant proportion of any procurements of these supplies and equipment available to WHO, for it to distribute equitably, based on need
- o Regularly, publicly report on how you are meeting your 26 March 2020 commitment
- For countries past the peak of their epidemics, or with sufficient levels of supplies and equipment, share not presently needed supplies and equipment based on the same principles of need and equity

## 4. Distribute therapies and vaccines equitably, based on need

Once developed, COVID-19 therapies and vaccines for COVID-19 must also be distributed equitably, based on need, and not on where they are manufactured or what country can pay the most. We therefore call upon your governments to:

- Work with WHO to develop a plan for manufacturing and distributing any COVID-19 vaccines globally, equitably, based on need, and free at the point of use; and commit to following this plan
- o Immediately provide the Coalition for Epidemic Preparedness Innovations the \$2 billion it requires to support developing a vaccine
- o Require any vaccines developed with public funding to be available to governments and international organizations at affordable prices

# 5. Remove export controls, reform sanctions, and revise travel restrictions that hinder the global COVID-19 response

Dozens of countries have imposed export controls on medical supplies and equipment, preventing them from being distributed equitably, based on need. Sanction regimes on several countries, notably Cuba, Iran, North Korea, Venezuela, and Zimbabwe are impeding their ability to respond to COVID-19. And travel restrictions may prevent health and humanitarian workers from traveling to countries to assist in the COVID-19 response or meet other humanitarian needs. We therefore call upon your governments to:

- o Remove export controls, at least to the extent they prevent needs-based, equitable distribution
- Reform sanctions that may hinder national COVID-19 responses, at a minimum to ensure prompt, flexible authorization for medicines, medical supplies and equipment, and other humanitarian needs
- o Exempt health and humanitarian workers from travel restrictions

# 6. Protect people who lack protection from own governments

Refugees, internally displaced persons, asylum seekers, stateless people, and other migrants living in camps or other situations highly conducive to the spread of COVID-19 and with limited access to health care require extra support. We therefore call upon your governments to:

- o Fully and rapidly meet all UN humanitarian appeals
- Prioritize these populations for distribution of medical supplies and equipment and COVID-19 related health technologies, including vaccines and therapies when available, due to their heightened vulnerability
- Ensure that all migrants, regardless of status, and stateless people have equal access to all COVID-19-related health services and social supports as their own citizens

Lastly, we implore you to take all possible measures to protect members of your own countries who are homeless, living with a disability, elderly, children, living with HIV, low-income, in confined settings (including prisons, nursing homes, detention centers, psychiatric or social care institutions or institutions for people with disabilities, and orphanages), or in any other way marginalized and extra vulnerable, ensuring robust health and social support, protections from discrimination, and any special measures that may be needed to protect their health and well-being. And we call for you to support other countries in doing the same to protect their own marginalized and vulnerable populations.

The only way to protect the health of people in all countries will be to protect the health of people in each country – all the people. A response to this pandemic based in social and global solidarity, that equally values poor and rich, and is grounded in the equal rights of all people will most quickly get us through this crisis with the least possible human devastation. The global coordination of such a response could launch a new era of global collaboration to move us nearer a world that fully respects each person's dignity.

Sincerely,

# **Organisations**

Action for Humane Hospitals
Cameroon

AIDS and Rights Alliance for Southern Africa (ARASA) Namibia

Aidsfonds Netherlands **AIDS Foundation South Africa** South Africa

African Youth and Adolescent Network Lesotho

Alianza Colombiana por la Salud Alimentaria/Colombian Alliance for Food Health Colombia Alianza Libre de Humo Argentina/ Alliance of Smoke Free Tobacco Argentina

Argentina

Alliance for Surgery and Anesthesia Presence (ASAP)

**USA** 

**American Heart Association** USA

Asociación Argentina de Salud Pública (AASAP)

Argentina

Asociación Latinoamericana de Salud Global (ALASAG)/Latin American Association of Global Health Argentina

**Bangladesh Legal Aid and Services Trust** 

Bangladesh

Canadian HIV/AIDS Legal Network | Réseau juridique canadien VIH/sida Canada

**Cancer Alliance** 

South Africa

**Centre for Applied Legal Studies** South Africa

**Centre for Environmental Rights**South Africa

Centre for Health and Resource Management India

**Centre for Law and Policy Research** India

Centre on Law & Social Transformation Norway Centro de Estudios para la Equidad y Gobernanza en los Sistemas de Salud (CEGSS)/Center for the Study of Equity and Governance in Health Systems

Guatemala

**CHESTRAD Global** 

Nigeria

Children's HeartLink

**USA** 

**Communication for Development** 

Nigeria

**Disability Rights International** 

**USA** 

Division of Social Accountability, University of Saskatchewan

Canada

**Educar Consumidores/Educate** 

**Consumers** Colombia

**Equal Education Law Centre (EELC)** 

South Africa

**Every Girl in School Alliance** 

Malawi

Framework Convention on Global

**Health Alliance** 

Switzerland/Global

**Frontline AIDS** 

UK

Fundación Interamericana del Corazón Argentina/Inter-American Heart Foundation – Argentina (FIC

Argentina)

Argentina

Fundación para el Desarrollo de Políticas Sustentables / Foundation for the Development of Sustainable Policies

Argentina

Fundación Salud Ambiente y Desarrollo (FUNSAD)/ Environment, Health and Development Foundation Ecuador

**Global Health South** 

Nigeria/Global

Health Economics and HIV and AIDS Research Division

South Africa

**Health-e News Service** 

South Africa

HealthGap

USA

**Healthy Living Alliance (HEALA)** 

South Africa

IFHHRO | Medical Human Rights Network

Netherlands

**Imamia Medics International (IMI)** 

USA

**Institute of Analysis & Advocacy** 

Ukraine

**Institute for Economic Justice (IEJ)** 

South Africa

**Institute for Justice & Democracy in** 

**Haiti** USA

**International Alliance of Patients'** 

**Organisations** 

United Kingdom/Global

International Council of AIDS Service

**Organizations (ICASO)** 

Canada/Global

**International-Lawyers.Org** 

(INTLawyers)

Switzerland/Global

**International Rescue Committee** 

**USA** 

**International Treatment Preparedness** 

**Coalition** 

South Africa

**Joep Lange Institute** 

Netherlands

Kenya Legal and Ethical Issues

Network on HIV and AIDS (KELIN)

Kenya

**Light of Hope** 

Ukraine

**Living Goods** 

**USA** 

**MADRE** 

**United States** 

**Management Sciences for Health** 

**USA** 

medica mondiale

Germany

Médecins Sans Frontièrs South Africa

South Africa

Mesa Colombiana por las

Enfermedades Crónicas/Colombian

**Board for Chronic Disease** 

Colombia

Ndifuna Ukwazi

South Africa

**Operation Smile** 

USA

**Oxfam South Africa** 

South Africa

**Partners In Health** 

USA

**People's Health Movement** 

Global

**PharmAccess Group Netherlands** 

Netherlands

PharmAccess Group Nigeria

Nigeria

PharmAcess Group Tanzania

Tanzania

Policies for Equitable Access to Health

Italy

POSITIVE-GENERATION

Cameroon

**Positive Vibes** 

Namibia/South Africa

**Prayas** 

India

Probono.org

South Africa

**Public Affairs Research Institute** 

South Africa

**Public Health Foundation of India** 

India

**Public Service Accountability Monitor** 

South Africa

**Rare Diseases South Africa** 

South Africa

**ReSurge International** 

USA

**Rural Health Advocacy Project** 

South Africa

Sala de Derecho a la Salud de la Universidad Blas Pascal/Right to

Health Room, Blas Pascal University

Argentina

Salud y Fármacos (EE.UU)

**USA** 

Saluteglobale.it Associazione di

**Promozione Sociale** 

Italy

**Save the Children South Africa** 

South Africa

Schweizer Partnerschaft Hôpital

Albert Schweitzer Haiti (SPHASH)

Switzerland

**SECTION27** 

South Africa

**Seed Global Health** 

**USA** 

**She Decides** 

South Africa

Siasa Place

Kenya

**Smile Train** 

**USA** 

**Sonke Gender Justice** 

South Africa

**South African Non Communicable** 

**Diseases Alliance** 

South Africa

**STOPAIDS** 

UK

**Sustainable Resource Foundation** 

Pakistan

**TB Proof** 

South Africa

The Center for Law, Justice and

Society – Dejusticia

Colombia

**Treatment Action Campaign (TAC)** 

South Africa

Viva Salud

Belgium

Wemos

Netherlands

What To Expect Project

USA

White Ribbon Alliance

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**World Federal of Public Health** 

**Associations** 

Switzerland/Global

Youth Wave

Malawi

#### **Individuals**

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