

Summary – Online Event

One year anniversary of ACT-Accelerator:  
How can we guarantee an equitable and efficient response to the global COVID19 crisis?

On 15 April 2020, on the occasion of the first anniversary of [ACT-Accelerator](#), Global Health Advocates organised an online event to discuss France’s and the international health response to the COVID19 pandemic.

ACT-A is a unique global collaborative initiative, which gathers governments, health agencies and the WHO in the fight against COVID19.

Dr Joseph Caboré, Director for Programme Management at the WHO Africa Regional Office, reminded the leadership of France and WHO in creating ACT-A under a year ago in an effort to collectively and globally fight against an unprecedented pandemic. With the prospects of a prolonged crisis affecting poorer countries -and particularly Africa where 82% of the population does not have access to social benefits- the international community needs to choose between *“investments to save lives by addressing the root causes of the pandemic or continuing to spend billions to address its consequences”*. With a global response being the only solution to eradicate the virus, Dr Caboré called for more solidarity and equity at the time when *“Africa administered a little less than 2% of available COVID19 vaccines in the world”*

« ACT-A, a year later : results and needs ».

In order to learn lessons, adapt and reinforce the COVID19 response, this first session features stakeholders directly involved in the implementation of the international health response. They will take stock of the results and remaining challenges within ACT-A.

ACT-A’s first results

- Purchased 500 million individual protection equipments;
- Training of 23 000 community health workers in nearly 200 countries;
- Procurement of 120 million tests;
- Within COVAX, distribution of 38,5 million vaccine doses in 105 Low- and Middle-Income Countries, including 16 million doses in Africa.

Confronted with human loss linked to the pandemics and unequal access to vaccines between rich and poor countries but also global economic consequences of the crisis, **Dr Paul Kristiansen, Head of Standards and Assays, Preclinical and Immunology at CEPI** underlined the need to continue and step up investments in ACT-A in order to increase the production and development new vaccines that can protect against the virus’ variants and therefore guarantee a global, effective and equitable response.

The COVID19 response needs to gather all countries but also be adapted to everyone’s needs, underlined **Dr Moumouni KINDA, Chief Executive Officer of the NGO ALIMA**. Among African countries, the priority should be

given to improving pandemic preparedness. In order to fight against Sars-CoV-2, this means increasingly raising awareness on prevention among the African population, but also simplifying diagnostics and improving access to oxygen (currently limited because of logistical issues).

In order to be better prepared to tackle emergencies, measures should be taken to strengthen health systems (health workers trainings, reinforcing the cold chain, improving procurement, developing local production and R&D as well as maintaining other essential health services) but also to continue and reinforce *“the management of all other diseases that still plague Africa”*.

**Françoise Vanni, Head of External Relations and Communications at the Global Fund to fight AIDS, TB and Malaria**, agreed with the previous analysis and alerted on the important collateral damages of the crisis to health systems, with an important drop in testing and treatment of diseases like HIV or Tuberculosis.

Reinforcing support to health systems is not only necessary to maintain routine care but is also essential to the COVID19 response specifically. No vaccination campaign will be effective if we are not able to test people, and therefore make diagnostics available to countries: *“Without diagnostics, we’re essentially responding to the COVID19 crisis with blindfolds”*.

**Dr Duneton, Unitaïd’s Executive Director**, also underlined the need to reinforce access to all technologies and tools necessary to fight the virus: *“in most countries there are no strategies on access to COVID19 treatments, for instance on the use of blood thinners or oxygen therapy”* even when this is part of the basic clinical package that helps save 50% of patients. There are several needs today: responding to stock-outs, especially oxygen needs in many countries, continuing R&D for new treatments with a long-term vision, especially when it comes to variants, and organizing generic production especially for new and promising antivirals under study. Dr Duneton invited us *“to look ahead in the long term, as the crisis is set to last”*.

### Role and opportunities for France in the global response

The second session focused on the role and opportunities for France to reinforce ACT-A.

The **French Minister for Europe and Foreign Affairs Jean-Yves Le Drian** recalled that *“global solidarity is the prerequisite to get rid of this global threat”*. Minister Le Drian encouraged us to redouble our effort, notably on the adopted Charter on access to COVID tools, a French initiative that promotes key principles such as: **knowledge sharing, technology transfer and price transparency**. He also presented the driving role of France in creating a fifth pillar within ACT-A to reinforce production capacity. Finally, he insisted that *“countries who can afford to do so, must share a part of their doses with most vulnerable countries via a direct contribution to COVAX. France is fully aware that immunity can only be global. If this fails, we will have to acknowledge the consequences.”*

**Professor Kazatchkine, Member of the Independent Panel for Pandemic Preparedness and Response** called for the development of a global strategy to fight pandemics to improve preparedness and response. Among the big challenges that we’re facing, we need a more inclusive governance in order to better involve all countries. While today *“we work within a structure that is largely perceived as a Western mechanism”* we need more accountability, a stronger WHO, and rethink an outdated North-South vision: *“we are in a new era, global health is a global public good, we need to reset the multilateral system.”*

**French MP Jean-François Mbaye** presented the work of parliamentarians *“in ensuring that France puts health at the top of its development policies’ priorities”* within the framework of the draft law on development aid and the fight against global inequalities. This text offers important room for maneuver in this regard. It acknowledges a rising trend in development aid budgets, confirms France’s commitment to allocate 0,1% of GNI to health, as recommended by the WHO (we’re barely meeting half of that target today). He also underlined the potential a bigger mobilisation of innovative financing could represent to answer to COVID19 challenges. Finally, he spoke in favor of the undeniable benefits of waiving patents to accelerate technology transfer.

You can watch the event again by clicking [here](#) (in French only)