## Joint G20 Finance and Health Ministers Meeting Communiqué

October 29, 2021

29 October 2021, Rome, Italy

The COVID-19 pandemic continues to have profound impacts worldwide. The severe mortality, morbidity and hospitalisation of affected patients have clearly revealed weaknesses in pandemic prevention, preparedness, and response (PPR), health systems and services, information, and education. At the same time, the pandemic has taken a heavy toll on the global economy. Economic recovery remains highly divergent across and within countries, more severely affecting emerging and developing economies, and populations in situations of vulnerability, including poorer households, women and girls, persons with disabilities, elderly, and children. The pandemic has exposed significant shortcomings in the world's ability to coordinate the global health response. These have left us ill prepared for the challenges of responding to the pandemic and to its socio[1]economic impact, and are hampering the advancement of the United Nations (UN) Agenda 2030 and the Sustainable Development Goals (SDGs). The pandemic has also highlighted the need to better understand and bridge the gaps in our systems. We reiterate our commitment to bring the pandemic under control everywhere as soon as possible, put people at the center of preparedness and to strengthen our collective efforts to prepare for, prevent, detect, report, and respond to health emergencies, notably promoting resilience of health systems and communities. We recognise the role of extensive COVID-19 immunisation as a global public good. We reaffirm our support to all collaborative efforts to ensure a timely and equitable access to safe, affordable, quality and effective vaccines, therapeutics, diagnostics, and personal protective equipment, particularly in low- and middle-income countries (LMICs). To help advance toward the global goals of vaccinating at least 40 percent of the population in all countries by the end of 2021 and 70 percent by mid-2022, as recommended by the World Health Organization (WHO)'s global vaccination strategy, we will take steps to help boost the supply of vaccines and essential medical products and inputs in developing countries and remove relevant supply and financing constraints.

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We reiterate our support to strengthen the resilience of supply chains, to increase vaccine distribution, administration, as well as local and regional manufacturing capacity in LMICs, including through voluntary technology transfer hubs in various regions, such as the newly established mRNA Hubs in South Africa, Brazil and Argentina, and through joint production and processing arrangements. We will continue to support the Access to COVID-19 Tools Accelerator (ACT-A) and the extension of its mandate into 2022, and we will advance collaboration with global and regional initiatives, including ACT-A's COVAX Pillar, the African Union's African Vaccine Acquisition Trust (AVAT), the Revolving Fund of the Pan American Health Organization, and the Global Fund's COVID-19 Response Mechanism. We will work to increase transparency and predictability of deliveries of vaccines and to foster responsible public-private partnerships. We thank the Multilateral Leaders Task Force for its efforts and encourage it to work to identify gaps and accelerate access to and on-the-ground delivery of COVID-19 tools. Not only will these actions help save countless lives, accelerating vaccinations across the globe also remains the cornerstone of the economic recovery. We call on Multilateral Development Banks working together with COVAX to continue to support procurement and delivery of vaccines.

We remain committed to build on the lessons learned from the COVID-19 crisis to increase investment into longer term health capacity, building up resilience to future health shocks and addressing people's needs by improving dialogue and coordination between global health and finance policy-makers, multilateral health and financial institutions, and reinforcing a multilateral approach for financing extensive immunisation as a global public good, based on multisectoral collaboration domestically and internationally. We commit to promote a healthy and sustainable recovery through the strengthening of national health systems, making them more inclusive and resilient, ensuring universal access to health care services, including sexual and reproductive health, in line with SDGs, and focusing on primary health care to achieve quality health care at all levels and achieve Universal Health Coverage (UHC), including the commitment on the G20 Shared Understanding on the Importance of UHC Financing in Developing Countries.

We are determined to advance pandemic, prevention, preparedness and response, as well as to prepare the way for stronger post-pandemic recovery, in line with the comprehensive One Health approach, taking into account work of the Tripartite and UN Environment Programme and their newly established One Health High Level Expert Panel, and with previous G20 commitments to tackle antimicrobial resistance. Joint G20 Finance and Health Ministers Meeting Communiqué | U.S. Department of the Treasury

We acknowledge that financing for PPR has to become more adequate, more sustainable and better coordinated and requires a continuous cooperation between health and finance decision-makers, including to address potential financing gaps, mobilising an appropriate mix of existing multilateral financing mechanisms and explore setting up new financing mechanisms.

In line with the Rome Declaration, we agree that our actions should be guided by the following principles: be anchored in countries needs and contexts; foster domestic resource mobilisation for strengthening health systems as our first line against the next pandemic; recognise the urgent need to act collectively to address the cross-border nature of health emergencies and focus on addressing gaps, including the gender dimension; recognise the crucial leadership role of the WHO in the international health work; build on the respective strengths and mandates of existing organisations and leverage existing networks of collaboration such as ACT-A; be coherent with and supportive of ongoing efforts to strengthen the global health architecture; strive to improve global coordination to enable agility and flexibility, promoting equity and avoiding duplication and overlapping mandates that could delay the response by global, regional and country-level health agencies; take into account processes that are considering support of a possible convention, agreement or other international instrument in the context of the WHO on pandemic preparedness and response, and in alignment with strengthening the International Health Regulations (2005).

Based on the principles above and building on the work of the G20 Informal Group of Finance and Health Experts, we establish a G20 Joint Finance-Health Task Force (the Task Force) aimed at enhancing dialogue and global cooperation on issues relating to pandemic PPR, promoting the exchange of experiences and best practices, developing coordination arrangements between Finance and Health Ministries, promoting collective action, assessing and addressing health emergencies with cross-border impact, and encouraging effective stewardship of resources for pandemic PPR, while adopting a One Health approach.

Taking into account the forthcoming discussions and decisions by the World Health Assembly with regards to strengthening WHO preparedness and response to health emergencies, the Task Force will develop options for coordination arrangements between Finance and Health Ministries. The Task Force is member led and operates by consensus. Task Force members will be Health and Finance officials. To ensure inclusiveness, representation, and geographical coverage, also building on the experience of the Global Health Summit held in May 2021, it will consider the inclusion of additional non-G20 10/29/2021

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members, regional bodies and International Organizations (IOs) on a consensus basis. It shall conduct outreach and meaningful engagement with vulnerable countries, regional organisations, civil society, academia, and the private sector.

The Task Force is initially jointly chaired by the 2021 and 2022 G20 Presidencies. It will report to Health and Finance Ministers in early 2022 and will be assisted by a secretariat housed at the WHO, with the support of the World Bank. The secretariat will draw on the expertise of the G20 membership and relevant IOs and International Financial Institutions.

We expect the Task Force to report on how health and finance collaboration can strengthen efforts to prevent, detect, and respond to future health emergencies with cross-border potential, within the framework of the International Health Regulations (2005). It should discuss public and private financing already allocated for pandemic PPR, and the related financing gaps, drawing upon the work of the G20 High Level Independent Panel and other relevant sources, and it could identify opportunities for coordination of financing and resource mobilisation for pandemic PPR; it should take into account relevant legislative/legal frameworks; and identify priorities for allocation of resources.

We ask the Task Force to convene before the end of 2021 to agree on an initial roadmap and appoint the secretariat.