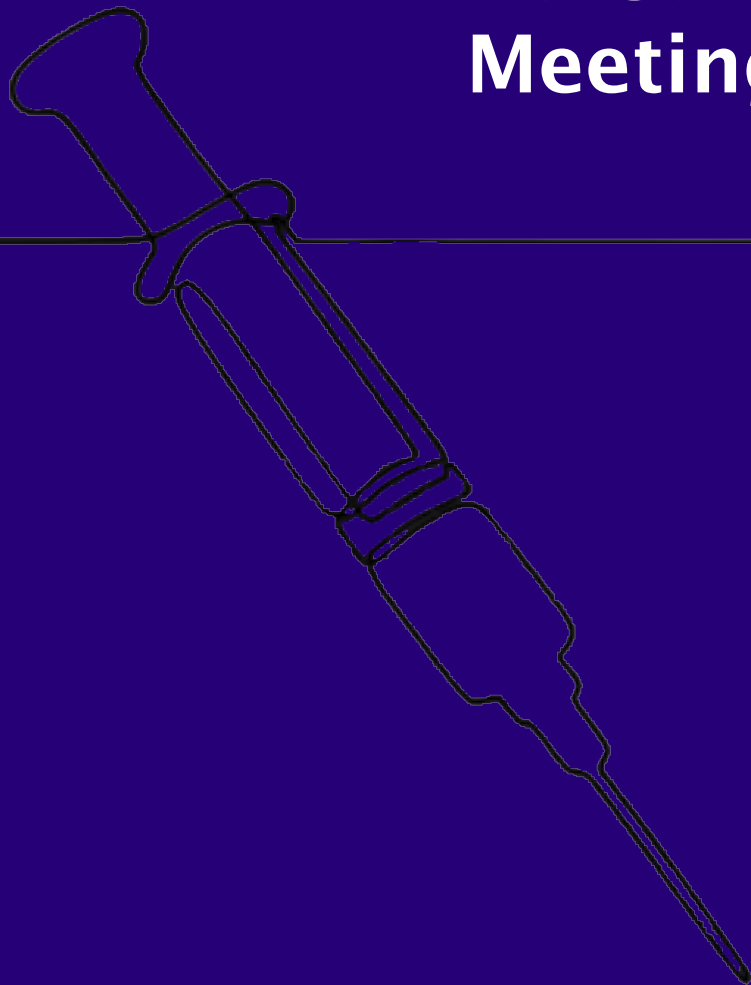


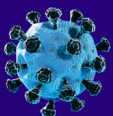
LANCET COVID-19 COMMISSION

# Statement on the Occasion of the G20 Leaders' Summit 2021 Meeting in Rome

5 OCTOBER 2021



The *Lancet* COVID-19 Commissioners  
and Commission Secretariat



THE LANCET  
COVID-19 COMMISSION

# Commissioners and Secretariat

## COMMISSIONERS

**Jeffrey Sachs** (Chair), University Professor, Columbia University, USA

**Salim Abdool Karim**, Caprisa Professor for Global Health in Epidemiology, Mailman School of Public Health, Columbia University, USA

**Lara Akinin**, Distinguished University Professor, Simon Fraser University, Canada

**Joseph Allen**, Associate Professor of Exposure Assessment Science, Harvard T. H. Chan School of Public Health, USA

**Laurence Boone**, Chief Economist and Head of Economics Department, OECD, France

**Kirsten Brosbøl**, Founder, Parliamentarians for the Global Goals, Denmark

**Gabriela Cuevas Barron**, Minister of Parliament, Mexican Congress, Mexico

**María Fernanda Espinosa**, Former President of the UN General Assembly and Former Minister of Foreign Affairs and Defense, Ecuador

**Vitor Gaspar**, Director of the Fiscal Affairs Department, IMF, USA

**Alejandro Gaviria**, President, Universidad de los Andes, and former Minister of Health, Colombia

**Andy Haines**, Professor of Environmental Change and Public Health, London School of Hygiene and Tropical Medicine, UK

**Peter J Hotez**, Dean of the National School of Tropical Medicine, Baylor College of Medicine, USA

**Phoebe Koundouri**, Professor, School of Economics, Athens University of Economics & Business, Greece, and President-Elect of European Association of Environmental and Resource Economists (EAERE), Greece

**Felipe Larraín Bascuñán**, Professor of Economics, Pontificia Universidad Católica de Chile, and former Minister of Finance, Chile

**Jong-koo Lee**, Professor, Seoul National University, Former Director, Korea Centers for Disease Control and Prevention, Republic of Korea

**Muhammad Pate**, Julio Frenk Professor of Public Health Leadership, Harvard T.H. Chan School of Public Health, USA

**Paul Polman**, Founder, Imagine.one; Former CEO, Unilever, UK

**Gabriela Ramos**, Assistant Director-General for Social and Human Sciences, UNESCO, France

**K Srinath Reddy**, President, Public Health Foundation of India (PHFI), India

**Ismail Serageldin**, Founding Director, Bibliotheca Alexandrina, Egypt

**Rajiv Shah**, President, Rockefeller Foundation, USA

**John Thwaites**, Chair, Monash Sustainable Development Institute, Australia

**Nísia Trindade Lima**, President, Oswaldo Cruz Foundation (Fiocruz), Brazil

**Vaira Vike-Freiberga**, Former President, Republic of Latvia

**Chen Wang**, President, Chinese Academy of Medical Sciences (CAMS), Peking Union Medical College (PUMC), and Director, National Clinical Research Center for Respiratory Diseases, China

**Miriam Khamadi Were**, Vice Chair, The Champions of AIDS-Free Generation, Kenya

**Lan Xue**, Cheung Kong Chair Distinguished Professor and Dean, Schwarzman College, Tsinghua University, China

**Min Zhu**, former Deputy Managing Director of the IMF and former Chair of the Bank of China

## SECRETARIAT AND COMMISSION STAFF

**Lauren Barredo**, Chief of Staff, UN Sustainable Development Solutions Network (SDSN), USA

**Yanis Ben Amor**, Assistant Professor of Global Health and Microbiological Sciences, Executive Director, Center for Sustainable Development, Columbia University, USA

**Ozge Karadag**, Research Scholar, Center for Sustainable Development, Columbia University, USA

**Guillaume Lafortune**, VP and Head of Paris Office, UN Sustainable Development Solutions Network (SDSN), France

**Emma Torres**, VP for the Americas and Head of the New York Office, UN Sustainable Development Solutions Network (SDSN), USA

**Juliana Bartels**, Special Assistant to the Director, Center for Sustainable Development, Columbia University, USA

**Neena Joshi**, Consultant, UN Sustainable Development Solutions Network (SDSN), USA

Learn more about the Commission at our website: <https://covid19commission.org>

# Commission Task Forces

## TASK FORCES

### Public Health Measures to Suppress the Pandemic

**Jong-Koo Lee**, former Director, Korea CDC, Korea (Co-chair)

**Chris Bullen**, Professor of Public Health, School of Population Health, The University of Auckland, New Zealand (Co-chair)

### COVID-19 Vaccines and Therapeutics

**Maria Elena Bottazzi**, Associate Dean of the National School of Tropical Medicine, Baylor College of Medicine, USA (Co-chair)

**Peter J Hotez**, Dean of the National School of Tropical Medicine, Baylor College of Medicine, USA (Co-chair)

### Safe Work, Safe Schools & Safe Travels

**Joseph Allen**, Associate Professor of Exposure Assessment Science, Harvard T. H. Chan School of Public Health, USA (Chair)

### Humanitarian Relief, Social Protection, & Vulnerable Groups

**Gabriela Cuevas Barron**, Honorary President, Inter-Parliamentary Union, Mexico (Co-chair)

**Vaira Vike-Freiberga**, Former President, Republic of Latvia (Co-chair)

**George Laryea-Adjei**, Regional Director for South Asia, UNICEF, Ghana (Co-chair)

### Mental Health & Well-being

**Lara Akinin**, Distinguished University Professor, Simon Fraser University, Canada (Chair)

### Fiscal Policy and Financial Markets

**Vitor Gaspar**, Director of the Fiscal Affairs Department, IMF, USA (Co-chair)

**Felipe Larraín Bascuñán**, Professor of Economics, Pontificia Universidad Católica de Chile, and former Minister of Finance, Chile (Co-chair)

### Global Health Diplomacy and Cooperation

**María Fernanda Espinosa**, Former President of the UN General Assembly and Former Minister of Foreign Affairs and Defense, Ecuador (Co-chair)

**Muhammad Pate**, Julio Frenk Professor of Public Health Leadership, Harvard T.H. Chan School of Public Health, USA (Co-chair)

**Lan Xue**, Cheung Kong Chair Distinguished Professor and Dean, Schwarzman College, Tsinghua University, China (Co-chair)

### Green Recovery

**Phoebe Koundouri**, Professor, School of Economics, Athens University of Economics & Business, Greece (Co-chair)

**Ismail Serageldin**, Founding Director, Bibliotheca Alexandrina, Egypt (Co-chair)

**Min Zhu**, former Deputy Managing Director of the IMF and former Chair of the Bank of China (Co-chair)

### Regional Task Force: India

**Chandrika Bahadur**, Director of the SDG Academy and Vice President of Education at the UN SDSN, India (Chair)

### Regional Task Force: Latin America and Caribbean

**Alejandro Gaviria**, President, Universidad de los Andes, Colombia (Co-chair)

**Gabriela Ramos**, Assistant Director-General for Social and Human Sciences, UNESCO, France (Co-chair)

### Regional Task Force: Africa

**Miriam Were**, Vice Chair, The Champions of AIDS-Free Generation Kenya (Co-chair)

**Muhammad Pate**, Julio Frenk Professor of Public Health Leadership, Harvard T.H. Chan School of Public Health, USA (Co-chair)

**Salim Abdool Karim**, Caprison Professor for Global Health in Epidemiology, Mailman School of Public Health, USA (Co-chair)

The following report has been posted online by the Commission Secretariat, and has not been peer-reviewed or published in *The Lancet*, nor in any other journal. This report intends to bring together expert views on key topics as the COVID-19 pandemic unfolds.

More than nineteen months into the COVID-19 pandemic, the situation remains very difficult. The brightest hope is the continuing uptake of vaccinations, yet major challenges remain. These include ongoing transmission of the virus (with around 435,000 new cases recorded daily as of early October 2021); the emergence and spread of new variants of concern; highly unequal access to immunizations and vaccine hesitancy; and premature lifting of basic public-health safeguards against further disease transmission. In addition, inequalities in health outcomes, long COVID, delayed consultations and treatments, and strains on the health system and health workforce all pose long-lasting threats to human well-being.

This statement by the *Lancet* COVID-19 Commission summarizes the core actions that the Commission advocates to address the pandemic at this stage of the crisis. It is especially directed to the G20 leaders who will meet in Rome on October 30-31, 2021 under the auspices of the Italian Presidency of the G20.

## TRANSMISSION CONTROL

The core strategy for ending suffering and death from COVID-19 is to combine comprehensive vaccine coverage with complementary non-pharmaceutical interventions (NPIs) to reduce transmission of the virus. High rates of vaccine coverage successfully reduce hospitalization and death rates, but do not suppress transmission unless accompanied by effective NPIs. In places where NPIs have remained strong and consistent, notably China, Taiwan, and Hong Kong, viral transmission has remained low even with the advent of the delta variant (and in the case of Taiwan, even with a relatively low rate of vaccine coverage to date).

Key NPIs include the use of face masks indoors; limits on large gatherings; physical distancing; restrictions on international travel; active testing, tracing, and isolation; and temporary lockdowns of locations of hotspot transmission (e.g., restaurants, theaters, night clubs). NPI measures must be tailored to local conditions. International survey evidence suggests that these virus containment strategies save lives and impose little cost on mental health; however, living in an environment of high disease risk has significant mental health costs.

## A PLAN FOR GLOBAL COVID-19 VACCINE COVERAGE

The global social fabric is being torn asunder by the imbalance and inequity of COVID-19 vaccine coverage. The rapid emergence of new variants of the virus poses dire threats, especially for under-protected populations living in circumstances of vulnerability.

The world has several effective COVID-19 vaccines, and more are on the way. However, although high-income countries have achieved coverage of more than 50 percent of their populations, less than 1 percent of people in most low-income countries are [fully vaccinated](#). The vaccination rate in Africa remains dangerously low at under 5 percent. Vaccination is a global public good that ensures the stability of global supply chains and safety in international travel. Vaccination also helps to limit cross-border transmission of cases and the emergence of new and dangerous variants.

The World Health Organization (WHO) has set targets of at least 40 percent vaccine coverage in each country by end of 2021, and at least 70 percent coverage by mid-2022. While these targets are widely supported, there is no operational plan to achieve them.

The WHO and the operational arm of the ACT-A Accelerator (ACT-A) for COVID-19 vaccine coverage, COVAX, must be at the center of global coordination for an organized plan to achieve these targets. We urge WHO to establish a high-level working group composed of government representatives from all major vaccine producing regions (including China, the European Union, India, Russia, the United Kingdom, and the United States), major vaccine producing companies (including multinationals and companies in developing countries), and other key product development partners to chart pathway and delivery timelines to achieve the WHO targets.

The plan must include transparent timelines for the delivery of COVID-19 vaccine doses to each low-income country, aligned with the WHO targets, so that recipient countries have time to prepare “last-mile” vaccine delivery systems. In many countries, financial and logistical support will be needed to scale up local health workforces and ensure that health workers are protected, valued, and properly remunerated. All companies must open their order books to WHO on current and future production plans and vaccine deliveries. All vaccine-producing governments should open their plans to WHO on

current and future vaccine purchases and existing inventories of vaccines in stockpile.

The WHO should report to the G20 leaders on this global plan to achieve universal vaccine coverage at the time of the G20 Summit in Rome on October 30-31.

## VACCINE PRODUCTION AND TECHNOLOGY

We call upon governments, international agencies, and funding mechanisms to step up research, discovery, development, and local production of vaccines and other health technologies through platforms that facilitate collaboration, technology transfer, and equitable distribution. Additional COVID-19 vaccines should be developed, possibly including shots that are easier to distribute and administer, require only one dose, and generate a more durable immune response. Ongoing high rates of transmission make it imperative that there are more trials of promising therapeutics, particularly those that can be given in community and primary care settings to reduce the risk of serious disease and hospitalization.

In line with the 1995 Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) regarding public health, governments should agree to waive all intellectual property on vaccines and technologies related to COVID-19 for a specific duration. Governments should also promote all needed technology sharing to maximize the increase in global production of effective vaccines and to promote next-generation vaccines as may be needed in the face of emerging variants. There are a few highly promising vaccines in trials that should be bolstered by official financing and support for their rapid uptake upon regulatory approvals for use.

## INFORMATION SYSTEMS

Information for public health continues to be one of the weakest links in the response to COVID-19. Daily data on positive tests, hospitalizations, deaths, and other metrics are available, but often incomplete and inadequate. The “case ascertainment rate,” or the proportion of cases of COVID-19 that are tested and reported, is often [less than 10 percent](#). Global COVID-19 death rates are also dramatically under-

counted. The [WHO estimates](#) an excess mortality of at least 3 million deaths, compared to 1.8 million reported deaths from COVID-19 in 2020.

The WHO should provide support to upgrade the global surveillance and reporting system, including comprehensive, systematic, accessible, and accurate daily reports on cases, deaths, susceptible populations (by serosurvey), genotypic variants, vaccine breakout cases, vaccine efficacy against severe disease and death, and others. Further, the overall health information infrastructure should be strengthened to improve routine care, health surveillance, and research, improving care in the short-term and building resilience in the longer term.

## FINANCING THE RECOVERY

The pandemic calls for a massive increase of public financing. Budget resources are necessary to fund social protection, economic stabilization, and investment-led recovery that is green, digital, and inclusive. High-income countries have borrowed and spent more than USD \$17 trillion on such efforts since the start of the pandemic, while the developing countries have spent far less in the aggregate and per person. Per capita spending by the low-income developing countries has been around one-twentieth of the spending by the advanced economies. These different spending levels reflect in part the highly differentiated capacities of governments to borrow from the capital markets.

For developing countries, greatly increased public investments are necessary to attain the Sustainable Development Goals (SDGs). The SDG financing gaps as a share of national income are greatest in the poorest countries, which are capital-scarce and need massive investment programs in electrification, connectivity, water and sanitation, healthcare, education, transportation, and other infrastructure. Yet, while the rich countries borrow long-term at around 2 percent per year or less on thirty-year fixed interest loans, the terms facing the developing countries are vastly worse, reaching 10 percent or more per year. Many low-income countries lack market access altogether.

Governments must improve their own domestic tax and administrative capacities to mobilize additional budgetary financing, while the G20 should agree on steps to increase the international financing available to developing countries. The greatly increased

access of developing countries to development financing on favorable terms (long-term loans with low and fixed interest rates) is crucial for achieving the SDGs and the Paris Climate Agreement.

The recent USD \$650 billion Special Drawing Rights (SDR) allocation at the International Monetary Fund (IMF) should be followed by at least three more steps during the coming year.

First, the G20 should ensure that the Multilateral Development Banks (MDBs) can increase their annual lending flows, on the order of 5-10 times, to provide developing countries with the financing needed for the SDGs and Paris Agreement. In particular, the shareholders of the MDBs should systematically increase the paid-in capital and offer other support to the MDB balance sheets to enable this expansion of lending in line with the continued AAA-creditworthiness of these institutions.

Second, the UN member states should bolster existing specialized funds, such as the Green Climate Fund and the Global Environment Facility (GEF), and establish new ones as needed, such as a Global Social Protection Fund, to support the SDGs.

Third, the global tax reforms now under discussion by the G20 and Organisation for Economic Co-operation and Development (OECD) should reflect the priorities and interests of the developing world, including new taxes to help finance the sustainable development agenda. Proposals in global discussion today include taxes on mega-wealth and ultra-high-incomes, financial transactions, and carbon emissions with a clear link to climate change.

## **VULNERABLE POPULATIONS**

The pandemic is pushing hundreds of millions of people behind, including the hungry, the destitute, children who are out of school, the sick, the poor, the displaced, the elderly, the mentally distressed, women facing domestic violence, persons with disabilities, and others. People facing vulnerability have been the most affected, but have the least voice. Women and girls have been hit especially hard, experiencing violence, losing jobs and educational opportunities at higher rates, and bearing a greater burden of unpaid domestic work as well as being over-represented in frontline jobs in the health sector. We call on the UN system, the leading global protector of vulnerable groups, to increase reporting, data flows, and operational programs to address growing challenges of inequality, notably for schooling, healthcare, nutrition, mental health,

social services, and social protection. Governments, especially the richest governments, must hear the cries for help within their own countries and across the world, and respond generously and speedily with the resources needed to alleviate suffering.

## **SUMMARY OF RECOMMENDATIONS FOR THE UPCOMING G20 LEADERS MEETING**

The *Lancet* COVID-19 Commission calls on the G20 leaders to commit to ensure vaccination of at least 70 percent of the population of every country by mid-2022 in alignment with WHO targets. The G20 should ensure that the new SDR allocation is used to provide necessary financing for vaccine coverage. The G20 should undertake new major initiatives in the coming year to enable developing countries to finance a green, digital, and inclusive recovery and to achieve the SDGs. Such financial measures should include increased lending by the MDBs, increased funding for other global funding streams, and globally agreed and coordinated tax reforms to increase the fiscal resources available to developing countries. We urge the G20 to systematically monitor and report progress to the world on these urgent action items.