

Global Health Summit

Rome, 21 May 2021

The Rome Declaration





President of the European Commission Ursula von der Leyen, Prime Minister of Italy Mario Draghi and Vice-President of the United States Kamala Harris

The Rome Declaration

We, Leaders of G20 and other states, in the presence of the Heads of international and regional organisations meeting at the Global Health Summit in Rome, May 21, 2021, having shared our experience of the ongoing global COVID-19 pandemic, and welcoming relevant work in this regard, including that presented during the pre-Summit, today:

Reaffirm that the pandemic continues to be an unprecedented global health and socio-economic crisis, with disproportionate direct and indirect effects on the most vulnerable, on women, girls and children, as well as on frontline workers and the elderly. It will not be over until all countries are able to bring the disease under control and therefore, large-scale, global, safe, effective and equitable vaccination in combination with appropriate other public health measures remains our top priority, alongside a return to strong, sustainable, balanced and inclusive growth.

Convey our condolences for lives lost and express our appreciation for healthcare and all frontline workers' vital efforts in responding to the pandemic.

Welcome the World Health Organization's (WHO) designation of 2021 as the Year of Health and Care Workers, and reaffirm our full support for the leading and coordinating role of the WHO in the COVID-19 response and the broader global health agenda.



*President of the European Commission Ursula von der Leyen,
Prime Minister of Italy Mario Draghi*

Underline that sustained investments in global health, towards achieving Universal Health Coverage with primary healthcare at its centre, One Health, and preparedness and resilience, are broad social and macro-economic investments in global public goods, and that the cost of inaction is orders of magnitude greater.

Recognise the very damaging impact of the pandemic on progress towards achieving the Sustainable Development Goals (SDG). We reaffirm our commitment to achieving them to strengthen efforts to build back better (as in UNGA resolution, 11th September 2020), and to the International Health Regulations 2005 (IHR), which together will improve resilience and global health outcomes.

Strongly underline the urgent need to scale up efforts, including through synergies between the public and private sectors and multilateral efforts, to enhance timely, global and equitable access to safe, effective and affordable COVID-19 tools (vaccines, therapeutics, diagnostics, and personal protective equipment, henceforth 'tools'). Recognise the necessity to underpin these efforts with strengthened health systems, recalling the G20 extraordinary Summit of 26 March 2020.

Recognising the role of extensive COVID-19 immunisation as a global public good, we reaffirm our support for all collaborative efforts in this respect, especially the Access to COVID-19 Tools Accelerator (ACT-A). We underline the importance of addressing the ACT-A funding gap, in order to help it fulfil its mandate. We note the intention to conduct a comprehensive strategic review as basis for a possible adaptation and extension of its mandate to the end of 2022. We emphasise our support for global sharing of safe, effective, quality and affordable vaccine doses including working with the ACT-A vaccines pillar (COVAX), when domestic situations permit. We welcome the June 2021 COVID-19 Vaccines Advance Market Commitment (COVAX AMC) Summit and we note the Charter for Equitable Access to COVID-19 tools.

Note the COVAX Vaccine Manufacturing Working Group, supporting the COVAX Manufacturing Task Force, led by the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI), GAVI and UNICEF, that includes partners such as the World Trade Organisation (WTO) and Medicines Patent Pool. We affirm our support for efforts



to strengthen supply chains and boost and diversify global vaccine-manufacturing capacity, including for the materials needed to produce vaccines, including by sharing risks, and welcome the vaccines technology transfer hub launched by the WHO. We ask the Working Group and Task Force to report on their progress to the G20 in time for the Leaders' Summit in October. This report will be informed by the WTO and other international stakeholders and organisations, consistent with their mandates and decision-making rules, on how to improve equitable access in the current crisis.

Applaud the unprecedented achievement of safe and effective COVID-19 vaccines within one year, and highlight the importance of continued investment in research and innovation, including in multilateral and other collaborative efforts, to further accelerate the development of safe and effective tools.

Underline the importance of working with all relevant public and private partners rapidly to increase the equitable availability of tools and to enhance access to them. Short-term options include: sharing existing products, including of vaccines through COVAX; Diversifying production capacity; Identifying and addressing bottlenecks in production; Facilitating trade and transparency across the entire value chain; Promoting increased efficiency in the use of capacities and global distribution by cooperation and expansion of existing capacities, including by working consistently within the TRIPS agreement and the 2001 Doha Declaration on the TRIPS agreement and Public Health; and Promoting the use of tools such as voluntary licencing agreements of intellectual property, voluntary technology and know-how transfers, and patent pooling on mutually-agreed terms.

Welcome high-level political leadership for preparedness and response in relation to health emergencies. Note proposals on a possible international instrument or agreement with regards to pandemic prevention and preparedness, in the context of the WHO, and efforts by the WHO, World Organisation for Animal Health, Food and Agriculture Organisation, United Nations Environment Programme and others in relation to strengthening the implementation of the One Health approach through their One Health High-Level Expert Panel.

Beyond these statements in view of the ongoing pandemic, **we set out principles** and guiding commitments below. These serve as voluntary orientation **for current and future action for global health** to support the financing, building, and sustaining of effective health system capabilities and capacities and Universal Health Coverage **to improve preparedness, early warning of, prevention, detection, coordinated response, and resilience to, and recovery from, the current pandemic and future potential public health emergencies.**

These mutually reinforcing principles reconfirm our commitment to **global solidarity, equity, and multilateral co-operation; to effective governance; to put people at the centre of preparedness and equip them to respond effectively; to build on science and evidence-based policies and create trust; and to promote sustained financing for global health.**



Principles of the Rome Declaration

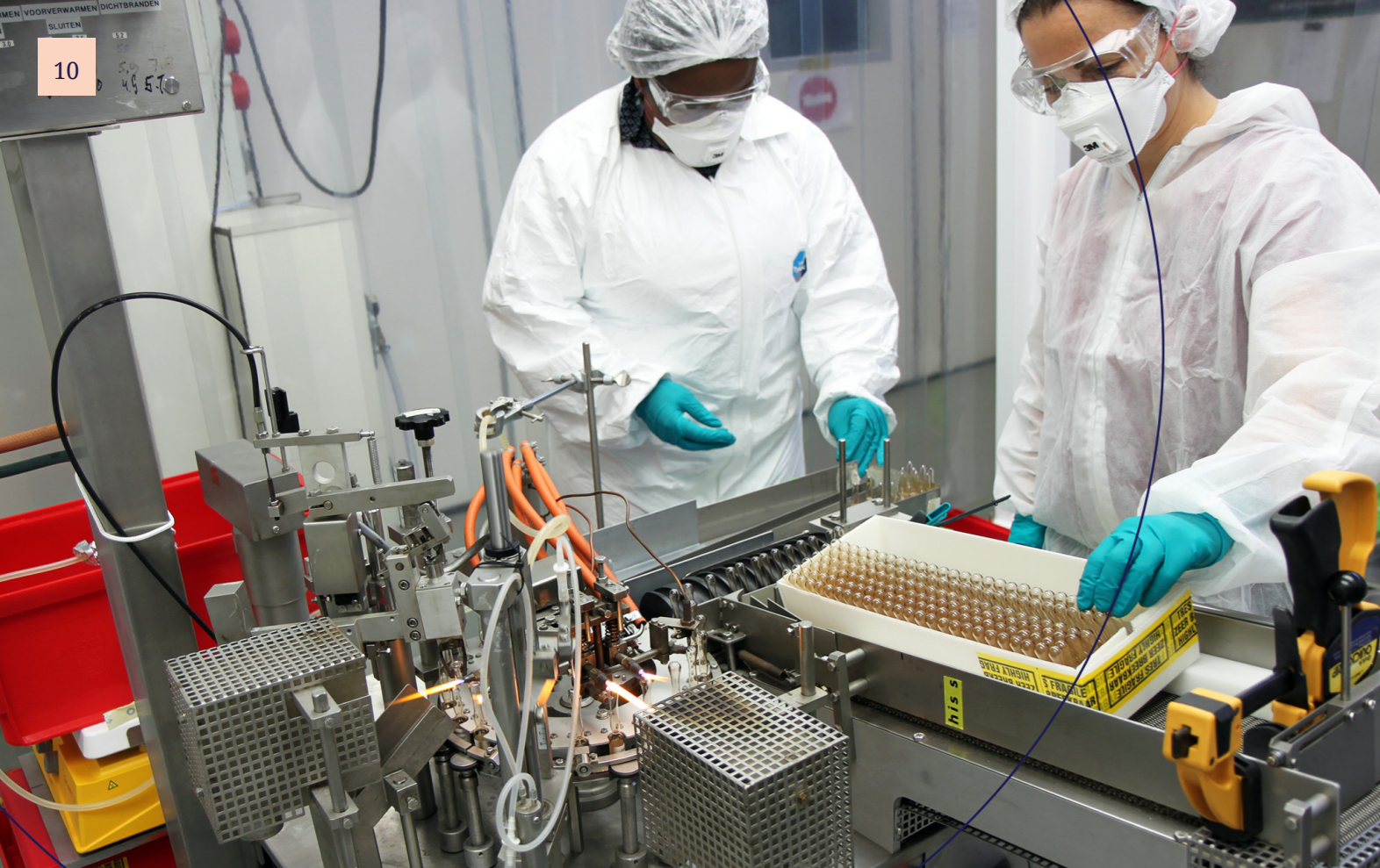
We commit to promote and make tangible progress towards these principles and the action they guide by the G20 Summit in Rome in October and beyond and invite their consideration in the forthcoming World Health Assembly (WHA) and other relevant fora, and by all relevant stakeholders. We will:

1 |

Support and enhance the existing multilateral health architecture for preparedness, prevention, detection and response with an appropriately, sustainably and predictably funded, effective WHO at its centre, taking account of the forthcoming WHA and various recent and ongoing review processes, including those resulting from the previous WHA. Support **the achievement of the SDG**, their targets, and specific initiatives such as the Global Action Plan for Healthy Lives and Wellbeing for all to better support countries to accelerate progress towards the health-related SDG including towards Universal Health Coverage. Support **the goal of a sustainable, inclusive and resilient recovery** that promotes the progressive realisation of the right for all people to the enjoyment of the highest attainable standard of health.

2 |

Work towards and better support the full implementation of, monitoring of and compliance with the IHR, and enhanced implementation of the multi-sectoral, evidence based One Health approach to address risks emerging from the human-animal-environment interface, the threat of anti-microbial resistance, noting the role of relevant international organisations in that regard and encourage new public health guidance in consultation with relevant health organisations on international travel by air or sea, including cruise ships.



3 |

Foster **all-of-society and health-in-all policies approaches**, with mutually reinforcing national and community elements, and promote **responsibility at the highest levels of government** for the achievement of better preparedness, prevention, detection and response.

4 |

Promote the multilateral trading system, noting the central role of the WTO, and the **importance of open, resilient, diversified, secure, efficient and reliable global supply chains across the whole value chain related to health emergencies**, including the raw materials to produce vaccines, and for the manufacturing of and access to medicines, diagnostic, tools, medical equipment, non-pharmaceutical goods, and raw materials to address public health emergencies.

5 |

Enable equitable, affordable, timely, global **access to** high-quality, safe and effective prevention, detection and response **tools**, leveraging and drawing on the experience of ACT-A, as well as to non-pharmaceutical measures, clean water, sanitation, hygiene and (adequate food) nutrition **and to** strong, inclusive, and resilient **health systems**; and support robust vaccine delivery systems, vaccine confidence and health literacy.

6 |

Support low- and middle-income countries to build expertise, and develop local and regional manufacturing capacities for tools, including by building on COVAX efforts, with a view to developing improved global, regional and local manufacturing, handling and distribution capacities. Further enable increased use of health technologies and the digital transformation of health systems.

7 |

Leverage synergies and build on expertise of relevant organisations and platforms to **facilitate data sharing, capacity building, licensing agreements, and voluntary technology and know-how transfers on mutually agreed terms**.

8 |

Enhance support for existing preparedness and prevention structures for equitable immunisation against vaccine preventable diseases, and surveillance and health programmes for these and other diseases, including HIV/AIDS, tuberculosis, malaria and others, and non-communicable diseases, as part of integrated service delivery and **ensuring that no one is left behind**.



9 |

Invest in the worldwide health and care workforce, to bring about the triple dividend of better health, acceleration of development, and advancements in social inclusion and gender equality, by developing mutually recognised competencies through education and training including through relevant WHO initiatives including the WHO Academy. Invest in **community health and in health systems** to achieve strengthened, resilient, inclusive, high quality health services, continuity of care, local and home care, and public health capacities in all countries. Invest in **multilateral WHO-led mechanisms to facilitate assistance and response capacities** for use in developing and crisis affected countries. Invest also in water sanitation and hygiene in health care facilities to reduce infection risks and safeguard healthcare workers.

10 |

Invest in adequate resourcing, training, and staffing of **diagnostic public and animal health laboratories**, including genomic sequencing capacity, and **rapidly and safely share data and samples during emergencies** domestically and internationally, consistent with applicable laws, relevant existing agreements, regulations and arrangements.

11 |

Invest in further developing, enhancing and improving interoperable **early warning information, surveillance, and trigger systems** in line with the One Health approach. Invest in new efforts to strengthen surveillance and analyse data on potential outbreaks, including rapid and transparent cross-sectoral and international information and data sharing, in accordance with the IHR.

12 |

Invest predictably, effectively and adequately, in line with national capacities, in **domestic, international and multilateral cooperation in research, development, and innovation**, for health systems tools and non-pharmaceutical measures, considering issues of scalability, access, and manufacturing from an early stage.

13 |

Coordinate pharmaceutical and non-pharmaceutical **measures and emergency response** (including online coordination of crisis and operation centres), **in the context of a sustainable and equitable recovery**, with investment in health, preparedness and response and policies informed by scientific advice. Policies should accelerate progress towards achieving the SDG, combat the root causes of health emergencies, including social determinants of health, poverty, structural inequality and environmental degradation, build human capital, accelerate green and digital transitions, and boost prosperity for all.

14 |

Increase the effectiveness of preparedness and response measures by supporting and promoting meaningful and inclusive dialogue with local communities, civil society, frontline workers, vulnerable groups, women's and other organisations and all other relevant stakeholders and by countering misinformation and disinformation. Underpin this with trust and transparency in relation to governance and decision-making, arising from the timely and culturally adapted communication of accurate information, of evidence and of uncertainty, and of lessons learned from the COVID-19 pandemic response and previous public health emergencies. Undertake health promotion and work on the social determinants of health to address other critical health issues such as non-communicable diseases, mental health and food and nutrition, as part of efforts to enhance overall resilience to future health crises and in addition ensure an age- and gender-sensitive response to future crises.

15 |

Address the need for enhanced, streamlined, sustainable and predictable mechanisms to finance long-term pandemic preparedness, prevention, detection and response, as well as surge capacity, capable of rapidly mobilising private and public funds and resources in a coordinated, transparent and collaborative manner and with robust accountability and oversight. In a spirit of solidarity, join efforts to support in particular the manufacture and supply of vaccines and other supplies and/or the provision of funding for vaccine purchase, to low- and middle-income countries.

16 |

Seek to ensure the effectiveness of such financing mechanisms, including by leveraging blended finance, innovative mechanisms, public, private, and philanthropic sources, and international financial institution funds. Seek to avoid duplication of efforts, and underline the need for countries to finance their national IHR and R&D capacities, primarily through domestic resources in line with their national circumstances, and mustering support for those unable to do so. Underline the importance of multilateral efforts to meet the financing needs of low- and middle-income countries, including the proposed new general allocation of Special Drawing Rights by the IMF, an ambitious IDA20 replenishment and existing G20 endorsed measures. Welcome the ongoing work of Multilateral Development Banks and International Organisations and call for increase within their mandates and respective budgets their efforts to better support the preparedness, prevention, detection, response, and control of health threats and enhance their coordination.



