

March 30th, 2022

Gregory Meeks
Chairman, House Foreign Affairs Committee

Michael McCaul
Ranking Member, House Foreign Affairs Committee

Karen Bass
Chair, Subcommittee on Africa, Global Health, Global Human Rights and International Organizations

Christopher Smith
Ranking Member, Subcommittee on Africa, Global Health, Global Human Rights and International Organizations

Re: Urging Support for African Partners Combatting COVID-19

Dear Chairman Meeks, Ranking Member McCaul, Subcommittee Chair Bass and Subcommittee Ranking Member Smith,

On behalf of the cosigned organizations, we hereby submit this letter for consideration ahead of the House Foreign Affairs Committee Hearing regarding the continued discrepancy in the international response to COVID-19 in Africa. In March 2022, the international community passed another grim milestone, as the global death toll reached 6 million. While we welcome US leadership on COVID-19, including vaccine donations bilaterally and through COVAX, we believe more must be done by the Biden Administration to address pandemic disparities in sub-Saharan Africa.

In October 2021, the WHO and United Nations published their [strategy](#) to vaccinate 40% the global population by the end of 2021, and 70% by mid-2022. Due to pharmaceutical companies prioritizing high-income countries, much of the world is now vaccinated, but parts of the [Middle East and nearly all of sub-Saharan Africa](#) are not.

According to the World Health Organization (WHO) [Africa region dashboard](#), the continent is currently facing 8,117,030 cumulative cases of COVID-19. As stated in a [WHO February update](#), only 13% of Africans are fully vaccinated, eighteen countries have vaccinated less than 10% of their population, and three have vaccinated less than 1%. In the 27 countries reporting data on health worker vaccination, 33% of their health work force is fully vaccinated.

A [December 2021 WHO statement](#) highlights the hurdles that the international community faces in meeting the 2022 goal of vaccinating 70% of the population. Due to high-income countries entering direct contracts with pharmaceutical companies, vaccine suppliers did not prioritize and deliver contractual obligations to COVAX. If their obligations are not met in 2022, populations who are most at risk will continue to be left behind in the fight against COVID-19.

Not only is the international community facing disparities in vaccine accessibility, but there are growing inequalities in treatment access. Oral antiviral treatments can play a critical role in reducing the severity of COVID-19 infections. While Pfizer has announced that they will designate 10 million treatment courses of Paxlovid to [low income countries](#), the company has not provided specific details as to how they will ensure global equitable access.

Since Paxlovid must be taken soon after symptoms begin, testing is a prerequisite. According to the [FIND SARS-Cov-2 test tracker](#), out of 3 billion tests performed worldwide, only 0.4% were done in low-income countries. While the Administration has urged WTO members to waive intellectual property protections on vaccines, they have been silent on other aspects of COVID-19 responses, such as testing and treatment plans. If the U.S. wants to effectively address COVID-19 globally, it must look holistically and not through the lens of a vaccine only solution.

While the Administration [agreed to a Trade-Related Intellectual Property Rights Waiver](#) for the vaccine, the compromise agreement being circulated in Geneva falls short of what has been [demanded](#). This proposed compromise contains only half measures that would continue to limit access to the tests, treatments and vaccines so desperately needed by hundreds of millions of people in developing countries. We urge the Committee to use this hearing to:

1. Press the Administration to lead a more concerted effort to get World Trade Organization (WTO) member states to take action and agree on a broad TRIPS waiver, which includes access to COVID-19 vaccines, tests, and treatment.
2. Stop any efforts to limit any waiver of the TRIPS agreement to vaccines only. WTO members must negotiate a much more comprehensive and inclusive deal.
3. Put all possible measures and policies in place to expand global production of COVID-19 vaccines and prevent vaccine developers from impeding broader access to vaccines.
4. Urge vaccine developers to ensure fair supply of COVID-19 vaccines to low-and lower-middle-income countries.

5. Urge the Administration to ensure that in the negotiations around the proposed International Pandemic Treaty or other international instrument, intellectual property barriers are addressed so that in any future pandemic, equal access to tests, treatments, vaccines and other essential medical products are guaranteed for all without discrimination.

Advocacy Network for Africa (AdNA)

Amnesty International USA

NETWORK Lobby for Catholic Social Justice

Treatment Action Group (TAG)