

To beat Coronavirus we must confront glaring inequities

By Dr. Philippe Duneton, Unitaid Executive Director a.i.

Covid-19 has cut an uneven, unpredictable path across the globe, leaving some countries with thousands of people dead, while passing over others with relatively mild effects.

Many commentators portray Covid-19 as a great leveller, striking at rich and poor alike. They see powerful public figures who have fallen ill with the virus, including the UK prime minister and Hollywood film stars, as hard evidence that nobody is safe from contagion.

The disease has, however, exposed glaring inequities in access to medicine, tests and health tools.

The virus is having an impact on the whole global health system and we do not yet know what the long-term damage will be or how long COVID-19 will be with us. The world has never experienced a pandemic quite like this.

What is clear is that countries with lower incomes and fragile health systems may face an unsurmountable health and economic emergency as COVID-19 infections spread.

Bill Gates recently summed up the disparities in healthcare between rich and poor and their consequences. "Covid-19 overwhelmed cities like New York but the data suggest that even a single Manhattan hospital has more intensive-care beds than most African countries. Millions could die."

The global health community can mitigate COVID-19's destructive impact on the most vulnerable. To do so, [Unitaid](#) and many agencies and organizations are uniting under the leadership of the World Health Organization, each group bringing skills and insight to this unprecedented crisis.

Heads of state and global health leaders have committed to ensure everyone has access to all the necessary tools to prevent, detect,

treat and defeat COVID-19, and launching a mechanism – known as the [COVID-19 Tools \(ACT\) Accelerator](#) -- that combines the efforts of many organizations to work speedily and at scale. We are already working with partners including the Bill & Melinda Gates Foundation, the Global Fund, GAVI, the World Bank and many others on the need to strengthen health systems to deal with the COVID-19 pandemic, and other possible pandemics.

A vaccine will provide a long-term solution, but it will not be the only weapon in our armoury to fight COVID-19. We also need to think about new diagnostics and treatments, not just vaccines, and we must act now.

A pledging event, launched on 4 May aims to raise an additional €7.5 billion of new funding for the ACT Accelerator, of which 4 billion will target vaccines, 2 billion therapeutics, and 1.5 billion diagnostics.

Under the ACT framework, Unitaid will be a co-convenor jointly with the COVID-19 Therapeutics Accelerator of a partnership in the field of therapeutics procurement and deployment. Two other partnerships address vaccines and diagnostics, respectively.

Each of the partnerships will be tasked with pursuing innovation across the value-chain, from research to production, delivery and universal access.

Unitaid is honoured to be able to work on therapeutics with its partners, notably the Wellcome Trust and the Bill and Melinda Gates Foundation, in order to rise to the historic challenge of overcoming COVID-19.

Unfortunately, most drugs trials are being conducted in developed countries. Conditions are very different in the Global South where, for example, there are practically no intensive care units to deal with two phases of the disease— involving respiratory issues and immunological reactions — that can prove fatal.

With the support of Unitaid's Executive Board, we have been racing to pinpoint how we could enhance the response to the pandemic.



There are two elements to Unitaid's response to the COVID-19 emergency. First, we are supercharging grant projects that are already underway by bringing forward fast molecular testing, clinical trials of medicines and access to portable devices that can identify critically ill patients by measuring oxygen levels in their blood.

We seek quick wins that advance our mission of making health tools accessible, available, and affordable as fast as possible.

The second element involves above all protecting health and community workers who are in the front-line of the response to COVID-19 in the Global South. Unitaid's contribution to the COVID19 Tools Accelerator will prioritize testing, preventive therapies, and treatments for early-stage symptoms of the disease.

In countries with weak health systems, that could quickly be overwhelmed by the spread of COVID-19, we want to reach patients and treat them before they need to be hospitalized.

We need to find ways to repurpose drugs and push for solutions that work in the Global South. That means replicating for COVID-19 some of the approaches to HIV that Unitaid has promoted: preventive therapy; and testing and treating in the early stages of the disease. We have meanwhile made a strong start on adapting our existing grants to the dramatic change in the global health landscape that the rapid spread of COVID-19 has brought about.

While one Unitaid project team focused on respiratory tools, other teams have been busy collaborating with partners on diagnostics and treatments for the pandemic. Today, Unitaid, Clinton Health Access Initiative and UNICEF Supply Division are working closely with many partners to activate COVID-19 testing sites and laboratories inside an already well-established network of facilities in Africa, while trying to speed up the supply of reliable tests to meet looming demand. This work opens the way for other partners and funders to join in.

In a related effort, Unitaid partner FIND has expanded its activities to evaluate a spectrum of diagnostic tests for COVID-19, with a view to making them available as fast as possible at affordable prices.



Meanwhile, four Unitaid-supported clinical trials that have been evaluating HIV medicines are now also accommodating an observational study of COVID-19 infection in Africa in people living with HIV. The study should bring us a new understanding of how COVID-19 behaves in low-resource areas with high HIV burdens and guide us toward the right treatments. One of the things we want to find out is whether certain HIV drugs may have an effect. So far, these types of studies have focused only on COVID-19 in high-income countries, so data from the Global South is urgently needed.

Another avenue where Unitaid is well positioned to contribute has to do with identifying people who need oxygen therapy.

Last summer, Unitaid launched two initiatives to help identify life-threatening illness in children by measuring the levels of oxygen in their blood with a small, portable device called a pulse oximeter. Pulse oximeters are invaluable for identifying patients who need oxygen therapy due to underlying diseases such as pneumonia and malaria; the oxygen measurements they provide help frontline health workers save lives by referring patients quickly to health care facilities. Although commonplace in high-income countries, the devices are often unavailable in low- and middle-income countries.

When COVID-19 struck, our TIMCI project with partner PATH and our AIRE project with partner ALIMA were already engaged in efforts to bring robust, affordable pulse oximeters for frontline health workers to use in low-resource settings, with a focus on children. Now, the TIMCI team has shifted gears and is working to ensure that countries can meet demand for respiratory therapy brought on by COVID-19.

At the same time, ALIMA's AIRE project has made a quick course change to implement COVID-19-related activities in Burkina Faso, Guinea, Mali and Niger—AIRE's original project countries—as well as supporting the Senegal Ministry of Health.

Underlying all of these efforts is one vitally important concept: access.



Together with our Board Chair Marisol Touraine, I have urged governments and institutions that are financing or contributing to the development of drugs, vaccines or technologies for COVID-19 to share their intellectual property rights. Unitaid already has a strong infrastructure in place to make this happen. The Medicines Patent Pool (MPP), which Unitaid founded ten years ago and funds, expanded its mandate in March to ensure that all countries get access to commodities they need as they become available, and that those items are affordable. Because public funds are being used in research, the resulting products should be publicly available.

No one company, no matter how big, can meet global demand all at once.

Through the MPP, we have worked with generic and brand companies to increase volume, competition and access. We must do the same for COVID-19. The volumes will be high and speed of delivery will be of the essence, but the basic principles are the same.

We are also concerned about helping individuals cope with the COVID-19 pandemic in their homes and communities. To that end, Unitaid is supporting a new digital miniseries called “MTV Shuga Alone Together” which launched in April 2020, carrying stories of characters living through COVID-19 in Cote d’Ivoire, Kenya, Nigeria and South Africa while reinforcing the need for social distancing in everyday interactions. Our partner MTV Staying Alive Foundation is producing the show, which is also backed by the United Nations Secretary-General’s Every Woman Every Child partnership.

As this storm threatens Africa and other vulnerable regions, we must disrupt the pattern of inequity that we have seen again and again with other epidemics: Wealthy countries receive new lifesaving drugs and health technologies first, and only years later, do people living in middle- or lower-income countries get the help they need.

Unitaid expects to play a continuing a role in making sure the right tests reach those who need them, that new medicines are tested in resource-limited countries in a way that complements other



stakeholders' efforts, and that equitable access to health is the core of our work.

I look forward to keeping you abreast of our activities in the challenging weeks and months to come.

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