



## European Commission - Speech [Check Against Delivery]



### **President von der Leyen at the World Health Summit**

Brussels, 25 October 2020

President Steinmeier,

Secretary-General Gutteres,  
Dr Tedros,

Distinguished guests,

I am honoured to be a patron of this year's World Health Summit.

And I am delighted to be able to speak to you today  
- even if I wish it could be in person.

Last year's edition with more than 2,500 participants and 300 speakers from 100 nations feels difficult to imagine only twelve months on.

This event has long reflected the global and interconnected nature of health in the 21st century.

Looking back now, this is something I perhaps had not fully grasped as a student when I saw medicine primarily through a scientific lens.

And while I started to understand it more as a doctor in obstetrics and gynaecology, the nature of my work was still narrowly focused on the clinical and the individual.

It was only later, when working at the Department of Epidemiology at the Hanover Medical School, that I really learnt what global health meant.

And there is one story from the time - the story of an epidemiologist - that I think illustrates this better than I could explain.

It was back in February and March 2003, just as I was moving from medicine to become State Minister with responsibility for health amongst other things.

At the exact same time on the other side of the world, a SARS super-spreading event was taking place on the ninth floor of the Metropole Hotel in Hong Kong.

Within days, the virus had spread as far as Singapore, Canada and Vietnam.

And it was there in Hanoi, that Dr. Carlo Urbani,  
an infectious disease specialist was working for the WHO.

Here was an Italian doctor working in a French hospital in Vietnam, treating an American patient who himself had fallen sick in Hong Kong.

He recognised at first that this was a SARS-like respiratory disease.

And he was the first to trigger the alarm.

And in doing so he saved countless lives everywhere from Thailand to Toronto and probably far beyond.

I mention this story firstly to pay tribute to Dr Urbani who - as many of you will know - became infected shortly afterwards and sadly passed away leaving a young family behind.

But also to illustrate how linked our health is and how important global cooperation is.

More than at any point in human history, the health of one country directly affects that of another.

And cross-border viruses need cross-border responses -  
especially as we move into the next phase of this pandemic.

The dramatic spikes in recent weeks across the world  
and especially here in Europe reflect a picture that is getting worse by the day.

We are back to March and April levels and in many cases already far beyond it.

But while the virus is back stronger than ever, our knowledge and experience of what we need to do is also much better than before.

And I would like to focus on three areas where this will be critical in the months ahead.

The first is the need for coordination across borders.

At the beginning of the pandemic, unilateral border closures threatened our ability to manage the health crisis and keep our societies and economies going.

In response, we created green lanes to ensure the availability of goods and essential services.

But this pointed to the crucial importance of early and effective cross-border cooperation.

The virus does not respect any borders.

This is why the Commission last month set out how measures taken by Member States should be coordinated and communicated.

We now have common criteria and thresholds when deciding whether to introduce travel restrictions.

We have a map with a single set of colours where everyone agrees which regions are red, orange or green.

And we now need a single set of rules for what testing and quarantine people have to do if they are travelling from a high-risk zone.

The second area where we need to draw on our experience is the supply of equipment.

In response to shortages at the beginning of the pandemic, Europe took swift action to ensure that industry could ramp up the production of masks, gloves, tests, ventilators and other essential equipment.

We created a common European reserve of medical equipment.

And through our Civil Protection Mechanism we can now ensure that it is distributed to where it is most needed.

Like the 30 ventilators that we are sending now to Czechia.

Also the need to diversify some of our supply chains in critical areas will be a key focus in the weeks, months and years ahead.

In the meantime we know that almost every country will take drastic and difficult measures to contain the spread of the virus.

People are once again being asked to make painful sacrifices.

We owe it to them to all pull in the same direction.

To protect their lives and their livelihoods.

And this is the third area I would like to discuss.

We need to ensure that we support people and support the economy.

This is why we created SURE - a temporary instrument to keep people in work and companies in business.

It will be funded by 100bn EUR - issued through social bonds - and will now start supporting short-time work schemes in at least 16 Member States.

And in parallel, our recovery plan - NextGenerationEU - will finance 750bn EUR of investment and reform to kickstart our economy, strengthen our health systems, and accelerate Europe's twin green and digital transition.

Ladies and Gentlemen,

The point is we cannot wait for the end of the pandemic to repair and prepare for the future.

This is why we will be putting forward proposals to improve our ability to collectively respond to serious cross-border health threats.

We will strengthen our medicines and scientific agencies - ECDC and EMA and we will build a new European agency for biomedical advanced research and development.

And we will build the foundations of a stronger European Health Union in which 27 countries work together to detect, prepare and respond collectively.

On the one hand we have seen the limits of what Europe can do without competence in this area.

And we do need to have a real debate about this.

Because on the other hand we have seen the real added value when countries cooperate and coordinate on everything from data to criteria.

Only this week, the Commission has set up an EU-wide 'gateway' for national tracing apps to ensure they safely interoperate and interact with each other.

Tracing apps from Germany, Ireland and Italy are now linked to this gateway and Czechia, Denmark, Latvia, Spain and others will soon also be live.

This will help people who work or travel across borders and ensure we are all pulling together.

This must be the hallmark of the European Health Union.

And I believe this can be a test case for a true global health compact.

The need for leadership is clear.

And I believe the EU must assume this responsibility.

This is why I will convene a Global Health Summit next year alongside Prime Minister Conte and the Italian G20 Presidency.

The aim will be to bring all global efforts together, learn the lessons of the crisis and update global health cooperation for this age of pandemics.

We need to rally around a set of international commitments, investments and principles for the next decade of global health cooperation.

And we have been laying the groundwork for this ever since the pandemic started.

In April, the European Commission helped launch the ACT-Accelerator initiative to globally coordinate and speed up the development and fair allocation of vaccines, treatments and diagnostics.

In May, we brought more than 40 countries together to raise 16 billion euros for universal access to tests, treatments and vaccines and to support the economic recovery in the world's most fragile regions and communities.

This was a truly global effort supported by Global Citizen, the Bill and Melinda Gates Foundation, the Wellcome Trust, the WHO and the Global Preparedness Monitoring Board - and many more besides.

And in August we joined the COVAX Facility - co-hosted by Gavi - and contributed 400 million euros for pooled procurement and equitable distribution of COVID-19 vaccines around the world.

But there is more work to do.

And we know that developing a vaccine won't save lives in itself.

But vaccinations will.

We need to ensure that those who need them most urgently, can get it first - the health workers, the vulnerable, the older generation.

We have been working hard to make agreements with pharmaceutical companies and secure future doses.

We must now get ready to deploy it - both in Europe with our recent Vaccination Strategy and around the world.

And we will not stop once the first vaccinations have been administered.

We will centrally collect robust data and evidence to assess the impact, effectiveness and any side

effects.

National Immunization Technical Advisory Groups in close collaboration with ECDC and the EMA, will play a key role in the coordination of large-scale EU-wide studies monitoring the safety and effectiveness of COVID-19 vaccines.

Preparations for these activities must start now to be in place when COVID-19 vaccines reach the EU market.

Ladies and Gentlemen,

This is how we will overcome any doubts or disinformation.

And it is how we can overcome the pandemic together.

But for the longer term, I believe it is time for the world to change its mindset on health.

We need to move away from looking after our health only through clinical, individual outcomes.

In today's world, we need to look after our health by looking after our planet, our wellbeing and our sustainable development.

And we need to do it together - through global health cooperation and not through global health competition.

This is the aim of this conference.

And this is what you can count on Europe for

in the difficult period ahead  
and in the decade that follows.

Thank you.

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