1. Zambia is honoured to deliver this statement on behalf of the African Region.

2. The African Region commends the efforts highlighted in the reports contained in documents A74/9 and A74/9 Add-1, the ACT-A in general, and the COVAX-AMC facility in particular; the C-TAP and all the initiatives.

3. We are, however, concerned with the current global response to the COVID-19 pandemic that has fallen short on aspects of global solidarity despite commendable efforts by WHO to support a coordinated global response. The accelerated research and development (R&D) efforts for vaccines have not been supported with mechanisms for ensuring equitable and timely access to all countries.

4. Chairperson, while we appreciate the areas of focus of interventions by the Secretariat contained in the report, we note that some aspects of resolution WHA73.1 are not addressed. The report provides insufficient discussion on critical challenges that Member States, particularly LMICs, face, such as ensuring adequate, affordable, and sustainable supplies of commodities for COVID-19. The resolution specifically requests the Director General to identify and present options, including using the flexibilities in the WTO TRIPS Agreement, for scaling up development, manufacturing and distribution capacities needed for transparent, equitable and timely access to diagnostics, therapeutics, and vaccines for COVID-19 response. Further, the report does not provide information on the work done by WHO in this regard. It is critical that this aspect of the resolution is urgently and effectively addressed.

We therefore request the Secretariat to report on the status on the availability and access to vaccines for developing countries, the challenges faced by COVAX, options to overcome those challenges, including alternative options that make use of TRIPS flexibilities.
5. Secretariat should also report on the existing regulatory approval pathways for vaccines and the support that they can provide to Member States, especially developing countries. In addition, we request Secretariat to establish a time bound Expert Working Group to consider the existing technical and scientific evidence on vaccines currently under development and establish an abbreviated regulatory approval pathway for non-originator vaccines to support local manufacturing of vaccines approved for COVID-19 by other vaccine manufacturers, thus scaling up their supplies. The African Region reiterates the call for immediate global action – coordinated by a strengthened WHO – to ensure that COVID-19 diagnostics, treatments, and preventive products, are made available to all Member States, and that all knowledge and inventions, including for medical devices, be treated as global public goods.

6. On the IHR-RC, we recognize the efforts by Secretariat in ensuring the impartial, independent, and comprehensive evaluation work of the Review Committee on the Functioning of the International Health Regulations (2005) during the COVID-19 response, endorses its report and urges the full implementation of recommendations contained therein.

7. On mental health in COVID-19, we endorse the updated comprehensive Mental Health action plan 2013-2030, with due consideration for the plan’s updated implementation options and indicators and commend the WHO DG’s Special Initiative for Mental Health. Given the impacts of COVID-19 on both the mental health of the population as well as on mental health systems, there is an increased need to support response and recovery from COVID-19. We request the Secretariat to follow through on Decision EB148(3) and provide technical support to Member States and expand WHO’s Mental Health and Psycho-Social Support capacity at the Regional and Country offices. We request allocation of adequate funding and support for Member States for them to strengthen the weak mental health systems leading to strengthened preparedness, response capacity and resilience for the current and future public health emergencies. We urge that the mental health and psychosocial response consider a whole of society approach that is context-specific, people-centered and address stigma associated with mental health at individual and community level.

8. In conclusion, the Africa Region supports the adoption of the draft resolution on this agenda item contained in conference paper A74/A/CONF./2.

I thank you