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*Panel discussion on deepening inequalities
exacerbated by the COVID-19 pandemic
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Oral statement of CETIM
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Deepening inequalities exacerbated by the COVID-19 pandemic

Madame President,

In the context of this panel discussion, CETIM considers the background for the crisis of social and economic inequalities in times of covid-19 pandemic is configurated by a series of political offensives against social determinants of health in the world.

The historic turning points corresponding to the weakening of social determinants of health are the coups d'etat of the 1970s and 1980s that lead to the imposition of neoliberal programs; the sabotage of the decisions of Alma Ata Conference; structural adjustment programs imposed and managed by the IMF and WB; a pseudo-victory extracted from "the fall of the wall" in favor of the neoliberal doctrine ; the financial crisis of 2008-2009 ; and the accelerated commodification of the public service of health and climate injustice.

The fact that Alma Ata represented a major event in the history of international health care is demonstrated by the Declaration it issued, focusing primarily on all the essential points in order to improve the social determinants of health: the rejection of inequalities in health between social classes and countries; appropriate technology and equitably put to the use of social categories; clear opposition to medical elitism; and a definition of health as a means of achieving socio-economic development with all the resulting environmental repercussions

Today instead, in the context of the COVID-19 pandemic, the vaccin Apartheid is one outcome of a world-wide health crisis which is actually prior to the pandemic.

In fact, in May 2020, the WHO had proposed to establish an international COVID-19 vaccine solidarity trial in which the it would coordinate trial sites in multiple countries. Both Big Pharma and the countries of the North suffocated this proposal. We can't forget this episode.

These firms put the public funding towards making a vaccine and then extracted enormous profits from their sales and further secured these profits through patents.

For COVID-19 vaccines, there are many successful and robust platforms that can be used. The vaccine could be produced equitably for the people thanks to the know-how and skilled personnel of a public sector that centers the social good in an equitable way in conformity with SDG 3 and 10.

We have fresh historical knowledge confirming us the world's largest pharmaceutical companies rejected an EU proposal four years ago to work on fast-tracking vaccines for pathogens like coronavirus to allow them to be developed before an outbreak. The plan to speed up the development and approval of vaccines was put forward by the Innovative Medicines Initiative (IMI) in Europe, but it was rejected by the pharmaceutical industries in 2017.

Today, there are insufficient numbers of skilled and practiced personnel to administer the vaccine in southern countries. Since regional and national vaccine production lines in these countries are not available, the vaccines need to be transported over long distances. Some COVID-19 vaccines that require an ultra-cold chain are simply impractical in much of the what is called Global South regions. The social movements active in the field of health care for every citizen request and propose :

1. Effective vaccination programs managed by robust public health systems guaranteeing transportation and cold chains as well as well-developed systems to monitor the impact of the vaccine.
2. To avoid barriers to the timely access to affordable medical products, including vaccines and medicines, and to scale-up the manufacturing and supply of essential medical products by waiving the vaccine and medical technology patents.
3. The local and national administrations must release re-consolidated budgets commensurate with the crisis and to prepare the post-crisis through the creation of funds dedicated to the transition, gradually and progressively, taxing the capital of companies as well as the taxation on stock market transactions, dividends and heavily taxing the most polluting sectors. In other words, the financing of the realization of SDG's must not be conducted on the backs of employees or precarious populations, nor increase existing social inequalities.
4. Provide sanctions for pandemic profiteering multinationals as well as economic groups contaminating water sources, air, deforestation of ancestral lands.
5. Improved international protection of activists for social, climate and environmental justice against criminalization, harassment and murder.
6. Implementation of Primary Health Care emerging from the Alma Ata conference defining and perceiving the health as a human right based on the principles of equity and community participation beyond doctors and hospitals up to social determinants and social justice.

I thank you for your attention.

Geneva, 27th September 2021