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President Cyril Ramaphosa: Opening remarks at the African Coronavirus COVID-19 Vaccine Financing and Deployment Strategy Webinar

27 Jan 2021

Chairperson of the African Union Commission, Your Excellency Moussa Faki Mahamat, Director-General of the World Health Organization, Dr Tedros Adhanom Ghebreyesus, President of the World Bank Group, Mr David Malpass, CEO of Gavi, the Vaccine Alliance, Dr Seth Berkley, Ministers of Finance and Health, Distinguished participants, Ladies and Gentlemen,

Allow me to begin by expressing my appreciation to the Secretary-General of the United Nations, Mr António Guterres, for his contribution to this meeting in the form of a recorded message.

He has provided outstanding leadership to the global community as we deal with the health, humanitarian, economic and human rights crisis that COVID-19 has posed.

His guidance has been a reassuring constant.

It has enabled us to develop policies and mechanisms not just to weather this storm, but to also prepare for future ones.

I am also appreciative of the presence of Dr Tedros Ghebreyesus, who has led the global health response to the COVID-19 pandemic.

The support provided by the World Health Organization has been vital to effective continental, regional and national responses.

Colleagues,

The pandemic has caused great devastation on our continent.

To date we have more than 3.4 million confirmed cases and have recorded nearly 87,000 COVID-19 deaths.

From the early days of this pandemic, we have worked as the African Union to develop an African COVID-19 strategy ably led by the Africa CDC.

We were able to strengthen the efficacy of our COVID-19 strategy by setting up a medical supplies platform to enable African countries to procure medical supplies at affordable prices.

A number of African companies that produce medical supplies were able to use the platform to sell their products across the continent.

This in many ways enhanced African economic integration.

We have promoted public health measures that depend on individual behaviour and implemented regulatory strategies, including lockdowns, to ensure social distancing.

The most important public health measure to prevent COVID-19 is a vaccine.

For the past year, efforts have been underway to find vaccines that are both safe and effective.

We finally have achieved the goal, with a number of vaccines having undergone clinical trials and passed stringent safety tests. Now they are being produced.

The task before us is to step up global solidarity to ensure equitable access to the vaccines.

All countries must get vaccines and must get them speedily.

It is vital to the global containment of COVID-19 that vaccination takes place in all countries and among all populations.

No part of the world will be safe from COVID until all parts of the world are safe.

We are all aware of the challenges of accessing vaccines for the Global South, particularly for Africa.

The developed North, which has substantial financial resources, has purchased the largest stocks, while we in Africa are struggling to get our fair share.

The painful irony is that some of the clinical trials for these vaccines were carried out in Africa.

In other cases, vaccines are packaged right here on the continent, yet we struggle to access them for our populations.

Vaccine prices are high, and many countries may not afford to vaccinate enough of their population to achieve herd immunity.

I am therefore pleased that we have both the President of the World Bank and the CEO of GAVI present.

We know that there are ways of reducing the costs of vaccine production.

Together with India, South Africa has proposed a TRIPS waiver in response to the pandemic.

We are calling on the World Trade Organization to waive specific TRIPS obligations related to the prevention and treatment of COVID-19 for a defined period.

We need more countries to support this initiative.

This would enable countries in Africa and elsewhere to access active pharmaceutical ingredients and benefit from technology transfer, including the know-how to manufacture vaccines in Africa at a cheaper cost.

Earlier this month I convened a meeting of the African Union Bureau to discuss the work undertaken by the African Vaccine Acquisition Task Team.

The Task Team was set up to ensure that the African continent would secure sufficient vaccine doses to achieve herd immunity.

It is estimated that Africa will only be able to access around 20% of vaccines needed through the COVAX facility.

We therefore found it necessary to complement this facility to ensure health workers are vaccinated soonest and countries reach herd immunity faster.

We have secured a provisional 270 million vaccine doses for African countries through the Task Team. At least 50 million will be available from April to June 2021.

These doses are from three major suppliers: Pfizer, AstraZeneca through the Serum Institute of India and Johnson & Johnson.

Because of the high cost of vaccines, the Task Team has arranged with Afreximbank to support member states who want to access these vaccines based on a whole-of-Africa approach.

Should countries submit firm offers, Afreximbank has committed to provide advance procurement commitment guarantees of up to US\$2 billion to the manufacturers on behalf of member states.

The AU team and the World Bank are collaborating to ensure that member states can have access to further funding.

We appreciate the offer of MTN to donate \$25 million to the vaccine programme of the Africa CDC to immunise health workers in Africa. This is solidarity in action.

We call upon other companies, both of African origin and offshore companies that do business in Africa, to do what MTN has done to contribute financially to enable African countries to immunise their target groups.

It is against this background that we have convened this webinar to discuss the continent's state of readiness to deploy COVID-19 vaccines effectively.

We will need to examine issues such as financing and streamlined regulatory processes, reliance mechanisms, logistics, human resources, governance, communication, community engagement strategies, and country readiness.

We need to discuss innovative solutions to leverage different rollout capacities, including opportunities for collaboration with a range of private sector role-players.

With the progress made towards the acquisition of vaccines for the continent, we look to this meeting to identify the next steps we should take to ensure the rapid deployment of vaccines to the eligible populations.

With these words, I welcome you once again and look forward to our engagement.

I thank you.

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