Remarks by World Bank Group President David Malpass at the Global Health Summit Co-Hosted by the European Commission and Italy, as Chair of the G20

May 21, 2021

Excellencies,

Thank you, Prime Minister Draghi, and President von der Leyen.

I share the intensity and deep emotions of previous speakers in combatting the pandemic. Together, we need to find faster and more effective ways to get vaccines to people in developing countries and to plan for future health emergencies.

I’d like to present the actions of the World Bank Group to tackle the pandemic and our plans to build preparedness for future health threats. I welcome your input and have been very pleased to hear the support of participants for the IDA20 replenishment, which provides a vital part of the global health platform.

In the first year of the pandemic, the World Bank Group committed $108 billion to help countries respond to the health, economic, and social impacts of the pandemic. This included a record 65% surge in IBRD and IDA commitments in 2020. We’re rapidly expanding our commitments to health, climate, and Africa, while working worldwide with all stakeholders.

We’ve also authorized $12 billion to help countries access and deploy vaccines, with the goal of vaccinating a billion people in developing countries. By mid-year we expect to have vaccine support operations in 50 countries with at least $4 billion committed.

This week, we launched a website to make all information about our vaccination projects easily accessible in one place. The website includes the detailed vaccine financing operations in place for each country and the results of the readiness assessments conducted over the last six months.

We urge countries, manufacturers, vaccine intermediaries, and on-the-ground providers to increase the transparency of their own commitments. This will facilitate fair access to vaccines, more effective financing, and the private sector investments that can expand supply.

In addition to firm and binding contracts, many announced “agreements” take the form of best-efforts, letters of intent, memoranda of understanding, future funding pledges, and advance purchase options. Each can be valuable, but as Kristalina just said, as many contributions as possible should be up front – fully funded and delivered. It is vital that we match excess vaccine supplies with delivery schedules and vaccination programs that are well planned and well-funded. The countries receiving vaccines need to know which types of vaccines will arrive, when, and at what price so they can communicate with their people and prepare for a major vaccination effort.
In sum, I urge countries with excess supplies to release their surplus doses as soon as possible to developing countries that have vaccination operations already in place, and I urge all of us to increase the transparency of these delivery commitments.

Regarding vaccine supplies, IFC is making debt and equity investments in health projects and is helping developing countries manufacture vaccines and related supplies. As we speak today, Makhtar Diop has been meeting with potential manufacturing hubs in Africa and building partnerships with development finance agencies. We’ll be announcing positive developments on this front in the coming weeks.

Looking forward, the negative impact on human capital will be deep and may last decades. Over a billion children have been out of school and 80 million children have missed out on basic childhood vaccinations. At Tuesday’s Summit on Financing of African Economies, I announced our commitment to provide $150 billion in financing for sub-Saharan Africa over the next five years, a dramatic step up on previous years. This draws heavily on contributions from IDA donors, the World Bank Group’s strong leveraging and mobilization capabilities, and the reflows from previous loans. Each year, IBRD is one of the largest contributors to IDA, substantially increasing the concessional nature of IDA funding that is vital for the poorest countries.

**It will take large new resources to build resilience to shocks.** Many low- and middle-income countries need stronger health systems, both for their COVID-19 vaccination campaigns to succeed and to be able to manage and recover from future outbreaks.

**Pandemic preparedness means investments across sectors, not just in health.** The COVID-19 pandemic has shown in particular that social safety nets that provide digital cash transfers are particularly valuable, adding to the resilience of food security, basic health, and education. To build preparedness, we need major investments in infrastructure, and digital connectivity – these are crucial – while maintaining our focus on the particular risks to women, girls, the poorest and most vulnerable. And with about 75% of emerging infectious diseases coming from animals, we must invest in sustainable and safe food systems.

Supporting crisis preparedness and response are integral to the mission of the World Bank Group; it is one of the themes for IDA20 and crisis preparedness and response are already embedded into our IBRD operations.

The World Bank Group is committed to the health agenda. By working together, we can help developing countries build the resilience they need when they face major threats to their people’s health.

Thank you.