World Health Organization

WHO Director-General's opening remarks at the media briefing on COVID-19 - 28 December 2020

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Good morning, good afternoon and good evening.

This week marks the one-year anniversary since WHO learned of cases of ‘pneumonia with unknown cause’ via a bulletin issued by the health authorities in Wuhan and ProMed.

We immediately set up an incident management structure to follow this development.

This is a moment for all of us to reflect on the toll the pandemic has taken, the progress we have made, the lessons we have learned, and what we need to do in the year ahead to end this pandemic.

For the past year, WHO and our partners have worked relentlessly to support all countries as they respond to the virus.

Staff have worked around the clock to accelerate science, provide solutions on the ground and build solidarity.

Science is at the core of everything we do and it has advanced at a blistering speed this year.

If we rewind to the start of 2020, it was on 10 January that WHO published its first comprehensive package of guidance documents for countries, covering topics related to the management of an outbreak of a new disease.

The next day, WHO received the full genetic sequences for the novel coronavirus from China.

By 13 January, WHO published its first protocol for a diagnostic test by a WHO partner lab in Germany to detect the virus.

By mid-January, our international technical expert networks were engaged and meeting by teleconference to share first hand knowledge with the new novel coronavirus and similar respiratory viruses, such as MERS and SARS.

And WHO convened the Strategic Technical Advisory Group for Infectious Hazards and the Global Alert and Response Network.

By the end of the month, 30 January, I declared a Public Health Emergency of International Concern, WHO's highest level of alert under global health law.

And by the start of February, WHO was shipping diagnostic tests around the world so that countries could detect and respond effectively.

On 4 February, WHO released the first global preparedness and response plan for COVID-19 based on the latest scientific evidence.

At the same time, WHO was connecting scientists, funders and manufacturers from across the globe together to accelerate research on tests, therapeutics and vaccines.

In mid-February, WHO's longstanding research and development blueprint group brought hundreds of experts from more than 40 countries together to plot out a COVID-19 research roadmap.

This was based on years of work on other infectious diseases including SARS, MERS and Ebola.

The roadmap subsequently developed, covered all technical areas from the animal human interface through to the development of vaccines and was set up to ensure maximum coordination and collaboration as the world tested, trialed and rolled out new health tools.

This included the Solidarity Trial, an international clinical trial that generated robust data quickly to determine the most effective treatments.

And by March, WHO was planning the Access to COVID-19 Tools Accelerator, which was launched with partners in April.

The ACT-Accelerator is a historic collaboration to further hasten the development, production and equitable access to vaccines, diagnostics and therapeutics for COVID-19 as part of an overarching endgame strategy.

And it has worked.

Good news came in June as initial clinical trial results from the UK showed dexamethasone, a corticosteroid, could be lifesaving for patients severely ill with COVID-19.

By September, new antigen based rapid tests had been validated and the diagnostic pillar of the ACT-Accelerator had secured millions of them for low- and middle-income countries.

And then the shot that rang out around the world was the release of positive vaccine news from multiple candidates, which are now being rolled out to vulnerable groups.

New ground has been broken not least with the extraordinary cooperation between the private and public sector in this pandemic and in recent weeks, safe and effective vaccine rollout has started in a number countries, which is an incredible scientific achievement.

This is fantastic but WHO will not rest until those in need everywhere have access to the new vaccines and are protected.

Throughout the pandemic, we have released and updated technical guidance and trainings based on the latest science and best practice from countries.

We've then disseminated it through all our channels, including more than 130 press briefings like this one.

And our regional and country offices have kept local populations up to date.

We've worked with thousands of brilliant scientists from around the world to build global solidarity; engaging with our critics and calling repeatedly for all stakeholders to quarantine any politicization of the pandemic and focus on what really matters: accelerating science to save lives and end this pandemic.

We learn something new every single day.

Sometimes good, sometimes challenging, sometimes down right surprising, but all helpful.

There will be set backs and new challenges in the year ahead. For example, new variants of COVID-19 and helping people who are tired of the pandemic continue to combat it.

At present, we are working closely with scientists all over the world to better understand any and all changes to the virus and how these changes affect its ability to spread or make people sick, or any potential impact on available tests, treatments and vaccines.

Specifically we are working with scientists in the UK and South Africa who are carrying out epidemiologic and laboratory studies, which will guide next steps.

Science drives our actions.

I would like to thank both those countries for testing and tracking new variants and underscore the importance of increasing genomic sequencing capacity worldwide.

This means the prompt sharing of epidemiological, virological, and full genome sequence information with WHO and other countries and research teams, including through open-source platforms such as GISAID and others.

Only if countries are looking and testing effectively will you be able to pick up variants and adjust strategies to cope.

We must ensure that countries are not punished for transparently sharing new scientific findings.

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I'm so humbled to work with scientists, epidemiologists and public health experts in WHO and around the world.

And today I'm joined by four of the best to look back and look forward.

First, Professor Quarraisha Abdool Karim from the Centre for AIDS Programme of Research in South Africa.

The floor is yours professor.

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Thank you so Professor Abdool Karim for those reflections.

And now to Dr. Dan Barouch from the Center for Virology and Vaccine Research, Beth Israel Deaconess Medical Center, in Boston, US.

Dr. Barouch the floor is yours.

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