

2020 Commonwealth Health Ministers Meeting

Final Outcome Statement

1. The 32nd Commonwealth Health Ministers Meeting (CHMM) was convened using video conferencing technology on the 14 May 2020 ahead of the 73rd World Health Assembly. Eighty-one delegates from 30 countries, including Ministers of Health, senior officials and experts participated in the meeting. The virtual meeting of ministers took place in the midst of the global health emergency caused by the COVID-19 pandemic. The meeting coalesced under the theme “*Delivering a coordinated Commonwealth COVID-19 response*”.
2. Noting with serious concern, the immediate impact of the COVID-19 pandemic on health systems and the anticipated long-term social and economic ramifications across the Commonwealth, Ministers welcomed the opportunity to share progress against the disease at regional and national level, share and exchange good practice strategies, solutions and models, and identify priorities for coordinated action.
3. Affirming the fundamental principles of the Commonwealth Charter and the collective desire for a fair, safe, secure and prosperous future, Ministers reiterated the need for solidarity and cooperation among Commonwealth member states in responding to the pandemic, being mindful of the needs of specific vulnerable groups and those in vulnerable situations, especially women and girls, the elderly and marginalised persons, including those with existing mental health conditions. Ministers therefore emphasised the importance of a coordinated response in addressing the disease.
4. Noting that an integrated multiagency and a multi-sectoral approach would prove most effective at all stages of responding to the disease, Ministers are committed to working collectively across sectors and with stakeholders (including academia, the private sector and civil society), partners and the local community in taking ownership and participating in addressing the disease. Acknowledging the crucial role of the World Health Organisation (WHO) in providing global leadership as well as the role of other global partners, including development partners, ministers pledged their continued support to one another during this critical time.
5. Noting the provisions of the International Health Regulations (IHR) to prevent the global spread of disease of this current nature, Ministers recognised global calls to enhance IHR, with a view to strengthening national

health systems, including collaborations in voluntary monitoring and evaluation activities and surveillance.

6. Recalling their commitment to the implementation of the principles of Universal Health Coverage (UHC), Ministers agreed to work with Finance Ministers to promote sustainable health financing strategies in Commonwealth countries, in accordance with national contexts and priorities, promoting access for vulnerable and marginalised people. Aware of the need to provide access to testing and treatment to individuals without excessive out-of-pocket payments, Ministers welcomed the suggestion to remove user fees in relation to COVID-19 testing and treatment for vulnerable people or those in vulnerable situations, in accordance to national context and legislation including migrants, refugees and people living in poverty. Ministers also agreed to accelerate strategies across the Commonwealth for protecting, retaining and deploying frontline responders to the pandemic, and recognised the sacrifices that the health care professionals and other frontline workers are making, even risking their own lives in responding to the pandemic.
7. Noting further, the adverse effects of the travel and trade restrictions on access to safe, effective, quality, affordable essential medicines, vaccines and medical supplies, including personal protective equipment, across member states, Ministers discussed responses to national and border measures and called for ongoing national dialogue on these issues. Ministers agreed to continue to work together to facilitate international trade and to coordinate responses in ways that take into consideration the need to ensure continuous and equitable delivery of medical supplies while protecting population health.
8. Ministers noted the need to sustain gains from previous public health efforts such as immunization, communicable disease prevention and control, progress against non-communicable diseases (NCDs), malnutrition, malaria, as well as maternal, women and girl's health targets; including but not limited to antenatal care, access to domestic as well as gender-based violence services, and sexual and reproductive health services. Ministers expressed the necessity to focus on the pandemic response while concurrently addressing other critical health challenges as well as other vulnerabilities to health systems inclusive of recurring climatic events affecting small and vulnerable states.
9. Aware of the fundamental responsibility to provide access to quality essential health services, especially for at risk groups, such as women and girls, and vulnerable populations or those in vulnerable situations, (such as those living with mental illness, people living with disability, the elderly, homeless persons and people living in rural areas), Ministers further

resolved to maintain delivery of quality essential health services even in the face of the pandemic, in accordance with national contexts and priorities, taking care to make provision for critical conditions such as NCDs and other infectious and communicable diseases.

10. Ministers welcomed specific Commonwealth coordinated action and the proposal to support existing commitments to establish a voluntary mechanism to support the equitable sharing/distribution of excess supplies of essential supplies (such as test kits, ventilators, personal protective equipment, medical technology, and medical products), contributing to the supply chain management during the global emergency, and in alignment with existing global efforts, including the UN Global Supply Task Force, to avoid duplication and within existing means.
11. Ministers also welcomed the formation of a COVID-19 open ended informal Technical Working Group of country contact points and experts for the purpose of facilitating the exchange of information and promoting innovative solutions between member states and responding to urgent needs or policy challenges, including challenges in human resources for health and sustainable financing, within existing resources.
12. Ministers continued to support actions to promote personal physical activity aligned with public health guidance in response to COVID-19, through campaigns such as 'Commonwealth Moves' as a strategy to address risk factors of non-communicable diseases (NCDs), address the high disease burden of NCDs and enhance physical and mental health and wellbeing of citizens.
13. Ministers welcomed the Access to COVID-19 Tools (ACT) Accelerator to fast-track research, innovation and knowledge sharing towards supporting and developing diagnostics, vaccine, and therapeutics for COVID-19 among academic, private sector and research institutions, and they agreed to promote efforts toward digital health solutions across the Commonwealth to meet the challenges of current and future outbreaks.
14. Ministers noted the contribution of civil society towards national responses, including the recommendations of the 2020 Commonwealth Civil Society Policy Forum that the COVID-19 pandemic has demonstrated that digital technology has significant potential to transform health services delivery and health worker education and is potentially more cost effective and should be subject to closer examination once the pandemic is over.
15. Ministers thanked The Gambia for chairing the meeting and commended their recommendations to the Commonwealth Heads of Government.