

Concrete actions needed for global pledges to result in access for all

4th May 2020

We welcome the efforts of the global health actors and other stakeholders to rally financial support to the research and development (R&D), manufacturing and distribution of COVID-19 vaccines, diagnostics and therapeutics through the May 4th global pledging conference¹.

We are also pleased that the EU joined WHO and global health organisations' call for action to accelerate the development, availability, and equitable access to safe, quality, effective and affordable diagnostics, therapeutics and vaccines against coronavirus².

As organisations and individuals in the health sector defending the public interest, we would like to underline the vital importance of the commitments in the call for action. We would also like to share recommendations to increase the accountability and public ownership of this pledging initiative and subsequent activities.

A global pandemic needs an accountable global coordination mechanism

Pandemics have no borders and only a coordinated global response can mitigate the consequences of the current crisis.

Without global coordination and agreement, including on the areas of investments and practices for R&D, useful and needed resources and time will be wasted. It is also important that all initiatives supported with public funding in the context of COVID-19 have a global mandate.

We invite the EU and all the other donors and partners to the pledging conference to set up a transparent and inclusive governance structure to decide on priorities, monitor progress, evaluate and report on the results of the pledges and further investments. A robust accountability mechanism should also be put in place to ensure that commitments are translated into actions. The meaningful involvement of civil society organisations should be ensured in all governance structures.

An ambitious goal requires a detailed plan and strong access and affordability clauses

As world leaders expressed their support for the WHO ACT accelerator and heightened expectations of global equitable access, many barriers remain to be addressed: safe and effective tools need to be developed and tested; manufacturing need to be transformed to meet global demand; supply and distribution need to be organized accordingly; and pricing arrangements need to be negotiated to ensure the tools are indeed affordable to all. Pre-COVID-19 experience has shown that each of these barriers can hinder access to life saving medical tools and it is essential to address them early on.

The pledging conference can provide the financial means to overcome some barriers. A plan detailing how each of these barriers will be addressed is needed. This plan should comprise a shared definition of what global equitable access, affordability and availability mean and detailed conditions under which partners are expected to contribute to fulfilling these ambitions in return for funding. As the pledging conference aims to raise funding from across the world to address the needs of all, this information should be publicly available.

Funding pledged to support COVID-19 R&D should include coherent legally binding arrangements with private and public partners to ensure that health technologies are priced fairly and affordably to healthcare payers and are free to the public at the point of care in all countries.

To complement those efforts, any COVID-19 treatment, diagnostic and vaccine developed with public funding through the 4th May pledges and afterwards should be conditional on mandatory inclusion to a global technology pool. A proposal for the creation of a voluntary pool has been submitted to the WHO by the government of Costa Rica. This proposal should be further developed, expanded and implemented in an effort to "pool rights to technologies that are useful for the detection, prevention, control and treatment of the COVID-19 pandemic"³.

¹ https://global-response.europa.eu/index_en

² [https://www.who.int/who-documents-detail/access-to-covid-19-tools-\(act\)-accelerator](https://www.who.int/who-documents-detail/access-to-covid-19-tools-(act)-accelerator)

³ <https://www.keionline.org/wp-content/uploads/President-MoH-Costa-Rica-Dr-Tedros-WHO24March2020.pdf>

We hope our suggestions will be taken onboard and we are at your disposal for further exchanges on those issues.

This statement was coordinated by the [European Alliance for Responsible R&D and Affordable Medicines](#). Contact - Viviana Galli - viviana@medicinesalliance.eu

Supporting organisations

1. AAJM - Association for Fair Access to Medicine, Spain
2. Access to Medicines Ireland
3. AJF - Africa Japan Forum
4. ARAS - Romanian Association Against AIDS
5. Association "Novi put", Bosnia and Herzegovina
6. Association des Femmes de l'Europe Méridionale - AFEM
7. Aurora Universities Network, The Netherlands
8. Austrian Institute for Health Technology Assessment (AIHTA), Austria
9. BEUC - The European Consumer Organisation
10. Black Activists Rising Against Cuts - BARAC, UK
11. Chronic Illness Advocacy & Awareness Group, USA/Global
12. Commons Network, The Netherlands
13. Corporate Europe Observatory - CEO
14. Ecologistas en Acción, Spain
15. EKPIZO, Greece
16. European Alliance for Responsible R&D and Affordable Medicines
17. European Public Health Alliance - EPHA
18. European Public Services Union - EPSU
19. Fondation Eboko, France
20. Fondation Joseph The Worker/Structure Lazarienne, Bénin
21. Foundation for Integrative AIDS Research - FIAR, USA
22. France Assos Santé, France
23. Fundación IFARMA, Colombia
24. Fundación Mexicana para la Planeación Familiar, Mexico
25. Global Health Advocates
26. Global Justice Now, UK
27. Health Global Access Project
28. Health Poverty Action
29. Heart to Heart Foundation, Thailand
30. Ibn Sina Academy of Medieval Medicine and Sciences, India
31. Instituto para el Desarrollo Humano, Bolivia
32. IT for Change, India
33. ITPC-LATCA
34. KEI Europe
35. La Ligue contre le Cancer, France
36. Mecanismo social de control y apoyo en VIH – MSCAV, Colombia
37. Médecins du Monde France
38. Medicines, Information and Power, Colombia
39. MSF Access Campaign
40. OCU - Organización de Consumidores y Usuarios, Spain
41. People's Health Movement, Kenya
42. Pharmaceutical Accountability Foundation, the Netherlands
43. Prescrire, France
44. Public Eye, Switzerland
45. Society of Development and Care - SODECA
46. SOMO Centre for Research on Multinational Corporations
47. STOPAIDS, UK
48. Students for Global Health (SfGH-UK), UK
49. Sukaar welfare organization, Pakistan
50. T1 International
51. Test Aankoop/Test Achats, Belgium
52. Transnational Institute, The Netherlands
53. Transparency International Health Initiative
54. Treatment Action Group, USA
55. Tunisian association of Positive Prevention - ATP+
56. UFC-Que Choisir, France
57. Universities Allied for Essential Medicines, UAE
58. Wemos Foundation, The Netherlands
59. Yolse, Santé Publique et Innovation, Switzerland

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