

Oireachtas Foreign Affairs Committee

9th February 2021 – 10am

Opening Statement - Access to Medicines Ireland

A Chathaoirleach,

We are very grateful for the opportunity to attend your committee today and to address the issue of equitable global access to COVID-19 vaccines. We would like to explain why we believe that Ireland should formally endorse the World Health Organization's Covid-19 Technology Access Pool (C-TAP) without delay.

My name is Kieran Harkin and I am a GP based in Dublin, I am joined by Aisling McMahon who is an Assistant Professor of Law at the University of Maynooth with a special interest in patent and health law.

Access to Medicines Ireland (AMI) is a membership group of Comhlámh, the organisation of development workers.

We are greatly honoured to be joined by Ms Winnie Byanyima, executive director of UNAIDS and a leading advocate of The People's Vaccine Alliance.

To date, over 3,600 people have died from Covid-19 in Ireland and over 2.3 million people globally.¹

The global economic cost of COVID-19 has been estimated as \$3.4trillion per year.² The International Chamber of Commerce estimates that the costs could be much higher if universal vaccination is not achieved more quickly.³ Furthermore, Oxfam has calculated that the economic impact of the virus could push half a billion people into poverty,⁴ and nearly half of all jobs in Africa could be lost according to UN estimates.⁵

While the arrival of effective vaccines has brought an expectation that the pandemic can be brought under control, this is threatened by an inadequate supply of vaccines to facilitate a rapid global rollout. Most lower income countries are not expected to be vaccinated until 2023 or later.

¹ Correct at time of writing 5th February 2021: https://www.worldometers.info/coronavirus/?utm_campaign=homeAdvegas1?

² Hafner et al, The global economic cost of COVID-19 vaccine nationalism (RAND Institute, 2020) available at https://www.rand.org/pubs/research_briefs/RBA769-1.html

³ Recent report commissioned by the International Chamber of Commerce as quoted in the New York Times see: Goodman, If Poor Countries Go Unvaccinated, a Study Says, Rich Ones Will Pay (New York Times, January 2021) available at <https://www.nytimes.com/2021/01/23/business/coronavirus-vaccines-global-economy.html?smid=tw-share>

⁴Oxfam, 'Half a billion people could be pushed into poverty by coronavirus, warns Oxfam' (9th April 2020) <https://www.oxfam.org/en/press-releases/half-billion-people-could-be-pushed-poverty-coronavirus-warns-oxfam>

⁵ UNDP, COVID-19: Looming crisis in developing countries threatens to devastate economies and ramp up inequality (30th March 2020) <https://www.undp.org/content/brussels/en/home/presscenter/pressreleases/covid-19--looming-crisis-in-developing-countries-threatens-to-de.html>

Vaccine scarcity and slow rollout will ensure a prolongation of the pandemic as outbreaks re-emerge due to travel between and within countries. Even more worrying, is the risk that variants of the virus will emerge which will be more infectious, more dangerous and be resistant to current vaccines. Only two days ago, South Africa put its roll out of the Oxford/AstraZeneca vaccine on hold, after preliminary data questioned its effects in protecting against the new strain of COVID-19 detected there.⁶

For these reasons, faster global roll out of vaccines is vital.

The reality is that the current vaccine scarcity is artificial, and can be resolved by increasing production capacity globally. However, to do so, companies must share knowledge and intellectual property rights to enable others to produce vaccines. Given the extent of this extraordinary health crisis, and the significant public investment that has supported the creation of many COVID-19 vaccines, this is not an unreasonable expectation.

As Dr Mike Ryan of the World Health Organization has said:

“We have got to get it together as a society. Social justice is only a dream if we don’t put health justice at the centre.”⁷

Rapid equitable global access to vaccines must be a key priority, and to achieve this, we urge the Irish government to endorse the World Health Organization’s COVID-19 Technology Access Pool.

With your permission, A Chathaoirligh, I would like to hand over to Dr McMahon who will detail this C-TAP model.

What is C-TAP?

In May 2020, the World Health Organization initiated the ‘Solidarity Call to Action’ launching its support for the C-TAP and urging key actors including governments to take action.

Put simply, the C-TAP is a platform to facilitate the sharing of intellectual property rights, data, know-how, and cell lines related to COVID-19 technologies, including vaccines. The end goal is increasing equitable global access.

Why is this needed?

The C-TAP model is needed because production capacity for vaccines, medicines and diagnostics against COVID-19 can be increased globally. But to do this, more companies must license and share intellectual property rights, know-how and technologies to enable others to produce these. The C-TAP sets up a mechanism to

⁶ Joseph Cotterill and Donato Paolo Mancini, ‘South Africa halts rollout of AstraZeneca vaccine’ (Financial Times, 8th February 2021)

⁷ Mark Hilliard, ‘Award-winning Mike Ryan of WHO flags healthcare inequality’ (Irish Times December 2020) <https://www.irishtimes.com/news/social-affairs/award-winning-mike-ryan-of-who-flags-healthcare-inequality-1.4437847>

facilitate this. It is a voluntary model subject to agreement of such companies, and participation, depending on the context, could include compensation in the form of royalties, where appropriate.

Countries must also learn from the past. The use of intellectual property rights in a manner which hindered access to medicines, has had devastating impacts previously, particularly in the HIV/AIDS crisis,⁸ with many lives lost as a result.

We must ensure that in this health crisis, this does not happen again.

In short, supporting the C-TAP provides a way to achieve global equitable access to vaccines. It would:

- Maximise the manufacturing capacity globally by enabling more companies to make vaccines,
- Accelerate the development of new technologies by encouraging the sharing of data and know-how thereby also increasing transparency, and
- Facilitate more affordable access.

The C-TAP model works in collaboration with the existing UN-backed Medicines Patent Pool which has extensive experience in pooling intellectual property rights for public health.⁹

Furthermore, support for the C-TAP aligns with the EU Commission's recently published intellectual property strategy,¹⁰ as well as with the World Health Assembly's COVID-19 Response Resolution,¹¹ both of which encourage voluntary pooling and licensing of intellectual property for COVID-19.¹²

Addressing vaccine inequality in this way, also gives us an opportunity to ensure that the core values and intention of Irish Aid's Policy, *A Better World*,¹³ is put into practice, reaching the *furthest behind first and leaving no-one behind*, which is Ireland's approach to realising the UN's Sustainable Development Goals.

⁸For further discussion, see: Ellen 't Hoen et al. 'Driving a decade of change: HIV/AIDS, patents and access to medicines for all.' (2011) 14(15) *Journal of the International AIDS Society* doi:10.1186/1758-2652-14-15; Duncan Mathews, *Globalising intellectual property rights: the TRIPS Agreement*. (London: Routledge; 2002); Peter Drahos, *The global ratchet for intellectual property rights: why it fails as policy and what should be done about it*. (New York: Open Society Institute; 2003); Aisling McMahon & Edana Richardson, 'Patents, Corporate Decision-Making & the Engaged Shareholder: A Pathway to Encourage Socially Responsible Patent Use in Healthcare (Working Paper 2021).

⁹ See: <https://medicinespatentpool.org/>

¹⁰ EU COM (2020) 760 "Making the most of the EU's innovative potential – An intellectual property action plan to support the EU's recovery and resilience" (25th November 2020)

¹¹ WHA73.1 COVID-19 Response (19th May 2020), paragraph 8(2) https://apps.who.int/gb/ebwha/pdf_files/WHA73/A73_R1-en.pdf

¹²Ellen 't Hoen, "Some Surprises in the European Commission's New Intellectual Property Strategy" (*Medicines Law and Policy*, 2nd December 2020) <https://medicineslawandpolicy.org/2020/12/some-surprises-in-the-european-commissions-new-intellectual-property-strategy/>

¹³ Government of Ireland, *A Better World: Ireland's Policy for International Development* (2019)

And, it is fully consistent with Ireland’s foreign policy goals of openness, global solidarity, and a commitment to multilateralism.

The C-TAP is also vital if COVAX the vaccine pillar of the WHO’s Access to COVID-19 Tools (ACT) Accelerator¹⁴ is to be a success; the C-TAP and COVAX are complementary to each other. On the 5th of February, Dr Tedros Ghebreyesus of the World Health Organization, in discussing COVAX’s first interim vaccine distribution forecast,¹⁵ cautioned that:

“Countries are ready to go, but the vaccines aren’t there.....we encourage all manufacturers to share their data and technology to ensure global equitable access to vaccines.”¹⁶

It must be emphasised that the C-TAP will only be successful if more governments and companies support it.

On the other hand, if voluntary mechanisms like the C-TAP do not achieve sufficient support, then mandatory measures such as suspending intellectual property rights under the TRIPS waiver proposal, currently under discussion at the World Trade Organization, are likely to gain support instead of such co-operation under the C-TAP, and must be supported to achieve change.¹⁷

Who else supports the C-TAP?

Access to Medicines Ireland is joined by ActionAid Ireland, the Irish Global Health Network, the Irish Nurses and Midwives Organisation (INMO), Médecins Sans Frontières Ireland and Oxfam Ireland, in calling on the Irish Government to support the C-TAP. To date, 40 countries worldwide including five European countries have endorsed the C-TAP.¹⁸

Furthermore, last September, President Michael D Higgins indicated his support for the WHO’s “global solidarity call to action” in his speech at the UN General Assembly.¹⁹

¹⁴ For further details on COVAX see: <https://www.who.int/initiatives/act-accelerator/covax>

¹⁵ See also <https://www.who.int/news/item/03-02-2021-covax-publishes-first-interim-distribution-forecast>

¹⁶ <https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19-5-february-2021>

¹⁷ Aisling McMahon, ‘Global Equitable Access to Vaccines/Treatments for Covid-19: The Role of Patents as Private Governance’ (2021) *Journal of Medical Ethics* <http://dx.doi.org/10.1136/medethics-2020-106795>

¹⁸ These are: Belgium, Luxembourg, Norway, Portugal and The Netherlands.

¹⁹ President Michael D. Higgins said: “As traditional markets have acknowledged that they cannot deliver at the scale needed to cover the entire globe, solidarity within and between countries and the private sector is essential if we are to overcome challenges presented to us by COVID with regard to accessing appropriate medical treatments”. The text of President Michael D. Higgins speech is available here: <https://president.ie/en/diary/details/president-addresses-un-meeting-on-universal-access-to-COVID-19-health-technologies/speeches>

And most recently, on the 3rd of February, Dr Anthony Fauci,²⁰ said that rich countries have a "moral responsibility" to help countries unable to access vaccines, and that this could include:

“...supplementing their own ability to produce vaccines ...with cooperation from the pharmaceutical companies regarding relaxation of some of the patent situations. Bottom line...we have got to get the entire world vaccinated...”²¹

Global multi-lateral action is needed, and Ireland can and should be a leading voice on this.

Access to Medicines Ireland urges the Irish Government to formally endorse this Global Solidarity Call to Action and the Covid-19 Technology Access Pool as soon as possible, and take action at the EU level to encourage greater support for the C-TAP.

Alongside this, we urge the Irish Government to increase financial support for the WHO’s ACT Accelerator.

²⁰ Director of the US National Institute of Allergy and Infectious Diseases.

²¹ Conversations with Dr Bauchner, JAMA, Coronavirus Update With Anthony Fauci – February 3, 2021 at 7.22-8.17 minutes, available at: <https://edhub.ama-assn.org/jn-learning/audio-player/18582859>