

### Time has failed us

- Two years into the pandemic, and 20 months proposal. Uncountable lives lost.
- Pharma companies, benefited from it, this was their game all along.
- Shift in strategy: Redirect energies away from TRIPS Waiver and save the face of the WTO

# 'We Are Choosing Death': Byanyima, Stiglitz Slam WTO Inaction on Vaccine Patents

Winnie Byanyima, the head of UNAIDS, said rich countries have chosen to "protect the monopolies and profits of pharma companies, and millions of people have died who shouldn't have died."

"The drug companies did not want a quick response," said Stiglitz. "The slower the response, the higher their profits. More people died, but that's not their concern. Their concern was profits over people's lives."

## Pharma under pressure

Nov 2021: Towards WTO Ministerial Conf.

- Global TRIPS Waiver Campaign steps up visibility
- Unified and visible union voice, <u>Council of</u> Global Unions Statement.
  - Moderna commits vax doses and manufacturing in Africa
  - Pfizer commits voluntary license with Medicines Patent Pool

May 2022: WTO talks take new turn

- new Covid-19 text
- PSI Statement rejecting the text and PSI affiliate protest at Davos
  - Pfizer commits medicines, vax to 45 LICs



corum (WEF) 2022: The initiative by Pfizer was launch rum Annual Meeting in Davos 2022

#### Too little, too late

- Too limited ambition. From expansion of production by providing simplified pathways to clarifying existing caveats that enable gov to sidestep patents.
- Too narrow scope. From all the health products to prevent, contain and treat COVID-19 to just vaccines, and possibility to expansion with a very limited window.
- Unpracticable coverage. From a range of IP
   privileges relevant for bringing a health product to
   the public to only patents, on a case-by-case basis,
   if necessary to address the COVID-19 pandemic.
- Forces are at play to make it worse.





## Key take aways

- We need a *permanent mechanism for automatic suspension of IP privileges* when a Public health emergency of international concern is announced. A crisis-by-crisis waiver demand is unpracticable.
- Health products required for public health are common public goods and require public direction in production. We need *public-led local production* of vaccines and medicines.
- Health governance, policy can't be left to trade officials. This is WHO's mandate, not WTO's.
- We need *change in the innovation system*. Incentivizing research and innovation with monopoly privileges as main reward works against public health, as highlighted by
  - UN High level panel on access to medicines and
  - WHO global strategy on public health, innovation and IP (GSPOA)

## Thank you

https://publicservices.international

susana.barria@world-psi.org