

Concept note

What can WHO contribute to making COVID-19 vaccines, treatments and technologies global public goods?

Tuesday, 12 January 2021, 16.30-18.00 CET

Abstract

In the debate on access to Covid-19 vaccines, treatments and technologies, WHO has so far failed to provide guidance and leadership on dealing with them as 'global public goods' – despite strong internal expertise on the issue. As a consequence, the World Trade Organization has once more become a more relevant arena for political proposals and debates on global health than the World Health Organization and its governing bodies. (How) can this be changed? What is the state of play regarding proposals for making vaccines, treatments and technologies global public goods? How can WHO live up to its constitutional role of providing binding conventions or agreements in key fields of public health (Art. 19 of the WHO Constitution)?

Content of the session

Moderation by Matheus Zuliane Falcao (People's Health Movement Brazil)

1) Setting the scene (10 minutes)

Proposed speaker: Jasper Thys, Viva Salud

- State of play: Vaccine nationalism and intellectual property rights are amplifying global health inequalities. National and private interests are trumping health justice.
- Highlighting the relevance of the discussion: see abstract
- Introducing the moderator & speakers

2) Covid-19 vaccines, treatments and technologies as global public goods (15 minutes)

Proposed speaker: Els Torreele (UCL) CONFIRMED

While the recent vaccine news has brought hope, it has also exposed the pharmaceutical industry's broken business model, casting doubt on the prospects of delivering a people's vaccine and achieving Health for All. For technological advances to translate into Health for All, innovations that are created collectively should be governed in the public interest, not for private profit. This is especially true when it comes to developing, manufacturing, and distributing a vaccine in the context of a pandemic. But what is needed to turn Covid-19 vaccines, treatments and technologies into global public goods? What are the implications of achieving that ambition in light of the Covid-19 pandemic? Where does control over global public goods ultimately lie and what could be the role of WHO in providing global public goods for health?

3) Where is WHO? (15 minutes)

Proposed speaker: Sangeeta Shashikant (Third World Network) CONFIRMED

Despite strong internal expertise on the issue and its constitutional role of providing binding conventions or agreements in key fields of public health, WHO has so far failed to provide guidance and leadership on dealing with vaccines, treatments and technologies for COVID-19 as global public goods. The World Trade Organization has once more become a more relevant arena for political proposals and debates on global public health than the WHO and its governing bodies. What is the state of play regarding proposals for making vaccines, treatments and technologies global public goods so that they become widely available and affordable to those who need them?

- Zoom in on TRIPs Waiver Proposal at the WTO to understand how WHO is on the sidelines of a debate that is in essence a global public health issue
- Zoom in on the architecture of the COVAX facility to outline the limited role of the WHO and to understand how PPPs take up more and more space of action in global public health

→ **Input from the WHO Watch team on the link of the discussion with the EB148**

4) Community participation for vaccines, treatments and technologies as global public goods (15 minutes)

Proposed speaker: Julie Steendam (coordinator European Citizens' Initiative NoProfitOnPandemic)
CONFIRMED

Community engagement and participation was at the heart of the Alma Ata Declaration in 1978. The fourth article of the Declaration states that “people have the right and duty to participate individually and collectively in the planning and implementation of their health care”. More than forty years later, that objective sounds like a faraway dream. How can we increase citizens’ control over global health policy? How can social movements and civil society actors affect the availability and affordability of essential medicines, vaccines and medical technologies? How should the WHO relate to these actors?

5) Responses by WHO members and the Secretariat (15 minutes)

6) General debate (20 minutes)

Contact

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