

A person wearing a blue protective suit and mask is holding a vial of COVID-19 vaccine. The vial is labeled 'COVID-19' and 'INJECTION ONLY'. The background is a view of Earth from space, showing the blue oceans and white clouds. A red rectangular block is on the left side of the image.

**No one is
safe until
everybody
is safe
everywhere !**

GLOBAL VACCINATION

FOR A GLOBAL VACCINATION STRATEGY

that is based on the needs of society, not corporate interests.

- 1.** Vaccine patents have to be suspended. The question of how fast we will be in a position to vaccinate on a global scale, ultimately determines whether people live or die. The more time it takes to vaccinate people, the faster mutations will develop and could result in the problem, that current vaccines become less effective and thus prolong the pandemic. This is why the acceleration of vaccine production must be the highest priority.
- 2.** Sharing patents will lead to an increase in production and particularly an increase in the number of production sites outside Europe and Western industrialized countries. In light of this, it remains unclear, how it can be argued, that the suspension of the patents would not lead to an increase in vaccine production. It appears as though the only reason vaccines remain under the protection of intellectual property, is the pretence to protect corporate interests. This is particularly unusual, given the publicly funded development of technologies, used e.g. in the case of BioNTech/ Pfizer and Moderna.
- 3.** Some vaccines were only possible, thanks to the financial support of the Exchequer (the German government for example spent €500 million, the US spent \$6 billion because of delivery obligations. Moreover, research took place in public universities, and also not included are the costs for basic research and the training and education of experts, which often are covered by public funding as well). A project financed by the general public cannot be reserved to generate profit for the few through restricted production capacity. Public money can only be spent when companies consent to share the developed technology, so that vaccines can be manufactured by other producers. Furthermore, the companies receiving public funding should agree to maximise total production capacity. The agreements between the EU and the pharmaceutical industry should be transparent. The public should be informed on the arguments used in the provision that prohibits the transfer to third-countries. The transfer of vaccines, unused EU vaccines, must be permitted to third-countries.



4. The international distribution of vaccines is profoundly unequal and industrialized nations benefit from this inequality. The pandemic threatens the lives of people globally. Because of low testing capacities, the situation in developing countries, for example in South America or South-East Asia, is uncertain. Experts estimate that it is dramatic. Particularly in these regions, the construction of production sites could speed up vaccination campaigns faster than the import of bought vaccines. In future, these facilities could be used for research and the production of vaccines and other pharmaceutical products. Right now, it is estimated that most developing countries will receive their vaccines not before the end of next year, as a result of western nations buying more than they actually need. The unequal distribution of vaccines is not only a cruel move from a moral standpoint, but also one that harms all of us because it could prolong the pandemic.

5. Globally, there are more vaccines in existence, such as the Russian Sputnik V and Soberana 2, the Cuban Epivaccorona (only admitted in Russia and Iran), as well as Chinese vaccines. It can be anticipated, that the distribution and availability of vaccines will highlight strategic and geopolitical clashes and inequalities, resulting in countries trying to use them to expand their international influence. Countries still waiting for vaccines need protection from becoming a means to an end.

6. Developing Countries should receive support when it comes to the construction of production capacities through technological transfers (such as the proposed Covid-19 technology pool-C-TAP) and investment. Additionally, the creation of a sufficient regional distribution network for pharmaceutical products and medicines is required.

7. Regarding the organisation of the transfer of patents, the global patent pool of the WHO should be used, which played a big role in the fight against HIV.

INTERNATIONAL DISTRIBUTION



- Rich countries that make up 14% of the global population have ordered 53% of the most promising corona vaccine candidates
- Right now, according to the current production capacity it is estimated that there won't be enough vaccines to vaccinate everyone until 2024.
- This situation leads to occasions where vaccines are being used that have not been tested through sufficient clinical trials. The necessary infrastructure for the production of the vaccines is still missing in most developing countries. Some vaccines are produced even though we know nothing about their safety or efficiency, simply because patents remain in place.
- India and South Africa have applied for exceptional provision for the TRIPS agreement by the WTO. The TRIPS agreement protects intellectual property by means of patents. The intellectual property of products that are related to the prohibition, containment or cure of COVID-19 should be suspended, at least temporarily. As of 2021, 100 of 164 WTO members support this proposal. The support of this measure internationally is too tentative. During the last meeting of the EU Council, the measure was opposed. The final decision will be made in March. Instead, EU governments are supporting COVAX, a structure made up of governments, the pharma industry and the Gates foundation, that wants to generate vaccines for the developing world through a mix of public and private funding.

DEMANDS

- 1.** No patents on vaccines during the pandemic.
- 2.** Vaccines should be considered global public goods and we encourage further research on vaccines that are easier to handle and cheaper with regards to storage and transport.
- 3.** The support of local and public pharmaceutical production in developing countries, by technological transfer, foreign financial aid and the creation of an efficient regional distribution system for vaccines, medicine and medical products.
- 4.** Free access to the WHO patent/technology pool.
- 5.** A WHO Quota that is based on equality and guarantees equal global access to vaccines
- 6.** Transparent deals between EU and the corporations that developed & produce vaccines.
- 7.** Socially responsible licensing in all publicly funded medical research and development projects



LABOUR
YOUTH

