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*Plenary sitting*

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**B9-0308/2021**

2.6.2021

## **MOTION FOR A RESOLUTION**

to wind up the debate on the statements by the Council and the Commission  
pursuant to Rule 132(2) of the Rules of Procedure

on meeting the global COVID-19 challenge: effects of the waiver of the WTO  
TRIPS Agreement on COVID-19 vaccines, treatment, equipment and  
increasing production and manufacturing capacity in developing countries  
(2021/2692(RSP))

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**B9-0308/2021**

**European Parliament resolution on meeting the Global COVID-19 challenge: effects of the waiver of the WTO TRIPS Agreement on COVID-19 vaccines, treatment, equipment and increasing production and manufacturing capacity in developing countries  
(2021/2692(RSP))**

*The European Parliament,*

- having regard to the World Health Organization (WHO) manifesto for a healthy and green COVID-19 recovery,
  - having regard to the Universal Declaration of Human Rights of 1948,
  - having regard to the UN General Assembly resolution of 3 April 2020 on global solidarity to fight the coronavirus disease 2019 (COVID-19),
  - having regard to the WHO decision to support the initiative to build up a ‘COVID-19 Intellectual Property Pool’ of May 18, 2021,
  - having regard to the UN Conference on Trade and Development report update of March 2020 on the COVID-19 shock to developing countries,
  - having regard to its resolution of 19 of May 2021 on accelerating progress and tackling inequalities towards ending AIDS as a public health threat by 2030<sup>1</sup>,
  - having regard to Rule 132(2) of its Rules of Procedure,
- A. whereas the COVID-19 pandemic continues to spread all over the world, despite the development of vaccines, with more than 168.73 million people reported to have been infected globally and 3 653 063 people dead;
- B. whereas the world cannot afford repeated disasters on the scale of COVID-19, whether they are triggered by the next pandemic or are the result of mounting environmental damage and climate change;
- C. whereas the right to physical and mental health is a fundamental human right; whereas every person, without discrimination, has the right to access modern and comprehensive healthcare; whereas universal health coverage is a Sustainable Development Goal (SDG) that all signatories have committed to achieving by 2030, and is specifically enshrined in SDGs 3, 13, 14 and 17;
- D. whereas Article 168 of the Treaty on the Functioning of the European Union (TFEU) stipulates that ‘a high level of human health protection shall be ensured in the definition and implementation of all Union policies and activities’;

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<sup>1</sup> Texts adopted, P9\_TA(2021)0250.

- E. whereas public healthcare systems are under great pressure to ensure adequate care for all patients; whereas they are receiving less and less funding and are being neglected as a result of liberalisation and privatisation processes and right-wing austerity measures; whereas they are consequently less able to function in both normal and abnormal situations, including the current COVID-19 outbreak;
- F. whereas an estimated two billion people worldwide do not have access to basic medicines;
- G. whereas the polio vaccine was brought onto the markets patent-free and the disease has now been eradicated in many regions of the world; whereas the South African Government led by Nelson Mandela was forced to use the availability of compulsory licensing to push for affordable and quality generic equivalents in order to avoid paying exorbitant prices to multinational drug companies using patents for HIV treatment;
- H. whereas big pharmaceutical companies should not profit from this pandemic at the expense of people's health; whereas vaccines, medicines, equipment and diagnostics to fight COVID-19 pandemics must be a real global common good;
- I. whereas more than 200 000 EU citizens have already supported the European Citizen's Initiative 'no profit on pandemic', which aims to making anti-pandemic vaccines and treatments a global public good, freely accessible to everyone;
- J. whereas COVID-19 has demonstrated the inter-dependencies between human health and the health of our planet; whereas the emergence of zoonotic diseases – those transferred from animals to humans – is exacerbated by climate change and environmental degradation;
- K. whereas the unfolding of COVID-19 has shown that the international system has been unable to ensure equal access to the vaccines and other products necessary to fight the pandemic;
- L. whereas to date 75 % of vaccines have been distributed in just 10 countries, which proves the existence of intolerable inequality in access to vaccines between rich and developing countries;
- M. whereas, according to the World Health Organization, 19 manufacturers from more than a dozen countries in Africa, Asia, and Latin America have expressed interest in ramping up mRNA vaccine production; whereas to date only 40 % of the world production capacity is used for the production of vaccines against COVID-19;
- N. whereas the Covax facility has so far failed to meet vaccine coverage expectations in developing countries, and has delivered just 72 million vaccine doses to 125 countries, barely sufficient for 1 % of their populations;
- O. whereas the Covax initiative is dependent on donations from rich countries and the production capacity of large pharmaceutical companies that hold vaccine patents, and is not supporting production capacities in developing countries; whereas the Covax initiative is not helping developing countries to overcome dependences on either vaccine production value and supply chains or on access to needed raw materials;

- P. whereas there is already some flexibility in the Trade-Related Aspects of Intellectual Property Rights Agreement (TRIPS) allowing countries to protect public health and increase access to medicines, such as by means of compulsory licenses; whereas rich World Trade Organization (WTO) members, such as the EU and its Member States, Japan, Switzerland and the US, have in the past undermined the use of TRIPS flexibilities in developing countries in order to protect the interests of their pharmaceutical industries;
- Q. whereas a substantial volume of public funds from the Member States and the EU has been used for the development of vaccines; whereas despite making available public funding, the EU and public institutions have no capacity to control the use of the licenses and technologies developed thanks to their funding;
- R. whereas since October 2020 India and South Africa have officially submitted to the WTO a temporary waiver proposal on intellectual property rights for vaccines, drugs, equipment and diagnostics for COVID-19; whereas the proposal has received support from around 100 countries in the WTO, as well as from dozens of civil society organisations, and also Parliament;
- S. whereas according to a recent study published by Public Citizen in collaboration with Imperial College, it would be possible to produce 8 billion doses of mRNA vaccine in one year, covering much of the world's vaccine needs, if a temporary waiver on COVID-19 vaccines patents is granted;
- T. whereas guaranteeing global vaccine production facilities in this way will be needed for any mid- and long-term strategy to meet the needs for fighting COVID-19 successfully within the next decade, as demonstrated by the struggle against the HIV virus;
1. Deeply regrets that the Commission has so far opposed the proposal made by India and South Africa at the WTO in 2020 to temporarily waive TRIPS, which was backed by more than 100 WTO Members, and which, if accepted, could contribute to the increase in world production of vaccines needed and to saving thousands of lives;
  2. Believes that the COVID-19 TRIPS waiver proposed by India and South Africa appropriately addresses the legal barriers to maximising production and supply of medical products needed for COVID-19 vaccines, treatment and prevention;
  3. Regrets that the contracts signed by the EU with pharmaceutical companies do not include clauses to enforce technological transfers in order to scale up vaccine production globally;
  4. Stresses that the Commission has so far decided to allow technology transfers for vaccine production only on a voluntary basis, which has diminished the chances of scaling up vaccine production in the EU and globally;
  5. Stresses that blocking this waiver is a serious obstacle to ending this pandemic, as global inequality in access to vaccines prolongs this health crisis and creates more risks, including the risk of emergent variants that will be resistant to or evade current vaccines;

6. Welcomes the US administration's announcement that it intends to support a temporary vaccines patent waiver at the WTO, and hopes it will soon be translated into an official written proposal, as well as into concrete actions aiming to ramp up global vaccine production; calls on the US and other WTO Member States to end export bans on vaccines and raw materials;
7. Believes that a swift approval of a temporary TRIPS patent waiver is crucial to increasing COVID-19 vaccine production globally, particularly in developing countries, and to helping to defeat the COVID-19 pandemic and saving thousands of lives; stresses that the use of TRIPS flexibilities and an intellectual property rights (IPR) waiver are not mutually exclusive, but are in fact complementary;
8. Calls on the Commission to support at all levels of the WTO the proposal for a temporary waiver on IPRs for COVID-19 vaccines, medicines, diagnostics and equipment, and to engage in text-based discussions with no further delay;
9. Acknowledges the key contribution made by the EU in terms of donations to the Covax facility and the EUR 1 billion Team Europe initiative on manufacturing and access to vaccines, medicines and health technologies in Africa; takes note of the Commission's proposals to the WTO, such as the creation a commission on health and trade within the WTO with a view to preparing the Twelfth WTO Ministerial Conference, but believes that without guaranteeing the TRIPS waiver, all these measures are not sufficient to respond to the urgency of scaling up the production of vaccines in developing countries;
10. Regrets that pharmaceutical companies have decided not to engage on a voluntary basis with the WHO COVID-19 Technology Access Pool (C-TAP) initiative that encourages the voluntary contribution of intellectual property, technology and data to support global sharing and scale-up of manufacturing and supply of COVID-19 medical products; urges the EU to oblige pharmaceutical companies to share their technologies and patents through the C-TAP initiative, and to immediately share their know-how with industries in developing and third countries who have already expressed their availability to contribute to vaccine production;
11. Calls on international donors and the EU to diversify the purchase of vaccines by purchasing from all countries and/or pharmaceutical companies that have developed COVID-19 vaccines recognised by the WHO;
12. Recalls that strengthening the public provision of universal healthcare is the best way to fight global epidemics, protect our societies and address inequalities in access to healthcare; stresses that the ongoing situation highlights the need for public control over the pharmaceutical industry and the production of medical equipment;
13. Emphasises the importance of pandemic prevention and the need to implement preventive strategies; supports the development of an international treaty on pandemics under the auspices of the WHO in order to strengthen resilience against future pandemics; supports the recommendation of the Intergovernmental Science-Policy Platform on Biodiversity and Ecosystem Services (IPBES) for the formation of a high-level intergovernmental council on pandemic prevention that would facilitate cooperation among governments;

14. Calls for the full implementation of the one health principle, which recognises that human, animal and environmental health are interconnected; recalls the importance of health in all policies; recognises that pandemics emerge from the microbial diversity in nature, and notes with deep concern how human ecological disruption and unsustainable consumption, as well as the impacts of the climate crisis, are greatly exacerbating the risk of more zoonosis ‘spillover’; stresses the need to drastically step up efforts to halt global warming at 1.5 degrees in order to protect and restore biodiversity and habitats, and ensure sustainable consumption;
15. Calls for a European sanitary exception, notified to the WTO, to be included in all trade agreements, concerning access to patents on medical machinery and medicines so as to ensure that health is treated differently from other commercial products; stresses that no restrictions should be imposed on the possibility for states to intervene in the public health sector;
16. Calls for the TRIPS Agreement to be reformed so that Global South countries can get equitable and affordable access to the technologies and medicines that their people need; calls for public health medicines to be exempt from the patent system so as to ensure that poor countries have the legal right to produce and import generic versions of life-saving medicines;
17. Instructs its President to forward this resolution to the Council and the Commission.