

**Subject: Global COVID-19 Vaccine Equity**

**Addressed To: The House of Commons Standing Committee on International Trade**

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*An Open Letter to Members of the Standing Committee on International Trade,*

Since April 24, 2021, we have been circulating a letter among medical students and health care advocates calling for Canada to support a World Trade Organization (WTO) Intellectual Property (IP) waiver. Over 865 medical students and health care advocates<sup>1</sup> have signed this letter, an indication of the deep concern of ongoing global inequities in access to COVID-19 medicines and vaccines. They join a chorus of voices writing in support<sup>2</sup> of nearly 100 WTO Member States and millions of signatories from across the globe who have been calling for global health equity throughout this pandemic.

As health care advocates, we recognize that the health of those living in Canada is interlinked to the health of the global community. It has been over one year since COVID-19 was declared a pandemic, yet on April 22, 2021, India recorded the world's highest one-day surge in cases. Hospitals in India have been forced to turn away<sup>3</sup> patients with "oxygen out of stock" signs. This is a moral catastrophe.

The global inequities are clear. Despite high income countries accounting for only 13% of the world's population, 82% of doses have gone<sup>4</sup> into the arms of those in high and upper middle income countries, compared to only 0.3% to those in low income countries. Clearly, the unprecedented rapid and global scientific progress has been made at the expense of low- and middle-income countries (LMICs). Throughout this pandemic, countries across the globe have relied on the Serum Institute of India to produce COVID-19 vaccines. India is currently providing vaccines to over 80 countries<sup>5</sup>, many of which are LMICs through the COVAX program, a program intended to provide vaccine access to LMICs. Notably, Canada is the only G7 country<sup>6</sup> to draw vaccines from COVAX. Given the current devastation in India, the fate of the COVAX program is heavily threatened<sup>7</sup>.

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<sup>1</sup> [https://docs.google.com/document/d/1KZ94IoS90JpBx2ZfrzGKce-TGcX7\\_tRi4csHFQnmVzw/edit?usp=sharing](https://docs.google.com/document/d/1KZ94IoS90JpBx2ZfrzGKce-TGcX7_tRi4csHFQnmVzw/edit?usp=sharing)

<sup>2</sup> [https://docs.google.com/document/d/1EFsKkzxB-53WxdeS9OgVjCM9j-uPLIQp\\_m89x9hsTo/edit](https://docs.google.com/document/d/1EFsKkzxB-53WxdeS9OgVjCM9j-uPLIQp_m89x9hsTo/edit)

<sup>3</sup> <https://www.bbc.com/news/uk-56841381>

<sup>4</sup> <https://www.nytimes.com/interactive/2021/world/covid-vaccinations-tracker.html>

<sup>5</sup> <https://www.axios.com/india-coronavirus-second-wave-vaccine-exports-76997508-4d91-4dd1-bac7-44a5ff5e36ba.html>

<sup>6</sup> <https://www.cbc.ca/news/canada/covax-explainer-canada-backlash-1.5902072>

<sup>7</sup> <https://www.deccanherald.com/national/indias-covid-19-crisis-imperils-global-vaccination-efforts-978437.html>

Furthermore, LMICs have contributed to the global effort to develop viable vaccines<sup>8</sup> in hopes of equitable vaccine access. For example, Kenya is one of the nations that participated in the initial vaccine trial<sup>9</sup> for AstraZeneca, which has allowed for over a million Canadians<sup>10</sup> to receive this vaccine. However, Kenyan health workers<sup>11</sup> are losing their lives due to delays in vaccine shipments<sup>12</sup> caused by HICs like Canada. While more than 85 countries will not have widespread access to even their first vaccine dose by 2023<sup>13</sup>, Canada has procured booster doses through 2024<sup>14</sup>. *What does this say about us as a nation?*

We are ready to stand in solidarity with low- and middle-income countries who recognized early on the need to remove any and all barriers to saving the lives of people across the globe. Since October 2020, India and South Africa have been advocating to the WTO for an intellectual property (IP) waiver<sup>15</sup> to enable patent-free, widespread manufacturing of COVID-19 medicines and vaccines. With partnerships and shared technology, any facility in the world with the capacity will be able to produce medicines and vaccines, such as those in Latin America, Africa, and Asia. This innovation should be a public good considering over \$100 billion<sup>16</sup> in taxpayers' money has funded these vaccines globally. It is unjust that a corporate monopoly is expected to profit over \$30 billion in revenue<sup>17</sup> from these vaccines and is still not reaching the people that need it most. Intellectual property laws were not designed for a global pandemic. Despite Canada's reliance on India's production capacity to vaccinate its own population, **Canada has joined other high-income countries and has not supported the IP waiver.**

#### **We request the following:**

1. Sign on to India and South Africa's proposal to waive<sup>18</sup> obligations under the *WTO Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS)*
2. Endorse the COVID-19 technology access pool (CTAP)<sup>19</sup>, which aims to accelerate scale-up of manufacturing and remove global barriers to access.

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<sup>8</sup> <https://www.aljazeera.com/features/2020/11/24/covid-19-vaccines-explained-in-maps-and-charts>

<sup>9</sup> <https://kemri-wellcome.org/news/chadox1-ncov-19-vaccine-trial-frequently-asked-questions-about-the-trial/>

<sup>10</sup> <https://health-infobase.canada.ca/covid-19/vaccination-coverage/>

<sup>11</sup> <https://www.dw.com/en/striking-kenyan-health-workers-hope-for-vaccine/av-56261074>

<sup>12</sup> <https://www.nytimes.com/2021/03/22/world/africa/africa-vaccine-inequality-covid.html>

<sup>13</sup> <https://www.eiu.com/n/85-poor-countries-will-not-have-access-to-coronavirus-vaccines/>

<sup>14</sup> <https://www.canada.ca/en/public-services-procurement/services/procuring-vaccines-covid19.html>

<sup>15</sup> [https://docs.wto.org/dol2fe/Pages/SS/directdoc.aspx?filename=q:/IP/C/W669.pdf&Open=True&\\_ga=2.37815139.1561692723.1619149924-1961033942.1619149924](https://docs.wto.org/dol2fe/Pages/SS/directdoc.aspx?filename=q:/IP/C/W669.pdf&Open=True&_ga=2.37815139.1561692723.1619149924-1961033942.1619149924)

<sup>16</sup> <https://www.oxfam.org/en/press-releases/monopolies-causing-artificial-rationing-covid-19-crisis-3-biggest-global-vaccine>

<sup>17</sup> <https://www.oxfam.org/en/press-releases/monopolies-causing-artificial-rationing-covid-19-crisis-3-biggest-global-vaccine>

<sup>18</sup> [https://docs.wto.org/dol2fe/Pages/SS/directdoc.aspx?filename=q:/IP/C/W669.pdf&Open=True&\\_ga=2.37815139.1561692723.1619149924-1961033942.1619149924](https://docs.wto.org/dol2fe/Pages/SS/directdoc.aspx?filename=q:/IP/C/W669.pdf&Open=True&_ga=2.37815139.1561692723.1619149924-1961033942.1619149924)

<sup>19</sup> <https://www.who.int/initiatives/covid-19-technology-access-pool>

3. Leverage our diplomatic relations to lead global partnerships in supporting the TRIPS waiver<sup>20</sup> and lifting any bans globally on the export of materials necessary to vaccine production

For many of us, the statistics on the news media represent the lost lives of family members and friends across the globe. As we battle this devastating pandemic, we must recognize that the health and wellbeing of those in Canada is inextricably linked to those within the greater global community. The longer the current global crisis persists, the greater the socio-economic fallout, making it imperative and urgent to collaborate internationally to rapidly contain the outbreak. Combating the pandemic is not about how a single country responds, but about global shared accountability to preserve the dignity and value of each and every human life as equal and indispensable. It is about rejecting the prioritization of profits over people. It is about moving towards a global concerted effort with a mindset of compassion, empathy, and solidarity. The only way to move forward is together.

With sincere gratitude and concern,

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You can sign to support our letter here: <https://forms.gle/ygG5keeqpdNHSjaw6>

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## About Us

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<sup>20</sup> <https://msfaccess.org/india-and-south-africa-proposal-wto-waiver-ip-protections-covid-19-related-medical-technologies>

The primary letter writers are current medical students at various medical schools in Canada and are of South Asian descent with family living in India. Please contact us if you have any questions or concerns. We are always happy to learn, engage, and build solidarity across the globe.

**Additional statements of support/Endorsements/Letters by international organizations, civil society, academics, etc. ([Source](#))**

- [Seattle City Council Resolution Urging Biden to Lift COVID-19 Patent Restrictions](#) (26 April 2021)
- [Former Heads of State/Nobel Laureates Call on President Biden To Waive IP Rules for COVID Vaccines](#) (18 April)
- [Southern CSO Letter to Developed Countries](#) (16 February)
- [The International Trade Union Confederation \(ITUC\) - representing 200 million members of 332 affiliates in 163 countries and territories](#) (01 March)
- [United States Civil Society Organizations](#) (26 February)
- [Japanese Civil Society Organizations](#) (17 February)
- [UNI Global Union - representing more than 20 million workers from over 150 different countries](#) (16 February)
- [Korean Civil Society Organizations](#) (03 February)
- [Swiss Civil Society Organizations](#) (27 January)
- [Declaration from more than 100 European Parliament members calling on EC and Member States not to block TRIPS waiver](#)
- [Philippines CSO letter to German ambassador](#) (11 February)
- [Philippines CSO letter to EU ambassador](#) (08 February)
- [Waiver support letter from the HIV Legal Network to the Canadian government](#) (16 November)
- [Open Letter from 37 Members of the Scottish Parliament](#) (9 December)
- [Covid Vaccine Petition to WTO signed by more than 900 000 individuals](#) (9 December)
- [Senators from Pakistan, Colombia, the Philippines and Malaysia](#) (8 December)
- [Canadian Union Public Employees](#) (8 December)
- [The National Union of Public and General Employees, Canada](#) (4 December)
- [Jamaica Confederation of Trade Unions and Jamaica Association of Local Government Officers](#) (4 December)
- [Public Services International a Global Union Federation of more than 700 trade unions representing 30 million workers in 154 countries](#) (4 December)
- [IndustriALL Global Union - representing 50 million workers in 140 countries in the mining, energy and manufacturing sectors](#) (25 November)

- [Open letter from International Development Studies department at Saint Mary's University in Halifax](#) (23 November)
- [100 UK parliamentarians urge UK government to support waiver](#) (23 November)
- [Canadian Centre for Policy Alternatives](#) (19 November)
- [Amnesty International](#)
- [Public Health Association Australia](#) (13 November)
- [African Commission of Human and Peoples' Rights](#) (13 November)
- [Global Development Policy Center's Working Group on Trade Treaties and Access to Medicines](#) (12 November)
- [Statement by UN Human Rights Experts](#) (9 November)
- [World Health Organization](#) (9 November)
- [World Health Organization](#) (17 October)
- [H.E. Archbishop Ivan Jurkovič, Permanent Observer of the Holy See](#) (16 October)
- [Chilean House of Representatives Resolution](#) (15 October)
- [More than 400 civil society organizations](#) (15 October)
- [Brazilian civil society organizations](#) (15 October)
- [https://www.uaem.org/carta\\_da\\_sociedade\\_brasileira](https://www.uaem.org/carta_da_sociedade_brasileira)
- [Joint United Nations Programme on HIV/AIDS \(UNAIDS\)](#) (15 October)
- [Progressive International](#) (14 October)
- [UNITAID](#) (13 October)
- [Drugs for Neglected Diseases initiative](#) (12 October)
- [South Africa-Affiliated Academics, Researchers and Teachers Letter to President Ramaphosa](#) (12 October)
- [South Centre](#) (7 October)
- [Médecins Sans Frontières](#) (7 October)