Access to medicines in the EU in 2020

Our work to improve and secure access to medicines for everyone everywhere has taken on a new sense of urgency in the face of a pandemic for which, until recently and in very few countries, there was no effective response. Restrictions and limitations have affected the way we work and have forced us to rethink, imagine and improvise new ways of getting our message across. It would not have been possible without collaboration with our colleagues, partners, and allies.

The COVID-19 pandemic has laid bare the limitations of healthcare systems around the world, including ones assumed to be high performing. It forced us to re-imagine intellectual property (IP) management, protection and enforcement in connection to access to medicines and vaccines. We realised the urgency in turning thought into concrete, tangible results, with a key element to this being greater use of TRIPS flexibilities, such as compulsory licenses. This was our goal when devising the Great Health Hack (GHH) a novel exercise convened by HAI, in which tech developers, students, health advocates and academics gathered to create a solution-oriented collaborative mechanism that would help mainstream the use of TRIPS flexibilities as part of the toolkit of policy options at the disposal of governments.

With the outbreak of the COVID-19 pandemic and the scramble to develop, manufacture and distribute an effective therapeutic response and/or vaccine, the issue of how to ensure public return on public investment in R&D returned to the fore, together with the need for greater transparency on R&D costs and a renewed focus on how IP can be an obstacle for access to medicines. We redoubled our efforts to demonstrate that it is possible, and necessary, to promote innovation beyond the current IP-centred, patent-fuelled system. We did this by revising and relaunching our manual on alternative innovation mechanisms, this time for a German audience, in a webinar scheduled to coincide and influence the German Presidency of the European Union (EU).

The need to rethink how we use, manage and govern health-related knowledge, such as patents, clinical trials and other relevant data, was at the centre of a successful side-event we organised during the 73rd World Health Assembly. This event was in support of the creation of the COVID-19 Technologies Access Pool (C-TAP), a WHO strategic tool, based on a proposal from Costa Rica. C-TAP will be critical to scaling up the production and manufacture of vaccines and therapeutic responses to COVID-19. In addition to this hugely successful WHA side event that has been watched over 1400 times, we delivered multiple interventions to WHO governing bodies both at global and regional levels to flag access to medicines issues including transparency, health-oriented management of IP and accountability on pricing and procurement decisions.

We remained deeply involved in European debates and discussions at multiple stages:

- Responding to the European Commission’s public consultations on issues including the
European Pharmaceutical Strategy or the Intellectual Action Plan;
• Coordinating the European Parliament Working Group on Access to Medicines;
• Information sharing and briefing for Members of the European Parliament (MEPs) on issues related to access to medicines ahead of hearings and/or debates;
• Contributing to the European Medicines Agency’s (EMA) work by responding to consultations and participating, as part of the Agency’s Patient and Consumer Working Party (PCWP), in meetings and other interactions;
• And, most importantly, collaborating with other public interest Civil Society Organisations in the defence and promotion of public health by advocating and advancing our agenda of achieving better access to medicines for everyone, everywhere.

Recording of the webinar “Public Return on Public Investment? - Zugang zu Arzneimitteln im Kontext der Corona-Pandemie” a joint activity (in German and English) of HAI and UAEM-Europe held on 23rd June.