**ACT-A CS & C Statement on C-TAP**

As the Civil Society and Community Representatives of the ACT-A, we welcome the recent re-launch of the Covid-19 Technology Access Pool (C-TAP). We urgently call on manufacturers, donors, governments and global health agencies to support C-TAP and make the response to COVID-19 a public common good.

To date, nearly 1.8 billion COVID-19 vaccine doses have been administered globally.[[1]](#footnote-1) However, stark inequities exist with only 0.3% of doses administered in low income countries compared with 85% in wealthy countries.[[2]](#footnote-2) As of 31st May 2021, COVID-19 vaccine production has reached 2.2 billion doses.[[3]](#footnote-3) Assuming a 2-dose vaccine schedule, up to 15.6 billion doses of COVID-19 vaccines could be needed to achieve universal adult coverage for the 194 WHO Member States.[[4]](#footnote-4) This scenario does not account for booster shots and / or expanding coverage into younger age groups. As a result, the global COVID-19 need requires at least a four-fold increase in manufacturing capacity, to avoid disrupting production of other lifesaving routine vaccinations.

Currently there is no scenario where the immediate and future projected supply of any COVID-19 health technology will be enough to meet global demand. Despite the pressing needs and growing global consensus, shortage of supply continues to occur while many pharmaceutical companies appear to pursue a “business-as-usual” approach to intellectual property, limiting global manufacturing and supply capacities.

Producing COVID-19 vaccines to scale, requires unprecedented manufacturing capacity as well as coordinated execution at a scale not before imagined or realised. To expand supply and improve equitable access, governments, multilaterals and the private sector must use all tools at their disposal to scale up manufacturing capacity to help drive a coordinated set of actions toward equitable vaccine access.

As the Civil Society and Community Representatives on the ACT-A we call on:

* Manufacturers to urgently start using the COVID-19 Technology Access Pool (C-TAP) and share COVID-19 health technology related knowledge, intellectual property and data, and for governments to help ensure this happens.
* Donors, as well as the pharmaceutical and medical devices industry, to use C-TAP to collaborate with developing country vaccine manufacturers (DCVM) through open licensing and full technology transfer to unleash supply and bring it closer to populations in LMICs. This has the potential to reduce lead times and cost, including minimising supply chain constraints such as cost of freight.
* Donors (both governments and philanthropists) to prioritise investment in manufacturing capacity and strengthening sustainable and quality assured supply chains globally, especially in low- and middle-income countries, and working with local stakeholders. This is critical for improved and safe supply and affordability, and will leave a legacy of health security preparedness.
* Donors to support an increase in the capacity of C-TAP and its affiliated partners so that it can fulfil its purpose to expand supply, lower price, and assure equitable access to COVID-19 related health technology of assured quality.
* Donors to create and fund incentives to pay intellectual property right holders that share intellectual property rights and allow technology transfer via C-TAP. This will compensate them for their R&D investments (taking into account public and charitable contributions, subsidies, and payments) and pay for the costs of technology transfer.
* Donors, as well as the pharmaceutical and medical devices industry, supporting the establishment and operation of WHO technology transfer hubs that can aid in technology transfer and absorption by licensed manufacturers.
* Lastly, we call on all governments to help operationalise C-TAP by supporting the proposed ‘Waiver from certain provisions of the TRIPS Agreement for the prevention, containment and treatment of COVID-19’.

*The Platform for Community and Civil Society Representatives to the ACT-A platform is co-led by WACI Health, StopAIDS and the Global Fund Advocates Network. For more information about the platform please visit* [*www.covid19advocacy.org*](http://www.covid19advocacy.org) *or for further information on this statement or the platform, please email* [*saoirse@stopaids.org.uk*](mailto:saoirse@stopaids.org.uk) *(Saoirse Fitzpatrick).*

1. Our World in Data. Coronavirus (COVID-19) Vaccinations. Accessed via: <https://ourworldindata.org/covid-vaccinations>. Date Accessed: 27th May 2021 [↑](#footnote-ref-1)
2. The New York Times. Tracking Coronavirus Vaccinations Around the World. Accessed via: <https://www.nytimes.com/interactive/2021/world/covid-vaccinations-tracker.html> . Date Accessed: 27th May 2021 [↑](#footnote-ref-2)
3. Airfinity. COVID-19 Vaccine Production and surplus doses: Science, trial forecast, production and news analysis May 19th .  [↑](#footnote-ref-3)
4. Wang W, Wu Q, Yang J, et al. Global, regional, and national estimates of target population sizes for covid-19 vaccination: descriptive study. BMJ. 2020;37. 15 December 2020. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7736995/> [↑](#footnote-ref-4)