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Intellectual Property Rights**

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Chair: H.E. Ambassador Dagfinn Sørli

Addendum

The present document contains the statements made during the Council for TRIPS held on 30 April 2021.

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* A record of statements as delivered in the formal session of the Council. Some statements have been lightly edited as appropriate to ensure the consistency of presentation.

1 PROPOSAL FOR A WAIVER FROM CERTAIN PROVISIONS OF THE TRIPS AGREEMENT FOR THE PREVENTION, CONTAINMENT AND TREATMENT OF COVID-19

1.1 South Africa

1. We congratulate you on your election as the Chair of this Council. South Africa will work constructively with you during your tenure. We also would like to welcome the new co-sponsors, Namibia and Fiji. We also thank you for convening meetings in various formats and for your report on the outcomes of these consultations. South Africa supports the report to the General Council as it is a factual reflection on the state of discussions on this important issue in the TRIPS Council.

2. As stated in the Report, the co-sponsors are continuing with the consultation process with various delegations in order to test ideas towards a revised proposal which will be submitted soon upon conclusion of these consultations. We thank the Members for availing themselves of the opportunity to engage and we hope that the revised text will provide a good basis to move to text-based negotiations which are long over-due. The circular discussions in the TRIPS Council are not helpful in facilitating a solution-oriented discussion. We can only find a pathway when we engage in text-based negotiations and this is the only way we can come up with a balanced outcome that addresses the concerns of all but delivers a global solution to this crisis.

3. The latest figures show that we have reached 150 million COVID-19 cases and 3.2 million deaths and the numbers are rising on a daily basis. Over 1 billion doses have been administered so far, 87% of these have gone to developed countries. We heard from the Director-General of the WHO on 14 April that one in four people in developed countries have got a jab but one in 500 in poor countries have received the shot. Only 0.2% of vaccines dispensed so far are in low-income countries. This demonstrates the inequity in vaccine access.

4. At this rate it will take years to inoculate 70% of the global population. The biggest challenge right now is limited supply. We have also heard that there is under-utilised manufacturing capacity that can be put on stream with sharing of technology and know-how.

5. As developed countries prepare to emerge from the pandemic, much of the world is still living a nightmare. Global demand for vaccines, therapeutics such as oxygen and diagnostics dwarfs the supply. Only a handful of countries are able to manufacture these medical products, especially vaccines at the scale needed to overcome infections and deaths that are still growing—and shifting due to the emergence of viral variants. It is certainly problematic that some countries are hoarding doses, as well as critical vaccine supplies for their own domestic populations. However, a focus on hoarding alone misses the point. The more sustainable solution is global cooperation to boost supply and get the jabs on peoples' arms so as to reach global immunity.

6. We cannot repeat the painful lessons from the early years of the AIDS response, when people in wealthier countries got back to health, while millions of people in developing countries were left behind. Governments and philanthropists worked together to scale up HIV medicines and paediatric vaccines, but the level of policy cooperation needed for COVID-19 vaccine production is, admittedly, unprecedented.

7. Without the TRIPS waiver, it is clear to us that poorer countries will remain dependent on the charity of richer countries and their pharmaceutical industries. The Waiver will facilitate sharing of technology and know-how in a coherent, transparent and open manner to companies with idle manufacturing capacity across the world. Bilateral deals through Voluntary Licences Agreements (VLAs) have proven to be ineffective as a response thus far.

8. The world has a normal capacity of production of 3.5 billion doses of vaccines and requires 14 billion by the end of 2021. Currently, around 55% of existing capacity is located in East Asia, 40% in Europe and North America, and less than 5% in Africa and South America. The biggest challenge is how to ramp-up and diversify production in the shortest possible time so as to effectively deal with the pandemic across the world. The production gap is most acute in Africa, a continent that imports 99% of its vaccines, according to the Africa Centres for Disease Control and Prevention (Africa CDC). COVID-19 has thus exposed the strategic vulnerabilities of many countries, especially Africa and no country or continent can solve this alone. What is required is global cooperation.

9. The proponents of the TRIPS Waiver understand and appreciate the role of IP to research and development (R&D) and innovation, including in the context of pharmaceuticals products. However, we are also reminded by what we as the WTO membership said in the Doha Declaration on TRIPS and public health. In that Declaration we stated that "we recognize the gravity of the public health problems afflicting many developing and least developed countries, especially those resulting from HIV/AIDS, tuberculosis, malaria and other epidemics. We stress the need for the WTO Agreement on TRIPS to be part of the wider national and international action to address these problems. We also recognize that IP protection is important for the development of new medicines. We also recognize the concerns about its effects on prices. We agree that the TRIPS Agreement does not and should not prevent members from taking measures to protect public health. Accordingly, while reiterating our commitment to the TRIPS Agreement, we affirm that the Agreement can and should be interpreted and implemented in a manner supportive of WTO members' right to protect public health and, in particular, to promote access to medicines for all."

10. The United States Trade Representative (USTR) put it well in the meeting the Director-General organized on 14 April 2021 when she said "the Doha Declaration on the TRIPS Agreement and Public Health, for example, was born out of the HIV/AIDS crisis, and we all – both in government and in the private sector – need to do our parts to live up to its spirit." There is no better time to do that than now.

11. The COVID-19 pandemic is an unprecedented global public health crisis and we need extraordinary measures and strengthened international cooperation to break the transmission chain globally. No one is safe until everyone is. Timely, affordable and equitable access is imperative for restoring economic recovery and protecting lives. Nationally focused responses, business as usual approaches and dependence on market-based solutions have proven inadequate as an effective response.

12. We stress that the Waiver is an exceptional, temporary instrument that will unlock global production. The co-sponsors are ready to negotiate a balanced instrument that ensures that IP and innovation is utilized for the global good. We would like to emphasise that Waivers are part of the legal architecture of the WTO and granting of Waivers is nothing new in the WTO, including in the context of the TRIPS Agreement.

13. It will ensure in accordance with the TRIPS Agreement that IP is used for the mutual benefit of producers and users of IP. For countries that do not have manufacturing capacity at all, it could open up more supply options so they do not have lock themselves to one or two companies through licensing agreements.

14. As the UN Secretary General said on 17 February 2021, if the virus is allowed to spread like wildfire in the Global South, or parts of it, it will mutate again and again. New variants could become more transmissible, more deadly and, potentially, threaten the effectiveness of current vaccines and diagnostics. This can prolong the pandemic significantly, enabling the virus to come back to plague the Global North. It will also delay the world economic recovery. At this critical moment, vaccine equity is the biggest moral test before the global community.

15. The scope of the Waiver has been carefully thought to ensure that it will enable production of vaccines, diagnostics and therapeutics. The scope takes into account the different aspects and categories of IP that are vital to making medical products that are a necessary response to fighting COVID-19 such as vaccines which include know-how, trade secrets, and data. Hence the importance of undisclosed information, patents, copyright, and industrial designs.

16. As we engage in the discussion, we need to note the cost to the global economy arising from an ineffective response to the pandemic. The IMF estimates the pandemic costs the global economy USD 28 trillion in lost output by 2025.

17. In conclusion, in relation to how we can move forward, we would welcome an opportunity to present the Revised text once concluded to Members before the formal meeting scheduled in June and we will work with you on the timing of such a meeting in May 2021.

1.2 Egypt

18. As is spreading in the international news, a country like India is facing a tsunami of COVID-19 cases, reporting one death in Delhi every four minutes. And the situation in many other parts of the world is not much better, recording more than 150 million coronavirus cases and a death toll exceeding 3 million globally.

19. As rich nations are vaccinating one person every second, the majority of the poorest nations are yet to give a single dose. If vaccine inequality is to continue, and high income countries were to construct fences to separate themselves from the rest of the world, and focus only on vaccinating their own people, the mutations and variants of the virus elsewhere will nevertheless come back to haunt them and the global pandemic will certainly get worse, and the losses would grow exponentially.

20. I recall here what Kristalina Georgieva, the Managing Director of the IMF, said while addressing the WTO event on COVID-19 and Vaccine Equity two weeks ago: that the forgone opportunity for the continuation of this crisis is estimated to reach USD 9 trillion for the period 2021-2025.

21. In this regard, I would like to reiterate what Egypt and other Members asked for during last TRIPS Council informal meeting seeking the assistance of the Secretariat for compiling the available data resulting from the sequence of events that we had recently on the 8 and 9 March, as well as the event on 14 April, as a part of the monitoring role of the WTO, with regard to the status of voluntary licensing, and the forecasts for the additional capacities to leverage the global manufacturing capacity.

22. It is obvious that the current global manufacturing capacities are insufficient for accelerated immunization across countries all over the world in the short-term. Moreover, the growing vaccine inequality is impeding the current multilateral efforts to contain this pandemic.

23. As noted by previous colleagues, the co-sponsors of the TRIPS waiver are currently reaching out to other Members to take their concerns on board, while amending the waiver proposal and call for informed text-based negotiations.

24. So let's give the TRIPS waiver a fair chance amongst other alternatives we are currently exploring to contain such an unprecedented crisis. We need to insure that IP rights are not creating barriers to access to medicine, vaccines, diagnostics and therapeutics, while at the same time keep the motivation for R&D.

1.3 Bolivia, Plurinational State of

25. We would like to welcome the report prepared by the Secretariat and would also like to thank you Chair and to congratulate you for taking up your position. We would also like to welcome this additional session of the TRIPS Council because this is an extremely important topic for the entire humanity. Every day it is clearer that we are going through a multidimensional crisis and it seemed that we are still far from being able to solve it, because of the slow speed at which vaccines are being produced.

26. As was expressed by South Africa, we in developed countries see one out of every four inhabitants that have been vaccinated, and in developing countries one out of every five hundred. If this continues at this rate then it is going to take years and years to produce the doses that we need if we are to produce enough to immunise 70% of the population and to finally be able to overcome this pandemic. Now there are many inequalities. I think we all agree on that. Let's prove that the distribution of the vaccine and access for nations for developing countries. This has been unequal and it shows the worst side of world capitalism where only those who have the right to health are able to access it.

27. Now we can see that there is a need, and an essential need, to be able to establish a humanitarian waiver, if you like, through these IP rules which would allow the capacity to manufacture the vaccines and therefore to achieve the objective that we all want, which is to preserve the lives of human beings. We would like to reiterate the urgency of adopting timely and appropriate measures so that the privileges and the rights which are recorded to pharmaceutical

industries do not override the rights we have to life, to health, the right to develop our economies. For all population, the world over.

28. Finally, I wanted to express the fact that it is very important to take action, not only in terms of discussions, we are concerned at the fact that from countries continue to bring up questions once and again within this pillar of the process for decision making. We are simply putting off a decision which is dealing with human lives and we cannot tolerate any further delay to these discussions. We need to take urgent action. All Members have a responsibility in our hands that the decision that may be adopted within this Council may change the reality experienced by millions of people on the ground throughout the world and allow us to move towards an economic recovery.

29. We should like to reiterate our request to the Secretariat for a data collection that is supposed to be carried out about the number of voluntary licenses granted for the production of COVID-19 vaccines, and in previous meetings we have also expressed our position on India's and South Africa's proposal, which we will also co-sponsor about the need to move to textual negotiations.

1.4 India

30. Thank you Chair for convening this meeting and for your status report to GC. India supports the report which is a factual compilation of the discussions on waiver since March.

31. As we meet, COVID-19 cases have risen exponentially to around 150 million with more than 3 million lives lost.¹ And while we have been debating the waiver proposal since seven months now, we have already lost trillions of dollars of economic output, hundreds of millions of additional vaccine doses that the enhanced manufacturing from the waiver could have generated and yet, unfortunately, some of us are yet to realise the importance of timely response to this alarming situation while thinking about future pandemics. The World Bank in a January report warned of "a decade of global growth disappointments" unless corrective action is taken. It estimated global output was on course to be 5% lower by 2025 than its pre-pandemic trend. Predictions are that COVID-19 will leave long-lasting symptoms, for the global economy once this year's V-shaped rebound fades.

32. While USD 26 trillion worth of crisis support and the arrival of vaccines have fuelled a faster recovery than many anticipated, the legacies of stunted education, the destruction of jobs, war-era levels of debt and widening inequalities between generations and geographies will leave lasting scars. The absence of foreign tourists is leaving a hole in countries' economies that locals can't fill, raising the prospects of double-dip recession. Global retail spending has lagged the broader recovery owing to lack of consumer confidence, which can't be ensured without timely access to vaccines and therapeutics to all.

33. We all agree that our shared primary objective is to rapidly enhance the global manufacturing capacity and the events of past few weeks have shown us that there is vast unutilized production capacity. In the last informal open-ended meeting of 22 April, along with few other Members, we had proposed that the Secretariat do a data compilation exercise, for transparency purpose, as to how many voluntary licensing agreements have been achieved as an outcome of the two events with pharma companies held on 8-9 March and 14 April, how many more vaccine doses have been/will be added to the overall capacity and how much of such doses have been actually delivered. We appreciate the update from Secretariat in this regard and look forward for such a compilation at the earliest, which could then be reviewed periodically, perhaps on a monthly basis. It would be useful if Secretariat could provide us a timeline as to when such a compilation would be made public.

34. Some delegations had posed questions on the implementation of the waiver, which we believe will depend on the final text of the decision and can be better addressed through text-based negotiations. With respect to the question of legal inconsistencies among trading partners due to waiver being optional, we are of the view that the current TRIPS rules and the uncertainty with respect to the patent landscape is creating an unpredictable environment for manufacturing and supply. For instance, how each element of Articles 31 and 31*bis* is implemented varies from country

¹ <https://covid19.who.int/>

to country. This creates legal uncertainty due to varying administrative and legal procedures, which in turn can erect a barrier for manufacturing and delay supply.

35. On the contrary, the waiver implementation would be a one off measure for a set duration, which increases certainty and predictability. If partnering countries invoke the waiver, it could help to level up the divergence of national procedures of using Articles 31 and 31*bis*, and remove uncertainties in cross-border collaborations. Since members can opt out from a waiver option, certainly, for Members who choose not to use it, they may not benefit from it, but it would not preclude other members who may choose to use the waiver to support quicker response, form coalitions and build up scales in production and supply.

36. Regarding next steps, as indicated in the previous meeting, the proponents have been working on a revised text of the Waiver in which we are looking at a pragmatic approach to scope and a specific duration of years based on scientific and epidemiological data as to how long it will take for the whole world to get the vaccines. Apart from this, we are trying to reflect the current developments in terms of mutations and emerging variants of the coronavirus. Currently, we are in the process of bilateral consultations with Members from both sides and will be in a position to finalize the text after incorporating the feedback received from Members bilaterally, in the near future. We could consider convening a TRIPS Council meeting in second half of May to discuss the revised text, should the Members show their willingness to have good-faith engagement on the text. It is time to come out of the circular discussions that we have been having in past few months in this Council and agree on text-based negotiations with an aim to find a common landing zone.

1.5 Maldives

37. I wish to thank the delegation of India and South Africa for their leadership in the work to set up a waiver from certain provisions of the TRIPS Agreement for the prevention, containment and life-saving treatment of COVID-19. We would also like to thank the growing number of co-sponsors for this initiative, which demonstrates the importance given by WTO Members to this proposal.

38. One year into the pandemic, we have been fortunate to have eight COVID-19 vaccines approved by WHO for use in various countries across the globe.² It is a tremendous achievement to have a selection of mRNA and adenovirus vaccine candidates approved within such a short period of time. Given this present context of the global emergency, it is important for the WTO Members to work together to address the challenges of vaccine scarcity, to provide equitable access and distribution of vaccines. A concerted effort among all Members are needed to overcome barriers related to affordable medical products including vaccines and to scale up vaccine manufacturing and roll-out of vaccines as quickly and widely as possible. It is important to utilise excess capacity that currently exists in many countries to produce vaccines. For these reasons, the Maldives would like to reiterate our support to the exceptional waiver mechanism proposed by India and South Africa and calls on fellow Members to agree to go for text based negotiations on the proposed TRIPS waiver as a way forward in the current negotiations and to effectively combat the COVID-19 pandemic for the benefit of all.

1.6 Tanzania on behalf of the African Group

39. I am delivering this statement on behalf of the African group. The group would like to thank you for convening this meeting and your tireless efforts to facilitate formal and informal discussion on TRIPS Waiver for COVID-19.

40. The world is still battling with COVID-19 pandemic which has brought about unprecedented challenges that need our urgent response to contain it. All members in particular developing countries want to ensure that COVID-19 vaccines and therapeutics are accessible and available at affordable prices in order to protect their entire populations.

41. However, the current inequitable distribution of vaccines and other medical products is hindering the efforts to control the pandemic and the situation is worsening. High income countries are

² https://extranet.who.int/pqweb/sites/default/files/documents/Status_COVID_VAX_14April2021.pdf

vaccinating at a rate 25 times faster than the low-income countries. This trend is worrying and needs our urgent attention as an organization that oversees fair and equitable trade.

42. The current approach to production and supply is dependent on voluntary bilateral manufacturing agreements, wherein the technology holding company maintains the intellectual property monopoly and decides how and where they want to produce and supply. This scenario is failing to mobilise global production capacity and is contributing to the inequity hence prolonging the pandemic which is costing many lives.

43. While everyone agrees that no one is safe until everyone is safe, there has been a serious lack of global solidarity and collaboration to scale up global manufacturing and supply of vaccines to meet the urgent needs and growing demand of developing countries and least developed countries.

44. India and South Africa submitted the TRIPS waiver proposal on 2 October 2020. Six months later, this proposal has grown from strength to strength attracting 60 WTO Members co-sponsoring the proposal and many other WTO Members supporting it. The proposal has received numerous global endorsements from civil society, world leaders, Nobel laureates, academics, US law makers, members of Parliaments across the globe such as EU, South Korea and etc, all of whom recognize the need of lifting intellectual property monopolies to provide freedom to operate, and more open sharing of technology and know-how that will support the scaling up manufacturing, wherever possible, of COVID-19 therapeutics, vaccines or other related medical products.

45. Unfortunately, a handful of members are intentionally delaying the decision of this crucial matter to be made, irrespective of the overwhelming support it has gained. Since October 2020, we have been engaging in circular discussions in the TRIPS Council meetings as well as in small group meetings, as a result we have allowed the virus to transform itself into many variants. The proposed waiver was expected to be WTO's contribution in the containment of COVID-19 through relaxation of Intellectual Property Rights on production of vaccines and therapeutics. The prolonged discussion on the waiver is a clear sign of WTO inability to resolve matters of great importance to the membership.

46. The African Group would like to once again stress that the virus and its mutations have no boundaries, as the large parts of the world remain unvaccinated, more infectious variants will continue to circulate, and hence no country will be truly safe. Continuing with debate on the waiver while our population remains unsafe is a self-defeating agenda. The only swift solution to contain and eradicate the virus is to enhance global solidarity in scaling up and diversify global production and supply of vaccines and treatment thereof.

47. In conclusion on behalf of the Africa group I would like to once again reiterate our call to initiate text-based negotiations with a view of closing this matter as soon as possible. We would like to urge Members who still have concerns on the draft, to constructively engage in the negotiations to conclude this matter.

1.7 Chad on behalf of LDC Group

48. The 2020 UNCTAD report on least developed countries (LDCs) makes it clear that the economic crisis caused by the COVID pandemic has highlighted the fact that the LDCs are confronted with the worst economic performance for 30 years.

49. This difficult situation has led to significant consequences, involving a 35% increase in extreme poverty in the LDCs, with an additional 32 million people pushed into extreme poverty in 2020 in the LDCs, reaching a total of 377 million.

50. The social and economic consequences of the COVID-19 crisis continue to ravage the whole world, disproportionately affecting the most vulnerable communities, in particular LDCs.

51. Calls for international solidarity in pursuit of global public welfare have been made, but what we have observed so far above all is vaccine nationalism, hoarding, and restrictive voluntary bilateral manufacturing agreements concluded on the basis of intellectual property monopolies, which artificially limit production and supply.

52. Most LDCs lack manufacturing capacity and rely on the COVAX mechanism and other manufacturers, particularly in developing countries. As supply depends on a small number of manufacturers, the supply needs of the LDCs are not covered.

53. The WHO Director General emphasized that "on average in high income countries, almost one in four people has received a vaccine. In low income countries, it's one in more than 500." It is clear that this gap is colossal. The COVAX mechanism itself has delivered only 49 million doses of vaccine.

54. In October 2020, the UNCTAD trade report concluded that "middle and low income countries have been largely priced out from access to COVID-19 related products" and that "only a tiny fraction of the additional world production of COVID-19 related supplies have reached low income countries." The inequality of access is a matter of concern.

55. And this inequality seems likely to continue. We learn that while COVAX and the LDCs are struggling to obtain vaccines for 2021, some WTO Members are already reserving their future vaccines in advance, until 2023 and possibly even beyond.

56. It is equally worrying that despite a long period of discussions on a realistic and pragmatic proposal, which has generated massive support throughout the world, the TRIPS Council has not yet taken an important decision because some Members are not yet ready to move forward on the issue, despite the detailed responses provided by the co-sponsors to the questions raised.

57. This is a matter of common sense, as highlighted by the Nobel Prize winner for economics, Joseph Stiglitz, in his editorial entitled "Preserving intellectual property barriers to COVID-19 vaccines is morally wrong and foolish".

58. If we want to expand manufacturing and diversify supply options, intellectual property monopolies must be removed, potential manufacturers must be free to operate, and there must be no legal barriers to cooperation and collaboration.

59. We need to move on to text-based negotiations with the utmost urgency. Legitimate questions and the reluctance of some Members should not take precedence over the unfulfilled global needs of the majority, in particular the LDCs. There is now a clear imbalance and unfairness that is becoming a recurring trend.

60. We believe that the WTO has a moral responsibility to take priority action and finalize discussions so that we can take active steps to intensify manufacturing, diversify supply and bring this pandemic under control.

1.8 Pakistan

61. Thank you Chair for convening us once again on this all-important matter. Congratulations on your formal appointment and we look forward to working with you. Pakistan wishes to recall and place on record all its previous statements on this issue in all previous formal and informal meetings of this Council.³

62. Every time we convene on this issue, the global situation has deteriorated further. And before we are told that things have improved, I would urge Members to look towards South Asia and South America where huge populations are in a spiral of mutated viruses and a dearth of vaccines, medicines and equipment, causing deaths in hundreds and thousands every day! The situation is

³ Pakistan's statements on this issue at formal meetings are contained in the record of the formal TRIPS Council meetings of 15-16 October and 10 December 2020 (IP/C/M/96/Add.1), of 23 February 2021 (IP/C/M/97/Add.1), and of 10-11 March 2021 (IP/C/M/98/Add.1). In an informal open-ended meeting of the TRIPS Council on 22 April 2021, Pakistan made the following statement:

"Pakistan joins statements made by co-sponsors and supporters of the waiver proposal that have spoken before us. We would like to welcome the new co-sponsors and the support they are building around this important issue. Pakistan has been a long-standing *demandeur* for text-based negotiations on the proposal and we welcome all the efforts and calls for beginning text-based discussions on this proposal. We would also support the calls for compiling data on the voluntary licensing events that were held on the 8 March and 14 April 2021. There will be no need to remind delegations how important this issue is and that we need to move towards an outcome on this waiver based on the text at hand."

presenting similar problems we had predicted in our previous interventions in case business as usual continues.

63. So, from where we sit, the variants and mutations are increasing, and the critical shortages in the supply of vaccines and essential medicines is becoming more acute. According to a latest report by Bloomberg, if the number of infections caused by new variants continues to outpace the number of people being vaccinated, we might need to start preparing for a 'permanent pandemic'. The UN Secretary General informed us in February that 75% of the vaccinations had been administered in just ten countries across the world, while more than 100 others had not yet received a single dose.

64. While the idea of a 'permanent pandemic' may not ring alarm bells in those ten or 15 countries receiving all the vaccines just yet, it may be important to reiterate the hackneyed phrase, no one is safe, until everyone is safe!

65. While we are asked repeated questions regarding the waiver, which we have answered in great detail and depth, some of our questions are still outstanding regarding the alternatives to waiver we have often been presented. For instance, how can 'voluntary' sharing and transfer of technology be ensured? Given that such voluntary sharing has only been possible by the private companies in an arbitrary, and selective manner, how would members proposing this way force those companies to 'voluntarily' share their technology? According to latest news, some of the pharmaceutical companies holding the rights are already urging people to prepare for third booster doses and a long-lasting pandemic where vaccination will be needed quite often. How would they be willing to let go of their profits and share their technology for mass production?

66. We will not go into further detail on the repeated arguments. We have been engaging with Members bilaterally to learn more about how to move this issue forward in good faith. We have taken their views into account and are working towards a revised proposal particularly in terms of scope and duration based on scientific evidence. We appreciate the efforts of the Secretariat on the compilation of the data and urge them to prepare the reports as soon as possible.

67. In light of this urgency and importance of the matter, we put it once again to the membership, to reflect on their positions on this waiver and come together to commence text-based discussions to find a solution sooner rather than later. Pakistan stands ready to engage in text-based discussions, at any level of formality on the text of the proposal with whichever members willing to do so.

1.9 Zimbabwe

68. Chair, first of all very warm congratulations on your election. Thank you for convening this meeting and thank you for your report.

69. Further to the intervention made by her Excellency the Ambassador of Tanzania on behalf of the Africa Group which we fully support, we take the floor to once again express our very strong support for the TRIPS waiver proposal as initiated by South Africa and India the previous year.

70. This is a request which, since October 2020, has gained significant support both from within the WTO membership, from literally hundreds of civil society organizations and from an increasingly long an impressive list of high-profile personalities across all spectrums of society.

71. This is a legitimate request, based primarily but not uniquely, on the moral or ethical imperative that all efforts must be made, and all possible avenues pursued, by all of us to get on top of this pandemic. Whatever motivation might be fuelling resistance or opposition to the waiver surely has no place within our collective efforts to deal with COVID-19. Just look at the daily statistics, not just of the COVID infections and deaths, but of the massive collateral damage that is being inflicted upon economies, employment, incomes and livelihoods across the globe and the tens of millions regressing to extreme poverty the status.

72. The recent 2020 World Bank report entitled 'Reversals of Fortune' I think is highly instructive in this regard. I think it has already been mentioned by previous speakers, the Director-General in recent consultations with big pharma revealed a multitude of existing facilities in various parts of the world, which with some calibration and support could be repurposed to help boost production and distribution of vaccines. We accept, of course, that there are a range of other impediments to

ramping up production and attaining a more equitable distribution of vaccines which also need attention, but we see no reason why these issues cannot be addressed in parallel with the waiver request.

73. The objective must be to significantly boost production and to significantly democratize distribution of the vaccines, and the waiver option would certainly help in this regard. With regard to the way forward, our Delegation also supports the proposal to the Council, after multiple sessions where information and views have been exchanged, where questions have been asked and answered and where clarifications have been sought and provided.

74. We believe the Council should move to text-based negotiations, which are surely our logical next step towards finding a practical solution to this burning issue of vaccine equity - an issue which in the recent words of the Director-General of the World Health Organization himself constitutes the challenge of our times. So we fully support the move towards text-based negotiations. And I think we take comfort from your assessment so that there appears to be general willingness to find a workable solution to this now extremely urgent issue.

1.10 Bangladesh

75. As it is the first formal meeting of this council, the delegation of Bangladesh congratulates you for your election as the TRIPS Chair and you can count on our full support. Bangladesh endorses the draft statement presented today which will be further delivered orally at the General Council by the TRIPS Council Chair.

76. My delegation endorses the statement delivered by Chad on behalf of the LDCs. With all the co-sponsoring Members, including the LDC Group, Bangladesh attaches high importance and welcomes discussion of the proposal contained in document IP/C/W/669. Bangladesh also commends India and South Africa for taking leadership on this important proposal.

77. My delegation believes that the issues of public health are concerns for everyone. We live in an interdependent world and therefore, a threat to public health in one society puts humanity at risk everywhere. The ongoing pandemic has already done enough damages and the LDCs particularly are the hardest hit. A large number of countries, including the LDCs, are facing severe challenges of accessing timely and affordable vaccines and therapeutics against this virus. Several new variants of the virus are threatening us. The priority now is to ensure unconditional, affordable, equitable and timely access to vaccine, required medical equipment other curative measures to stop the pandemic. The TRIPS or any other regulatory framework should not be brought as a hindrance to the most urgent needs of the humanity today.

78. As the way forward, my delegation supports that a text-based discussion should begin very soon based on the forthcoming revised text as proposed by the proponents. The delegation of Bangladesh thanks the WTO Secretariat for initiating compilation of necessary data regarding voluntary licencing and production and distribution of vaccines. My delegation looks forward to engaging constructively with Members and once again requests a favourable consideration of the proposal.

1.11 Nepal

79. First, my delegation would like to congratulate you Chair for this new role and wish you a successful tenure. I thank you Chair for your report and thank the Secretariat for the update. My delegation wishes to associate with the statement delivered by Chad on behalf of the LDC Group.

80. I would like to refer to Nepal's statements delivered earlier in various meetings on this waiver proposal and reiterate our full support to this proposal for the benefit of the people at large across the globe.

81. The COVID-19 pandemic has posed further challenges to us through its different waves and variants. We, LDCs and LLDCs, are much severely impacted by the pandemic. The huge support by significant number of delegations in all the meetings and strong and supportive arguments expressed outside the WTO system demonstrate an urgency of this matter to consider positively through this body.

82. All the concerns raised on the proposal have been well-responded by the proponents and I believe that no further justification is needed. It would not only help save life of millions of people across the world but also contribute to the global economy in this pandemic situation. Therefore, my delegation urges all Members to positively consider the proposal.

1.12 Saudi Arabia, Kingdom of

83. The Kingdom of Saudi Arabia thanks the proponents for their proposals and emphasizes the importance of TRIPS Agreement's principles and the provisions in protecting intellectual property rights.

84. The COVID-19 pandemic has severely affected every country, no one has been spared. In these difficult times, we all have a collective responsibility to overcome this pandemic and to make vaccines available to everyone across the globe at affordable prices.

85. While understanding that intellectual property rights granted legal certainty to support innovation, Members should also ensure that intellectual property rights should not pose an obstacle to enhancing the production of vaccines for non-commercial purposes and to ensure equitable access to them and other essential supplies across the globe.

86. In this regard, the Kingdom of Saudi Arabia urges all Members to move forward towards text-based negotiations in order to reach consensus as soon as possible.

1.13 Tunisia

87. We congratulate you, Chair, on your appointment and thank you for your report and for your efforts to facilitate trade and bridge the positions of Members.

88. My delegation endorses the statement made by Mauritius on behalf of the African Group and thanks the proponents for their tireless efforts to provide relevant arguments and the assurances necessary to convince certain Members, which remain sceptical, about the vital objective of this initiative, which is to save lives by providing fair and affordable access to vaccines and other medical products necessary for the prevention, containment and treatment of COVID-19.

89. If there has been a subject of convergence so far, it is the disastrous health, economic and social impacts of this pandemic, but also the recognition that all efforts made by the international community, the generosity of some donors and the mechanisms in place at the international level to address vaccine-access challenges, such as the ACT-A and COVAX initiatives, remain insufficient. This failure has been observed by the agencies leading the fight against the pandemic, in particular WHO.

90. Tunisia, which was one of the first countries to contain the first wave, by prioritizing, and rightly so, public health and compliance with health recommendations, and by redirecting its limited resources to the fight against the pandemic, has been unable to continue to effectively address the recurrent waves of new COVID-19 variants. It is now experiencing a severe health crisis with some of the highest mortality rates, which is weakening the already fragile health, social and economic system. This is mainly due to a low vaccination rate of no more than 1% of the population, despite the preparatory, administrative and regulatory efforts and financial sacrifices made by the Tunisian Government. This is unfortunately the case for over 80% of countries whose vaccination rate has not exceeded 10% of their population.

91. Consequently, the sincere commitment made by the Members and companies monopolizing licences to increase production and to respond effectively to the needs of all, has instead turned into commercial speculation and disputes before the courts for non-compliance with deadlines.

92. This demonstrates that the intellectual property protection system, while effective in promoting research and innovation, has proven to be limited in the response to such an exceptional situation.

93. In this regard, the proposed waiver under discussion serves as a reminder of the foundations of the Doha Declaration on the TRIPS Agreement and Public Health, prioritizing the protection of global health and the promotion of access to medicines for all. WTO Members have a duty to demonstrate

the solidarity required in this exceptional situation. We highlight the targeted time-bound framework for this initiative, and urge Members to engage in constructive negotiations on the basis of a text to bridge positions and try to provide an effective and fair response to the pandemic.

1.14 Nigeria

94. We would like to thank you Chair for convening this meeting. We would also like to thank other co-sponsors for leading these discussions. Access to COVID related medicines and equipment continue to be an issue for developing countries like ours. IP rights also remain a barrier to scaling up manufacturing capacities in developing countries on COVID related items.

95. We thank the membership for their various efforts in distributing COVID related medications however, the quantities received for instance in Nigeria are not nearly enough to service the population.

96. Since the inception of this proposal by South Africa and India, the proposal has gained a lot of traction given its importance to access to COVID vaccines and equipment. Up to 60 WTO Members are now co-sponsors, with many more WTO Members and external groups and sectors openly voicing their support of the waiver. This shows the critical importance and the urgency in entering into text-based negotiations on the various aspects of the proposal.

97. Finally, we would like to encourage members to regress from circular discussions that seek to delay the process of negotiation and adoption of the waiver, and move to text based negotiations towards finding a multilateral solution to ensure timely, affordable, and equitable access to vaccines, therapeutics and diagnostics, because no one is safe until everyone is safe.

1.15 Sri Lanka

98. First let my delegation congratulate you on your election as the Chair of this Council at this very crucial juncture, and equally wish to commend my dear colleague Ambassador Xolelwa Mlumbi-Peter for her contribution made and services rendered to this body. By saying it, my delegation's support is extended to you at all times.

99. My country's situation in relation to positive cases is becoming dreadful, having reported over more than 1,000 cases per day consistently for the last one week. This is unprecedented and hospitals in populated areas are witnessing stressed situations in terms of the occupancy rates. This is despite having vaccinated a sizable population in mostly concentrated and densely areas.

100. The AstraZeneca vaccines, which have already been administered to close around 1 million people in Sri Lanka, including frontline and health workers, are responding well to the new variant of COVID-19, which is rapidly spreading in the country at present, indicating that the country is going through its third wave.

101. Officials said that to date, there had hardly been any cases of those who had received the first dose of vaccination to have contracted the new variant of the COVID-19, but in future, even if they do face a threat of being infected, they will have a very low chance of advanced disease or complications.

102. Basically all the vaccinations which are available in the world today are responding well to all the variants of the COVID-19 including the mutated versions. In fact a recent study carried out by one of the Universities in Sri Lanka shows that those vaccinated have better immunity than even those infected. That is why it is extremely important that everyone is vaccinated, vaccinations coupled with other health measures are the only way out for us.

103. Meanwhile, as discussions continue to purchase more AstraZeneca doses, health experts said that with more mutated versions now spreading rapidly globally, a third vaccination dose known as the 'booster' might need to be administered in the future. Experts were discussing this possibility and we heard that manufacturers are gearing up to cater to the third vaccine.

104. Sri Lanka has been working closely with India to sign agreements to purchase adequate doses from the Serum Institute in India under commercial terms, as this generic version AstraZeneca vaccines can be procured at rates affordable to our government.

105. But due to the current situation in India, our friendly neighbour, which is around the clock trying hard with much vigour to contain the spread the infections and save its population, we are not certain whether Sri Lanka will be able to procure the required amount to vaccinate at least 44% of our population while also using the doses assured under the COVAX initiative.

106. In instances where no patent holder of available vaccines is willing to negotiate provision of the required doses to Sri Lanka at rates affordable to us, Sri Lanka is seriously mulling over as to how it can import and procure the vaccines under compulsory licenses.

107. This is because, Sri Lanka has not introduced the required amendments to its National IPR Act to give effect to the Article 31*bis* of the TRIPS Agreement. This is aggravated further, knowing well that Sri Lanka is also not having clear provisions to procure the vaccines under parallel imports (under Exhaustion of IP rights), even if there are vaccines available in other third country markets, which we know will not be realistic at present given the severe shortage prevailing on the supply side.

108. I am therefore conveying the situation, which my country will be facing very soon, if we do not have a multilateral solution by way of this waiver to address the difficult situation likely to be faced by countries such as mine. If we cannot have a solution to this impasse soon, Sri Lanka may be compelled to submit a country-specific request to the WTO seeking to waive its relevant TRIPS obligations, enabling it to take an array of measures, including issuance of compulsory licenses to those generic manufactures in the world who can supply the required quantities at this time of the hour.

109. As we know there are generic manufactures having manufacturing capacity, who can cater to our requirements, provided they are permitted to do so under compulsory licences which Sri Lanka will be able issue under the waiver. Any delay in launching such initiatives by my government will have severe and unimaginable consequences on my country.

110. We are very certain that the waiver proposal promises to help large populations in developing countries and particularly countries such as mine not having manufacturing capacity hence is compelled to rely on imports, but would also allow export of medicines and medical equipment to other needy developing countries in the future where demands could remain unfulfilled otherwise, if we can gradually build the production of capacity over the years.

111. It is high time we listen to the countless calls outside the WTO premises from all walks of life, for global solidarity and cooperation to help fight the pandemic which threatens humanity. We are open and look forward to more meaningful engagement from members at this juncture, that aims at finding constructive solutions to address this issue.

112. We have had sufficient and lengthy debate on the issue of the waiver. The co-sponsors made the case in great detail describing the various challenges and problems which necessitate this waiver. The time is now ripe for a more forthright, solution-finding approach, which is to proceed on text-based negotiations based on the texts before us and to be presented sooner than later. This will be the most significant contribution that the WTO could make towards fighting the pandemic, saving human lives and helping lower-middle income countries and LDCs.

1.16 Namibia

113. Let me take this opportunity to thank you for your report and for directing the proceedings for the present TRIPS Council meeting and congratulate you on your role as Chair for the TRIPS Council. Namibia aligns itself with the statement which was delivered by the Permanent Representative of Republic of Tanzania on behalf of the African Group.

114. My Delegation is pleased to be among the co-sponsors for this proposal and fully supports a call for text-based negotiations with a view to achieve a balanced outcome of the waiver on certain provisions of the TRIPS Agreement for the prevention, containment and treatment of COVID-19.

115. The current rate of the vaccine production and distribution calls for concern. We need to find an urgent solution to the rapid scaling up of manufacturing to address capacity and supply constraints of the COVID-19 vaccine in order to save lives. Lives that are being lost on a daily basis. As net importer of medicine, Namibia reiterates its position in support of the proposal of the TRIPS waiver and implores other Members as a matter of urgency to support this proposal.

1.17 Fiji

116. Fiji expresses its support calling for the need to move forward and conclude this phase of negotiation for a decision on this IP waiver proposal. The wrath of the COVID-19 and its evolving mutation as well as the necessary tools to combat the continued evasion of the pandemic into our society needs to be put to a halt through a means from the WTO. The continuous mutations and emergence of new variants of COVID-19 highlight the significant uncertainties and complexities of controlling this pandemic which underscores the urgency of this decision paper to be reviewed and finalised sooner. The concern and urgency as mentioned have been reflected and accommodated in the preambular paragraph of this revised draft decision paper.

117. We have noted that the COVAX Facility despite its critical role, still falls far behind in terms of its perceived target of purchase and vaccination coverage. This is due to numerous factors most of which are well known which is closely related to production and supply chain limitations. Thus, it would be unwise for the global community to remain solely reliant on a single arm or entity to answer the global surge in demand especially so for the developing Members who are still far behind.

118. The rate of vaccine coverage remains unequal for all societies some of which are quite more fortunate than others. This deficiency requires global and multilateral collaboration and efforts not only in funding the COVAX facility but more so in other innovative measures to boost the production and supply of COVID-19 preventative tools to strengthen public health measures. Fiji is thankful to its neighbours Australia, New Zealand, India the WHO and partners for their continued assistance to Fiji and the Pacific in these recent weeks, however we are equally mindful of our small island developing states community likewise those developing members who are still far behind in their vaccination.

119. Further we are not only talking about vaccine, we need to think of all other tools such as therapeutics, diagnostics, PPEs and so on which needs to be diversified and scale-up to curb the evolving mutations and to sufficiently equip our various health centres and bring confidence back to our public health facilities and economies. All this has been addressed amicably in the preambular section of the draft decision paper.

120. In terms of multilateral cooperation, we have heard in addition to the co-sponsors, the wide spectrum of support of the international organisations, and worldwide support from the general public. Thus, it's only fair that we give a chance to the WTO and all its Members to progress forth together in solidarity.

121. Vaccine is a global public good. Our economies are fragile and rely on its service sector such as tourism to revive the economy. Without this, reviving the economy would remain challenging and its difficult for the travelling public, including investors to find confidence in any economy.

122. The proponents remain flexible to consider views as we dwell on the text to finalise this long-standing discussion in light of the urgent need to act to ensure that no one is left behind.

123. Regarding the process, we have noted the indicative dates of upcoming meetings. However, in view of the textual discussions that need to be pursued, we would welcome comments in any format by delegations. In addition, we would also welcome more regular consultations facilitated by the Chair in various predictable configurations to at least finalise this text to be presented to the July General Council. Beyond the summer break would be quite difficult as we have various other competing priorities to address before MC12. The two months before us we believe should be sufficient to gather comments and responses in view of the urgency.

1.18 China

124. We support the status report drafted by the Chair as it reflects the current discussion status in an objective and neutral way. China is willing to continue to engage constructively and work with other members to find effective solutions to address the proponents' concerns.

125. The TRIPS waiver proposal has been discussed at the TRIPS Council for over half a year and the consultation clarifies relevant matters and helps members understand each other. China thinks that the waiver proposal is an important possible way to improve the accessibility of COVID-19 vaccines. We acknowledge the legitimacy of proponents' requests and appreciate proponents' positive efforts in advancing the proposal. Therefore, we support continuing our discussion on the waiver proposal at the TRIPS Council and stand ready to work with other members with a view to bringing the discussion into the text-based phase and reaching satisfactory outcome at the earliest date. We look forward to a revised proposal to be submitted by sponsors and believe that updating the proposal will be a crucial step to bridge gaps, attract convergence and lay a good foundation for future discussions.

126. We believe the global pandemic requires global response. Recently, China's President Xi emphasized again the importance of international cooperation on the R&D, production and distribution of vaccines at the opening ceremony of the Boao Forum for Asia Annual Conference 2021. We notice with great sympathy that some parts of the world are undergoing an increasingly serious pandemic situation. China is willing to provide aid and support as needed by local people. In addition, China is actively supplying vaccines to middle- and low-income countries, and Chinese vaccine manufactures have established technology transfer and cooperation partnerships with local enterprises in some developing countries. China also provided aid of emergency goods to over 160 countries and international organizations and will continue to make contributions to the global combat against the pandemic.

1.19 Vanuatu

127. I would like to thank you for the report that was presented and we support the report which reflects the factual situation, and the facts that it sets out are much welcomed. We congratulate you Chair for your appointment and we affirm our support to you as you conduct our proceedings from now on.

128. This crisis is a scourge in the human history and we are clearly aware that the speed of manufacturing COVID-19 vaccines we believe must be accelerated. Not only that, but even with the current production, the annual access to the current production is clearly unacceptable. We express our support for the proposal by India and South Africa which aims at vastly increasing the production and allowing the licensing and manufacturing capacity to be fulfilled and to ensure that the vaccine scarcity be addressed. This is not only for the goodness of one country. This is for the good of the global community. We are, for example, a small island and vulnerable country which is already becoming a country that has no access to the vaccines. And if we do not have access to the vaccines as quickly as we can, what does it mean for our local community?

129. We align ourselves with the statement by Chad on behalf of the LDC Group and we call on all Members to support the waiver proposal and we look forward to text-based negotiations that must be conducted as soon as possible.

1.20 Switzerland

130. Thank you, Chair, for consulting with Members the draft for your oral status report on the Council's discussion on this item to next week's meeting of the General Council. We fully support your status report.

131. On the Waiver request, worldwide, the COVID-19 pandemic continues to have far-reaching negative impact on public health, the economic and social well-being. We are particularly concerned about the worrying news from India about the impact of the 2nd wave. The pictures we see and the loss of lives suffered are devastating. The Swiss Government has offered its support to India for its efforts to address this public health crisis.

132. While the fight against the pandemic must be fought on many fronts, clearly, scaling up manufacturing of COVID-19 vaccines to achieve global access as efficiently and effectively as possible must be a priority. Switzerland supports all initiatives and measures, which truly help enable, in a practical manner, to scale-up manufacturing and to advance global access.

133. Among practical and hands on initiatives, I cite COVAX first, the international initiative under the leadership of WHO, bringing together Member states, international organizations and other public and private stakeholders as partners to work together towards the goal of global access to COVID-19 vaccines. The Swiss Government, in addition to its substantial financial contributions of last year, approved last Wednesday, a further 300 Million CHF to support the Access to COVID-19 Tools Accelerator initiative.

134. Vaccine supply chains are international. This is evidenced by the example of the BioNTech/Pfizer vaccine, which contains more than 280 ingredients and components, sourced from 19 countries. Other novel vaccines, such as those from Moderna or Johnson & Johnson are similarly complex. The WTO and its Members have a key role to play in addressing the challenges to scale-up manufacturing.

135. Members can contribute to making increased production and global access happen faster and better with appropriate national policies. For example by way of implementing trade facilitating measures and by avoiding trade-restrictive measures such as export restrictions, tariffs or other administrative measures which come in the way of a smoothly functioning transnational supply chain.

136. The Trade and Health Initiative initiated by the Ottawa Group addresses these factors and promotes transparency in trade-related measures. Generating more information and data along the value chains, in cooperation with the private sector and relevant international organizations, is equally important to better understand the complexity of global value chains for medical goods, including vaccines, and foster efficient and coherent trade policy making.

137. To achieve scaling up of manufacturing in a quick, safe, and effective manner, cooperative and collaborative approaches are in our view most promising. We therefore thank the DG for her engagement and organization of the COVID-19 Vaccine Equity Event on 14 April. Switzerland follows with interest the initiative of the DG to engage the WTO helpfully as a facilitator in bringing together vaccines developers with manufacturers that are qualified for the production of the new COVID-19 vaccines or that can meaningfully contribute to its scale-up.

138. We encourage those delegations who have knowledge about such qualified manufacturing capacity lying idle in their country or region, to come forward with this information, in a substantiated manner, so that it can be fed into this initiative and the further process. For this cooperation, and for the partnerships mentioned, to have a reliable and stable international regulatory framework to build on is an enormous asset. This reliable basis is all the more important in times of crisis, as in a pandemic like COVID-19, where we face manifold new challenges and grapple to keep up with new and serious developments to adapt our strategies against the virus almost every day. The TRIPS Agreement builds such a stable, reliable international regulatory framework.

139. It has been recalled many times in our discussion that the TRIPS Agreement also provides the necessary balance, means and remedies to allow the use of protected content and or product if needed in individual cases. Such legal guidance is needed - and particularly useful - in crises such as this pandemic, in which time is of essence. WTO Members have introduced these rules in the TRIPS Agreement also - and in fact, in part specifically - to take into account public health emergencies. Switzerland fully acknowledges that compulsory licenses are a flexibility that the TRIPS Agreement provides in its Article 31 for Members' use, as also confirmed in the separate Doha Declaration on the TRIPS Agreement and Public Health. Under this article, a compulsory license can be issued promptly and in the case of an emergency, like the COVID-19 pandemic, without prior negotiations with the right holder.

140. We have heard from some delegations that Members may face difficulties in making use of these flexibilities. As others, my delegation is open to discuss difficulties that Members have encountered in practical instances when actually wanting to make use of these TRIPS flexibilities. In reaction to our question in relation to the impact of a TRIPS waiver on existing manufacturing partnerships, South Africa, at our last informal meeting, answered that it expects no impact and that

these collaborations CAN continue; and that, anyway, the proposed TRIPS waiver is proposed for a time-limited duration.

141. However, this response does not allay our concerns. Switzerland is not home to a COVID-19 vaccine developer. However, a number of Swiss pharmaceutical companies are contractual manufacturers and suppliers to foreign vaccines developers. Suspending TRIPS risks throwing into uncertainty also these partnerships.

142. Further, we fail to understand how the effects of a TRIPS waiver could be time limited. In particular, how could inventions made and used during a TRIPS waiver still claim IP protection after the waiver has ended? Technology and proprietary information, once disclosed and shared, can no longer re-enter the status of being "un-disclosed" or "un-shared". Once made public, without IPR coverage, they fall into the public domain. Accordingly, the proposed waiver would have effects and affect the innovation landscape and pandemic preparedness for many years after its effective duration.

143. The global community, the private sector and we as WTO Members must now step up efforts to scale-up global manufacturing of COVID-19 vaccines and to ensure equitable, timely and affordable access. In these efforts, my delegation considers the TRIPS Agreement as part of the solution - and thus, as one tool of a broader toolbox helping us to win the battle against this pandemic.

1.21 Paraguay

144. "None of us will be safe until everyone is safe". This is the phrase that we have heard repeatedly and which makes us question the impact of multilateralism for the benefit of all the countries represented here. We fully agree with the Membership that global cooperation and collaboration are key to addressing the COVID-19 pandemic.

145. However, what must be emphasized is the fact that initiatives such as the COVAX mechanism have proved to be insufficient, and so there is a pressing need for reinforcement and innovation through alternatives that enable a rapid increase in the production of vaccines and their corresponding distribution and use as soon as possible.

146. Paraguay has had limited access to vaccines. However, we must acknowledge the generosity of a number of countries such as Chile, the United Arab Emirates, Russia and especially India, which have worked together with our country in the provision of vaccines, thus contributing to the beginning of the long-awaited immunization of our population.

147. We also understand that the financial contribution of other countries to the COVAX initiative is very important for its functioning, but this financing is of little use if we are unable to access the purchase of vaccines or if they are not distributed fairly, and even more so if emergency situations and the epidemiological characteristics of the moment are not considered in the criteria for distribution.

148. If we talk about financing, Paraguay has paid for the equivalent of 4,300,000 doses – enough to immunize the entire adult population. However, in view of the hoarding of vaccines by just a few Members, so far we have received only 170,400 doses through the COVAX mechanism. Because of this hoarding of vaccines, procurement contracts with COVAX and other suppliers continue to be unfulfilled.

149. Hence, proposals such as that of India, South Africa and the other co-sponsors put forward alternative courses of action and place the debate on the agenda, as reflected in the media around the world. The proposal can, of course, still be adjusted and discussed, but we believe that it is being put forward in the spirit of a joint search for swift responses to this inequality that is worsening day by day.

150. The lack of alternatives in this field and the weak response of the multilateral system today means that some of us Member countries find ourselves in the situation of reassessing our position not only regarding the waiver proposal but also regarding the very relationship between intellectual property rights and their linkage to health as a fundamental right.

151. We appeal to the Membership to intensify efforts to achieve positive outcomes and to recall that Article 8 (Principles) of the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) states that appropriate measures may be needed to prevent the abuse of intellectual property rights by the resort to practices which unreasonably restrain trade or adversely affect the international transfer of technology.

1.22 European Union

152. Chair, please accept congratulations of the European Union on your appointment. We also thank you for the preparation of the status report, which we fully support. We would like to refer to the statement made by the European Union in the informal TRIPS Council meeting on 22 April, which we will summarise to a certain extent today. The pandemic continues and so must our efforts to ensure equitable distribution of COVID-19 vaccines.

153. As we have mentioned in the previous sessions, there are many promising avenues that the WTO can and must take in order to contribute to the objective of equitable distribution of COVID-19 vaccines. The WTO event on equity of vaccine distribution of 14 April has shed further light on the fact that the equitable access requires very close cooperation between governments, regulators, financial institutions and companies themselves to scale up production. To do that a scale-up must take place across the whole value chain. There is a need to have more information about markets, supply chains and government measures. Some of these elements are included in the Trade and Health Initiative proposed by the Ottawa Group.

154. Another element is the collaboration with industry - given the urgency and technical complexity of manufacturing COVID-19 vaccines, governments should facilitate broad and global co-operation between vaccine developers and manufacturers including through transfers of technology and know-how. This is the best way to speed up supply in the EU and globally.

155. While we see the main solution to this crisis in the intensified collaboration with the industry, should the voluntary solutions not be available, we consider that the TRIPS Agreement and the principles of the Doha Declaration can play a role in addressing this crisis. They reflect a careful balance between protecting intellectual property on one hand, which is a crucial incentive to innovation, and promoting widespread access to medicines and health care, on the other hand. This concerns especially the possibility of granting compulsory licences, including for export purposes.

156. We have noted carefully the difficulties conveyed by some Members with regard to the implementation of the TRIPS Agreement flexibilities, and we are ready to discuss ways of overcoming them. Administrative burdens should not stand in the way of manufacturing and delivering vaccines to where they are needed. We are ready to work with you, Chair, on this matter in various formats – small group consultations, informal and formal meetings to advance evidence-based discussion.

157. The EU remains committed to an open and comprehensive dialogue with all WTO Members to explore how the multilateral rules-based trading system can best support universal and equitable access to COVID-19 vaccines and treatments.

1.23 Uruguay

158. The factual report prepared by the Chair and the consultation process among Members reflects how this Council can contribute to the fight against the pandemic. Uruguay is closely following the discussions on how Members can find robust, rapid and universal responses to the COVID-19 pandemic.

159. Our country maintains that the multilateral trading system, and in this case, the matter of intellectual property rights, must be robust and respected. Exceptions should be made on a case-by-case basis and in exceptional circumstances. At this stage of the discussions, we can say that there is consensus for an increased production of vaccines and other medical inputs for treatments. The question is what the best way to achieve this goal is, and part of the answer is for it to have a rapid impact on the lives of our peoples.

160. In this regard, taking into account the TRIPS Agreement and the Declaration on the TRIPS Agreement and public health, Members must make every effort to ensure that the voluntary

transfer of licences and incentives to lower costs through economies of scale takes place in the short term. This transfer must be made on the basis of mutual benefit among the Parties, which is expected to stimulate and fund further scientific research. We consider that strengthening the tripartite dialogue between Governments, patent and licensing developers, and producers is a realistic and practical solution. We also believe that Governments must lead this dialogue, in defence of the rights of their peoples, and through the application of their domestic legal regimes.

161. Let us use Articles 31 and 31*bis* of the TRIPS Agreement, which provide us with tools that are already available. Uruguay is part of COVAX. We thank the Members who have led this initiative and invite them to make it more efficient and truly reach all the countries that have already paid for vaccines and have not yet received them. While the COVAX initiative is the greatest expression of international cooperation in this area, we can all agree that it has not met the expectations of any of the stakeholders involved.

162. In keeping with our dedication to multilateralism, we are willing to sit down to negotiate a text that would enable us to achieve a concrete outcome at the Ministerial Conference in December. As to the format of this text, we will participate in the discussions to assess the best means of action. The WTO must maintain its role of monitoring trade, administrative and technical measures that adversely affect the production and marketing of vaccines and medicines. We invite it to continue coordinating actions with WHO and WIPO.

163. Uruguay understands that there are political and public pressures in each Member State in these challenging times, but this pandemic will not end until the virus is brought under control on a global scale. Nobody is safe until we are all safe.

1.24 United Kingdom

164. As this is the first time this delegation speaks in a formal setting since your election as TRIPS Council Chair, we would like to congratulate you. The UK welcomes the text of the status report and is content for it to be delivered at the upcoming General Council, and we thank you for having consulted the membership on this matter.

165. At the 22 April informal Council and subsequently in writing, the UK shared questions with proponents regarding the proposal's optional national implementation and how subsequent legal disparities would be conducive to certainty for manufacturers. These questions are intended to advance discussions and aid in finding effective solutions. Therefore, we hope for constructive engagement to help achieve our shared aim of increasing the availability of COVID-19 vaccines, diagnostics, therapeutics, and ending this pandemic.

166. Advancing evidence-based discussion complements the global roll out of vaccines. The Oxford-developed and AstraZeneca-produced vaccine is a good example of this unprecedented international effort. AstraZeneca has made great commitments to global equitable access, as demonstrated in their partnership with the Serum Institute of India to provide 1 billion doses to low-and middle-income countries, and the UK government is fully supportive of these efforts.

167. AstraZeneca has already entered more than a dozen collaborations in countries around the globe, for example in China, Mexico, Brazil, Russia, South Korea, and India, to deliver billions of doses. We must now facilitate more partnerships like this to ramp up global manufacturing output. And we must ensure that wider supply chain issues including skills and raw materials shortages plus other trade barriers such as export restrictions do not impact on the ability of these partnerships to deliver. This will require industry, developers, and manufacturers alike, to collaborate in making available the information needed to engage in these effective partnerships.

168. While there is much to be achieved, we are pleased to see recent action to support IP licensing and manufacturing including the signing of non-exclusive voluntary licensing agreements with five generic manufacturers for a COVID-19 therapeutic and ongoing discussions to license this therapeutic through the Medicines Patent Pool. We would encourage such initiatives to continue and to expand in scope. We also note with interest that members are intensively exploring the use of the TRIPS flexibilities.

169. The continued emergence of multilateral initiatives to help prevent, treat, and contain COVID-19 are welcomed by the UK. For example, the announcement of a COVAX Manufacturing Taskforce and the recently announced WHO mRNA technology transfer hub are further steps to ensuring intellectual property continues to be managed to support the global response to COVID-19 while looking at the whole of the supply and manufacturing chain. We continue to encourage the WHO, WIPO, and WTO to work together closely on these initiatives under the auspices of the established trilateral cooperation and beyond.

170. Frequent discussions on the waiver proposal have reinforced all Members share an ambition to end this pandemic as soon as possible. Differences of opinion do though remain as to the most effective means to achieve our shared aim. Through sustained and constructive engagement, we can move closer to ending the pandemic. The UK continues to stand ready to engage further to accomplish this objective.

1.25 Indonesia

171. We would of course join others in congratulating you for your appointment as the Chair of the TRIPS Council. We also appreciate and support your draft oral status report. We would like to support the views of the Co-sponsors on this very important issue.

172. We believe there is no higher right in the world than saving people's lives regardless of their status or citizenship. The opponent of this Proposal believes that there is no sufficient evidence that the Waiver will expand the access of vaccines and other medical products for the COVID-19. Furthermore, the Proposal, they said, will disincentivize innovation in fighting against COVID-19 and any future pandemic.

173. We disagree with such views. The stark evidence in front of us is showing that the current voluntary system is not sufficient. The voluntary global cooperation under the COVAX Facility is also struggling to get enough supply of vaccines, and the C-TAP is sitting idle with no private entities interested. In addition, the vaccine event held by the Director-General has yet to generate real improvement on access to developing and LDCs.

174. Giving the impact of the COVID-19 on our lives and the global economy, there is simply no other way than putting mandatory action to improve access. But we have heard that isolated mandatory action such as in Article 31 and 31bis will not be enough to enhance global enough. Co-sponsors and Indonesia have shown the reasons and examples.

175. The Waiver for certain provision of TRIPS, meanwhile, is indeed not a tested mechanism. But what are our options at this moment? Are we going to wait for market mechanism to increase the supply and access? The history, as has been mentioned by the Ambassador of South Africa in case of HIV AIDS, is not in our side. We must take immediate action on this issue. Further delay will cost more lives and will create further uncertainty to the global recovery. The Waiver is the best option that we have and hence, we urge members to reconsider their position on this proposal.

1.26 Chinese Taipei

176. We would like to thank India and South Africa for submitting document IP/C/W/669. Chair, we would also like to thank you for the status report that you issued earlier this month and wish to express our support for the suggested language contained therein.

177. Previous discussions have highlighted members' differences of opinion on whether a common goal should be achieved by (a) waiving the relevant protection obligations under the TRIPS Agreement, (b) making use of the existing flexibility mechanisms of the TRIPS Agreement, or (c) relying on voluntary licensing by pharmaceutical companies.

178. We believe that there are certain flexibilities in the "Declaration on the TRIPS Agreement and Public Health" of 2001, especially on the use of compulsory licensing of patented medicines. From a practical perspective, it might be useful for Members to review what aspects in the 2001 Declaration are actually not sufficient for the purpose of effectively addressing the current pandemic. If, after the review, the flexibilities provided in the 2001 TRIPS Declaration is not sufficient, Members might need to work together to decide either improving the 2001 TRIPS Declaration or adopting certain

additional decisions to cope with the current pandemic. We hope that a practical approach can help move forward toward resolving the difficulties we currently face.

179. For the way forward, members should continue discussions to achieve a solution that is agreeable to all. We welcomed the text-based discussion from the proponent. In doing so, we hope to reach a consensus and paves the way for an effective response to the pandemic.

1.27 Cameroon

180. My delegation would, first of all, like to extend our thanks to you for your efforts to make progress in this debate. On the theme, we would like to welcome the efforts that have been made from Madam Director-General for the facilitation of access to vaccines as well as facilitating discussions amongst Members. We would also like to express our solidarity for all of our friends in India that are facing up to a violent wave of the COVID-19 pandemic. This wave shows just how much developing nations are suffering and are difficult for them to protect their populations. At the moment we must stress that vaccines access is still insufficient and this insufficiency is very unequally distributed around the world in the different regions.

181. Producers and manufactures and the eruption of new variants, the concentration of production apparatus in certain states and certain entities, the lack of willingness of certain Members of industry to provide access or licences makes it increasingly difficult to vaccinate our populations around the world. We said this before and we will stress it again: no single measure taken, in fact, will solve the urgent problem that we are currently facing. None will be a miracle cure. But if no measure can be a miracle cure we must stress all the same as strongly as we can that one measure which might save one human life, would be very welcome. That certainly would not be an excess - any measure that can save lives would be very welcome at this stage.

182. We cannot hide behind the complexity of this issue to automatically reject any discussion on a series of exceptional measures which seek to lift the contextual constraints which are in place as a result of the TRIPS Agreement. That is not the aim of this august assembly.

183. Cameroon would encourage all parties to become involved in a substantial discussion on the text, particularly on the proposals put before us by India and South Africa which can be an acceptable basis of discussion on this key issue. Our delegation would therefore recommend that all other points that have been raised which would be of interest for party such as licenses facilitation, the reform of pharmaceutical infrastructure, be considered jointly at this stage and that we make the most of this discussion for the long term to understand how we can address potential future pandemics.

184. We need action on this text which produces definitive results. An action which is pragmatic which allows access to vaccines and allows us to use these vaccines. We must remove the textual restrictions in order to make progress on this, we must be diligent in our action, because we must understand the urgent need for action - that is why we hope that together we will work constructively and consensually to join our efforts in all these bodies to provide a satisfactory response on this issue. Once again, Cameroon is committed to work with all parties in order to achieve effective and concrete results under the aegis of your guidance.

1.28 Singapore

185. Let me start by affirming that Singapore supports the transmission of the short and factual report from the TRIPS Council to the General Council. Allow me to now make three brief points.

186. First, we are all on the same page. We all agree that the road to recovery from the COVID-19 pandemic will be a long and painful one. This is evident as many countries, including some with large vaccine production capacities, continue to struggle with multiple waves of infections. Hence, it is imperative that Members objectively answer a fundamental question, namely, how and to what extent, would the TRIPS waiver proposal increase the global supply of vaccines.

187. Second, I believe that we are all headed in the same direction – which is to increase production and enhance the distribution of vaccines. We have been engaging actively with each other to one, understand the complexities and challenges involved in ramping up production of COVID-19 vaccines and two, find a practical and pragmatic way forward. In this connection, the vaccine event on 14 April

was extremely useful in bringing together all the key stakeholders, ranging from vaccine developers to manufacturers as well as civil society organisations (CSOs). It was an excellent opportunity to hear real-life accounts from practitioners who are involved in the development, manufacture and deployment of vaccines. The key take-away for me was that the process of developing and manufacturing vaccines and getting them into the arms of people is neither straight-forward nor linear. On the contrary, it is highly complex and involves many moving parts. What this means is that there cannot be one "silver bullet" that will solve the current shortage of vaccines. Hence, Members must seek a holistic response that strikes a balance between adopting practical steps in the short term and starting to think about how to ensure that the WTO is better prepared for the next pandemic in the longer term.

188. Third, if we can agree that our destination is the same – the next question is, what is the best way to get to there? There is no simple answer, but we will need to keep engaging each other in good faith to find a pragmatic solution. We need to agree first on what are the obstacles we face in scaling up vaccine production. We have heard from experts and manufacturers, who have clearly identified impediments such as export restrictions, disruptions to supply chain connectivity and domestic regulations as the real limiting factors. These are factors that cannot be addressed by the TRIPS waiver proposal.

189. Let me conclude with a medical analogy. It stands to logic that when a doctor treats a patient, he must first diagnose the cause of the illness properly in order to prescribe the correct medicine. In this case, we know that the global shortage of vaccine is the illness. Based on the diagnosis of experts, there are multiple causes, including the fact that the vaccine production process is highly complex, resource-intensive and multi-faceted. Hence, it is futile to search for one single magic pill that can cure this illness. Rather, it requires more than just collaboration between vaccine and developers, but also commitment from Members to avoid imposing export restrictions, to streamline customs and regulatory procedures and ensure supply chain connectivity, so that the vaccines that are produced can get into the arms of our people. We must work together to overcome the COVID-19 pandemic.

1.29 New Zealand

190. New Zealand welcomes the constructive approach taken in recent meetings of the TRIPS Council. As we work toward our joint ambition of global, equitable access to vaccines, it is important that Members engage in evidence-based conversations so we can identify how the WTO can most effectively facilitate access to vaccines for all. Conversations between Members, industry and other stakeholders have served to illustrate the complex supply chain relationships which enable manufacture and supply.

191. In this Council, our goal is to understand the role that intellectual property rules play in pursuing our joint ambition. The exchange of perspectives to date has shed light on this relationship. IP can provide certainty for parties to invest in manufacture and distribution, share information, collaborate and enter new markets. It's important that we have rules which will support our continuing efforts in combating the evolution of this pandemic and allow effective preparation for future pandemics. But, it's also important that IP protection provides benefits when we most need it to. We must live up to the spirit of the Doha Declaration in considering the balance struck in the current TRIPS rules.

192. In this regard, we've noted recent comments on the value of clarifying, highlighting and facilitating the utilisation of the TRIPS flexibilities and the principles within the Doha Declaration. We look forward to hearing further perspectives on these initial suggestions. We are happy to discuss any proposal which reflects the evolving expert opinion on the role that IP plays in enabling access to vaccines. That expertise exists both within this Council but also from outside. We remain committed to pursuing our joint ambition, whatever form that takes.

1.30 Japan

193. Japan appreciates the efforts made by the Chair and the Secretariat to convene this TRIPS Council meeting. Japan considers it important to aim at leaving no one behind in achieving Universal Health Coverage in response to COVID-19 and Japan has been proactively contributing to multilateral schemes such as the ACT Accelerator, the COVAX Advance Market Commitment (AMC).

Especially, Japan will co-host the "COVAX AMC Summit" with Gavi in June, and will continue to support COVAX Facility together with the international community, by facilitating international financial support for COVAX.

194. In parallel with the support for COVAX Facility, Japan is making complementary contributions to developing countries in order to contain COVID-19. For example, Japan has also been supporting construction of vaccination system to 25 Southeast and Southwest Asian and Pacific Island countries by providing cold-storage facilities and transportation through UNICEF as "Last One Mile Support" to deliver vaccines to each person. On April 27, the government of Japan decided to extend such assistance to 31 Latin America and the Caribbean and African countries through Emergency Grand Aid of approximately 39 million US dollars.

195. Furthermore, Japan is contributing to the Global Fund, and the Medicines Patent Pool through Unitaid for promoting the distribution of medical products. In addition, it is essential to encourage technology transfer in cooperation with pharmaceutical companies in order to scale up the production capacity of vaccines. In this context, Japan supports the initiatives by WTO Director General to find a "third way" by having dialogues with pharmaceutical industries.

196. We are convinced that these efforts are practical and effective for achieving timely, fair and equitable access to medical products. We will contribute to the discussion at the TRIPS Council, as the proponents clarify how the proposed waiver on the TRIPS Agreement relates to real solutions to the concrete challenges that we have been facing, through increased production and procurement of COVID-19 vaccines, therapeutics, diagnostics and other medical products. Japan remains committed to combatting COVID-19, together with the international community.

1.31 Australia

197. Australia was pleased to deliver a detailed intervention at last week's informal TRIPS Council session, and we'd like to take this opportunity to reiterate our commitment to finding pragmatic and consensus-based outcomes. We also remain committed to ensuring that the TRIPS Agreement's public health flexibilities offer practical support for all countries responding to the grave challenges posed by COVID-19. We look forward to working with TRIPS Council members to support the increased global manufacture of safe and effective COVID-19 vaccines.

1.32 United States of America

198. The United States supports the Council's status report to the General Council for next week's meeting. The top priority of the United States is saving lives and ending the pandemic in the United States and around the world.

199. As Ambassador Katherine Tai, the United States Trade Representative, said in her remarks at a World Trade Organization (WTO) virtual conference on April 14, these extraordinary times require extraordinary leadership, communication, and creativity. Our USD 4 billion commitment to COVAX demonstrates America's leadership and determination to support equitable distribution of vaccines and funding globally.

200. The United States is committed to working together with WTO Members on a global response to COVID-19. We will continue to engage in discussions with other Members to explore pragmatic and effective steps that support the production and equitable distribution of vaccines.

1.33 South Africa

201. I take the opportunity to thank the Members that have taken the floor. There were a couple of questions and comments that we will quickly respond to. With regard to Switzerland, of course, as colleagues indicated, there has been a response in this regard, but they are still concerned. In our view we really do not see how the waiver would be perceived to preclude the possibility of companies agreeing to voluntary licenses. What the waiver would do is to provide a viable option when market-based solutions are ineffective which is increasingly the case as we speak.

202. We want to reiterate that the majority of the current manufacturing agreements are contract manufacturing - the fill and finish. So even if we get the waiver, manufacturers that are interested

in fill and finish can continue to do so. We also heard from a number of Members, and the EU included, that the TRIPS flexibilities, if voluntary licences are not working, are a viable option. We have to reiterate, in our view, the number of Members that have also taken the floor to indicate the current challenges in implementing the TRIPS flexibilities.

203. In our view, the TRIPS flexibilities were never designed for a global pandemic and, as we indicated before, both Articles 31 and 31*bis* are territorial in nature, are on a case-by-case basis, raising a lot of difficulties in using them in responding to a pandemic of this nature. Other colleagues also raised the issue around other global initiatives such as COVAX and ACT-A. We want to reiterate such as many members that have taken the floor, that these have not been sufficient for the global demand. We all know that COVAX only covers 20% of the global population of the participating countries, and what the waiver does is to complement this initiative. Other Members also emphasized that COVAX provides only 40 million doses, which is clearly way short from the 2 billion doses that COVAX is looking to secure.

204. With regard to the waiver and the impact on R&D, I think that we have also stated before and will reiterate that the waiver is temporary and limited only to COVID-19, and is implemented as an exceptional measure in the context of this pandemic. It should not, it will not be extended to other sectors nor other diseases. So this will not affect and have an impact on the R&D and innovation because it is limited and is only in response to the current epidemic.

205. We also reemphasize that pharmaceutical companies had been able to deliver in a short space of time because of contributions of public funding as well as the contribution from a number of scientists in such a way that there was a collaborative effort. What will help to resolve this pandemic is a collaborative effort also from the companies elsewhere.

206. On how the waiver would support the sharing of technology and know-how there is the case of remdesivir, where freedom to operate removed the barrier of IP and has led to manufacturing and diversification of supplies beyond the limited few licenses that Gilead was able to offer. So it is the same thing that, once we have the waiver in the case of vaccines, there will be freedom to operate to manufacturers that have the capacity, that have capacity that is sitting idle and, with the transfer of technology and know-how, that capacity can be ramped up, and it will be able to make a contribution to addressing the current challenges that we have with supplies. While we do appreciate the fact that we have a shared understanding of the problem as raised by Singapore, I think we have been discussing and trying to define the problem for the last six months, and it is important that we look at moving towards good-faith discussions and solution-oriented discussions and using Singapore's analogy: if you continue to diagnose the patient for six months, the patient may die. It is now time to move forward in treating the patient. Of course, the co-sponsors are not saying that IP is the only barrier, we are saying that IP is one of the barriers and there are other barriers that of course need to be addressed by other bodies of the WTO that have the mandate in some cases, and require solutions of the implementation at a national level, but what we have within the context of the TRIPS Agreement is IP, and it is important that we find a solution when it comes to the IP.

207. So we hope that we can really be supported by many Members, that it is time that we move towards the text-based negotiation and we look forward to constructive engagement with Members and will continue with the consultations and presented text, and hope that now we can move towards text-based negotiation.

1.34 Angola

208. Thank you Chair for giving us the floor and we take good note of our report. Angolan delegation is in line with the statement made by South Africa, India, Chad on behalf of the LDC and Tanzania on behalf of the African Group. Our Countries continue to face great difficulties in achieving their development-related objectives, given their economic, financial, and administrative needs and limitations.

209. The current situation, of COVID-19, of which the world and especially the developing countries and LDCs, feel double difficulties, not only in matters specifically related to health, as well as the lack technological equipment for other sectors to support the development. With this pandemic we must work together for the good of the world and not with the idea that each continent solves its problem.

210. We have many reasons to request the Members of this Council once again to consider the proposal on waiving certain provisions of the TRIPS Agreement for the prevention, containment, and treatment of COVID-19.
