I make this statement on behalf of 51 organizations.

President, multilateralism was founded upon the principles of international cooperation and solidarity and with the objectives of ensuring global peace and protection of human rights. The COVID-19 pandemic and its fall out, felt in every country of the world, should have brought a renewed commitment to international solidarity, and reinforced the necessity of interdependence between nations. To the contrary, we are witnessing ‘vaccine nationalism’, with a small group of rich countries stockpiling vaccines, and COVID-19 related medical materials at the expense of everyone else. For instance, “per capita imports of the medical goods essential to mitigate the COVID-19 pandemic have been about 100 times larger in high-income countries in comparison to low-income countries.” The stonewalling of the temporary TRIPS waiver proposal by developed countries in this moment of urgent crisis is akin to rent seeking and profiteering at the cost of real human lives, for instance the attempt by Israel to extort political gains through the provision of excess stockpiled vaccines. The extraordinary precarity facing the world today demands that access to COVID-19 vaccines and related medical supplies not be treated like any other value chain issue, subject to market forces. Having the right to life and right to health at stake means that States must have a human rights-based response.

The Special Procedures in the statement on vaccines highlighted that “Isolationist health policies and procurement are in contradiction with international human rights standards,” Canada, the UK, Chile have all procured enough supplies to give each person four doses of the COVID 19 vaccine. Just 10 countries have administered 75% of all COVID 19 vaccines. Now, the human rights council as the body responsible for promotion and protection of all human rights must ask itself, whether it is indeed upholding human rights at all - or protecting corporate interests? It is important for all states, particularly the rich states with means to stockpile vaccines, to be accountable to the people and not corporations and big pharma. In a cruel irony, an estimated 7,5 billion euro of public funds have been used to support big pharma’s vaccine development, making vaccines truly public goods. Yet, states fail to reign in the pharma monopolies by insisting that they share their science and technology with others to ensure that the global demand can be met.

As noted by the UN Secretary General, a COVID-19 vaccine must be seen as a public good. We endorse the call of the People’s Vaccine Alliance calling on governments and corporations to prevent monopolies on vaccine and treatment production by making public funding for research and development conditional

1 https://twn.my/title2/wto.info/2020/t201025.htm
on research institutions and pharmaceutical companies freely sharing all information, data, biological material, know-how and intellectual property.5

We demand that the Human Rights Council and all states take a stance against the further proliferation of a neocolonial, neoliberal world order where profits are prioritised over people. We demand that States uphold human rights, to support the temporary TRIPs waiver and ensure equitable distribution of vaccines in a manner conducive to the right to development for everyone.

Endorsed by:

1. International Women’s Rights Action Watch Asia Pacific (IWRAW AP)
2. AWID
3. Women’s Global Network for Reproductive Rights (WGNRR)
4. Global Network of Sex Work Projects (NSWP)
5. Cairo Institute for Human Rights Studies (CIHRS)
6. Sexual Rights Initiative
7. Egyptian Human Rights Forum
8. Conectas Direitos Humanos
9. International Civil Society Action Network (ICAN)
10. Synergia, Initiative for Human Rights
11. Asia Indigenous Peoples Pact (AIPP)
12. Habitat International Coalition
13. COC-Nederland
14. Jerusalem Legal Aid and Human Rights Center (JLAC)
15. MIFTAH
16. RESURJ (Realizing Sexual and Reproductive Justice Alliance)
17. Egyptian Initiative for Personal Rights (EIPR)
18. Federation for Women and Family Planning
19. Women’s Centre for Legal Aid and Counselling (WCLAC)
20. Brazilian Interdisciplinary Association for AIDS (ABIA)
21. Akahatá
22. Development Alternatives with Women for a New Era (DAWN)
23. Latin America Consrtium Aginst Unsafe Abortion
24. Centro de Promoción y Defensa de los Derechos Sexuales y Reproductivos (PROMSEX)
25. Women & Media Collective (WMC), Sri Lanka
26. Shirkat Gah- Women’s Resource Centre, Pakistan
27. Center for Independent Journalism (CIJ), Malaysia
28. Global Interfaith Network for People of All Sexes, Sexual Orientations, Gender Identities and Expressions
29. Center for Reproductive Rights (CRR)
30. Global Alliance Against Traffic in Women (GAATW)

5 The People’s Vaccine, https://peoplesvaccine.org/
31. Queer Hindu Alliance
32. Mitini Nepal
33. Centre for Policy Alternatives, Sri Lanka
34. Addameer Prisoner Support and Human Rights Association
35. Al-Haq, Law in the Service of Man
36. Al-Rakeezeh Foundation for Relief and Development (Iraq)
37. Dhameer for Rights and Freedoms
38. The Yemeni Observatory of Mines
39. Gender and Development Network (GADN)
40. Foundation for Studies and Research on Women (FEIM)
41. Al-haq for Human Rights (Yemen)
42. CNCD-11.11.11
43. OutRight Action International
44. Fundación Arcoíris por el Respeto a la Diversidad Sexual A.C. Mexico
45. Pacific Women’s Watch- New Zealand
46. Association ESE Macedonia
47. Coalition of African Lesbians
48. International Lesbian and Gay Association
49. Yemeni Observatory for Human Rights (YOHR)
50. Watch for Human Rights (Yemen)
51. AIDS and Rights Alliance for Southern Africa (ARASA)
52. Syrian Center for Media and Freedom of Expression
53. Growth foundation for development & improvement (Iraq)
54. FIDH - International Federation for Human Rights
55. ESCR-Net - International Network for Economic, Social and Cultural Rights
56. Oficina para América Latina de la Coalición Internacional para el Hábitat (HIC-AL)
57. Iraqi Observatory for Human Rights
58. International Service for Human Rights (ISHR)