EURO-LATIN AMERICAN PARLIAMENTARY ASSEMBLY



RESOLUTION:

Bi-regional cooperation for the strengthening of health systems, for access to and distribution of vaccines, and for scientific research to face pandemics

based on the report by the Committee on Social Affairs, Youth and Children, Human Exchanges, Education and Culture

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EUROLAT – Resolution of 27 July 2023 – Madrid

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Bi-regional cooperation for the strengthening of health systems, for access to and distribution of vaccines, and for scientific research to face pandemics

The Euro-Latin American Parliamentary Assembly,

- having regard to the 1948 Universal Declaration of Human Rights,
- having regard to the 1966 United Nations International Covenant on Economic, Social and Cultural Rights,
- having regard to the 1946 Constitution of the World Health Organization (WHO),
- having regard to the WHO statement of 30 January 2020 declaring COVID-19 a public health emergency of international concern,
- having regard to the UN report of March 2020 entitled 'Shared Responsibility, Global Solidarity: Responding to the socio-economic impacts of COVID-19',
- having regard to the joint statement of the World Bank Group and the International Monetary Fund of 25 March 2020 regarding a call to action on the debt of the International Development Association's client countries and to the Communiqué of the G20 Finance Ministers and Central Bank Governors of 15 April 2020,
- having regard to UN General Assembly Resolution 74/270 of 2 April 2020 on global solidarity to fight the coronavirus disease 2019 (COVID-19),
- having regard to UN General Assembly Resolution 74/274 of 20 April 2020 on international cooperation to ensure global access to medicines, vaccines and medical equipment to face COVID-19,
- having regard to the joint communication of the Commission and the High Representative of the Union for Foreign Affairs and Security Policy of 8 April 2020 on the Global EU – response to COVID-19 (JOIN(2020)0011),
- having regard to the proposal for a Council regulation of 28 May 2020 establishing a European Union Recovery Instrument to support the recovery in the aftermath of the COVID-19 pandemic (COM(2020)0441),
- having regard to the Council conclusions of 8 June 2020 on the 'Team Europe' global response to COVID-19,
- having regard to Council Recommendation (EU) 2021/2122 of 26 November 2021 on a Pact for Research and Innovation in Europe,
- having regard to the joint statement of the International Telecommunication Union and the WHO on unleashing information technology to defeat COVID-19,

AP103.227v04-00 2/8 AT\1285659EN.docx

- having regard to the WHO statement of 1 July 2021 on the equal recognition of vaccines,
- having regard to the joint statement of the International Coalition of Medicines Regulatory Authorities and the WHO of 17 May 2022 on how COVID-19 vaccines are regulated for safety and effectiveness,
- having regard to the interim statement of 17 June 2022 on decision-making considerations for the use of variant updated COVID-19 vaccines,
- A. whereas the COVID-19 pandemic is arguably one of the most significant public health challenges humanity has faced in recent times; whereas the European Union and Latin America and the Caribbean, as well as other parts of the world, were not sufficiently prepared to cope with the scale of this health crisis and its consequences; whereas the crisis has had a significant impact on societies and economies around the world;
- B. whereas Article 25(1) of the Universal Declaration of Human Rights states that 'Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services;
- C. whereas during the pandemic, mostly due to the urgency of the situation and particularly in the earliest phases, public authorities had to take decisive and swift actions in order to safeguard the right to health and life, while regretfully having a negative impact on other fundamental rights;
- D. whereas the protection of people's health and life must be the priority in any public policy decision;
- E. whereas the European Centre for Disease Prevention and Control did not detect the seriousness of the COVID-19 threat in a timely manner, partly as a result of a lack of preparedness within the Member States at the beginning of the pandemic; whereas this delayed action was due to the lack of timely data sharing by the Member States, and a lack of adequate funding and resources for monitoring and data surveillance management;
- F. whereas any vaccination strategy is a competence of the Member States of the European Union and the countries of Latin America and the Caribbean;
- G. whereas millions of people have died as a result of the spread of COVID-19; whereas according to the European Centre for Disease Prevention and Control (ECDC)¹, by September 2022 around 1 145 000 people had died from SARS-CoV-2 infection in the European Union; whereas according to figures from the Statista platform, by September 2022 around 1 736 000 people had died from COVID-19 in Latin America and the Caribbean, making it one of the hardest hit regions in terms of public health, with cases and deaths exceeding the global average;
- H. whereas, despite shortcomings and gaps in prevention, preparedness and response, the EU developed a common response to the pandemic and took actions to ensure the swift development and fair distribution of vaccines on the European continent and globally;

¹European Centre for Disease Prevention and Control

- I. whereas the development and deployment of COVID-19 vaccines in the European Union was a game-changer in the pandemic, and underpinned the important role of vaccine research and development in preparing for future pandemics; whereas the speed with which researchers developed effective vaccine protection was unprecedented, and whereas the EU demonstrated leadership in the global response to the COVID-19 pandemic;
- J. whereas progress on vaccinations in Latin America and the Caribbean varies from region to region, and faces different challenges in terms of production, access, storage and distribution, while SARS-CoV-2 transmission levels remain high;
- K. whereas Latin America and the Caribbean are heavily dependent on COVID-19 vaccine production in developed countries, leaving the region in a vulnerable position in terms of access to vaccines; whereas this should be addressed in light of the emergence of new variants of the virus and the possible need to increase vaccination in the coming years;
- L. whereas global cooperation and solidarity are essential to effectively tackle the COVID-19 pandemic, and to ensure rapid access to vaccines, diagnostics and treatments worldwide; whereas in 2020 and 2021 at least 17 million people in the 53 countries of the WHO European Region have experienced a post-COVID-19 condition, also known as long COVID, i.e. symptoms lasting for at least three months²;
- M. whereas the EU has been at the forefront of the multilateral and collaborative response to fight the virus and its consequences; whereas such rapid development of vaccines in the EU during the pandemic would not have been possible without years of research and industrial capacity to scale up production; whereas the EU launched a series of research and innovation actions at the very outset of the pandemic; whereas under the Coronavirus Global Response Initiative, the European Commission pledged to invest € 1 billion from Horizon 2020, the EU's research and innovation programme (2021-2027), and the programme had mobilised €872 million as of March 2022;
- N. whereas in order to enhance cooperation, in June 2021, the EU launched the Coronavirus Global Research & Innovation Collaboration Portal to facilitate collaboration between research organisations and individual researchers from all over the world on COVID-19 projects³;
- O. whereas one of the most relevant achievements was the establishment of the EU4Health programme 2021-2027, with an estimated budget of €5.3 billion, focusing on cross-border health threats and the improvement of medical products and systems⁴; whereas the programme's four general objectives are to improve and foster health in the EU, to respond to cross-border health threats, to improve medicinal products, medical devices and crisis-relevant products, and to strengthen health systems and make them more resilient;
- P. whereas on 30 October 2020, the participants in the eighth Senior Officials Meeting on

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 $^{^{2} \}underline{\text{https://www.who.int/europe/news/item/13-09-2022-at-least-17-million-people-in-the-who-european-region-experienced-long-covid-in-the-first-two-years-of-the-pandemic--millions-may-have-to-live-with-it-for-years-to-come}$

³ Coronavirus Global R&I Collaboration Portal

⁴ EU4Health programme 2021-2027

- Science and Technology of the EU-CELAC (Community of Latin American and Caribbean States) Joint Initiative on Research and Innovation (EU-CELAC JIRISOM) agreed to relaunch the EU-CELAC Joint Initiative, underlining the importance of science and innovation cooperation on COVID-19;
- Q. whereas the EU is one of the largest donors to the COVAX initiative, a central pillar of the Access to COVID-19 Tools Accelerator; whereas in the case of EU-LAC cooperation, by December 2021 the EU had exported 130 million doses to the region and provided around €3 billion for immediate health support;
- R. whereas bi-regional collaboration and cooperation between the EU and Latin America can play a vital role in developing new research and innovation initiatives in the field of health; whereas attracting European and Latin American stakeholders and their resources into both regions will help to pool the best skills and technologies, and improve COVID-19 prevention, treatment and immunisation programmes;
- S. whereas the pandemic aggravated existing structural problems in the health sector, notably staff and resource shortages, compromised the resilience of health systems, and highlighted the need to encourage and increase public spending on health;
- T. whereas the fight against health threats requires investment in research and increased scientific and technological cooperation in order to accelerate vaccine production and thus ensure that as many people as possible have fair and rapid access to vaccines as quickly as possible;
- U. whereas UNESCO and various human rights organisations have suggested that fairness criteria should be considered in relation to vaccination, taking into account as much evidence as possible and international human rights and bioethical standards; whereas statistics show that there is a higher prevalence of COVID-19 and a greater risk of mortality among poor populations and ethnic communities, regardless of age and comorbidities; whereas those populations have not been fully prioritised in the administration of vaccines and have not responded sufficiently to prevention measures;
- V. whereas the pandemic had a deep impact on social relations, changed ways of work and education, affected various social groups and increased global inequalities;
- W. whereas it is important to learn from what has happened and be better prepared for future crises; whereas it is crucial to be prepared and resilient in the face of crises, particularly in terms of healthcare systems and supplies, in order to increase strategic autonomy in key areas, such as the production and distribution of vaccines and critical and essential medicines;
- X. whereas in order to mitigate the current health situation and possible future crises, it is essential to deploy different actions to develop, promote and strengthen international cooperation in the field of health; whereas this could give the regions the financial, scientific and technical resources they need to be self-sufficient in terms of vaccine and medicine research, identification, production, procurement and marketing, and enable them to respond to such situations as quickly as possible in order to avoid irreparable consequences;
- Y. whereas in the European Union the Commission granted conditional market authorisation

- to vaccines for COVID-19, after receiving the European Medicines Agency's recommendation and consulting with the EU Member States, on the basis that the benefits of the vaccines far outweighed their potential risks and that they would be subject to mandatory, rigid post-approval safeguards and controls;
- 1. Emphasises the importance of guaranteeing in the European Union, and in Latin America and the Caribbean, access to and fair, equitable and rapid distribution of vaccines, therapeutics and diagnostics for COVID-19 and future diseases; underlines the need to promote the improvement of health systems and vaccination processes, so that vaccinations, therapeutics and diagnostics can be provided in an organised, continuous, safe, effective, timely and equitable manner, giving priority to the most vulnerable populations and sectors;
- 2. Notes that public health is not a cost to be minimised, but an important strategic asset for our societies that requires investment; acknowledges that public spending on health has risen in both regions; encourages further investments in this area to achieve universal health coverage and the sustainable development goals on health; stresses that investing in health helps to reduce poverty and encourage inclusive economic growth, leading to healthier, safer and fairer societies;
- 3. Reaffirms that the COVID-19 vaccines were developed primarily to avoid serious disease and death, and acknowledges that those authorised by the EMA are effective in this regard, as demonstrated by the results of the COVID-19 vaccination process;
- 4. Calls on the European Union and Latin America and the Caribbean to develop and share a catalogue of best practices spanning aspects from scientific research to vaccine access and distribution, reducing dependence on third countries for medical products and pharmaceutical ingredients, and promoting and sharing intellectual property; notes that this would address supply chain vulnerabilities and improve vaccine administration in both regions;
- 5. Notes that the rapid availability of vaccines on the European market, thanks to the use of the conditional marketing authorisation, has been crucial in saving lives, reducing hospitalisations and, in general, protecting people from the more severe effects of COVID-19; underlines that the conditional marketing authorisation is an appropriate tool to accelerate vaccine authorisation in a public health emergency like the COVID-19 pandemic;
- 6. Welcomes the ECDC's creation and deployment of a COVID-19 vaccine monitoring system operating almost in real time; points out that it could be used as a model for future monitoring of vaccines in other areas;
- 7. Stresses that it is essential to prioritise public investment in public healthcare systems and private collaboration in order to strengthen health systems and to obtain the resources needed to ensure access to universal medical care and vaccines to tackle pandemics and other diseases, while promoting economic and social recovery, in particular in countries with poor health systems, paying special attention to their most vulnerable groups; believes that it is essential to invest in health and care personnel, facilitate access to education and training and ensure good working conditions for healthcare workers in order to attract the next generation of health and social care workers and avoid brain drain;

- 8. Believes that health promotion and disease prevention, preparedness and response to cross-border health threats must constitute the foundations of bilateral cooperation on health with a view to reinforcing the resilience and quality of the healthcare systems in the EU and in Latin American and the Caribbean, tackling health inequalities in both regions by providing adequate investments in health systems;
- 9. Considers that bi-regional cooperation between the European Union and Latin America and the Caribbean plays a significant role in strengthening and promoting more effective health systems with the coverage, quality, and technical, financial and human resources needed to deal with current and future diseases;
- 10. Underlines the importance of encouraging scientific and clinical cooperation between the countries of Latin America and the Caribbean and the European Union, which is essential to ensure early access to vaccines against current and future diseases; notes that this type of cooperation could lead to academic and scientific collaboration agreements between the countries of the two regions, with the aim of achieving joint production of vaccines to tackle pandemics and current and future diseases, and developing health inputs and technologies;
- 11. Believes that it is vital to support the functioning of WHO / Pan American Health Organisation funds and to include possible sources of financing through international or regional institutions such as the Inter-American Development Bank and the CAF Development Bank of Latin America; notes that this should complement the COVAX Facility in order to address immediate vaccine procurement needs and promote joint procurement of vaccines to tackle pandemics and current and future diseases so as to prevent them from spreading in the EU and in Latin America and the Caribbean;
- 12. Underlines the importance of cooperation and exchanges of good practices on continuous training, retraining, upskilling and reskilling for health workers throughout their careers; emphasises the need to improve their working conditions in order to attract future generations of health workers and address shortages and brain drain in the European Union and in Latin America and the Caribbean;
- 13. Calls on the EU, Latin American and Caribbean countries to support the ongoing negotiations at the WHO to establish a Pandemic Treaty in order to better prepare for next pandemics, and define strong cooperation mechanisms based on common but differentiated responsibilities, ensuring access and sharing of pathogens and with a strong emphasis on benefits sharing;
- 14. Emphasises that the sharing of IP, know-how, technologies, practices and information with a view to exchanging knowledge, skills, development mechanisms, experiences and best practices, among others, is necessary to ensure large-scale manufacturing and production processes for vaccines and timely global availability of medical countermeasures against COVID-19 and future diseases, but also help to prevent future epidemics or pandemics; notes that the goal is to make vaccines and treatments more available, reduce prices and ensure universal access;
- 15. Stresses the importance of cooperation and exchanges of best practices aimed at improving the security of critical infrastructure, protecting health institutions and patients from the risks posed by misuse of digitalisation, raising awareness of the opportunities and risks of digitalisation, and improving digital literacy, including awareness of

- cybersecurity, among individuals and organisations;
- 16. Stresses the need to boost the donation of surplus vaccines to countries that have not made sufficient progress on vaccination; points out that these actions will, in the short and medium term, help to strengthen health systems and prepare for future diseases, without discouraging technological development and domestic vaccine production;
- 17. Considers that it is vital to have greater integration, cooperation and bi-regional solidarity, through exchanges of information on public health experiences and best practices; notes that parliaments can play a crucial role in this area, promoting scenarios and actions that help to strengthen this exchange of knowledge, and ensuring fair, equitable and transparent access to vaccines and medical supplies to deal with future pandemics, while preventing negative impacts;
- 18. Believes that it is essential to establish a forum for bi-regional dialogue with the competent ministries and institutions in the European Union and in Latin America and the Caribbean, in order to move forward with the creation of a permanent coordination mechanism to allow, among other things, coordinated and/or joint vaccine procurement to meet the health needs of the population;
- 19. Reaffirms its full commitment to public health, which is the basis for the well-being of all individuals in our societies; stresses that the right to comprehensive health is an inalienable human right and should not be subject to factors of power and differential access for socio-economic groups; notes that in the work needed to achieve the SDGs by 2030, health is the basis of, and a condition for, a decent life, the development of our citizens and fair economic growth;
- 20. Emphasises that it is important to take into account the needs of indigenous people, people of African descent, Roma and others in public policies aimed at improving health prevention, promotion and care, especially for any future crises of a magnitude similar to this one; notes that that it is crucial, in this regard, to respect their world view, culture and traditions, ensuring that such strategies are not at odds with the way of life adopted by each population or community;
- 21. Underlines the need for all the ancestral knowledge of indigenous communities and peoples to be accompanied by legal and technical advice to allow the registration of product patents; notes that this should benefit them by ensuring that they are not used by transnational parties, who are not aware of their original ownership but who also have financial considerations that do not take into account the costs for vulnerable populations;
- 22. Instructs its co-presidents to forward this resolution to the Council of the European Union, the European Commission, the parliaments of the Member States of the European Union, all the countries of Latin America and the Caribbean, the Latin American Parliament, the Central American Parliament, the Andean Parliament, the Mercosur Parliament, the General Secretariat of the Andean Community, the Committee of the Permanent Representatives of Mercosur, the Permanent Secretariat of the Latin American and Caribbean Economic System and the Secretaries-General of the Organization of American States and the United Nations.