

Access initiatives for Covid: Sketching the Big Picture Context (and PHM's Strategies in Response)

David Legge
PHM/TWN Covid-19 IPHU
28 September 2022

Purpose

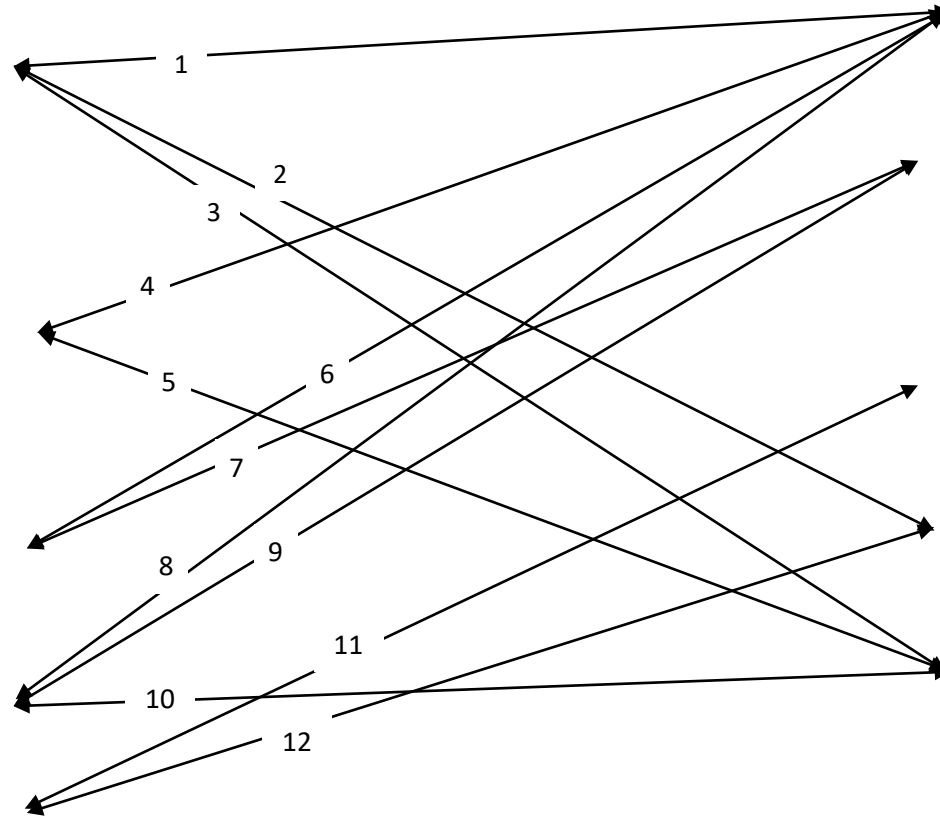
- Review some key issues covered in this course regarding inequities in prevention diagnosis and treatment during the Covid pandemic
- Identify the big picture structures and processes which underly those inequities
- Reflect on the strategies and programs of the People's Health Movement and
 - how they aim to deal with the specific policy issues confronted under Covid
 - while also addressing the big picture challenges

- Key issues covered in IPHU

- Global inequity in distribution of vaccines, tests and medicines
- ACT-Accelerator and Covax as multistakeholder public private partnerships
- Refusal of Europe and US to agree to Waiver
- Scale up local production
- Neglect of health systems

- Global big picture

- Globalisation, transnational corporations and global value chains
- Innovation focused in the metropolis and private ownership of knowledge
- Neoliberalism and austerity (threat of overproduction)
- Financialisation and 'market sentiment'
- Imperialism: the nexus of corporate and imperial power



Key issues emerging in
Covid pandemic and
discussed in IPHU

Global inequities in access to vaccines, test and medicines

- Vaccine nationalism
 - Wealthy countries over-procurement
- Failures to share technology
 - First, through C-TAP (or open licensing / tech transfer)
 - Second, opposition to the TRIPS Waiver
 - Wealthy countries support for pharma
- Covax farce
 - Restriction of Covax to 20% target
 - Refusal of wealthy nations to use Covax for procurement or dose sharing
 - Conflating different risks: peoples' health in L&MICs, government purchasing, corporate profits
 - Dysfunctional Covax governance

ACT-Accelerator and Covax as Multistakeholder public private partnerships

- ACT Accelerator: a deliberate strategy
 - to bypass the WHA (where L&MICs have voice)
 - and place Gates and Pharma in management role
- The multistakeholder public private partnership as an attack on multilateralism
 - A transfer of power globally from governments to the organs of the Transnational Capitalist Class (TCC)

Refusal by Pharma, Europe and US of technology sharing

- Refusal of pharma (with support of wealthy countries) to participate in C-TAP or to agree to open licensing or technology transfer, despite gross disparities around access
- Refusal Europe and US to agree to TRIPS Waiver, notwithstanding
 - Global pandemic,
 - Disparities around access
 - Powerful advocacy from Global South and civil society, and
 - Provision in WTO rules for such a waiver in emergency

Scaling up local production

- Corporate control of technologies and know how
- Global value chains with production centred in China and India under contract to transnational pharma
- Prevailing ideology of trade liberalization so governments uncertain about supporting and protecting domestic production
- Pricing power of transnational pharma (and ability to undercut (or purchase) local producers)

Neglect of health system strengthening

- ACT-Accelerator initially conceived purely in terms of commodities (health system pillar added later and grossly underfunded)
- Neoliberal policy orthodoxy directed to public health system austerity and privatization
- WHO / WB / Rockefeller model of 'universal health coverage' directed to privatised health care funded through private health insurance markets
- Donors reluctant to commit to budget support (Gates strongly opposed)

Big picture structures and forces which set the wider context for Covid access struggles

Globalisation, global value chains controlled by, and for the benefit of, transnational corporations

- A regime of unequal exchange
 - the value produced accrues to the TNCs; not the workers, not the countries of the Global South
- Production capacity outstripping employment (and wages to support consumption)
 - looming threat of 'crisis of overproduction' (and 'underconsumption')
 - exacerbating unequal exchange to protect the transnational capitalist class from crisis of overproduction
- Expansion of financial system (debt funded consumption and consumption supported by trickle down wealth from asset speculation)

Innovation focused in the metropolis (and the privatisation of knowledge)

- Extreme IP protection (the privatisation of knowledge) plays a key role in driving global value chains (and unequal exchange)
- Centralisation of R&D (academic and corporate) in the capitalist heartlands
- Innovation supported by vast flows of public funding
 - Academic research outcomes gifted to Pharma
 - High prices and profits (much from public and insurance funding) protected by IP under the promise of innovation (but more goes to marketing)
- Lack of transparency
 - Pharma refusal to participate in solidarity trials
 - Clinical trials too small, poorly designed
 - Failure to register clinical trials
- Failure to align investment in innovation with public health need

Neoliberalism and austerity (and the looming crisis of overproduction)

- Neoliberalism: a policy package designed to protect the transnational capitalist class from the threatening crisis of overproduction
 - Liberalisation of trade and investment (but not migration of people or access to technology)
 - Tight limits on public expenditure on human services and infrastructure (not defence!)
 - Privatisation and marketisation of education, health, aged care, municipal services
 - Degrading employment conditions (expansion of precarious employment)
 - Degradation of health and environmental regulation

Financialisation and the power of 'market sentiment'

- High corporate profits (monopoly power), facing shrinking need for investment in real productive capacity, leads to increased flow to a bloating financial sector
 - debt funded consumption
 - trickle down consumption from the earnings of asset speculation
- Expanded role of financial sector as owner of industrial corporations (including the buying and selling of Pharm corporations)
- 'Market sentiment': the power of the financial sector to threaten or punish countries who adopt unfavourable policies
 - Profitability of big pharma (and fossil fuel corporations) keenly followed by banks, private wealth funds, sovereign wealth funds, municipal funds, pension funds, insurance reserves
 - Unfavourable policies may lead to capital flight, collapse of exchange rate, collapse stock prices, increase cost of borrowing
- Financialisation of Covid response
 - WB and Gates promote funding of ACT-A and Covax through financial markets (unsuccessfully) rather than taxation

Imperialism: the nexus of corporate and hegemonic power

- Imperialism
 - a partnership between hegemonic powers and transnational capitalist class
 - Neoliberalism a policy package driven by this partnership
 - Extreme IP protection a key element of this package
- Multistakeholderism, in ACT-A and Covax, a strategy to bypass the WHA where the Global South has an equal voice and give control to the corporates and the hegemonic powers
- Corruption and bullying of governments in Global South directed to harnessing them to the imperial / transnational capitalist project

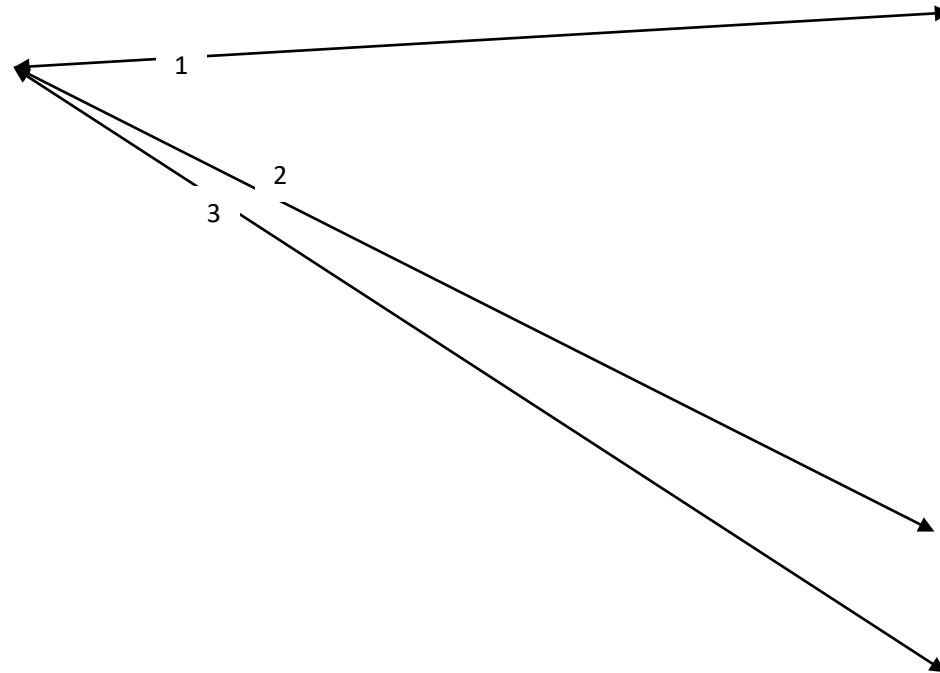
Reviewing the links
between the specifics of
Covid and the Big Picture
forces

- Key issues covered in IPHU

- Global inequity in distribution of vaccines, tests and medicines
- ACT- Accelerator and Covax as multistakeholder public private partnerships
- Refusal of Europe and US to agree to Waiver
- Scale up local production
- Neglect of health systems

- Global big picture

- Globalisation, transnational corporations and global value chains
- Innovation focused in the metropolis and private ownership of knowledge
- Neoliberalism and austerity (threat of overproduction)
- Financialisation and 'market sentiment'
- Imperialism: the nexus of corporate and imperial power

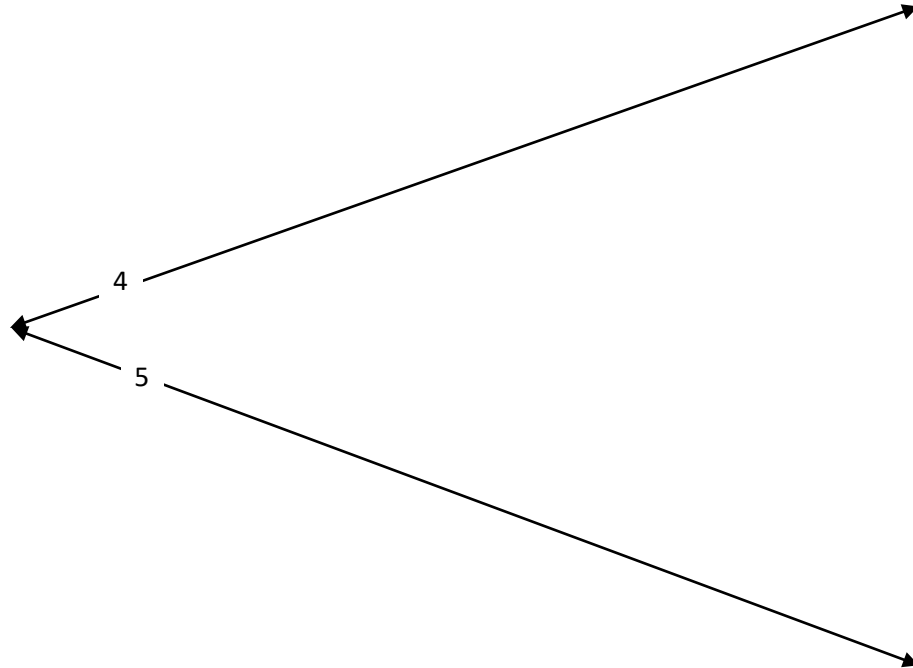


- Key issues covered in IPHU

- Global inequity in distribution of vaccines, tests and medicines
- ACT-Accelerator and Covax as multistakeholder public private partnerships
- Refusal of Europe and US to agree to Waiver
- Scale up local production
- Neglect of health systems

- Global big picture

- Globalisation, transnational corporations and global value chains
- Innovation focused in the metropolis and private ownership of knowledge
- Neoliberalism and austerity (threat of overproduction)
- Financialisation and 'market sentiment'
- Imperialism: the nexus of corporate and imperial power

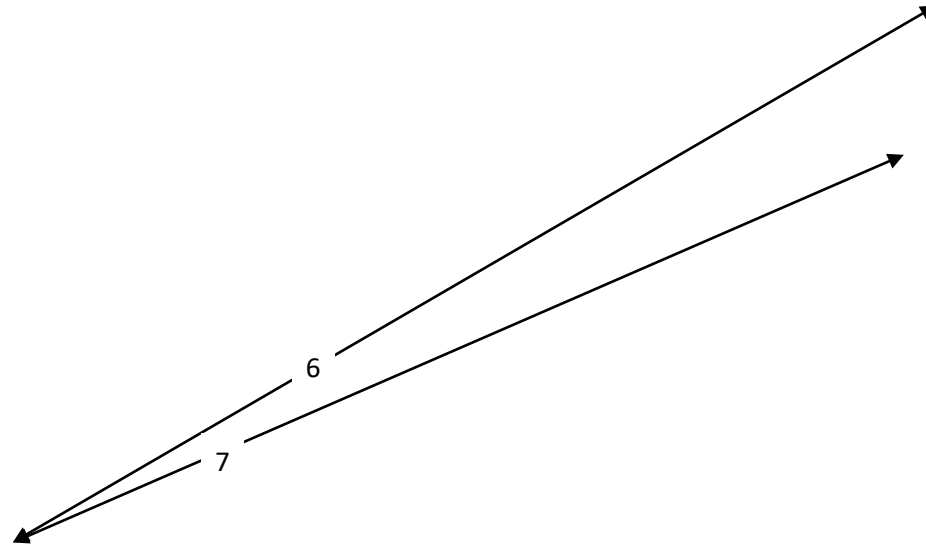


- Key issues covered in IPHU

- Global inequity in distribution of vaccines, tests and medicines
- ACT-Accelerator and Covax as multistakeholder public private partnerships
- Refusal of Europe and US to agree to Waiver
- Scale up local production
- Neglect of health systems

- Global big picture

- Globalisation, transnational corporations and global value chains
- Innovation focused in the metropolis and private ownership of knowledge
- Neoliberalism and austerity (threat of overproduction)
- Financialisation and 'market sentiment'
- Imperialism: the nexus of corporate and imperial power

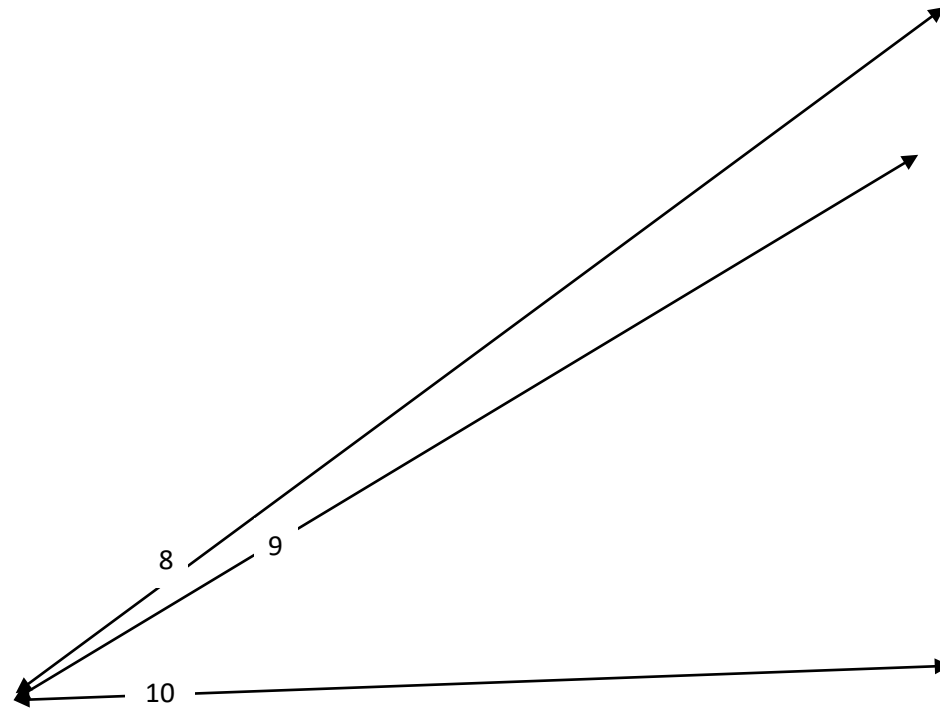


- Key issues covered in IPHU

- Global inequity in distribution of vaccines, tests and medicines
- ACT-Accelerator and Covax as multistakeholder public private partnerships
- Refusal of Europe and US to agree to Waiver
- Scale up local production
- Neglect of health systems

- Global big picture

- Globalisation, transnational corporations and global value chains
- Innovation focused in the metropolis and private ownership of knowledge
- Neoliberalism and austerity (threat of overproduction)
- Financialisation and 'market sentiment'
- Imperialism: the nexus of corporate and imperial power

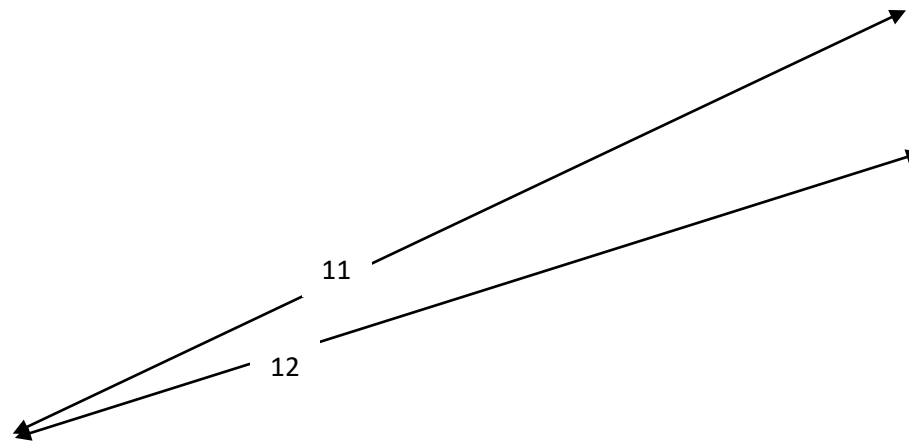


- Key issues covered in IPHU

- Global inequity in distribution of vaccines, tests and medicines
- ACT-Accelerator and Covax as multistakeholder public private partnerships
- Refusal of Europe and US to agree to Waiver
- Scale up local production
- Neglect of health systems

- Global big picture

- Globalisation, transnational corporations and global value chains
- Innovation focused in the metropolis and private ownership of knowledge
- Neoliberalism and austerity (threat of overproduction)
- Financialisation and 'market sentiment'
- Imperialism: the nexus of corporate and imperial power



Covid access struggle
within PHM's broader,
longer term strategies

Policies for equitable access

- Domestic law reform to fully deploy TRIPS flexibilities
- TRIPS reform to facilitate compulsory licensing for export
- TRIPS Waiver
- Develop (public) research, development and production capacity in Global South
- Demand mandatory open licensing, data sharing, as focus of pandemic treaty
- Focus on northern academia (UAEM), eg open licensing as condition of public research funding
- Delegitimation
 - People's Tribunal on Corporate Violations of the Right to Health
 - Delegitimise extreme IP laws

Universal health care based on comprehensive primary health care principles

- Health system strengthening
 - Universal access to affordable, accountable, quality health care funded and delivered in the public sector and based on comprehensive PHC
- Policy advocacy and political mobilising to create the conditions for healthy, happy, peaceful, fulfilled people
 - PHC as a platform for enabling partnerships between health care practitioners and agencies and their communities around the social conditions for good health

Democratising global health governance

- WHO Watch
 - Defense of multilateralism and WHO
 - Contributing to policy coherence and political solidarity across the Global South
 - Strengthening the accountability of countries for their (health) diplomacy
- Global Health Watch
 - Locating health inequalities and pathways to health equity in relation to globalisation and imperialism
- Defence of open, inclusive, constructive, democratic processes within countries

Convergence and movement building

- Convergence of social and political movements globally to overturn capitalism and imperialism and build a sustainable equitable convivial civilisation
- Recognise the changing structures of class
 - from national (capitalists versus workers)
 - to global
 - Transnational capitalist class (coherent, self-conscious, rich internal communication) confronting
 - Dispersed array of national working classes, middle classes, dispossessed and marginal classes
- Recognise the intersecting oppressions and suspicions across gender, ethnicity, nationality, religion, etc
 - Deep cultural roots
 - Independent relations to capitalism
 - Divisions which facilitate ascendancy of transnational capitalist class and imperial power
- Solidarity versus fascism (fed by suspicion and hostility)
 - Key role of domestically oriented fraction of national capitalist class (in opposition to the globalising fraction)
 - National bigotry (and neofascism) as defence against globalisation
- PHM's approach
 - Working towards convergence of social and political movements
 - Working across difference; listening and respect key to solidarity