

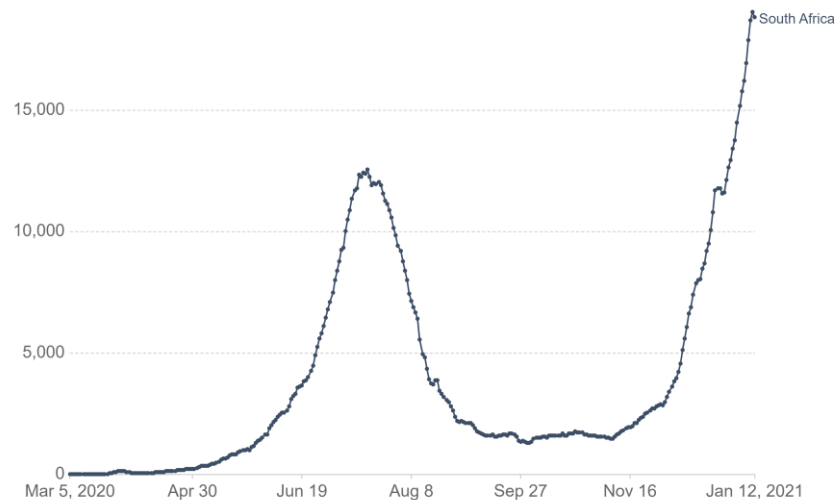
COVID-19 vaccines
in South Africa:
Inequality or
Access?



Second Wave – Inequality again?

Daily new confirmed COVID-19 cases

Shown is the rolling 7-day average. The number of confirmed cases is lower than the number of actual cases; the main reason for that is limited testing.



Source: Johns Hopkins University CSSE COVID-19 Data – Last updated 13 January, 06:02 (London time)

CC BY

Sector COVID19 testing	Private	Public
Population coverage	20%	80%
Total tested to date	3 475 297	2 535 938
	58%	42%
Private to Public to date	5.5:	1

Tested in past 3 days	26 283	16 260
	62%	38%
Private to Public recent	6.5:	1



ISS Today >

Measures to address COVID-19 have gendered consequences

- Gender-based violence
- Burden of domestic care
- Access to services curtailed
- Women bear brunt of health care risk
- Displacement of LGBTI issues from policy agendas

What might happen with the COVID-19 vaccines?



What is a Patent, what is Intellectual Property and why is it important?

- Patent: A government gives an inventor the exclusive right to stop others from making, using or selling something they have invented.
 - For a set period (in South Africa = 20 years)
 - For a product or process that provides **a new way** of doing something, or offers **a new technical solution** to a problem
- Intellectual Property: When you apply your mind (your intellect) to develop something new or original.
 - Registering your IP is meant to give you an incentive to create new ideas, products, processes
 - A patent is one form of IP (others are copyright, designs, trade marks, etc)
- Administered in law



A car that
runs on
electricity ...

But a car is
not a
medicine ...
or a vaccine

- Tobeka Daki, a single mother started treatment for breast cancer in 2013.
- She had a type of cancer that was very aggressive but could be treated with a medicine called trastuzumab.
- The World Health Organization recommends it for her type of cancer
- In US and Europe it is 'normal' care.
- But in Africa, it costs US\$35,000 per year for one patient.
- Tobeka tried to get access to the drug. But because the drug was expensive and hard for public health systems to get, her request was denied.
- Tobeka never got the drug she needed.
- Her cancer returned in 2015.
- She died the following year.

msfaccess.org/patents-and-intellectual-property

ACCESS CAMPAIGN

Media room Contact msf.org

About us Our work Get involved Resources

Search...

Medicines shouldn't be a luxury

Take action! Get involved

TOPIC OVERVIEW

"If I can get this treatment, I can live longer"

Tobeka Daki - Cancer patient, activist, Eastern Cape, South Africa

INTELLECTUAL PROPERTY AND TRADE

Content navigation: Back to top ↑ Three things to know about intellectual property How MSF is addressing intellectual property barriers Key publication Take a closer look What MSF staff are saying STAY UPDATED 📢

Why is a patent bad for health?

- When drug companies hold patents they have a monopoly on the medicine or vaccine.
- No other company can make the same medicine or vaccine without their permission even if there is a health emergency
- Because they have a monopoly, they can and will keep the prices high.
- When there is competition, however, the prices come down.

IP obstacle to control COVID-19 in South Africa

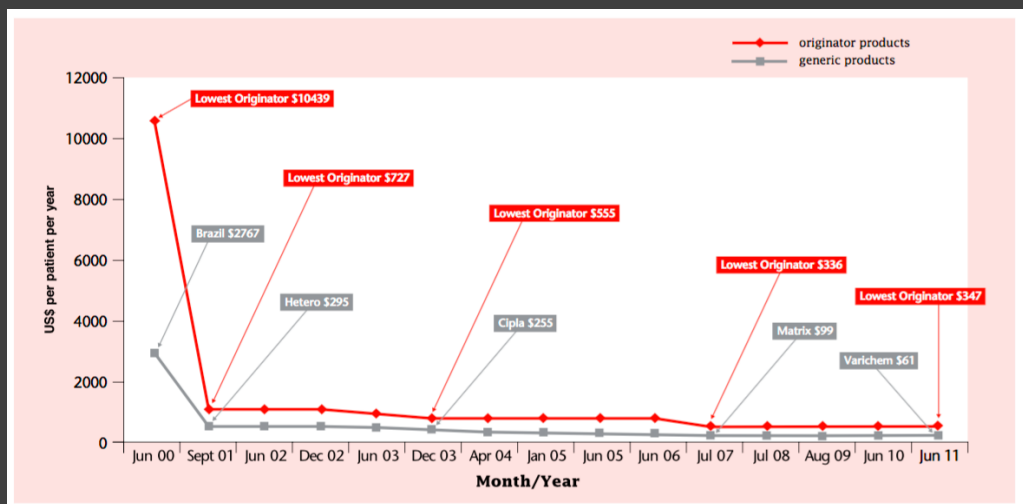
- Our PCR testing for COVID-19 relied on technology we bought for TB diagnosis
- But we need lots of cartridges!
- The US bought up most of the supply
- As a result, the NHLS labs fell far back
- Tests were wasted or meaningless
- The NHLS could have made their own kit cartridges but the composition was protected by a patent
- ... patents killed South Africans





What did we learn from HIV?

- HIV taught us that without strong Civil Society Action, no gains
- We succeeded in bringing down medicine costs though mobilisation advocacy and legal challenges





**COVAX: THE
VACCINES PILLAR
OF THE ACCESS TO
COVID-19 TOOLS
(ACT) ACCELERATOR
STRUCTURE AND
PRINCIPLES**

Global efforts to ensure access to vaccines – COVAX


- COVID-19 accelerator to speed up responses
- COVAX – advance purchasing = pre-paying to buy a vaccine
- Under COVAX, Low Income Countries get free vaccine; Middle Income Countries purchase at market prices
- Money pumped into COVAX does not change IP protection. Big Pharma still maintains patents
- Not enough doses for everyone (20%). Countries will have to decide who gets vaccine first. ? Elderly ? Those with other diseases? Health workers?
- Vaccine nationalism (e.g. 80% Pfizer vaccine already reserved by northern High Income Countries)



Why COVAX is not good enough

- Weaknesses of COVAX
 - Relies on market
 - No fixed pricing
 - Can't stop privatising IP
 - Does not prevent one country cutting a deal
 - No guarantee you get the most suitable vaccine (e.g. super cold chain)

Min Mboweni allocated R0.5 billion,
R4.5 billion more needed for SA



COVID-19 Technology Access Pool (C-TAP)

- An open-access technology pool to speed up discovery of vaccines, medicines and other technologies
- Supported by 34 Low/Mid Income countries; no support UK, USA
- Pfizer: “nonsense” and “dangerous”
- To date, not one Pharma company has donated its IP to the pool



The alternative – a Waiver of IP at the World Trade Organisation

- South Africa and India proposed a Waiver of all IP for COVID-19 related technologies in WTO
 - Just during of the epidemic
 - Until vaccine can comprehensively cover the population; or
 - majority global people immune
 - Only for COVID-19 related tech
 - Not mandatory for countries
 - Enables Tech Transfer for local production
- Co-sponsored Kenya and eSwatini, supported by range of LICs, MICs, the Vatican, WHO, UNAIDS
- Opposed by US, EU, Japan and others



Global governance of the Health Technology landscape

- In the hands of Big Pharma, Big Gates, Big GAVI, and Big Countries with their little partners
- We know:
 - COVAX is insufficient and cements patent control of vaccine market
 - Pharma companies now heroes of vaccine science (TWN)
 - C-TAP is ignored and marginalised
 - A WTO Waiver will lower costs, remove regulatory obstacles and potentially enable local production



Phase 3 of Covid-19 vaccine trial kicks off in South Africa

alth24 Compiled by Zakiyah Ebrahim

SHARE  



Johnson & Johnson's Phase 3 trial of its Covid-19 vaccine has officially launched in South Africa

South Africa – vaccine prospects positive

- We are hosting vaccine trials (at least 3)
- We have local production capacity in both private and public sector (PPP)
- J&J concluded deal with Aspen to finish vaccine - unclear if for local distribution
 - Dec: President announces payment to COVAX facility to cover 10% of pop early 2021
 - Jan: 1.5 mill vaccinations from Serum Institute of India
 - This week: 20 million purchased
- SAPHRA received registration application J&J vaccine Dec; others license by comparability

South Africa – vaccine prospects minus

- Which vaccine we receive via COVAX depends...
- Did we miss a COVAX deposit deadline...?
- No legal compulsion to be vaccinated (yet?)
- All health procedures nominally require informed consent – but probably not practice
- No specific compensation system
- No discussion on gender or intersectionality risks; populations vulnerable due to social situation (e.g. homeless, migrants, disability, sexual orientation)
- Not clear if private sector can sequester part of the national allocation
- Vaccine misinformation rife; beliefs uncertain

Government mum as SA misses another deadline for Covax vaccine deposit

fin24 Khulekani Magubane

SHARE   

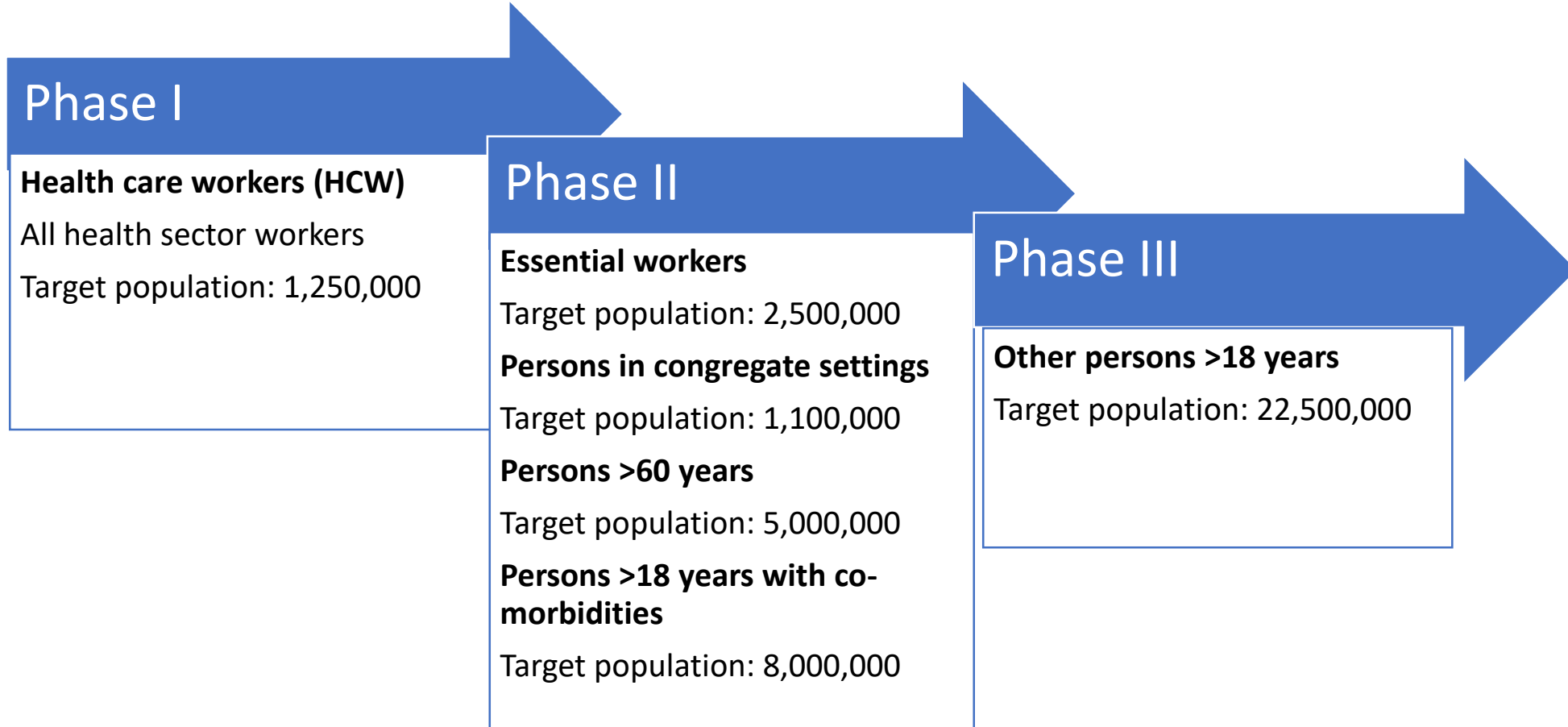


Listen to this article 0:00

 SUBSCRIBERS CAN LISTEN TO THIS ARTICLE



What is planned?



South Africa currently relying on Astra Zenica vaccine – two doses, 4 weeks apart; does not need supercold storage

Many unresolved issues

- Should Pregnant Women and Children be vaccinated?
- Should those who have previously survived COVID-19 be vaccinated?
- How will everyone get their Vaccination Card?
- Will the information system be secure and reliable?
- Will private sector get in their first?
- Do we have enough people to deliver the vaccinations?
- Where will people get their vaccination?
- Vaccine denialism

Access to a vaccine for COVID-19 is your right

- Covenant on Economic, Social and Cultural Rights:
 - In order for everyone to enjoy “the highest attainable standard of physical and mental health”, states must take steps to “prevent, treat and control epidemic, endemic, occupational and other diseases” and ensure access to medical service and medical attention in the event of sickness.”
- Constitution of South Africa
 - Everyone has the right to have access to health care: our health services and the state must take “reasonable legislative and other measures, within its available resources, to achieve the progressive realisation of each of these rights”



- Our national response in past month has been entirely focused on purchase of vaccine
- No attention to the waiver or building local vaccine capacity
- No attention to equity in the region – we have been as vaccine nationalist as other nations ...
- Our IP legislation is still handing out patents to pharma companies – Fix the Patent Laws

Fix the Patent Laws: <https://www.fixthepatentlaws.org/>

PHM Equitable Access to Health Tech for COVID19: <https://phmovement.org/eact/>

News | Coronavirus pandemic

Zimbabwe bans traditional funerals after spike in COVID cases

Move is part of new measures to stop traditional funeral rites believed to be increasing the spread of the coronavirus in the country.

