

The UN General Assembly Resolutions on COVID-19: Solemn Assurances for Access to Health Technologies without an Action Plan

By Nirmalya Syam*

The outbreak of the global pandemic of a novel coronavirus disease – commonly called COVID-19 – has spurred the international community to explore solutions to this unprecedented public health crisis. Under article 55 (b) of the United Nations (UN) Charter, the UN is mandated to promote, among others, “... solutions of

international economic, social, health and related problems...” Under article 56 of the Charter, all UN member States have pledged to take joint and separate action in co-operation with the UN for the achievement of the purposes set forth in article 55, including the promotion of solutions to international health problems.

Abstract

The United Nations (UN) has the mandate under the Charter of the United Nations to promote solutions to international health problems, such as the global COVID-19 pandemic. While the UN secretariat, led by the Secretary-General, has undertaken a number of initiatives in response to COVID-19, member State initiatives in the UN has so far been limited to two resolutions adopted by the UN General Assembly. Member States are currently negotiating an omnibus resolution of the General Assembly on COVID-19. This policy brief analyzes the extent to which the General Assembly addresses the issue of timely, equitable and affordable access to health technologies, particularly for developing countries who have greater vulnerability to COVID-19. The adopted resolutions make very broad pledges for global solidarity but lack specific commitments to guide actions by member States. The omnibus resolution currently under negotiation should provide specific guidance to member States on actions to be taken based on the principles of solidarity and multilateral cooperation in diverse aspects impacted by COVID-19.

Les Nations unies (ONU) ont pour mandat, en vertu de la Charte des Nations unies, de promouvoir des solutions aux problèmes de santé internationaux, tels que la pandémie mondiale de COVID-19. Alors que le secrétariat des Nations unies, dirigé par le Secrétaire Général, a entrepris un certain nombre d'initiatives en réponse à la pandémie de COVID-19, les initiatives des États membres des Nations unies se sont jusqu'à présent limitées à deux résolutions adoptées par l'Assemblée générale des Nations unies. Les États membres négocient actuellement une résolution de portée générale. La présente note de synthèse analyse dans quelle mesure la question de l'accès rapide, équitable et abordable aux technologies de la santé, en particulier pour les pays en développement qui sont plus vulnérables à la pandémie est abordée dans le cadre des discussions de l'Assemblée générale. Les résolutions adoptées contiennent des engagements très larges en faveur de la solidarité mondiale, mais aucun d'engagement spécifique sur les actions qui doivent être entreprises par les États membres. Il est essentiel que la résolution actuellement en cours de négociation fournisse des orientations spécifiques aux États membres sur les mesures à prendre, sur la base des principes de solidarité et de coopération multilatérale, dans les domaines et secteurs touchés par la COVID-19.

Las Naciones Unidas, con arreglo a la Carta de las Naciones Unidas, tienen el mandato de promover la solución de problemas internacionales de carácter sanitario, como la pandemia mundial de COVID-19. Aunque la Secretaría de las Naciones Unidas, dirigida por el Secretario General, ha emprendido diversas iniciativas en respuesta a la COVID-19, las medidas de los Estados Miembros de las Naciones Unidas se han limitado hasta el momento a dos resoluciones adoptadas por la Asamblea General de las Naciones Unidas. Los Estados Miembros están negociando actualmente una resolución general de la Asamblea General sobre la COVID-19. En este informe de políticas se analiza la medida en que la Asamblea General aborda la cuestión del acceso oportuno, equitativo y asequible a tecnologías de la salud, especialmente para los países en desarrollo, que son más vulnerables a la COVID-19. En las resoluciones adoptadas se hacen promesas muy generales de solidaridad mundial, pero faltan compromisos concretos para orientar la actuación de los Estados Miembros. La resolución general que se está negociando actualmente debería proporcionar orientaciones específicas a los Estados Miembros relativas a las medidas que han de adoptarse sobre la base de los principios de solidaridad y cooperación multilateral en diversos aspectos afectados por la COVID-19.

* Nirmalya Syam is Senior Programme Officer of the Health, Intellectual Property and Biodiversity (HIPB) Programme of the South Centre.

The UN Secretary-General has led the UN response to the pandemic by stressing on the need for coordinated, decisive, and innovative policy action from the world's leading economies, reiterating that the poorest countries and most vulnerable will be the hardest hit by the pandemic.¹ In a series of policy briefs, the Secretary-General has also laid down a vision for how the international community can deliver an effective and coordinated response to COVID-19.² In several statements, the Secretary-General has emphatically stated that vaccines, therapeutics and diagnostics for COVID-19 must be seen as a clear global public good, and that these should be affordable and universally available for everyone everywhere.³ The Secretary-General also established an inter-agency fund mechanism called the UN COVID-19 Response and Recovery Fund to support low- and middle-income countries in responding to the pandemic and its socio-economic impacts.⁴

However, the real action in response to COVID-19 within the UN system is the responsibility of the member States of the UN, within which the world's leading economies have to play a crucial role. So far, the response by the member States to COVID-19 has been manifested in the form of two resolutions adopted by the United Nations General Assembly (UNGA) – 1) resolution on “Global solidarity to fight the coronavirus disease 2019 (COVID-19)”, and 2) resolution on “International cooperation to ensure global access to medicines, vaccines and medical equipment to face COVID-19.” A proposed resolution at the UN Security Council failed to be adopted due to the lack of consensus. Currently, the General Assembly is undertaking virtual negotiations on an omnibus resolution⁵ on a comprehensive and coordinated response to COVID-19.⁶

This policy brief analyzes the UN General Assembly resolutions that have been proposed, adopted or are under negotiation. It examines, in particular, the extent to which these address the issue of access to health technologies for COVID-19.

Solidarity in response to COVID-19

The “Russian” proposal for a UN declaration

The first initiative to guide the UN and its member States to respond to the diverse challenges posed by COVID-19 was a draft resolution proposed by the Russian Federation along with 4 other countries.⁷ The following were the salient features of the draft resolution:

- It expressed resolve to set aside political and economic differences and cooperate with one another *in accordance with the Charter* by joining efforts in countering the global challenge of COVID-19. This was the only proposal among all others on COVID-19 which alluded to the Charter obligations of the UN and its member States to cooperate in resolving global health problems.

- Member States pledged to give all necessary support to the World Health Organization (WHO) as the coordinating authority of international health work. This was also the only proposal which recognized the role of the WHO in a coordinating capacity.
- It called for the pursuit of a comprehensive, science-based approach in response to COVID-19 following the rules, recommendations and technical guidance of WHO. This again recognized the coordinating and guiding function of the WHO in leading the global response to COVID-19 from the health perspective.
- The proposed draft resolution expressed a commitment by member States to cooperate to develop vaccines and treatments.
- The draft resolution expressed profound solidarity with most affected countries and, in particular, to provide technical assistance to developing countries with weak health systems and more vulnerable populations.
- Member States pledged to cooperate with each other and consult with WHO to ensure that national protective measures are effective, while minimizing to the extent possible negative effects for people, other States, trade and the global economy.
- Member States pledged to refrain from raising trade barriers, raising new export restrictions or implementing protectionist or discriminatory measures inconsistent with the World Trade Organization (WTO) rules and not to apply any unilateral coercive measure without the mandate of the UN Security Council, and prevent financial speculations, to not hinder access to essential health care services and quality, safe, effective and affordable essential medicines, vaccines, personal protection and food items.
- The draft resolution expressed the resolve to cooperate to address disruptions to international trade, mitigate the damage caused to the global economy and promote economic growth, especially in developing countries.
- The draft resolution also called upon member States to share reliable and accurate data relating to COVID-19.
- Finally, the draft resolution also expressed the resolve not to allow any stigmatization or discrimination of States, peoples or individuals.

However, consensus could not be reached on the draft proposal. It is reported that the European Union (EU), the United Kingdom (UK), the United States (US) and Ukraine objected to the proposal.⁸ A revised version of the proposal was submitted on 16 April 2020, co-sponsored by 30 countries.⁹ The following new proposals (and some dilutions from the previous draft) were advanced:

- The revised draft resolution called for the *expansion of global manufacturing capacity* to meet the increasing needs for medical products and equipment to cope with the pandemic, ensuring that essential medical supplies and pharmaceuticals are made widely available, at affordable prices, on an equitable basis, where they are most needed and as quickly as possible.
- The draft resolution invited the international financial institutions to support countries in need using all relevant financial instruments to the fullest extent, including addressing risks of debt vulnerabilities in low-income countries.
- It recognized that investments in strengthening health systems capable of providing universal health coverage constitute the first line of defense against international health crises, and stressed the importance of aid targeted to the health sector of affected countries, as a complement to domestic financing, while also noting the role of private sector investment, as appropriate, and called for increased business engagement in the global efforts to curb the pandemic.
- Reference to prohibition of “unilateral coercive measures” in the first draft was removed but the call for refraining from adoption of trade restrictive measures was retained.
- The draft resolution welcomed the launch of the Global Humanitarian Response Plan for COVID-19 on 25 March 2020.
- It also welcomed the statement by the Group of 77 (G77) and China on the COVID-19 pandemic (New York, 3 April 2020)¹⁰ as a strong message of solidarity in the face of the pandemic from the developing world, and reaffirmed the need to continue to work together tirelessly for the full implementation of the Sustainable Development Goals (SDGs).

However, no consensus was reached even on the revised proposal.¹¹

Adopted UNGA resolution on global solidarity

The “Russian proposal” was being considered in parallel with another draft resolution¹² proposed by 136 countries led by Ghana, Indonesia, Liechtenstein, Norway, Singapore and Switzerland, that was eventually adopted by the General Assembly.¹³ The following are the salient features of this resolution:

- The resolution recognizes the central role of the UN system in coordinating the global response to COVID-19, acknowledging the crucial role played by WHO.
- The resolution acknowledges the need for all relevant stakeholders to work together.
- The resolution also mentions the need for full

respect for human rights, and states that there is no place for discrimination, racism or xenophobia in relation to COVID-19.

- It calls for intensified international cooperation to contain, mitigate and defeat the pandemic, including by exchanging information, scientific knowledge and best practices and by applying the relevant guidelines recommended by the WHO.
- The resolution renews commitment to help people and societies in special situations, especially the weakest and most vulnerable.
- The resolution also calls upon the United Nations system, under the leadership of the Secretary-General, to work with all relevant actors in order to mobilize a coordinated global response to the pandemic and its adverse social, economic and financial impact on all societies.

Proposal by Saudi Arabia

After the adoption of the UN General Assembly resolution on global solidarity to fight COVID-19, the Kingdom of Saudi Arabia submitted a new draft proposal to the General Assembly, co-sponsored by 36 countries, on a united response for combating COVID-19.¹⁴

- The draft resolution acknowledged that a response to COVID-19 calls for an open, transparent, robust, coordinated, large-scale, science-based and inclusive global response in the spirit of solidarity. It also took note of the importance of utilizing *all available policy tools* to safeguard the global economy, financial markets, trade and global supply chains in order to minimize the economic damage from the pandemic, restore global growth and maintain market stability.
- The draft resolution also recognized the *essential* role of the UN as the body that can effectively bring together a global response to control and contain the spread of COVID-19 and address the critical interlinkages between health, trade, finance and economic and social development, and the great effort undertaken by the WHO.
- It also expressed deep concern about the serious risks posed to all countries, in particular developing and least developed countries, and notably African countries and small island developing States.
- The draft resolution also called for intensified international cooperation and multilateral efforts in handling disease outbreaks, including by sharing timely, accurate and transparent information, exchanging epidemiological and clinical data, sharing materials necessary for research and development (R&D), and implementing the International Health Regulations (IHR 2005) and relevant guidance.
- The draft resolution further emphasized on the need for the United Nations system, as well as relevant regional and international organizations and

financial institutions, to collaborate in order to ensure that the adverse social, economic, humanitarian and financial impacts of COVID-19 are addressed in a timely and non-discriminatory manner.

- Due emphasis was given to the need for full respect for human rights, stressing further that there is no place for any form of discrimination, racism and xenophobia in the response to the pandemic.
- In particular, the draft resolution stressed on the need for urgent short-term action on
 - ◇ Swift delivery of medical supplies
 - ◇ *Increasing R&D funding for medicines and vaccines*, leveraging digital technologies and strengthening international scientific cooperation
 - ◇ *Expanding manufacturing capacity* to meet the increasing needs for medical supplies and ensuring that these are made widely available, at an affordable price, on an equitable basis, where they are most needed and as quickly as possible
 - ◇ Engaging with frontline international organizations, notably UN, WHO, the International Monetary Fund (IMF), World Bank, multilateral and regional development banks for financial packages to strengthen global financial safety nets.
- The draft resolution reaffirmed the necessity to support economies, protect workers, businesses, especially micro-, small and medium-sized enterprises, and the sectors most affected, and shield the vulnerable through adequate social protection, and welcomed the Group of Twenty (G20) statement of injecting 5 trillion USD into the global economy.
- It also stressed on the need to give high priority to people, particularly the elderly, women and girls, displaced persons and refugees and persons with disabilities, and areas that are most vulnerable, particularly developing and least developed countries.
- It called for enhanced coordination on public health and financial measures as well as cooperation at the national, regional and international levels to confront and combat this pandemic.
- The draft resolution stressed the need to give appropriate consideration to the issue of halting and reversing the global threats posed by epidemics through the implementation of SDGs.
- It also urged member States, in conjunction with the United Nations, the World Health Organization, the International Monetary Fund, the

World Bank Group and other regional and international organizations, working within their existing mandates, to embark on sustainable pandemic preparedness, response and recovery planning, taking into account strengthening the capacity of health sector institutions in developing countries.

However, consensus could not be reached on this proposal.

Access to medicines, vaccines and medical equipment related to COVID-19

Mexico submitted another draft resolution with 179 co-sponsoring countries specifically focusing on international cooperation to ensure global access to medicines, vaccines and medical equipment to face COVID-19.¹⁵ This resolution was adopted without any objection.¹⁶ The following are the main features of this resolution:

- The resolution reaffirmed the coordinating role of the UN system and the *crucial leading* role of WHO.
- It requests the Secretary-General, in close collaboration with the WHO and other relevant agencies of the UN system, including the international financial institutions, *to identify and recommend options*, including approaches to rapidly scaling manufacturing and strengthening supply chains that promote and ensure fair, transparent, equitable, efficient and timely access to and distribution of preventive tools, laboratory testing, reagents and supporting materials, essential medical supplies, new diagnostics, drugs and future COVID-19 vaccines, with a view to making them available to all those in need, in particular in developing countries.
- It encourages member States to work in partnership with all relevant stakeholders to *increase research and development funding for vaccines and medicines*, leverage digital technologies, and strengthen scientific international cooperation necessary to combat COVID-19 and to bolster coordination, including with the private sector, towards *rapid development, manufacturing and distribution of diagnostics, antiviral medicines, personal protective equipment and vaccines*, adhering to the objectives of efficacy, safety, equity, accessibility, and affordability.
- The resolution also calls upon member States to take immediate steps to prevent speculation and undue stockpiling.
- Further, the resolution requests the Secretary-General to establish an inter-agency task force in collaboration with WHO to take the necessary steps to effectively coordinate and follow up on the efforts of the United Nations system to promote and ensure global access to medicines, vaccines and medical equipment needed to face COVID-19.

Though the resolution was adopted by consensus, two member States expressed their different perspectives which were not reflected in the resolution. Pakistan point-

ed out that the resolution does not call for assurance of adequate financial resources to developing countries to enable them to meet the enormous challenges of addressing the health emergency and preserving socio-economic development. On the other hand, the US delivered an explanatory letter dissociating itself from the reference to “WHO’s crucial leading role” in the COVID-19 outbreak, alluding to the US’s criticism of the handling of the COVID-19 outbreak by the WHO. The US also dissociated itself from the request to the Secretary-General to establish an inter-agency task force in the light of its position on the role of the WHO.

New Draft Omnibus Resolution

The President of the General Assembly appointed the Permanent Representatives of Afghanistan and Croatia – Ms. Adela Raz and Mr. Ivan Simonovic – as co-coordinators for the General Assembly on COVID-19 related initiatives, with the mandate to engage with member States on COVID-19 related initiatives to facilitate an exchange of views, coordinate approaches and initiatives and leverage the influence of the General Assembly to effectively advocate for measures aimed at defeating COVID-19, while mitigating its social and economic impact.¹⁷ The co-coordinators have submitted the zero draft of an omnibus resolution on a “Comprehensive and Coordinated Response to the COVID-19 Pandemic.”¹⁸ The draft resolution has been prepared based on written and oral contributions from member States as well as recommendations from groups of member States and experts within the UN system. The preambular and operative provisions in the draft resolution draws from the language used in the two adopted UNGA Resolutions, in Resolution WHA 73.1 on COVID-19 adopted by the World Health Assembly of the WHO,¹⁹ as well as in the statement on COVID-19 made by the President of the UN Human Rights Council.²⁰

The draft resolution recognizes COVID-19 as one of the greatest challenges in the history of the UN and expresses concern about its impact on loss of life and livelihood, food security and malnutrition, health and education, the disruption to economies and societies, the exacerbation of economic and social inequalities within and between countries, which will hamper progress towards achieving the Sustainable Development Goals and other internationally agreed development goals. It also expresses solidarity with the countries affected by COVID-19, and condolences and sympathies to the families of the victims of COVID-19, and the people whose lives and livelihoods have been and will be impacted by the crisis. The draft resolution expresses the conviction that the global response to COVID-19 must be based on unity, solidarity, cooperation, transparency, accountability and trust among States, peoples and generations. It reaffirms commitment to the UN Charter, the SDGs, and other internationally agreed development goals and programmes of action, UN declarations on health matters including

universal health coverage (UHC) and non-communicable diseases (NCDs), and international human rights instruments. It reaffirms the two UNGA resolutions on COVID-19 (see above). Moreover, while recognizing the central role of the UN system in coordinating and catalyzing the global response to COVID-19, it also recognizes the WHO’s constitutional mandate to act as the directing and coordinating authority on international health work and its key leadership role within the broader UN response.

In this regard, the draft resolution reaffirms commitment to international cooperation, multilateralism and solidarity as the only effective way for the world to respond to COVID-19, and calls for intensified international cooperation to contain, mitigate and overcome the pandemic and its consequences, including by supporting the development of new data tools and platforms to inform mitigation and response actions, and continuously monitor the impact of the pandemic. It expresses deep concern about the challenges facing the most vulnerable countries, including African countries and Least Developed Countries (LDCs) and underlines the need to give particular attention to their concerns and specific challenges. It also expresses deep concern about the devastating impact of COVID-19 on sustainable development including food security, nutrition, livelihoods, education and health services, especially for people in vulnerable situations and countries in special situations. It also reaffirms that the pandemic and related global economic and commodity price shocks could significantly increase the number of countries in or at risk of debt distress and expresses deep concern at the impact of high debt levels on the ability of countries to withstand the impact of COVID-19. It also expresses deep concern at the disproportionate impact of the crisis on women and girls.

Specifically, in respect of public health, the draft resolution calls on member States to maintain the continued functioning of the health system in all relevant aspects, including for COVID-19 and other epidemics, as well as for communicable diseases, neglected tropical diseases, NCDs and vaccination programmes, etc., in the context of achieving UHC. It calls on international organizations and other relevant stakeholders to support all countries, upon request, in implementation and review of multisectoral national plans and health systems strengthening for COVID-19 and maintaining the safe provision of all other essential public health functions and services. It also calls upon member States, supported by the UN, to work together to develop a science-based, cooperative approach to allocate scarce resources on the basis of a collective public health needs assessment. Moreover, it also calls for protection of vulnerable groups in the context of timely, universal and equitable access to safe, quality, effective and affordable health care services and equipment including diagnostics, medicines and vaccines. Member States are encouraged to work with relevant stakeholders to increase research and development funding for vaccines and medicines, leverage digital technologies and strengthen scientific international cooperation and bolster coordination for rapid development, manufacturing and distri-

bution of diagnostics, antiviral medicines, personal protective equipment, medical science-based treatment protocols and vaccines. It also recognizes extensive immunization as a global public good, following the World Health Assembly (WHA) resolution WHA 73.1. Member States are also encouraged to ensure availability of reliable, high quality and timely data to inform COVID-19 response. It reaffirms the need for safe and unhindered access by humanitarian personnel, particularly medical personnel and calls upon member States to eliminate any impediment to the delivery of humanitarian assistance.

Further, the draft resolution welcomes the independent and comprehensive evaluation that is to be undertaken pursuant to the referred to WHA resolution to review the experience gained and lessons learnt from the WHO coordinated international health response to COVID-19.

Importance of the UN General Assembly resolutions

It should be noted that the UN General Assembly resolutions, in contrast to the Security Council resolutions, are not binding on the member States. They can nevertheless be an important guiding instrument for coherent global action by member States and related international organizations, both within the UN system and outside. However, in order for the General Assembly resolutions to serve as an effective guiding instrument, it is important that the resolutions adequately address all aspects relating to a particular global challenge that need to be addressed, pointing to the desirable action on the part of different actors. Measured against this yardstick, the UN General Assembly resolutions on COVID-19 do not provide sufficient guidance beyond broad exhortations of good faith principles.

First, both adopted resolutions do not provide clarity on the role that should be played by the WHO. While the resolution on global solidarity refers to the “crucial” role of the WHO, the resolution on access to medicines, vaccines and medical equipment related to COVID-19 refers to the “crucial leading role” of the WHO. However, the role that the WHO should play is not clarified. At the same time, both resolutions refer to the coordinating role of the UN system, suggesting a marginalization of the WHO as an important actor, but not in a coordinating capacity. It would have been more valuable as a guiding instrument for the WHO, if the General Assembly resolutions clarified its expectation of the role that the WHO should play, particularly with regard to coordination of the health-related interventions in response to COVID-19. Under the relationship agreement between the UN and WHO, recommendations made by the UN (such as in the form of General Assembly resolutions) are to be placed for further consideration by the governing bodies of the WHO. Therefore, more clarity on the role of WHO would have been desirable. For instance, in contrast to the ambivalent language in the referred to resolutions, the G77

statement on COVID-19 clearly encourages the WHO to “...take the lead in developing a strategy to ensure that Governments have adequate supplies of essential medical equipment to contain the spread of COVID-19 and to mitigate its impacts.”²¹ However, the draft omnibus resolution recognizes the key leadership role of the WHO as the directing and coordinating authority on international health work. It will be important to ensure that the final resolution contains such an acknowledgement of the leading role of the WHO.

Second, both the resolutions do not specify clearly the actions that need to be taken to address the challenges posed by COVID-19. The draft omnibus resolution is also deficient in this regard and provides no guidance on actions that could be taken by member States and the UN agencies to ensure universal, equitable, timely and affordable access to diagnostics, medicines and vaccines. They recognise some of the challenges, but do not specify concrete action areas in respect of which solutions should be explored. For instance, the need to identify and recommend options to rapidly scale up manufacturing and for strengthening supply chains to ensure timely and affordable access to health technologies required for COVID-19 is mentioned. However, there is no guidance on the kind of mechanisms that could be explored in this regard, and what role the WHO can play. For instance, it has been observed by commentators that the WHO should play a coordinating role in respect of the various R&D initiatives that have been initiated in the aftermath of COVID-19,²² in order to ensure priority setting and prompt, equitable and affordable access to the existing health technologies as well as technologies that could be developed in future. There is also no call for enhanced public funding of research and development of health technologies on a non-proprietary and open access basis.

Third, the particular challenges faced by developing countries in the context of COVID-19, including their need for technical and financial assistance, is not specifically recognized in the adopted resolutions. The resolutions could have provided clear guidance on the need to transfer technology and know-how for the local manufacturing of health technologies in developing countries and the use of safeguards under international agreements, such as the flexibilities relating to intellectual property (IP) rights that are available under the WTO Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS). Guidance could have also been given on how mechanisms within the UN such as the UN Technology Bank or the Technology Facilitation Mechanism to support the implementation of the SDGs could be leveraged to that end. Even the draft omnibus resolution does not refer to these, or any reference to the possibility of fully utilizing the TRIPS flexibilities²³ or utilizing mechanisms such as the COVID-19 Technology Access Pool (C-TAP)²⁴ launched by WHO and Costa Rica.

Conclusion

The UN secretariat has taken good initiatives to provide guidance to its member States on a number of thematic

issues impacted by COVID-19 on which suitable response measures need to be taken. The Secretary-General has consistently and unequivocally called upon the leading economies of the world to act in a spirit of multilateral cooperation and solidarity to the poorer countries and the most vulnerable peoples. In particular, the Secretary-General has unequivocally stressed the need to ensure that vaccines, therapeutics and diagnostics for COVID-19 are universally affordable and available as global public goods. However, the UN General Assembly resolutions on COVID-19 that member States have agreed to have been limited to exhortations of the need for global solidarity and a pledge by the member States to address some of the challenges in relation to COVID-19. These resolutions do not provide specific guidance in terms of the role of the WHO and other agencies in a coordinated global response to COVID-19. The resolutions are also ambivalent in recognizing the particular vulnerabilities faced by developing countries and the action areas where specific intervention would be needed, such as exploration of mechanisms to facilitate public funding of health R&D and transfer of technology and know-how to developing countries on an open sharing, non-proprietary basis.²⁵ These deficiencies could be addressed in the context of the ongoing negotiations for an omnibus resolution on COVID-19. In particular, the omnibus resolution can specifically guide member States to give full consideration to the use of the flexibilities available under the TRIPS Agreement to remove any potential IP barrier to the use of health technologies for COVID-19, as well as to effectively contribute to the implementation of the C-TAP or other initiatives that allow for unrestricted access to the necessary technologies.

Endnotes:

¹ United Nations, “Secretary-General Remarks on COVID-19: A Call for Solidarity”, 19 March 2020. Available from https://www.un.org/sites/un2.un.org/files/sg_remarks_on_covid-19_english_19_march_2020.pdf (accessed 20 May 2020).

² Covid-19 Response, From the UN Secretary-General. Available from <https://www.un.org/en/coronavirus/un-secretary-general> (accessed 20 May 2020). The UN Department of Economic and Social Affairs has also published a number of policy briefs addressing different aspects of COVID-19. See United Nations, UN/DESA Policy Brief. Available from https://www.un.org/development/desa/dpad/document_gem/undesa-policy-brief/ (accessed 7 June 2020).

³ E.g. United Nations Secretary-General, “Secretary-General’s remarks to the World Health Assembly”, 18 May 2020. Available from <https://www.un.org/sg/en/content/sg/statement/2020-05-18/secretary-generals-remarks-the-world-health-assembly-bilingual-delivered-scroll-down-for-english-and-french-version> (accessed 20 May 2020).

⁴ United Nations, “The Secretary-General’s COVID-19 Response and Recovery Fund” (April 2020). Available from https://www.un.org/sites/un2.un.org/files/sg_response_and_recovery_fund_fact_sheet.pdf (accessed 20 May 2020).

⁵ An ‘omnibus resolution’ is a resolution that is intended to address all facets of an issue.

⁶ Social Watch, “UN Monitor: COVID-19 Round Up –

15/06/2020”, 15 June 2020. Available from <http://www.socialwatch.org/node/18496>.

⁷ Declaration of solidarity of the United Nations in the face of challenges posed by the coronavirus disease 2019 (COVID-19), UN Doc A/74/L.51 (27 March 2020). Available from <https://undocs.org/A/74/L.51> (accessed 20 May 2020).

⁸ See Edith M. Lederer, “UN rejects 2 COVID-19 resolutions from Russia, Saudi Arabia”, AP News, 23 April 2020. Available from <https://apnews.com/f59fe5845ec596d59e1efc8a03236e4a> (accessed 20 May 2020).

⁹ Declaration of solidarity of the United Nations in the face of challenges posed by the coronavirus disease 2019 (COVID-19), UN Doc A/74/L.51/Rev.1 (16 April 2020). Available from <https://undocs.org/A/74/L.51/Rev.1> (accessed 20 May 2020).

¹⁰ Statement by the Group of 77 and China on the coronavirus disease (COVID-19) pandemic, UN Doc A/74/803 (14 April 2020). Available from <https://undocs.org/en/A/74/803> (accessed 20 May 2020).

¹¹ Lederer, “UN rejects 2 COVID-19 resolutions from Russia, Saudi Arabia”.

¹² Global solidarity to fight the coronavirus disease 2019 (COVID-19), UN Doc A/74/L.52 (27 March 2020). Available from <https://www.un.org/pga/74/wp-content/uploads/sites/99/2020/03/A-74-L.52.pdf> (accessed 20 May 2020).

¹³ UNGA Resolution 74/270 (3 April 2020). Available from <https://undocs.org/en/A/RES/74/270> (accessed 20 May 2020).

¹⁴ United response against global health threats: combating COVID-19, UN Doc. A/74/L.57 (14 April 2020). Available from <https://undocs.org/A/74/L.57> (accessed 20 May 2020).

¹⁵ International cooperation to ensure global access to medicines, vaccines and medical equipment to face COVID-19, UN Doc A/74/L.56/Add.1 (20 April 2020). Available from <https://undocs.org/en/A/74/L.56/ADD.1> (accessed 20 May 2020).

¹⁶ UNGA Resolution 74/274 (21 April 2020). Available from <https://undocs.org/en/A/RES/74/274> (accessed 20 May 2020).

¹⁷ General Assembly of the United Nations, President of the 74th Session, “Appointment of Co-coordinators for COVID-19 related initiatives”, 20 April 2020. Available from <https://www.un.org/pga/74/wp-content/uploads/sites/99/2020/04/PGA-Appointment-Letter-on-Covid-19-co-coordinators-1.pdf>.

¹⁸ General Assembly of the United Nations, President of the 74th Session, “Omnibus Resolution: Comprehensive and Coordinated Response to the COVID-19 Pandemic”, 5 June 2020. Available from <https://www.un.org/pga/74/wp-content/uploads/sites/99/2020/06/COVID-19-OMNIBUS-RESOLUTION-1.pdf>.

¹⁹ See Nirmalya Syam, Mirza Alas and Vitor Ido, “The 73rd World Health Assembly Resolution on COVID-19: Quest of Global Solidarity for Equitable Access to Health Products”, Policy Brief, No.78 (Geneva, South Centre, 2020). Available from <https://www.southcentre.int/policy-brief-78-may-2020/>.

²⁰ United Nations Human Rights Council, document A/HRC/43/L.42. Available from <https://undocs.org/A/HRC/43/L.42>.

²¹ United Nations General Assembly, document A/74/803. Available from <https://undocs.org/en/A/74/803>.

²² See Viviana Muñoz Tellez, “The COVID-19 Pandemic: R&D and Intellectual Property Management for Access to Diagnostics, Medicines and Vaccines”, South Centre Policy Brief 73 (April 2020). Available from https://www.southcentre.int/wp-content/uploads/2020/04/PB73_The-COVID-19-Pandemic-RD-and-

[Intellectual-Property-Management-for-Access-to-Diagnostics-Medicines-and-Vaccines_EN-3.pdf](#) (accessed 20 May 2020).

²³ See, e.g., World Health Organization, “Making the response to COVID-19 a public common good: Solidarity call to action”, 1 June 2020. Available from

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/global-research-on-novel-coronavirus-2019-ncov/covid-19-technology-access-pool/solidarity-call-to-action>. Also see, South Centre, “Message from the South Centre at the Launch of the “Solidarity Call to Action” by the President of Costa Rica and the Director-General of the WHO”, 1 June 2020. Available from <https://ipaccessmeds.southcentre.int/wp-content/uploads/2020/05/SC-Statement-SCTA-REV.pdf>; Zeleke Temesgen Boru, “Equitable Access to COVID-19 Related Health Technologies: A Global Priority”, Research Paper, No. 114 (South Centre, Geneva, 2020). Available from <https://www.southcentre.int/wp-content/uploads/2020/06/RP-114.pdf>.

²⁴ World Health Organization, “COVID-19 technology access pool.” Available from

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/global-research-on-novel-coronavirus-2019-ncov/covid-19-technology-access-pool#:~:text=The%20COVID%2D19%20Technology%20Access,knowledge%2C%20intellectual%20property%20and%20data>.

²⁵ E.g. On 2 June 2020, the WHO secretariat and the Government of Costa Rica issued a solidarity call to action to realize equitable global access to COVID-19 health technologies through pooling of knowledge, intellectual property and data. The call to action has been acceded to by 38 countries. See Solidarity Call to Action, “Making the response to COVID-19 a public common good”. Available from <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/global-research-on-novel-coronavirus-2019-ncov/covid-19-technology-access-pool/solidarity-call-to-action/docs/default-source/coronaviruse/solidarity-call-to-action/solidarity-call-to-action-01-june-2020> (accessed 7 June 2020).



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The South Centre
Chemin du Champ d'Anier 17
PO Box 228, 1211 Geneva 19
Switzerland
Telephone: (4122) 791 8050
south@southcentre.int
<https://www.southcentre.int>

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