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CEPI

Marcus Thranes gate 2
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Re: CEPI Equitable Access Policy

CC:

Cherry Gagandeep Kang, David Reddy, Ichiro Kurane, Jane Halton, Joachim Klein,
John Nkengasong, Peter Piot, Rajeev Venkayya, Trevor Mundel, Richard Hatchett, Helen Rees,
Peggy Hamburg, Peter Salama, Tim Evans

Dear Members of the CEPI Board,

Having cooperated extensively in the establishment of CEPI as a novel R&D initiative for public health-driven vaccine development, including as a Board member during its two formative years, we are writing to express our concern and disappointment in CEPI's revised Equitable Access Policy*, which was adopted during your December 2018 Board Meeting. Médecins Sans Frontières (MSF) was heartened by the creation of CEPI to break new ground in public-interest R&D because we believe it is a shared responsibility to ensure scientific and technological progress benefits all people – including the most vulnerable – and because we did not want to ever again be confronted with a terrible and deadly epidemic like the 2014-2016 Ebola outbreak without any tools to effectively respond.

As a medical humanitarian organisation, MSF witnesses the deadly impact of inequitable access to lifesaving drugs and vaccines on a daily basis. For the past 20 years, we have advocated for governments, companies and civil society to assume collective responsibility for ensuring that medical innovation addresses the neglected health needs of people who are most in need. This cannot be achieved through business-as-usual approaches; it requires an innovative approach with a strong public commitment to adopt and enforce transparent, public health-focused rules of engagement with research partners – including the private sector.

CEPI's revised Equitable Access Policy constitutes an alarming step backwards for the organisation because it no longer guarantees that the vaccines CEPI funds will be made available at an affordable price. It also provides no basis for CEPI to be held accountable to its public and philanthropic investors in its agreements with development partners on the ownership and treatment of intellectual property or the pricing of CEPI-funded vaccines. By replacing the previously detailed equitable access policy† with only a broad statement of principle, the revised policy marks a concerning pivot away from

* https://cepi.net/wp-content/uploads/2019/01/CEPI-Approach-to-Equitable-Access-13-12-FINAL_0.pdf

† https://msfaccess.org/sites/default/files/2018-09/CEPIoriginalPolicy_2017.pdf

CEPI's early commitments to access, transparency and openness, and to breaking new ground in terms of public responsibility. It betrays the interests of everyone who invested in CEPI because they wanted to change the deadly status quo.

When CEPI was established, its interim Board committed to a strong and visionary access policy to guarantee equitable access to CEPI-funded vaccines, developed with the support of legal experts from WHO, Wellcome Trust and MSF. It contained important safeguards including enforceable commitments on pricing and intellectual property, grounded in transparency and disclosure of information and knowledge. Regrettably, the Board failed to ensure the policy was implemented and used to shape access provisions in the contractual agreements CEPI signed with developers. Instead, supposedly in response to industry actors' dissatisfaction with the policy, it immediately gave in on its founding principles and decided to revise the access policy.

Over the summer, MSF provided repeated detailed and constructive feedback on the proposed revisions, including a proposal that an Access Advisory Committee of relevant experts be established to provide independent review of the legal agreements concluded with commercial developers from an access perspective. We also suggested ways to integrate access considerations at critical steps along the pathway of vaccines R&D. At the October 2018 Board meeting, we again raised our concerns about the weakening of CEPI's initial access commitments.


Ultimately, the Board lacked the courage to maintain the critical safeguards built in to the original access policy. We were disappointed to learn that it was replaced by a vague, toothless and weak new policy in December 2018, disregarding our concerns and proposals, while delegating the development of more detailed, but secret, implementation guidance to the Secretariat.

As you meet as a Board later this week in Tokyo, we urge you to reconsider this change in direction, which stands in stark contrast to the original intent of CEPI. We ask that you agree to work quickly to revise your current policy and come to your next Board meeting in June ready to adopt these revisions. The unique thing about CEPI is not the science, but the unprecedented levels of public and philanthropic money provided to make the science possible, in the interest of global public health. CEPI must live up to its promises to break new ground in vaccine R&D and do things differently. At a minimum, this requires the Board to step up now and reintroduce an unapologetic commitment to affordable access and transparency.

Sincerely,



Dr Joanne Liu
MSF International President



Dr Els Torreele
Executive Director, MSF Access Campaign