

Research Briefing

Number 9417

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13 July 2022

Waiving intellectual property rights for Covid-19 vaccines

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Summary

Global access to Covid-19 vaccines has been unequal. As of 30 June 2022, [16% of people in low-income countries have been fully vaccinated](#), compared to 74% in high income states. Africa continues to be the continent with the lowest vaccination rates: In March 2022, [less than 15% of its population was fully vaccinated](#).

“Fully vaccinated” means an individual has received two doses or a single dose of a one-dose vaccine. Low-income countries are those that have a

[Gross National Income \(GNI\) per person below US\\$1,045](#), while high-income countries have a GNI per person above US\$12,696.

This briefing sets out inequalities in access to Covid-19 vaccines, arguments for and against the proposed waiver, and details of the compromise text and reaction. It also signposts other challenges that affect the distribution of Covid-19 vaccines worldwide.

Three-year waiver proposed, 2020

In October 2020, South Africa and India proposed at the World Trade Organization (WTO) [that intellectual property rights on Covid-19 vaccines and related drugs and treatments be waived for at least three years](#). They argue this would allow more areas to manufacture vaccines and increase global supply. They cite the level of public investment in vaccines as one reason to share the technology.

Intellectual property (IP) rights are rights given to creators of work, which may take the form of an invention, industrial design, or trade secret, and usually give the creator an exclusive right over the use of their creation for a period.

South Africa and India's position gained the [reported backing of over 100 other states](#). The Biden Administration [also supported a waiver](#) in principle on IP rights relating to vaccines.

UK and EU opposition, 2020-2022

At the WTO, the proposal was opposed by the UK and European Union, among other countries.

They argue the IP rights system has [played a “positive role”](#) in generating innovative vaccines against Covid-19 and providing an incentive for further work to address new variants of concern. They have instead encouraged the [voluntary licensing of vaccines](#) to allow others to manufacture doses.

Compromise deal agreed, 2022

In June 2022, the WTO announced a [compromise text](#) (PDF) that gained consensus among its members, [including the UK](#) and EU. The proposal is narrower than the original, as does not currently cover diagnostics and therapeutics. They will be considered by the WTO later in 2022.

For five years, developing countries will be allowed to authorise the use of patented materials and ingredients for the manufacture of Covid-19 vaccines without the consent of the rights holder to produce vaccines, for domestic and eligible markets. Rights holders will be compensated. Some charities have argued this [does not go far enough](#), and some countries have [called for it to be extended to wider related technologies](#) this year. Some pharmaceutical companies have argued this will [undermine innovation](#).

1

Inequalities in vaccine access

The World Health Organization (WHO) has [set a target for 70% of the global population to be vaccinated](#) against Covid-19 by September 2022.¹ The G20, which includes the UK and US, [has also backed the goal](#).²

However, the purchase and rollout of Covid-19 vaccines has been dominated by richer economies:

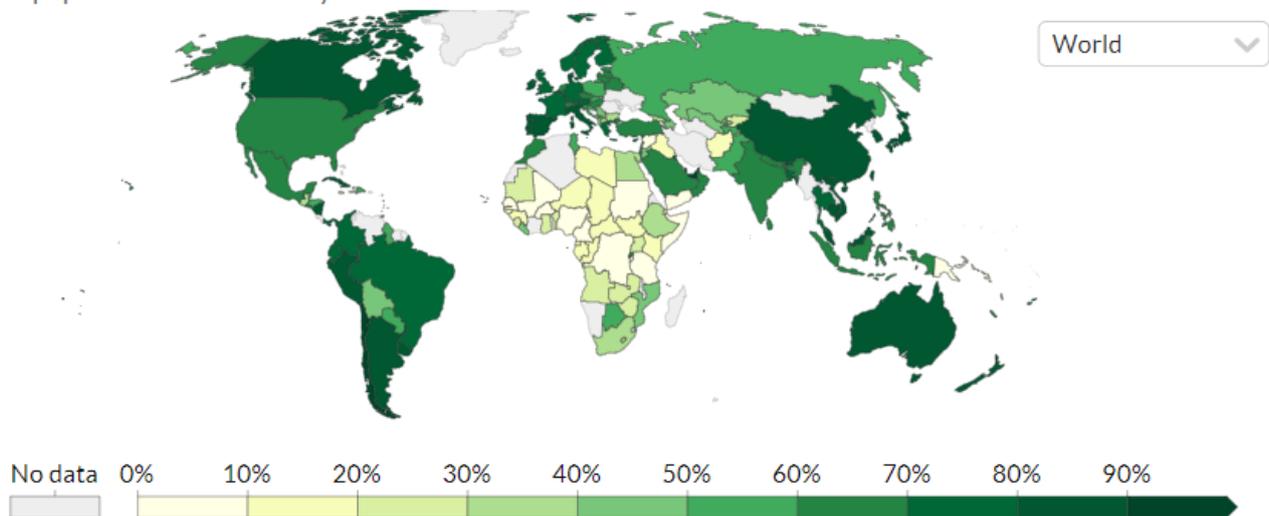
- As of 30 June 2022, [16% of people in low-income countries have been fully vaccinated](#), compared to 74% in high income states.³ As the below map shows, African countries have seen the lowest levels of vaccination.

“Fully vaccinated” means an individual has received two doses or a single dose of a one-dose vaccine. Low-income countries are those that have a [Gross National Income \(GNI\) per person below US\\$ 1,045](#), while high-income countries have a GNI per person above US\$ 12,696.⁴

Share of people who completed the initial COVID-19 vaccination protocol, Jul 12, 2022

Our World
in Data

Total number of people who received all doses prescribed by the initial vaccination protocol, divided by the total population of the country.



Note: “Share of people who completed initial Covid-19 vaccination protocol” means they have completed initial courses i.e. two doses of a two-dose vaccine and not a booster.

Source: Our World in Data, [Share of people who completed the initial Covid-19 vaccination protocol](#), accessed 13 July 2022. Used under [CC BY](#)

¹ WHO, [WHO, UN set out steps to meet world vaccination targets](#), 7 October 2021, accessed 8 April 2022

² European Council, [G20 Rome Leaders' Declaration](#), 31 October 2021, accessed 11 January 2022.

³ Our World in Data, [Share of people who completed the initial Covid-19 vaccination](#), updated 12 July 2022

⁴ World Bank, [Country and lending groups](#), accessed 11 January 2022

- In March 2021, the Organisation for Economic Cooperation and Development (OECD) estimated that high-income countries, which account for 16% of the global population, had [negotiated supply agreements amounting to around half the world's supply](#) (note, however, it was uncertain which vaccines would be effective and gain regulatory approval).⁵

These inequalities have put a focus on how best to distribute vaccines equitably and invest in vaccine manufacture worldwide.

Other ways to address access

Aside from countries purchasing and manufacturing vaccines themselves, there have been two major international efforts to ensure fair access:

- **Vaccination donations by richer economies.** The G7, which includes the UK, US, France, Germany, Italy, Japan, Canada, and the EU, has pledged to donate 1 billion vaccines by June 2022.
- **Covax, the global vaccine-sharing initiative** run by the WHO and others, has been shipping free vaccines to lower-income states since February 2021. Its efforts are supported by donations of both vaccines and financial aid, such as from G7 states.

Further reading on other tools to share vaccines

- Commons Library, [Covax and global access to Covid-19 vaccines](#). Describes Covax and the challenges it has faced.
- Commons Library, [UK and G7 commitments to donate Covid-19 vaccines](#). Provides updates on the G7's pledge to donate vaccines.

⁵ OECD, [Covid-19 vaccines: Global approaches in a global crisis](#), 18 March 2021, figure 2, accessed 11 January 2022.

2

Proposals on IP waivers

Glossary of key terms

- **Intellectual property (IP) rights**
Rights given to creators of work, which may take the form of an invention, industrial design, or trade secret (this is not an exhaustive list). They usually give the creator an exclusive right over the use of their creation for a certain period.
- **TRIPS**
Stands for Trade-related aspects of intellectual property rights. This is an international agreement governing IP rights that provides mechanisms to protect and share IP rights (eg patents). The debate on the waiver of Covid-19 vaccine IP rights has centred on whether the IP protections existing under the WTO agreement on TRIPS should be waived temporarily.
- **Waiving intellectual property rights**
Means countries could apply discretion to disapply all protections granted by patents, copyrights, and other IP rights for the duration of the waiver. The vaccine manufacturer may not be remunerated by the vaccine producer.
- **Voluntary licensing**
Would see the vaccine developer and manufacturer agree voluntarily to work together. Technology and information would likely to be transferred as part of any agreement.
- **Compulsory licensing**
Under existing TRIPS rules, governments can grant a compulsory license to a potential vaccine producer without the consent of the patent holder. The patent holder is granted some remuneration. However, these are challenging to implement, especially if the countries lack manufacturing capacity and knowledge.

Source: WTO's [What are intellectual property rights?](#) and [Compulsory licensing of pharmaceuticals and TRIPS](#)

2.1

What proposals have been made?

In October 2020, India and South Africa proposed to the World Trade Organization (WTO) that intellectual property rights (IPs) on Covid-19

vaccines and related treatments be suspended to scale up global production.⁶

The South African Health Minister, Dr Zweli Mkhize, argued that lack of equitable treatment to vaccines [was putting development goals in low-income countries “at risk.”](#)⁷

Talks have continued, and in late 2021 became settled on two documents.

From India and South Africa

These countries [proposed that](#) (opens PDF):

- There be at least a three-year waiver on IP rights
- That this covers diagnostics, vaccines, medical devices, personal protective equipment, and other tools to prevent, treat or contain coronavirus.⁸

From the European Union

The EU is opposed to the draft text. Their proposal instead [encourages WTO members to commit themselves and vaccine manufactures to](#) (opens PDF):

- Limiting export restrictions to facilitate trade
- Encouraging voluntary technology transfer
- For manufactures to share expertise and put in place tiered pricing
- Use existing WTO rules to allow countries to grant licenses without the permission of the patent holder in some circumstances (though they would still receive compensation).⁹

2.2

Who supported a waiver in 2020 and 2021?

By May 2021, the proposal from South Africa and India had the formal support of 62 WTO members, mostly least developed countries in the global south. Supporters included Kenya, Indonesia, and Pakistan.

⁶ WTO, [WTO members discuss IP response to the Covid-19 pandemic](#), 20 October 2020

⁷ SABC News, [Need for Covid-19 vaccines more compelling in developing countries: Mkhize](#), 30 September 2020

⁸ WTO, [Waiver from certain provisions of the TRIPS agreement for the prevention, containment and treatment of Covid-19](#), 25 May 2021

⁹ WTO, [Draft council declaration on the TRIPS agreement and public health in the circumstances of a pandemic](#), 18 June 2021; European Commission, [Questions and Answers: EU communications to the WTO \[...\]](#), 2 June 2021, accessed 7 January 2022

Reportedly, more than 100 countries support the principle of a waiver (the WTO has 164 members).¹⁰

In April 2021, President Biden reversed the decision of his predecessor to come out, in principle, of a waiver on vaccines. In late 2021, he argued that the emergence of the Omicron variant underlined the need for greater vaccine production worldwide.¹¹

However, the G7 as whole did not back a waiver. At the G7 summit in June 2021, [its members only said](#) (opens PDF) that they would “engage constructively with discussions at the WTO.”¹² The G7 includes the UK, US, France, Germany, Italy, the EU, Japan and Canada.

In the UK

Both the [Scottish Government](#) and the [Labour Party](#) have backed a waiver on vaccine rights. They both argue this will help boost global manufacturing and reduce the risk of new variants of concern developing.¹³

2.3

A compromise deal in 2022

In June 2022, World Trade Organization (WTO) negotiators announced they had agreed a compromise text: [Ministerial decision on the TRIPS agreement](#) (PDF). TRIPS stands for Trade-Related Aspects of Intellectual Property Rights.

What does it propose?

The agreement is narrower than the one originally proposed in 2020. It:

- Allows developing countries to authorise the use of patented materials for the manufacture of Covid-19 vaccines without the consent of the rights holder to produce vaccines, for domestic markets and eligible countries. Rights holders will be compensated.
- Covers a five-year period
- States the WTO will consider its extension to diagnostics and therapeutics within 6 months.¹⁴

¹⁰ The Economic Times, [India-South Africa Covid patent waiver plea gets 62 backers](#), 18 May 2021; WTO, [Members and observers](#), accessed 8 April 2022

¹¹ White House, [Statement by President Joe Biden on the Omicron Covid-19 variant](#), 26 November 2021, accessed 5 January 2022

¹² G7, [Carbis Bay G7 summit communiqué](#), June 2021, p5 (opens PDF)

¹³ Scottish Government, [Action on vaccine inequity](#), 9 December 2021; The Guardian, [Labour says UK must “get off the fence” over global covid vaccine access](#), 20 May 2021, both accessed 7 January 2022

¹⁴ WTO, [Ministerial decision on the TRIPS agreement](#), adopted 17 June 2022 (PDF). All sources in section 2.3 accessed 13 July 2022

What has the UK Government's response been?

The compromise text was reached by consensus, and with the UK's support.¹⁵

Speaking in the Lords in July 2022, the Business, Energy and Industrial Strategy Minister Lord Callanan defended the agreement against criticism it does not cover therapeutics and diagnostics:

This is a very good agreement, and the Government have seen no evidence that IP rights, including the protection of undisclosed information or trade secrets, are any barrier to accessing treatments for Covid-19. The problem now is that we are seeing supply effectively outstrip demand, with the current level of vaccine production.¹⁶

What have others said?

The WTO Director General, Ngozi Okonjo-Iweala, [argues the compromise text](#) will “contribute to ongoing efforts to deconcentrate and diversify vaccine manufacturing capacity.”¹⁷

However, both charities and pharmaceutical manufacturers have criticised the agreement:

- [Oxfam](#) and [Médecins Sans Frontières](#) (MSF), for example, are among charities and civil society organisations that have expressed disappointment at the agreed text. They argue it must cover related technologies.¹⁸
- The [International Federation of Pharmaceutical Manufacturers & Associations](#) argue it is a “backward step” in terms of undermining the industry’s ability to address the pandemic and future health threats. It argues gaps in infrastructure and trade barriers are more significant reasons why vaccines have not been administered equitably worldwide.¹⁹

In July, it was reported that [up to six countries are seeking to extend the agreement to treatment and tests](#) by December 2022. India, South Africa, Pakistan, Indonesia, Egypt and Tanzania are reported by the news-agency Reuters to be backing an extension.

Some companies have raised concerns about this extension, stating many Covid-19 tests and treatments are used to address other infectious diseases, and such a decision would undermine future pandemic preparedness.²⁰

¹⁵ Financial Times, [WTO agrees partial patent waiver for Covid-19 vaccines](#), 16 June 2022, accessible via [Nexis news](#) (Commons Library login).

¹⁶ HL Deb, [11 July 2022](#), c1267

¹⁷ WTO, [MC12 Closing session](#), 17 June 2022

¹⁸ MSF, [Lack of real IP waiver on Covid-19 tools is a disappointing failure for people](#), 17 June 2022 and Oxfam, [WTO agrees a deal on patents for Covid-19 vaccines](#), 17 June 2022

¹⁹ BioPharma Reporter, [Pharma industry slams WTO move on TRIPS waiver](#), 20 June 2022

²⁰ Reuters, [WTO faces new battle over COVID tests, drugs](#), 7 July 2022

3

What have supporters argued?

IP rights restrict the number of manufacturers

Note these arguments were made prior to the June 2022 compromise text

Manufacturing of leading Covid-19 vaccines, such as Pfizer and Moderna, is concentrated in higher-income economies in Europe and North America (Oxford-AstraZeneca also produces doses in Asia and South America, and Johnson & Johnson in India and South Africa).²¹

In March 2021, the WHO said there were fewer than ten African manufacturers with any vaccine production. Most carry out packing and labelling of doses, rather than their manufacture.²²

As a result, Africa continues to import an estimated 99% of its vaccines, despite representing 25% of the world population.²³

Restrictions on vaccine exports affect supply

Countries have sometimes introduced trade restrictions to maintain domestic supplies.

For example, from April to October 2021 the Indian Government halted the export of vaccines as the pandemic worsened there.

This affected one of the largest suppliers to Covax, the Serum Institute, which had intended to be its main supplier. It was able to supply only 30 million of the 550 million doses ordered.²⁴

While in the US there was no formal ban on vaccine exports in the early part of 2021, companies were compelled to fulfil US contracts ahead of other orders.²⁵

Page 14 has more on the trade restrictions affecting supply. The EU and UK have pledged to reduce these.

²¹ Peterson Institute for International Economics, [How Covid-19 vaccine supply chains emerged in the midst of a pandemic](#) (opens PDF), August 2021, pp13, 14, 16, 18, 24

²² WHO, [What is Africa's vaccine production capacity?](#), 19 March 2021, accessed 7 January 2022

²³ Gavi, [Why Africa needs to manufacture its own vaccines](#), 19 July 2021, accessed 7 January 2022

²⁴ Al-Jazeera, [India's Serum institute resumes vaccine exports to Covax](#), 26 November 2021, , accessed 7 April 2022

²⁵ Financial Times, [Is there a ban on Covid vaccine exports in the US?](#), 1 May 2021, accessed 7 January 2022

Vaccines received a high amount of public funding

Work published in the British Medical Journal's Global Health estimated that 97-99% of all identifiable funding for research on the Oxford-AstraZeneca vaccine at the University of Oxford [came from public and charitable sources](#) (to Autumn 2020).²⁶

Supporters of a waiver have argued the level of public funding means the typical argument for IP rights—that they reward and stimulate innovation—does not apply.²⁷ However, some in the pharmaceutical industry have argued private sector capital bore the brunt of the risk of developing the technology Covid-19 vaccines have been able to build on.²⁸

Further reading on public funding for vaccines

- Forbes, [Which companies received the most Covid-19 vaccine R&D funding?](#), May 2021. Includes an infographic showing public funding for leading vaccines, such as Pfizer and Oxford-AstraZeneca.
- Brookings Institute, [Why intellectual property and pandemics don't mix](#), June 2021. Argues that the degree of government funding for vaccines outweighs the desire to protect IP rights during the pandemic.

Voluntary licensing has not yet delivered

Countries in favour of a waiver said in January 2021 that the voluntary licensing of vaccines has been “non-existent or insufficient.”²⁹

South Africa's President, Cyril Ramaphosa, has argued that the WHO's mRNA hub, which had been established in 2021 to facilitate vaccine technology

²⁶ S. Cross et al, [Who funded the research behind the Oxford-AstraZeneca Covid-19 vaccine?](#), British Medical Journal, December 2021

²⁷ WTO, [Waiver from certain provisions of the TRIPs agreement for the prevention, containment and treatment of Covid-19](#), 15 January 2021, para 81

²⁸ John Stanford in Stat, [Thank private risk-taking, not public funding, for Covid-19 vaccines](#), 5 April 2021, accessed 10 January 2022

²⁹ WTO, [Waiver from certain provisions of the TRIPs agreement for the prevention, containment and treatment of Covid-19](#), 15 January 2021, para 163 (PDF)

transfer, had been “hampered” by IP barriers. It was not until February 2022 that the first hub was established, in six African countries.³⁰

mRNA vaccines tend to have a simpler means of production than other vaccines, making them quicker to produce and share.

Some individual agreements have been in place prior to this, including:

- Oxford-AstraZeneca making global licensing agreements to transfer technology to establish 20 global supply chains, including with the Indian-based Serum Institute.³¹
- Aspen, in South Africa, is due to make 400 million Johnson and Johnson vaccines in 2022 through the “fill and finish” method, meaning the substance of the vaccine is sent to the plant, which put it in vials (bottles) and then distribute.
- South Africa’s Biovac is due to start making Pfizer vaccines in early 2022, though it will also import ingredients from Europe.³²

In response to the Omicron variant in late 2021, Human Rights Watch published research [suggesting 120 companies in Asia, Africa and Latin America are capable of supporting the production of mRNA vaccines](#), if Pfizer and Moderna could share IP knowledge with them.³³

There has also been some progress for drugs to treat coronavirus: Gilead, the Californian biopharmaceutical company, has signed voluntary licensing agreements with companies in Egypt, India and Pakistan [to manufacture its remdesivir medication](#), and Pfizer has signed a voluntary licensing agreement [for its coronavirus oral antiviral treatment](#).³⁴

Refusing a waiver risks repeating past mistakes

The Director of the Africa Centers for Disease Control and Prevention, John Nkengasong, has cited HIV/AIDS in the 1990s as an example where delays in access to medicine meant mortality rates remained much higher in low-

³⁰ Devex, [Six African nations chosen for mRNA vaccine production, 18 February 2022](#), accessed 8 April 2022

³¹ PQ 120644 [[Coronavirus: Vaccination](#)], 16 February 2022

³² Devex, [Prospects for local manufacturing of Covid-19 vaccines in Africa](#), 6 January 2022, accessed 8 April 2022

³³ Human Rights Watch, [Experts identify 100 plus firms to make Covid-19 mRNA vaccines](#), 15 December 2021, accessed 7 January 2022

³⁴ Gilead, [Voluntary licensing agreements for remdesivir](#); UN, [Covid-19: Licensing agreement for new candidate drug “an important first step.”](#) 16 November 2021, both accessed 7 January 2022

income countries than in higher-income states where drugs were readily available.³⁵

These events, however, may act as a precedent to act: In response to high costs for HIV/AIDS drugs, in 1997 South Africa's Government passed a law allowing the state to import cheap generic versions without the permission of the companies holding the drug patents.

While pharmaceutical companies opposed the move, and sought to challenge the law in court, in 2001 they chose to drop their opposition following public criticism.³⁶

The precedent of HIV/AIDS?

- Foreign Policy, [Stopping drug patents has stopped pandemics before](#), May 2021. Argues loosening rules over vaccines will support creativity in manufacturing, using the example of HIV/AIDS drugs in the 1980s.
- Politico, [Why AIDS history is repeating in Covid-19](#), June 2021. Argues history risks repeating itself, with poorer countries likely to suffer more Covid-19 deaths for longer.

³⁵ Reuters, [African Union backs call to waive IP rights on Covid-19 vaccines](#), 25 January 2021, accessed 8 April 2022

³⁶ The Guardian, [Shamed and humiliated—the drugs firm back down](#), 19 April 2001, accessed 8 April 2022

4 What have opponents, including the UK Government, argued?

Note these arguments were made prior to the June 2022 compromise text

The UK Government does not support the waiver. It argues there is “no evidence” that waiving IP rights would help address the inequitable distribution of vaccines, and instead would undermine the framework which has incentivised the development of new products to combat Covid-19.³⁷

The European Union has also opposed a wider waiver, though both engaged with drafting of the compromise text (see pages 7 to 8, above).

Global manufacturing is now sufficient

The UK Government has noted the [World Health Organization’s \(WHO\) statement](#) in October 2021 that there is “enough supply to achieve our targets,” arguing that the focus should now be how best to deliver and administer vaccines fairly.³⁸

In December 2021, the International Federation of Pharmaceutical Manufactures and Associations (IFPMA) [said 11.2 billion Covid-19 vaccines were manufactured in 2021](#). This was sufficient to vaccinate 70% of the global population of 7.9 billion (excluding booster shots)—in line with the WHO’s target.³⁹

The EU has also stressed its role as a vaccine exporter: In November 2021 it said [it is the biggest provider of vaccines](#), with 1.3 billion doses (half its production) exported to date.⁴⁰

But manufacturing could be scaled-up further

An alternative proposal to further scale up supply is a [global Covid-19 Vaccine Investment and Trade Agreement](#), which would support the whole supply chain of vaccine production. Such an agreement could work closely with existing schemes, such as Covax.

³⁷ PQ 120643 [[Coronavirus: Vaccination](#)], 17 February 2022

³⁸ WHO, [Vaccine equity](#), accessed 8 April 2022; PQ HL 4715 [[Coronavirus vaccination](#)], 20 December 2021

³⁹ IFPMA, [11 billion Covid-19 vaccines produced in 2021 \[...\]](#), 16 December 2021, and UN, [World population prospects 2019](#), both accessed 8 April 2022

⁴⁰ European Commission, [EU replaces Covid-19 vaccines export authorisation new mechanism \[...\]](#), 26 November 2021, accessed 5 January 2022

Proponents argue that, given the multiple-stage process of vaccine production, with research, manufacture, and the fill and finish of vaccines, global manufacturing would be better supported through a global framework coordinating input capacity (eg syringes, medical materials), subsidies of the full manufacturing supply chain, and commitments to not place export restrictions on vaccines and related materials.⁴¹

In the UK, the Labour Party has previously called for a coordinated investment programme with the pharmaceutical industry and [a global trade and investment agreement](#) to scale up global production.⁴²

Further reading on global manufacturing

- World Economic Forum, [From zero Covid-19 vaccines to 11.2 billion in a year](#), January 2022
- Center for Global Development, [The Covid-19 vaccine rollout was the fastest in global history, but low-income countries were left behind](#), February 2022

Restrictions on trade need to be lessened

The UK and EU have also [supported the Ottawa Group's Trade and Health Initiative](#), which calls on countries to restrict their use of export restrictions and suspend some tariffs on medical products.⁴³

Export curbs on Covid-19 medical goods [continued to increase in 2021 in order to safeguard domestic supplies](#). As of January 2022, there were 147 export curbs on medical products and 50 specifically related to vaccines and their distribution.⁴⁴

⁴¹ PIEE, [Here's how to get billions of Covid-19 vaccine doses to the world](#), 18 March 2021, accessed 6 January 2022

⁴² Emily Thornberry MP in the Guardian, [Britain could steer a global vaccination programme—but where is the leadership?](#), 20 May 2021, accessed 6 January 2022

⁴³ Department for International Trade, [The UK welcomes the Ottawa Group's Trade and Health Initiative](#), 16 December 2020, accessed 5 January 2022; HL Deb, [9 September 2021](#), c1045-9;

⁴⁴ Brookings Institute, [Why global vaccine equity is the prescription for a full recovery](#), February 2022, accessed 8 April 2022

Rewarding and protecting IP rights are essential for promoting innovation

The UK Government has [defended the IP system](#) as playing a “positive role” in the development of vaccines to address the virus. It has cited the continuing mutations in the virus as a reason why innovation needs to be protected and rewarded.⁴⁵

WTO rules allow for emergency licensing

In 2001, the WTO agreed the Doha Declaration.

This allows member states to introduce compulsory licensing when experiencing an emergency. This allows Governments to waive IP rights without the consent of the owner to produce generic versions of medicines.

A 2005 amendment further allowed countries without manufacturing capacity to import generic versions of drugs without the cooperation of exporting states. However, this has only been used once, in 2007 when Canada supplied generic drugs to Rwanda.⁴⁶

Voluntary licensing is working

In addition to the voluntary agreements cited above, on pages 10 to 11, the IFPMA says there are now 370 voluntary licensing and technology transfer agreements in place.⁴⁷

Moderna, for example, has pledged never to enforce its patents. This has allowed South Africa's Afrigen Biologics and Vaccines to replicate Moderna's vaccine by using publicly available information, without the company's support.⁴⁸

⁴⁵ Foreign, Commonwealth and Development and Department for International Trade, [WTO General Council](#), 24 November 2021, accessed 5 January 2022

⁴⁶ Sophie Harman, [TRIPs waiver—US support is a major step but no guarantee of Covid-19 vaccine equity](#), Queen Mary online, 13 May 2021, accessed 8 April 2022

⁴⁷ UN, [UN rights chief leads call for global Covid-19 vaccine equity](#), 10 March 2022, accessed 8 April 2022

⁴⁸ Devex, [6 African nations chosen for mRNA vaccine production](#), 18 February 2022, accessed 8 April 2022

In 2022, BioNTech also announced plans to send mobile Covid-19 vaccine labs to Africa, and train local employees to operate them in the medium term. The patent for the vaccine will not be waived, but the technology will be shared.⁴⁹

Further reading on voluntary licensing

- [We can accelerate vaccine production through partnerships that promote knowledge sharing](#), December 2021, Xiaolan Fu and Diego Sánchez-Ancochea, University of Oxford. Argues that technology is best transferred through joint ventures between manufactures and local companies.

⁴⁹ Africa New, [BioNTech to ship mobile Covid vaccine labs to Africa](#), 16 February 2022, accessed 8 April 2022

5

What might the effect of a waiver be?

A patent waiver is only one tool to address inequalities in vaccine administration—donations to Covax, the ability of countries to administer doses, and the capacity of manufacturers to scale up production all have an impact.

On global manufacturing

Since the IP waiver was first proposed in 2020, global manufacturing has greatly increased. This has led to several governments and organisations placing greater emphasis on the fair distribution of vaccines.

In 2021, the WHO said that with global vaccine production at nearly 1.5 billion doses a month, its target for 70% of the world population to be vaccinated by mid-2022 is achievable, “provided they are distributed equitably.” It argues that “this is not a supply problem; it’s an allocation problem.”⁵⁰

The WTO Director General, Ngozi Okonjo-Iweala, has also noted the [complexities in scaling-up and diversifying vaccine manufacture](#), citing the fact Pfizer’s vaccines contain 280 components, produced at 86 sites in 19 countries.⁵¹ This would make the release of IP rights, without a sharing of technical knowledge and time to ramp-up production, slow to have an effect.

The manufacturing landscape is now changing

In 2021, the African Union (AU) said it would develop a strategy to ensure Africa can manufacture 60% of its vaccine need locally by 2040.⁵²

Examples of voluntary licensing and technology sharing—mentioned above on pages 10 and 15—are examples of increased international collaboration to increase manufacturing capacity during 2022 in the areas whose populations are least vaccinated against Covid-19.

In support of the strategy, the UK has provided technical support to develop business cases for vaccine production in South Africa, Senegal, and Morocco, and engaged with AU plans to scale up production.⁵³ The UK has also pledged

⁵⁰ WHO, [Vaccine equity](#), accessed 7 January 2022

⁵¹ The Guardian, [G20 urged to do more to support global vaccine distribution](#), 5 July 2021, accessed 7 January 2022

⁵² African Union, [Partnership for African Manufacturing framework for action](#), March 2022, accessed 8 April 2022

⁵³ PQ 120720 [[Africa: Coronavirus](#)], 16 February 2022

£160 million to the Coalition for Epidemic Preparedness Innovations to help it develop vaccines and invest in manufacture in low- and middle- income countries.⁵⁴

Further reading on manufacturing vaccines outside Europe

- Tony Blair Institute, [Vaccine manufacturing in Africa: What it takes and why it matters](#), April 2021. Describes the steps towards greater self-sufficiency of supply
- Center for Global Development, [Expanding emergency vaccine manufacturing capacity in Latin America and the Caribbean](#), March 2022. Sets out nine issues needed to be addressed to scale manufacturing.

Other challenges exist to vaccine administration

The Organisation for Economic Cooperation and Development (OECD) has said that even with sufficient vaccine production, the rollout of vaccination campaigns in lower-income countries [would experience several challenges](#). For example, it highlighted:

- The lower number of health workers per capita in lower income states, reducing their ability to quickly roll-out a campaign.
- The requirement for vaccines to be refrigerated to protect their longevity. This creates challenges in rural areas and places where electricity is in short supply.
- Already weakened immunisation campaigns due to coronavirus-related disruption, gaps in health provision, and existing weakness in health infrastructure, would mean priorities may be focused elsewhere.⁵⁵

Section 4 of the Library briefing, [Covax and global access to vaccines](#), provides more on the challenges of vaccine rollouts.

⁵⁴ Foreign, Commonwealth and Development Office, [UK pledges £160 million to boost global vaccine development](#), 24 February 2022, accessed 8 April 2022

⁵⁵ OECD, [Coronavirus vaccines for developing countries: An equal shot of recovery](#), 4 February 2021, section 4

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