Open Letter to Delegates of WHA 72 on Transparency Resolution Negotiations

We call upon delegates to reach consensus on a strong WHO transparency resolution that addresses every topic in the original proposal, including prices, revenues, units sold, marketing costs, clinical trial enrollment and outcomes, clinical trial costs, government R&D subsidies, patent landscapes, manufacturing know-how, and future meetings, forums and activities that collectively are designed to progressively expand and implement norms on transparency.

We encourage delegates to support the specific language in the original resolution that requests the WHO Director-General to explore suitable options for alternative incentive frameworks to patent or regulatory monopolies that could better serve the needs of Member States in their efforts to attain Universal Health Coverage and support innovation.

During the negotiations, we ask that the negotiating text be released after every negotiating session, with country positions identified for any brackets or alternative texts proposed, in order to ensure that the negotiations on the transparency resolution are themselves transparent.

If the delegates are unable to reach consensus in the drafting group on the WHO transparency resolution, as a result of the objections of a few countries who seem determined to favor secrecy over transparency, and ignorance and propaganda over facts and objective evidence, we ask that the advocates of transparency submit a strong version of the resolution for a vote before the 72nd World Health Assembly.

Organizations (in alphabetical order)

1. Acción Internacional para la Salud, Perú
2. Act Up-Basel
3. Aides (France)
4. Alianza LAC-Global por el Acceso a Medicamentos (International)
5. American Medical Student Association
6. Americas TB Coalition
7. BUKO Pharma-Kampagne
8. Canadian HIV/AIDS Legal Network
9. Cancer Alliance South Africa
10. Centro de Información de Medicamentos de la Universidad Nacional de Colombia. (Colombia)
11. Chronic Illness Advocacy & Awareness Group
12. Comité de Veeduría y Cooperación en Salud (Colombia)
13. Conferencia Episcopal de Colombia (Colombia)
14. Doctors for America
15. Federación Médica Colombiana (Colombia)
16. Fundación Grupo Efecto Positivo, Argentina
17. Fundación Ifarma (Colombia)
18. Global Justice Now, United Kingdom
19. Global Tuberculosis Community Advisory Board
20. Health Action International
21. Health Global Action Project (Health GAP)
22. Heart to Heart Foundation, Thailand
23. International Treatment Preparedness Coalition (ITPC)
24. Just Treatment
25. Knowledge Ecology International
26. Latin American Network for the Access to Medicines (RedLAM)
27. Lawyers Collective, India
28. Médecins du Monde
29. Médecins Sans Frontières (MSF) Access Campaign
30. Misión Salud (Colombia)
31. Observatorio del Medicamento de la Federación Médica Colombiana (Colombia)
32. Positive Malaysian Treatment Access & Advocacy Group (MTAAG+)
33. Prescrire
34. Public Citizen
35. Public Eye
36. ReAct—Action on Antibiotic Resistance
37. Salud por Derecho
38. Salud y Farmacos USA
39. Stichting Farma ter Verantwoording - Foundation for Pharmaceutical Accountability
40. STOPAIDS, United Kingdom
41. The Working Group on IP (GTPI)
42. Third World Network
43. Treatment Action Group (TAG)
44. Union for Affordable Cancer Treatment
45. Universidades Aliadas por Medicamentos Essenciais (UAEM Brasil)
46. Universities Allied for Essential Medicines (UAEM)
47. Wemos
48. Women's Coalition Against Cancer (WOCACA), Malawi
49. Yolse
50. Young Professionals Chronic Disease Network

**Individuals** (in alphabetical order)

1. Anna Zorzet, ReAct Europe, Uppsala University
2. Anthony D. So, ReAct Strategic Policy Program, Johns Hopkins Bloomberg School of Public Health
3. Arturo Quizhpe, ReAct Latin America
4. Diane Singhroy PhD, Research Associate McGill University, Canada
5. Dr. Mohga Kamal-Yanni, Global health and access to medicine consultant
6. Jordan Jarvis, London School of Hygiene & Tropical Medicine
7. Kirsten Myhr, MScPharm, MPH, Independent access to medicines consultant, Norway
8. Marcus Low, Spotlight, South Africa
9. Marina Tsaplina, #insulin4all New York Chapter
10. Mirfin Mpundu, ReAct Africa, Ecumenical Pharmaceutical Network
11. Sujith Chandy, ReAct Asia Pacific, CMC Vellore