**Core Group:** Brazil, China, Egypt, India, Indonesia, Senegal, South Africa and Thailand

**Contact** **person**: Clara Solon (Brazil)

 clara.solon@itamaraty.gov.br

 +41 79 768 62 80

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ZERO DRAFT

**Human Rights Council**

**Fourth-first session**

**Agenda item 3**

Access to medicines **and vaccines** in the context of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health

*The Human Rights Council,*

*PP1 Guided* by the purposes and principles of the Charter of the United Nations,

*PP2 Reaffirming* the Universal Declaration of Human Rights,

*PP3 Reaffirming also* that the right of everyone to the enjoyment of the highest attainable standard of physical and mental health is a human right as reflected in, inter alia, the Universal Declaration of Human Rights, the International Covenant on Economic, Social and Cultural Rights and the Convention on the Rights of the Child, and, with respect to non-discrimination, in the International Convention on the Elimination of All Forms of Racial Discrimination, the Convention on the Elimination of All Forms of Discrimination against Women and the Convention on the Rights of Persons with Disabilities, **and that the Constitution of the World Health Organization also recognizes health as a fundamental right of every human being without distinction of race, religion, political belief, economic or social condition (Updated),**

*PP4 Recalling* Human Rights Council resolution 32/15 of 1st July 2016 and all relevant previous resolutions and decisions on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health adopted by the Council, the General Assembly and the Commission on Human Rights, **(Updated)**

*PP5 Recalling* also the Declaration on the Right to Development, which, inter alia, establishes that States should take, at the national level, all measures necessary for the realization of the right to development and should ensure, inter alia, equality of opportunity for all in their access to basic resources, such as health services,

*PP6 Reaffirming* General Assembly resolution 70/1 of 27 September 2015, entitled “Transforming our world: the 2030 Agenda for Sustainable Development”, in which the Assembly adopted the outcome document of the United Nations summit for the adoption of the post-2015 development agenda **and pledged that no one would be left behind**,

*PP7 Welcoming* the Sustainable Development Goals, including, inter alia, Goal 3 on ensuring healthy lives and promoting well-being for all at all ages, **particularly target 3.8 on achieving universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all, as well as** its specific and interlinked targets, and other health-related Goals and targets,

***PP8 Welcoming* the Human Rights Council panel convened during its 36th session to exchange views on good practices and key challenges relevant to access to medicines as one of the fundamental elements of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, on 8 March 2017, (NEW)**

***PP9 Welcoming also* the report of the United Nations Secretary-General’s High-level Panel on Access to Medicines**, **which made** proposals on how to address policy incoherence in public health, trade, the justifiable rights of inventors, and human rights, (Updated)

***PP10 Recalling* General Assembly Resolution A/RES/71/3 of 19 October 2016, in which the Assembly adopted the Political Declaration of the High-Level Meeting of the General Assembly on Antimicrobial Resistance, whereby Heads of State and Government and other representatives underline that affordability and access to existing and new antimicrobial medicines, vaccines and diagnostics should be a global priority and should take into account the needs of all countries (NEW);**

***PP11 Recalling* General Assembly Resolution A/RES/73/2 of 17 October 2018, in which the Assembly adopted the Political Declaration of the Third High-Level Meeting of the General Assembly on the prevention and control of non-communicable diseases, whereby Heads of State and Government and other representatives commit to promote increased access to affordable, safe, effective and quality medicines and diagnostics and other technologies (NEW);**

***PP12 Recalling* General Assembly Resolution A/RES/73/3 of 18 October 2018, in which the Assembly adopted the Political Declaration of the High-Level Meeting of the General Assembly on the fight against tuberculosis, whereby Heads of State and Government and other commit to promoting access to affordable medicines, including generics, for scaling up access to affordable tuberculosis treatment (NEW);**

***PP13 Reaffirming* the importance of the implementation of the Global Strategy and the Plan of Action on Public Health, Innovation and Intellectual Property, contained in WHA Resolutions WHA61.21 and WHA62.16 and recent Decision WHA71(9) from 25 May 2018, that aims to promote new thinking on innovation and access to medicines and to secure an enhanced and sustainable basis for needs-driven essential health research and development relevant to diseases that disproportionately affect developing countries (NEW);**

***PP14 Welcoming* the WHO Road Map for Access to Medicines, Vaccines and other Related Health Products 2019-2023 during the 72nd World Health Assembly, which recognizes that improving access to health products is a multidimensional challenge that requires comprehensive national policies and strategies aligning public health needs with economic and social development objectives and promoting collaboration with other sectors, partners and stakeholders, (NEW)**

***PP15 Reaffirming* the importance of improved transparency of markets for medicines, vaccines, and other health products, and taking into consideration resolution WHA 72.8 adopted by the 72nd World Health Assembly (NEW),**

***PP16 Seriously concerned* with the high prices and the inequitable access of some health-related products and technologies, within and among Member States which impede progress toward achieving Universal Health Coverage for all (WHO Transparency resolution, pp4),**

***PP17 Recalling* the 2018 Astana Declaration on Primary Health Care, which recognizes the need to address the inefficiencies and inequities that expose people to financial hardship resulting from their use of health services by ensuring better allocation of resources for health, adequate financing of primary health care and to work towards the financial sustainability, efficiency and resilience of national health systems, appropriately allocating resources to primary health care based on national context. (Astana Declaration on Primary Health Care, 2018)**

*PP18 Noting with concern* that, for millions of people throughout the world, the full and equal enjoyment of the right to the highest attainable standard of physical and mental health remains a distant goal,

*PP19 Concerned about* the interrelatedness between poverty **and other social and economic determinants of health** and the realization of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, in particular the fact that ill health can be both a cause and a consequence of poverty (Updated),

*PP20 Recognizing that* universal health coverage implies that all people have access without discrimination to nationally determined sets of the needed promotive, preventive, curative, palliative and rehabilitative essential health**-care** services, and essential, safe, affordable, efficacious and quality medicines and vaccines, while ensuring that the use of these services does not expose users to financial hardship, with a special emphasis on the poor, vulnerable and marginalized segments of the population (Updated),

***PP21 Welcoming* General Assembly’s resolutions 72/139, which decided to convene the upcoming High-level Meeting on Universal Health Coverage, and 73/131, which defined its scope, modalities, format and organization; (NEW, GA RES. 72/139 and 73/131)**

*PP22 Recognizing also* the need for States, in cooperation with international organizations and civil society, including non-governmental organizations, **philanthropic foundations, academic institutions** and the private sector, including pharmaceutical companies, to create favourable conditions at the national, regional and international levels to ensure the full and effective enjoyment of the right of everyone to the highest attainable standard of physical and mental health (Updated),

*PP23 Recalling that* the Doha Ministerial Declaration on the Agreement on Trade-Related Aspects of Intellectual Property Rights and Public Health confirms that the Agreement does not and should not prevent members of the World Trade Organization from taking measures to protect public health, and that the Declaration, accordingly, while reiterating the commitment to the Agreement, affirms that it can and should be interpreted and implemented in a manner supportive of the rights of members of the Organization to protect public health and, in particular, to promote access to medicines for all, and further recognizes, in this connection, the right of members of the Organization to use, to the full, the provisions of the above-mentioned Agreement, which provide flexibility for this purpose,

***PP24 Welcoming* the entry into force of the protocol amending the WTO Trade Related Aspects of Intellectual Property Rights (TRIPS) Agreement, which adapt the rules of the global trading system to the public health needs of people in poor countries, thus contributing to the realization of the right of poorer populations to the enjoyment of the highest attainable standard of physical and mental health, (NEW)**

*PP25 Regretting* the high number of people still without access to affordable, safe, **effective** and quality medicines **and vaccines**, and underscoring that improving such access could save millions of lives every year, and noting with deep concern that, **globally, two billion people cannot access the medicines they need**, while recognizing that the lack of access to medicines **and vaccines** is a challenge that affects people not only in developing countries but also in developed countries, even though the disease burden is disproportionately high in developing countries, **(updated data, Who 2018 report “Access to medicines: making markets forces serve the poor”),**

*PP26 Concerned* at the lack of access to quality, safe, effective and affordable medicines for children in appropriate dosage forms, and at problems in the rational use of children’s medicines in many countries, and that, globally, children aged under five years still do not have secure access to medicines for the treatment of pneumonia, tuberculosis, diarrheal diseases, HIV infection and malaria, or medicines for many other infectious diseases, non-communicable diseases and rare diseases,

*PP27 Concerned* that the increasing incidence of non-communicable diseases constitutes a heavy burden on society, with serious social and economic consequences, which represent a leading threat to human health and development, and recognizing the urgent need to improve accessibility to safe, affordable, **effective** and quality medicines and technologies to diagnose and treat non-communicable diseases, to strengthen viable financing options, and to promote the use of affordable medicines, including generics, as well as improved access to preventive, curative, palliative and rehabilitative services, particularly at the community level,

***PP28 Recognizing* the need to appropriately address challenges, gaps, market-failures and opportunities regarding the research and development of health technologies, availability and affordability to treat, inter alia, rare and neglected diseases, and respond to the growth of emerging challenges such as antimicrobial resistance, among others, with a view to avoid that exclusively market-driven approaches do not address adequately public health needs, as well as taking into account the necessity to promote alternative incentive frameworks to meet public health needs while adequately rewarding innovation (NEW);**

***PP29 Considering* the report by the WHO Director-General on cancer medicines, which, pursuant to resolution WHA 70.12, examined the impacts of pricing approaches, including transparency, on availability and affordability of medicines for the prevention and treatment of cancer (NEW)*;***

***PP30 Recognizing* with appreciation the introduction of new pharmaceutical products based on investment in innovation for cancer treatment in recent years, and *noting with great concern* the increasing cost to health systems and patients, as well as *emphasizing* the importance of addressing barriers in access to safe, quality, effective and affordable medicines, medical products and appropriate technology for cancer prevention, detection, screening diagnosis and treatment, including surgery, (NEW, Resolution WHA 70.12, adapted)**

*PP31 Expressing* deep concern at recent outbreaks of highly infectious pathogens with **pandemic** potential, which demonstrate the potential vulnerability of populations to them, and in this context reaffirming and underscoring the importance of **research and** development **(R&D)**of new and innovative medicines and vaccines and of ensuring access to safe, affordable, **effective** and quality medicines and vaccines to all, **including new and innovative medicines** as well as **buildind and/or** strengthening health system capacities**, including primary health care,** for **detecting,** preventing and **timely** responding to outbreaks, **epidemics, pandemics and other health emergencies** (Updated)**,**

1. *Recognizes* that access to medicines **and vaccines** is one of the fundamental elements in achieving progressively the full realization of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health **and correspondent objectives of universal health coverage and health for all, with special attention to reach first those furthest behind**; (Updated)

2. *Stresses* the responsibility of States to ensure access for all, without discrimination, to medicines **and vaccines**, in particular essential medicines, that are affordable, safe, **effective** and of quality; (Updated)

3. *Calls upon* States to promote access to medicines **and vaccines** for all, including through the use, to the full, of the provisions of the Agreement on Trade-Related Aspects of Intellectual Property Rights, which provide flexibility for that purpose, recognizing that the protection of intellectual property is important for the development of new **and innovative** medicines **and vaccines**, as well as the concerns about its effects on prices **and public health**; (Updated)

4. *Also calls upon* States to take steps to implement policies and plans to promote access to comprehensive and cost-effective prevention, treatment and care for the integrated management of non-communicable diseases, including, inter alia, increased access to affordable, safe, **effective** and quality medicines**, vaccines** and diagnostics and **other** **health products** , including through the full use of Trade-Related Aspects of Intellectual Property Rights flexibilities; (Updated)

5. *Reiterates* the call upon States to continue to collaborate, as appropriate, on models and approaches that support the delinkage of the cost of new research and development from the prices of medicines, vaccines and diagnostics for diseases that predominantly affect developing countries, including emerging and neglected tropical diseases, so as to ensure their sustained accessibility, affordability and availability and to ensure access to treatment for all those in need;

6. *Calls upon* the international community to continue to assist developing countries in promoting the full realization of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, including through access to medicines**, in particular essential medicines, vaccines, diagnostics, medical devices and other health products** that are affordable, safe, **effective** and of quality, and through financial ,technical support, training of personnel, **and other capacity building measures,** while recognizing that the primary responsibility for **respecting, protecting and fulfilling** all human rights rests with States; **and recognizing the fundamental importance of the transfer of environmentally sound technologies on favourable terms, including on concessional and preferential terms, as mutually agreed, (Updated according to HRC Res. 38/8)**

7. *Recognizes* the innovative funding mechanisms that contribute to the availability of vaccines and medicines in developing countries, such as the Global Fund to Fight AIDS, Tuberculosis and Malaria, the Gavi Alliance and UNITAID, and calls upon all States, United Nations agencies, funds and programmes, in particular the World Health Organization, and relevant intergovernmental organizations, within their respective mandates, and encourages relevant stakeholders, including pharmaceutical companies, while safeguarding public health from undue influence by any form of real, perceived or potential conflict of interest, to further collaborate to enable equitable access to quality, safe and **effective** medicines that are affordable to all, including those living in poverty, children and other persons in vulnerable situations; (Updated)

**8. *Encourages* the engagement between governments, international organizations, non-governmental organizations , academic institutions, philanthropic foundations and the private sector, as well as greater policy coherence and coordinated actions through whole-of government and health-in-all-policies approaches, to find solutions to health challenges, such as the need for public health-driven research and development, alternative frameworks to adequately reward innovation, pricing and affordability of health products, and leveraging innovative technologies, including digital technologies, and solutions for health (NEW, WHO Roadmap on Access to Medicines and Vaccines, adapted)**

**9. *Urges* States, in cooperation with other stakeholders, to redouble efforts to achieve a continuous supply of quality, safe, effective and affordable health products through research and development that meets public health needs, for the efficient application and management of intellectual property standards, to carry out evidence-based selection of health products and seek fair and affordable pricing, to adopt good procurement and supply chain management and promote appropriate prescribing, dispensing and rational use of health products (NEW, WHO Roadmap on Access to Medicines and Vaccines)**

**10. *Recognizes* the importance of adequately training health care workers, especially community health workers, and improving health literacy in order to achieve the highest attainable standard of physical and mental health and strengthen Universal Health Coverage, (NEW)**

11. *Urges* all States, United Nations agencies and programmes and relevant intergovernmental organizations, especially the World Health Organization, within their respective mandates, and encourages non-governmental organizations and relevant stakeholders, including pharmaceutical companies, to promote innovative research and development to address health needs in developing countries, including access to quality, safe, **effective** and affordable medicines **and vaccines**, and in particular with regard to diseases disproportionately affecting developing countries, and the challenges arising from the growing burden of non-communicable diseases, taking into account the Global Strategy and Plan of Action on Public Health, Innovation and Intellectual Property of the World Health Organization; (Updated)

12. *Invites* the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, while considering the many ways towards the full realization of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, to continue to focus on the human rights dimension of access to medicines **and vaccines** when discharging his or her duties, in accordance with the mandate; (Updated)

13. *Invites* Member States and all stakeholders, including relevant United Nations bodies, agencies, funds and programmes, treaty bodies, special procedure mandate holders, national human rights institutions, civil society and the private sector, to promote policy coherence in the areas of human rights, **public health,** intellectual property and international trade and investment when considering access to medicines **and vaccines**; **(Updated)**

**14. *Requests* the High Comissioner:**

1. **To convene, before the forty-fourth session of the Human Rights Council, a full-day intersessional seminar on good practices, key challenges and new developments relevant to access to medicines and vaccines as one of the fundamental elements of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, in coordination with the World Health Organization;**
2. **To invite States, relevant United Nations bodies, agencies, funds and programmes, treaty bodies, special procedure mandate holders, national human rights institutions, civil society and other relevant stakeholders, with a view to ensuring their participation in the seminar; and**
3. **To submit to the Human Rights Council at its forty- sixth session a report, in the form of a summary, on the seminar. (NEW)**