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**Peter Maybarduk, Director of Public Citizen's Access to Medicines Program  
Oral Statement**

**Office of Global Affairs: Stakeholder Listening Session for the Intergovernmental  
Negotiating Body (INB) To Draft and Negotiate a WHO Convention, Agreement or  
Other International Instrument on Pandemic Prevention, Preparedness and Response  
June 28, 2023**

We deeply appreciate U.S. leadership in global pandemic preparedness and response. A spirit of international cooperation represents the best of our country. Thank you.

We also appreciate U.S. efforts to ensure coordination and complementarity between the IHR and INB processes.

Our comments will reference articles from the "Bureau's Text" released June 2, 2023.

**Article 11 – Co-development and transfer of technology and know-how**

We are glad to see the inclusion of technology transfer and know-how in the Bureau's Text. We support Option 11.A – it creates stronger and more specific proactive commitments regarding the multilateral environment on intellectual property.

**Article 12 – Access and benefit sharing**

We believe in the importance of benefit sharing. The risk of not including benefit sharing is that an agreement may come to resemble surveillance of the Global South without the spirit of partnership and respect that the pandemic experience has recommended. We urge continued creativity to find ways to support benefit sharing within the Bureau's Text. We would like to point to [Knowledge Ecology International's proposal](#) as one approach to benefit sharing.

**Article 9 – Research and development**

Edits from the zero draft have changed binding access commitments into publication and transparency commitments. Upstream access is one of the most important opportunities we have to ensure equitable access to medical products.

We must consider what is being done with taxpayer-funded medical tools and how to ensure broad public access to them. In our view, it does not cross any U.S. government red line to be creative in looking at ways to share, and commit to sharing, publicly-funded technology, as well as ensuring fair pricing of publicly funded technology. We should recognize that U.S. policy in this area is progressing, and leave room to reflect emerging U.S. values.

The Chair of the U.S. Senate Committee on Health, Education, Labor and Pensions has called for a bold stand on reasonable pricing of publicly funded medical tools. The U.S. Government licensed its NIH funded technology to the World Health Organization. The Coalition for Epidemic Preparedness Innovations (CEPI) is asking national governments to be very proactive in using the leverage of their funding agreements to ensure access to medical tools. Can we put into the agreement something beyond the publication and transparency requirements, and drive home the values, norms, and expectations of fair pricing, and sharing and licensing public funded medical tools? Article 9 is an area where we can be more creative.

Thank you.