March 9, 2022

President Joseph R. Biden The White House 1600 Pennsylvania Avenue, NW Washington, D.C. 20500

Dear President Biden,

More than two years into the Covid-19 pandemic and more than one year into your presidency, we are distressed to write that the United States is failing in its efforts to adequately address the worldwide pandemic. Responsibility for this failure is widely shared among nations, but the United States has a singular leadership role in global health; it has unique capacities and thus responsibilities; and a special duty to lead the world's response. So far, we have failed.

From the outset of the pandemic, there was widespread recognition that vaccines offered the best hope to end the worldwide health crisis as rapidly as possible and reduce the levels of global illness, death, disruption and impoverishment. There was recognition, too, that special efforts would be needed to deliver vaccines to low- and middle-income countries – financing, enhanced distribution capacity and, above all, expanded production of vaccines.

Vaccine development succeeded. Building on years of public investment and spurred by billions of dollars in Covid-related research and development and advance purchase commitments, effective vaccines made their way to market in record time.

But the effort to deliver vaccines to low- and middle-income countries has failed. The facts are stark: Even at this late date, only 19 percent of Africans have received a single shot. The vaccination rate among low-income countries is 14 percent – about one-sixth the rate in rich nations. And even those data disguise the extent to which people in poorer countries are receiving less efficacious vaccines.

The true toll of this failure will never be known, but at this point almost surely includes tens of millions of avoidable cases and hundreds of thousands of deaths from Covid. It also includes extreme disruption of poorer countries' economies and societies. The World Bank estimates roughly 100 million additional people living in extreme poverty (less than \$2/day) due to Covid. Some of this was unavoidable, but the Bank expects that low-income countries and African nations – exactly the nations with lowest vaccination rates – will have evidenced further increases in poverty in 2021.

There are two key explanations for this devastating failure: First, the United States and other rich countries not only, reasonably, prioritized domestic needs; they refused to pay appropriate

^[1] Institutional affiliations do not indicate endorsement by the institution.

attention to global solutions to the global pandemic, because of political concerns or otherwise. Second, the United States and other rich countries failed to expand vaccine supply sufficient to meet global need. Without adequate supply, efforts to bolster low-income country distribution and delivery systems consequently have lagged and been similarly under-resourced. Instead, governments permitted the multinational pharmaceutical companies to maintain a monopoly on the most advanced vaccines, declining to use existing authority to force those companies to share vaccine recipes and failing to invest in new vaccine production facilities.

There is no turning the clock back. We write now to plea with you to reverse course. We are highly supportive of vaccine donations from rich countries to low-income nations. But the donations have not been - and will not be - a substitute for sharing technology and increasing the overall supply of vaccines and implementing a plan to get shots into arms.

We write at this moment with great trepidation. With the Omicron wave fading in the United States, there is an understandable desire by everyone to "put the pandemic behind us." On the one hand, this risks leaving poor countries out in the cold. Without concerted and determined efforts, vaccination rates will remain low in these nations. On the other hand, "put the pandemic behind us" risks repeating failures we cannot afford to replicate. If much of the world remains unvaccinated, the odds of new and dangerous Covid variants increase. Such variants will inevitably make their way to the United States, as Delta and Omicron have done in turn. We can certainly hope that this scenario won't occur, but it is beyond reckless to rely only on hope — rather than a strategy of getting as much of the world vaccinated as possible.

Going forward, we urge your administration to:

- Use its authorities and request sufficient funding from Congress to share vaccine technology with other countries and support the scale up of vaccine manufacturing facilities in the United States and around the world. This remains an immediate need, but it is also crucial to create an infrastructure capable of dealing with evolutions of the virus, or other possible viruses.
- Augment your request for funding from Congress to fully resource support for vaccine distribution in low-income countries, including resources to support adequate "last mile" delivery of vaccines, effective public health messaging, and frontline healthcare workers.
- Act urgently to expand production and sharing of effective Covid therapeutics. Especially while vaccine access remains so inequitable, equitable access to effective therapeutics is crucial. The maker of the most important available therapeutic, Pfizer, plans to make far too little to meet global need.

President Biden, we write this letter reluctantly. We recognize the inherent difficulties in addressing a global pandemic with no recent historic parallel. We certainly appreciate this administration's commitment to science and public health. But we have long urged effective action to address the worldwide pandemic, including in countless meetings with and

^[1] Institutional affiliations do not indicate endorsement by the institution.

communications to the administration. So far, our efforts have failed to spur appropriate action from your administration. We hope that this letter can help change that and look forward to working with your team in any way possible to meet the global challenge.

Sincerely,

Gregg Gonsalves, PhD, Associate

Professor Yale School of Public Health

Gavin Yamey, Professor of Global Health

and Public Policy Duke Global Health Institute

Michael O'Loughlin, Ph.D. Adelphi University

Ntama Bahati, Policy Analyst Africa Faith and Justice Network

John Hassell, National Director of

Advocacy AIDS Healthcare Foundation

John Steen American Health Planning Association

Mitchell Warren, Executive Director AVAC

Jamila Headley, Co-Executive Director Be A Hero

Ady Barkan, Co-Executive Director Be A Hero

Boston Medical Center/Boston University

Avik Chatterjee, MD, MPH School of Medicine

Andrea Boggio, JSD Bryant University

Alan D. Levine, PhD, Professor Case Western Reserve University

Center for Policy Analysis on Trade and

Ellen R. Shaffer PhD, Co-Director Health (CPATH)

Scott Pytluk, PhD, ABPP, Psychoanalyst Chicago Center for Psychoanalysis

Sarah E. Baker, PhD Children's Hospital of Michigan

Kim Maxa, PharmD, MBA, BCOP Children's Minnesota

Carlyn Cowen, Chief Policy and Public

Affairs Officer Chinese-American Planning Council (CPC)

^[1] Institutional affiliations do not indicate endorsement by the institution.

Pamela Behrman, PhD	College of Mt. St. Vincent
Betty Wolder Levin, Professor Emeritus	Graduate School of Public Health and Health Policy, City University of New York
Catherine Stanger, Ph.D. Professor	Dartmouth College
Rachel Cohen, Regional Executive Director	Drugs for Neglected Diseases initiative (DNDi), North America
Sally Guttmacher, PhD	Emerita Professor of Public Health, New York University
Robert A Bednarczyk, Associate Professor of Global Health	Rollins School of Public Health, Emory University
Kenneth G. Castro, MD	Rollins School of Public Health & School of Medicine, Emory University
Dr. Tim K. Takaro	Faculty of Health Sciences, Simon Fraser University
Kenneth Mayer, Medical Research Director and Professor	Fenway Health
George M. Carter, Founder/Director	Foundation for Integrative AIDS Research (FIAR)
Jhumka Gupta, ScD, MPH	College of Health and Human Services, George Mason University
James Recht, MD	Harvard Medical School
Nancy Krieger, PhD, Professor of Social Epidemiology	T.H. Chan School of Public Health, Harvard University
Alicia Ely Yamin, Lecturer and Senior Fellow on Global Health and Rights	Harvard University
Asia Russell, Executive Director	Health GAP
Nina (Cornelia) Kammerer, Senior Lecturer	Heller School, Brandeis University
Joan Rosenhauer, Executive Director	Jesuit Refugee Service USA
Karyn Pomerantz	Justice is Global; Public Health Awakened

^[1] Institutional affiliations do not indicate endorsement by the institution.

George J. DuPaul, PhD, Professor of

School Psychology Lehigh University

Susan Gunn, Director Maryknoll Office for Global Concerns

Kelly Hirko, PhD Michigan State University

Mount Sinai School of Medicine Sheela Maru, MD, MPH

National Clinician Scholarship Program,

University of Pennsylvania Ravi Gupta, MD

Department of Population Health, Grossman

Samuel R Friedman School of Medicine, New York University

Laura Peralta-Schulte, Senior Director of NETWORK Lobby for Catholic Social Public Policy and Government Relations Justice

Wendy E. Parmet, Matthews

Distinguished University Professor of Law School of Law, Northeastern University

Jonathan Kahn, Professor of Law and

Biology Northeastern University

School of Global Public Health, New York

People's Health Movement-Canada and

University Mari Armstrong-Hough

Andrew Goldstein MD, MPH, Assistant

Professor School of Medicine, New York University

Kenneth D. Rosenberg, MD, MPH Oregon Health & Science University

Alexis Dinno, Associate Professor OHSU-PSU School of Public Health

Abby Maxman, President & CEO Oxfam America

Joshua B Mendelsohn Pace University

Andréa Sonenberg, PhD, WHNP, CNM-

BC, FNAP, FNYAM Pace University

George William Letson, MD **PATH**

Anne-Emanuelle Birn, Professor of Global

Health

University of Toronto

Mary Ann Castle, PhD, Senior Associate Planning Alternatives for Change

^[1] Institutional affiliations do not indicate endorsement by the institution.

Michael Friedman, MPH, PhD, Visiting

Assistant Professor **Pratt Institute**

Christian Urrutia PrEP4A11

Robert Weissman, President Public Citizen

Paul Davis, Policy Director R2H Action (Right to Health)

Jon Shaffer, Founder and Co-Organizer R2H Action (Right to Health)

Lara E Sucheston-Campbell, PhD **Roche Diagnostics**

Rollins School of Public Health, Emory

Dabney P. Evans University

Rollins School of Public Health, Emory

Jodie Guest, Professor University

Beth S. Linas, PhD, MHS **RTI** International

Shauna Downs, Assistant Professor School of Public Health, Rutgers University

Stephan Schwander, MD, PhD, Associate

Professor School of Public Health, Rutgers University

Rachel E. Kreier PhD Saint Joseph's College

Supriya Misra, Assistant Professor of

Public Health San Francisco State University

Maureen Benjamins, PhD, Epidemiologist Sinai Urban Health Institute

Center for Public Health Research, Beasley

Scott Burris School of Law, Temple University

Cynthia Golembeski, PhD Candidate,

Executive Board Member

The New School; New Jersey Public Health

Association

The University of North Carolina at Chapel

Benjamin Mason Meier

Hill

Kimberly A. Powers, PhD, Associate

Professor of Epidemiology

Trude Bennett, DrPH

The University of North Carolina at Chapel

Hill

School of Public Health, The University of

North Carolina at Chapel Hill

Mark Harrington, Executive Director **Treatment Action Group**

^[1] Institutional affiliations do not indicate endorsement by the institution.

Ippolytos Kalofonos MD, PhD, MPH	University of California, Greater Los Angeles
Steffanie Strathdee, PhD, Associate Dean of Global Health Sciences	University of California, San Diego
Maria L Ekstrand, PhD, Professor	Department of Medicine, University of California, San Francisco
Kim Yi Dionne, Associate Professor of Political Science	University of California, Riverside
Hannah Leslie, Assistant Professor	University of California, San Francisco
Parya Saberi, PharmD, MAS, Associate Professor	University of California, San Francisco
Regina Day Langhout, PhD	University of California, Santa Cruz
Harold Pollack, Helen Ross Professor of Social Work, Policy, and Practice	University of Chicago
Jimi Adams, Associate Professor of Health & Behavioral Sciences	University of Colorado, Denver
Sarah S. Willen, PhD, MPH, Associate Professor of Anthropology	University of Connecticut
Wendy Bostwick, Associate Professor	University of Illinois, Chicago
Mary K. Anglin, PhD, MPH, Associate Professor Emerita	University of Kentucky
Carmen Velez Vega	University of Puerto Rico Medical Campus
Colleen A. Redding, PhD, Research Professor	University of Rhode Island
Theodore M. Brown	University of Rochester
Sofia Gruskin	Institute on Inequalities in Global Health, University of Southern California
Keshet Ronen, PhD, MPH	University of Washington
Nora Kenworthy, Associate Professor	University of Washington, Bothell
Jenna Loyd, Associate Professor	University of Wisconsin, Madison

^[1] Institutional affiliations do not indicate endorsement by the institution.

Lance Gable, Professor of Law Wayne State University Law School

Kevin Larkin, Professor of Psychology West Virginia University

Women's Equity in Access to Care and

Mardge Cohen Treatment

Catherine DeLorey DrPH Women's Health Institute

Margaret Holland, PhD, MPH, Research

Scientist Child Study Center, Yale University

Michael Skonieczny, Deputy Director Yale Institute for Global Health

Poonam Daryani, MPH Yale Law School

Sandra A. Springer, MD, Associate

Professor of Medicine Yale School of Medicine

David Vlahov, PhD, RN Yale School of Nursing

Gina Novick, PhD, CNM

Yale School of Nursing

Shelley Geballe, JD, MPH Yale School of Public Health

Taiga Christie, MPH, EMT Yale School of Public Health

Alyssa Parpia Yale School of Public Health

Joseph S. Ross, Professor of Medicine and

Public Health Yale University

^[1] Institutional affiliations do not indicate endorsement by the institution.