**FORUM:** GENERAL ASSEMBLY II

**THE QUESTION OF:** The ownership of vaccine patents and intellectual properties during epidemics and pandemics

**MAIN SUBMITTER:** Mexico

**CO-SUBMITTERS:** European Union, New Zealand, DRC, WIPO, USA

*Alarmed* at the 52 million cases caused by the COVID-19 pandemic and the rising cases in deaths as the second wave hits the world,

*Bearing in mind* that there is yet to be a fully successful vaccine to be distributed so as to prevent the further spread of the virus and prolonging this current pandemic,

*Concerned* with the lack of cooperation in the international community with the novel coronavirus vaccine patents,

*Takes into account* that most intellectual property holders are looking for profit within a market,

*Aware of* the variety of intellectual property types and systems found internationally and that collaboration between said systems can be difficult,

*Expressing its satisfaction* at previous international action with the matter which is proven by the World Intellectual Property Organization Patent Cooperation Treaty (PCT),

1. Calls on all Member States to reevaluate their national patent laws/legislations in order to secure that vital products and/or designs, which could contribute to the development and/or production of vaccines are easily accessible, by means such as but not limited to;
	1. Creating exceptions to the patent laws/legislations such as:
		1. Limiting the amount companies/organisations must pay to gain access to use a patented product or design,
		2. Pausing the protection years,
		3. Dissolving patents,
	2. Supplying funding to help pharmaceutical companies to pay off costs of using patented products and/or designs;
2. Encourages all Member Nations to improve their vaccination rates by means such as by not limited to;
	1. Legal actions such as but not limited to:
		1. Imposing laws which make vaccination against harmful disease mandatory, while allowing exceptions for:
			1. Religious reasons,
			2. Medical reasons,
		2. Fining/arresting leaders and important members of anti-vaccination campaigns and protests/marches,
	2. Awareness campaigns, in favour of vaccinations, through:
		1. Newspapers,
		2. TV shows,
		3. Social media,
		4. School education such as lessons focused on the importance of vaccination,
		5. Posters;
	3. Creating a better vaccination infrastructure to more efficiently produce and distribute the vaccine by means such as but not limited to:
		1. Creating vaccination stations responsible for a specific region/city/town,
		2. Help the development and production of vaccines to secure the availability and access to the vaccine through,
			1. Increased state funding for both national and international vaccine developers and producers,
			2. Increased state involvement in these processes to secure that national health and wellbeing is the main priority of the developer and/or producer,
	4. Make vaccination free of charge to encourage the population to get vaccinated.
3. Calls upon all member nations to cooperate internationally with a variety of different nations and organisations/corporations in order to;
	1. Secure that patents do not interfere with:
		1. Vaccine development/production,
		2. Humanitarian aid,
	2. Relax international patent laws specifically surrounding times of crisis such as but not limited to:
		1. Pandemics,
		2. Wars,
		3. Natural disasters.
4. Encourages all countries to abolish medical patents for:
	1. the duration of the pandemic and future similar health crisis;
	2. intellectual resources such as but not limited to:
		1. scientific research,
		2. pandemic related information,
		3. tracking of viruses,
	3. medical resources such as but not limited to:
		1. medical equipment,
		2. vaccines,
		3. testing methods,
		4. medicines;
5. Advises that all nations create a vaccine distribution programme that will:
	1. produce the necessary amount for global distribution,
	2. equally, distribute the vaccines regardless of monetary contributions made,
	3. first focus on at-risk groups of the population of each country measured by issues such as but not limited to:
		1. age,
		2. underlying conditions such as but not limited to:
			1. respiratory issues,
			2. cardiovascular problems,
			3. diabetes,
		3. contact with the infected population in jobs such as but not limited to:
			1. doctors,
			2. nurses,
			3. hospital maintenance staff.
6. Calls upon member nations and national private companies to discuss current and future regulations regarding the ownership of vaccine patents and intellectual properties in order to
	1. Have control over who is the rightful owner of the idea in the event of a crisis,
	2. Prevent the use of compulsory licensing or march-in rights,
	3. Strengthen relationships to increase collaboration when developing new vaccines or intellectual properties.