5. Establish a pre-negotiated platform for tools and supplies

ACT-A was launched on 24 April 2020 and evolved organically. Its vaccines, diagnostics, therapeutics pillars, and health systems connector are intended to be agile, collaborative partnerships rather than hierarchical structures. While **ACT-A was able to establish a successful platform** in many respects, the fact that it did not exist before the COVID-19 pandemic and had to be created for that purpose is reflected in its shortcomings. **Not all pillars of the initiative have been equally successful**, and a coherent, strategic, inclusive, and fully funded framework has not been achieved, to this day. ACT-A is seen by some countries and civil society as supply-driven and not sufficiently inclusive, with large donor countries and institutions having an asymmetrical influence on decision-making.

There is a lack of shared vision among all stakeholders, including both countries and manufacturers, that the therapeutics, vaccines and diagnostics needed to counter pandemics are global health commons. Without that shared vision, the "business-as-usual" approach prevails dominated by the development and sale by global corporations of proprietary products designed for wealthy countries, leaving the rest of the world dependent on the goodwill of donors, development assistance and charity to gain access — eventually — to life-saving health technologies [60].

The alignment of international instruments should support such a shared vision, for example, by including the open licensing of vaccines, therapeutics and diagnostics in the United Nations Educational, Scientific and Cultural Organization's forthcoming Recommendation on Open Science, an international standard-setting instrument that is currently being negotiated with Member States for adoption in 2021.

Concentration of manufacturing capacity, and of trials and knowledge generation, for vaccines, therapeutics, diagnostics and other essential supplies in a small number of countries has been a major contributor to inequity. While vaccine product development has been the most successful, there was a **lack of end-to-end planning** with R&D, clinical trials and manufacturing processes guided by a goal and strategy for equitable and effective access.

A pre-negotiated system to accelerate R&D and achieve equitable access is vital to pandemic response and the development and delivery of vaccines, therapeutics, diagnostics, and essential supplies. ACT-A provides a valuable model. Lessons drawn from both its strengths and weaknesses should guide the establishment of a permanent platform which can stand in readiness for any future pandemic.

The Panel believes that a **comprehensive review** of the achievements, financing, and governance of ACT-A should be conducted to make it more robust and fit for the extended purpose it should assume.