

The goal of the paper is:

- There was a letter from TWN on questions around ABS covid19. Yes, fair and equitable sharing is a really important concern that is not yet addressed and concerns us.
- However, there is not widespread awareness about the role of public research in the response to the pandemic.
- The EVA-GLOBAL Horizon 2020 project was a critical player in the early diagnostic kits
- This was possible because of investments in infrastructure and the preservation of a wide variety of biodiversity which enabled preparedness
- Subsequently, many of the diagnostics were provided free of charge and provided to international colleagues
- Secondly, there is significant other inputs such as training, capacity building, data generation
 - INSERT SURVEY RESULTS HERE
- There is no evidence that any pathogenic material was obtained/received/accessed from a NP Party or underlying ABS obligations or that it should have been. On the contrary, the public health community, can be very grateful that the countries that have provided this material have not exerted sovereign rights over their genetic resources, such as 5.1.2a Netherlands, 5.1.2a If ABS had been a concern it could have caused delays in delivering critical resources in a pandemic.
- IN the early phase of the epidemic, distribution was more regional and focused on early outbreak countries. Then private sector took over and started to ramp up diagnostics. EVA continued to play a role and provide validation/reference materials. (3 MTAs for different types of reference material – diagnostics, antiviral screen, vaccine reactivity.)
- At that point, the outreach continued into a second phase, in which the kits were sent out to an additional 70 (?) countries and provided them with diagnostic kits.
- Imagine if the pandemic had originated in central Africa where ABS regimes are not fully-established or transparent. This could have led to serious delays.
- There are discussions underway in the WHO to expand the multilateral PIP framework to other pandemic situations. There is a clear need for this. We need to be prepared as a global community.

Need from 5.1.2e

- Distributed to 86 countries
- Public sector vs private sector
- 2,563 covid19 accesses
- Figure like figure 7: Distribution of sars-cov-2 products through end of September in world map divided by public and private sector
- Links to the catalog on all Sars-cov-2 relevant products

- 3 MTAs