March 11, 2021

Dear colleague:

The Global Health Technologies Coalition (GHTC) is launching this [policy report](#) almost exactly one year after COVID-19 turned our world, and our work, upside down. As advocates for the power of innovation to solve the world's most pressing health challenges, we have watched with awe as scientists have shattered speed records for vaccine development, collaborated across borders to share data in real time, and trained the powerful lens of single-minded scientific inquiry on this deadly global foe—upending assumptions about how science works, and how fast.

But even as we cheered the rapid progress of science unfolding before our eyes in 2020, we grappled with new evidence of seemingly ancient problems that have held back our global society for generations: racism, xenophobia, gender inequality, economic inequality, and the plain fact that the fruits of medicine and science itself are not equally shared across class and color lines, either in our own country or around the world. These realizations felt painful and personal. Over the past year, the Washington, DC–based GHTC secretariat team sat on Zoom calls as colleagues in Nairobi and Johannesburg comforted *us* as protests over police brutality rocked *our* cities and a violent insurrection spurred on by antidemocratic sentiment shook *our* capital—upending our unconscious but injurious assumptions about "our" problems versus "theirs." Above all, 2020 was a year to say out loud that we as Americans have much still to learn, that to achieve real and lasting progress we must approach global challenges with humility and a commitment to authentic partnership.

From this tumult can, and should, come a reckoning that redoubles our commitment to science *and* social justice, new products and new practices, human-centered design and human rights. The hand of science should fit the glove of our shared aspirations and values, not vice versa.

We are redefining what US leadership in global health research and development (R&D) should look like in this new era. A global pandemic and its associated loss of life and livelihoods is a tragic beginning to a new decade and, here in the United States, a new administration and Congress. But it is also a forcing moment: an opportunity to confront the most damaging and deeply rooted inclinations—be they enshrined in policy or embedded in our mindsets—that hold back progress in science and society. Out of the destruction of COVID-19, we can rebuild and revitalize our work with the leadership of visionary policymakers; funding at the level our challenges require, not what our short-term politics allow; and a biomedical research agenda that is shaped by patients and communities and reoriented to the people we serve, not dictated by gatekeepers who unilaterally wield resources and order priorities.

This forcing moment is unfolding in waves as we digest new reports that reinforce just how deep these divisions run: as we learn that just 5 million COVID-19 vaccine doses have been administered across the African continent, compared to nearly 94 million in the United States; as we hear of scientific trainees and young investigators—whose diverse perspectives we desperately need—being driven from the R&D field by evaporating funding and shrinking institutional support; as we confront the staying power of a pernicious narrative dressed up in subtly shifting language—from speeches which plainly state that

American interests come first, to policies and purchase agreements which perpetuate that promise in practice.

GHTC does not shy away from these realities, nor do we consider ourselves or our members immune from their grip. We present the following policy recommendations fully cognizant of the scale of the challenges we face—but optimistic that significant gains can be made if these proposals are pursued. Ultimately, we believe that inequity, in many shifting but powerful forms, is the hidden pandemic that has dramatically worsened the prognosis for our shared global recovery from COVID-19. And we believe that addressing specific inequities by decolonizing the systems, funding, and norms that govern global health R&D will be a powerful healing force.

The following policy recommendations are oriented around that aspiration—but they represent, in truth, a starting point for a larger-scale shift that is needed. We welcome the fresh energy, new perspectives, and unique vision this new administration and congressional champions for global health innovation can bring to a fuller reevaluation of the global health R&D ecosystem and the role of US leadership in it. We charge the Biden-Harris administration to think bigger and bolder, including by convening global dialogues to develop a shared global health R&D agenda and coordinated funding and policy commitments.

We are pleased to present this report and look forward to the dialogue it sparks with our partners, policymakers, and the public at a moment when science occupies our attention and imagination like never before.

Signed,

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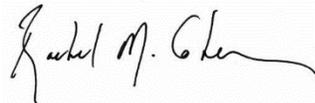
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