

**Opening Statement – Finance Committee (FINA)**  
**Doctors Without Borders/Médecins Sans Frontières (MSF)**  
**Mr. Joe Belliveau and Dr. Jason Nickerson**  
**June 02, 2020**

**\*\*\*CHECK AGAINST DELIVERY\*\*\***

To be presented by Mr. Joe Belliveau:

Thank you, Mr. Chair, and thank you to the Committee for the opportunity to present to you today.

I am the Executive Director of Doctors Without Borders/Médecins Sans Frontières (MSF), and am joined by my colleague, Dr. Jason Nickerson, our Humanitarian Affairs Advisor.

MSF is an international medical humanitarian organization that provides impartial medical assistance to people in more than 70 countries. We deliver essential health services in some of the world's most complex environments, and we are no stranger to public health emergencies.

But today we are facing an unprecedented crisis created both directly and indirectly by the COVID-19 pandemic, which has reached all of the countries where MSF works.

We are witnessing COVID-19 cases that are occurring alongside existing emergencies and creating a dangerous set of public health risks. In the refugee camps of Cox's Bazar, Bangladesh, nearly one million Rohingya refugees live in overcrowded, unsanitary conditions that are perfect for spreading COVID-19, in a place where it is virtually impossible for people to socially distance, and access to clean water is a persistent challenge. In Central African Republic, years of conflict have left millions of people displaced and dependent on humanitarian assistance. MSF's teams on the ground are among the only providers of direct care in the country, and the budget we require to operate effectively there exceeds that of CAR's own ministry of health. That means there is little capacity to provide care for everyday health problems – and certainly not for a pandemic.

COVID-19 is creating new strains on our capacity to deliver essential care. It is critical, especially in the midst of this pandemic, that the Canadian government continue to protect humanitarian responses in these emergencies and others around the world, by continuing to provide international assistance funding. This funding ensures that humanitarian organizations can continue their existing operations while also responding to new pressures created by the pandemic. In Canada, we can rely on our strong and stable health system infrastructure. In other places, health systems struggle to meet people's everyday health needs. For example, yesterday the Democratic Republic of Congo confirmed a second Ebola outbreak, meaning the country is currently responding to two Ebola outbreaks, the largest measles epidemic in the world, and to COVID-19 - all in a country that has been affected by armed conflict and other protracted humanitarian crises for decades.

To respond to the COVID-19 crisis and to meet the needs it is creating in Bangladesh, Congo and other places, MSF has identified a budgetary need of 226 million Canadian dollars. Although roughly 95 per cent of MSF's funding comes from private donations, we are asking the Canadian government for a contribution of 10 million Canadian dollars to our COVID-19 Crisis Fund. This fund is to ensure that our teams will be on the ground, working to meet the needs of people and health systems around the world overwhelmed by this unprecedented crisis. COVID-19 has already caused an immediate expansion of our

activities around the world, including in places where we would not normally work – such as Canada itself.

But our delivery of medical care depends not just on funding. We also rely on affordable access to - and innovation for – new medicines, vaccines, and diagnostic tests. These advances are crucial for the health and wellbeing of countless people around the globe, just as they are in Canada.

But the global research and development system is not designed to prioritize affordable access, especially outside of wealthy countries. Access to lifesaving medicines is inequitable.

This is unacceptable. As Canada spends more than one billion dollars of public funding to develop and deliver COVID-19 technologies, it is essential that Canada demands a fair return on investment by including specific requirements in funding agreements with, for example, pharmaceutical companies or universities receiving Canadian public funds to ensure that any resulting health technologies are globally accessible and affordable – including for Canadians.

Today, to our knowledge, no such requirements exist in Canadian funding agreements. It would be unacceptable if a vaccine to prevent COVID-19 or a medicine to treat it was developed with Canadian public funding and yet priced out of reach. We risk creating a situation where billions of people will not benefit from these substantial investments, even when they make the difference between life and death.

**The time to act is now.**

As you consider Canada's essential funding contributions to COVID-19 R&D, I urge this Committee to demand that such funding come with common-sense public health safeguards that ensure that the vaccines and treatments for COVID-19 developed with Canadian public funds are made affordable and accessible to everyone who needs them.

The global pandemic will not end here until it ends everywhere. Now is a moment for global solidarity and smart public investment to ensure that everyone, everywhere, has access to the medical care that they need.

We look forward to your questions. Contact information for both of us is available from the Committee Clerk. We would welcome any of the Members to follow-up directly with either of us. Thank you.