The pandemic caused by COVID-19 has stretched the National Health System, whose response to the needs of the population is fundamental, to its limits.

We need a strong public health system with Primary Care at the heart of the response; one that is not subject to cuts and restrictions. A national health system in which healthcare workers are well trained to deal with health emergencies and have the necessary resources to ensure patients receive the attention they need at all times.

We need to restore universal health coverage because the virus does not care about residence or origin. Pandemics and epidemics are public healthcare issues that affect the entire community, especially the most vulnerable, and they must be resolved with universal access to healthcare. Therefore, to deliver the right to healthcare, we can leave no one behind and must ensure the best care, the best materials and healthcare technologies and accessible, efficient and safe medicines at a price that ensures their affordability.

Innovation is also crucial, both in relation to prevention through vaccines and in the development of medicines to treat the disease. Research agendas must respond to the health needs of the population and not profitability. COVID-19 is an example of just how necessary it is for research to be conducted into infectious and bacterial diseases and public and community health, among other areas. It is urgent therefore to prevent any excessive concentration of resources in a small number of diseases and to increase financing of a diversified and balanced biomedical R&D, with clinical trials independent of the industry. A commitment to innovation in the public sphere is required, recognising the economic and resource contributions to any collaboration that is carried out. There are many research initiatives currently being conducted on a global scale, from Europe and also in Spain, to develop vaccines, medicines and diagnostic testing as soon as possible.
Access must be guaranteed for everyone who needs it. This can only be achieved by preventing monopolies and exclusive licences in the event of transferring a medicine to the private sector. Moreover, other socially responsible measures must be implemented to safeguard the public interest, accessibility and a fair price for products.

In this context, **good governance, transparency and accountability** shall, now more than ever, prove to be the best instruments for ensuring the best decision-making based on clinical evidence, development and production costs and the safety and efficiency of medicines and health technologies that are made available to the population. This includes guaranteeing the supply of medicine and ensuring that supply through the use of the compulsory licenses, as provided among in the flexibilities of the TRIPS Agreements.

From this experience we have learned that it is necessary to invest in healthcare and the repercussions of putting our healthcare system under strain, both in terms of economic and human resources. This cannot happen again, but the good news is that we have everything necessary to remain one of the best healthcare systems in the world.

This letter is an initiative of the organizations promoting the **NO ES SANO** campaign:

Asociación de Afectadas por la Vacuna del Papiloma (AAVP), Alianza por la Solidaridad, ANESVAD, Apoyo Positivo, Asociación de Residentes de Medicina Preventiva y Salud Pública (ARES), Asociación de Usuarios de la Sanidad de Murcia, Comisión Española de Ayuda al Refugiado (CEAR), Consejo Estatal de Estudiantes de Medicina (CEEM), Coordinadora Estatal de VIH y Sida (CESIDA), CIECODE, Asociación de Consumidores y Usuarios de Murcia (CONSUMUR), Coordinadora de ONGD- España (CONGDE), Farmacéuticos Mundi, Federación para la Defensa de la Sanidad Pública (FADSP), Federación Española de Estudiantes de Medicina para la Cooperación Internacional (IFMSA- Spain), Medicus Mundi, Plataforma de Afectados por la Hepatitis C (PLAFHC), Red Española de Atención Primaria (REAP), Sociedad Española de Enfermería Familiar y Comunitaria de Asturias (SEAPA), Sociedad Española de Médicos de Atención Primaria (SEMERGEN), Sociedad Española de Medicina de Familia y Comunitaria (SEMFYC), Sociedad Española de Médicos Generales y de Familia (SEMG), Universities Allied for Essential Medicines (UAEM), Unión Sindical Obrera (USO).

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