

Africa: the face of vaccine inequity



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It is exactly a year on since global Covid-19 vaccine delivery began in earnest.



Source: Pexels

Science and vaccines have saved many lives in 2021, but while some nations are giving out fourth vaccine doses, three quarters of health-care workers in Africa have yet to receive one.

We need to understand why and how to do better. How do we fix this?

"There is absolutely no reason why a continent like Africa with a population of 1.2 billion people should be lagging behind and having 7% of its population immunised. This is not the humanity we want to project here. The moral failures that we've witnessed over the last two years cannot repeat themselves in 2022," said John Nkengasong, director of Africa CDC.

Nkengasong was speaking at The World Economic Forum's 'Davos Agenda 2022'. This is a global platform for heads of state and government as well as CEOs and other leaders to share their visions for 2022 on critical collective challenges and how to address them.

The panel discussion on Wednesday highlighted global vaccine inequity. The speakers were John Nkengasong, director of Africa CDC; Adar C. Poonawalla, CEO of the Serum Institute of India; Gabriela Bucher, executive director of Oxfam

International; Seth F. Berkley, CEO of Gavi, the Vaccine Alliance; and Michael Ryan, executive director of the WHO Health Emergencies Programme.

This is the second consecutive year that the event is being held virtually.

"The only way to prevent other variants challenging global efforts and the advances in medicine, is to vaccinate at scale and at speed," Nkengasong said.



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Africa wants to take the vaccine

Nkengasong said that in a <u>study</u> published in the journal 'Nature', 80% of Africa's population are ready to take vaccines if they're available.

The research found Covid-19 vaccine acceptance was much higher in the low and middle-income nations under review than in the US (65%) or Russia (28%). The study included countries such as Rwanda, Burkina Faso, and Mozambique.

Most people in the poorest countries will need to wait another two years before they are vaccinated against Covid-19, researchers have told 'Nature'. This timeline stands in stark contrast to the WHO's strategy to vaccinate 70% of people in all countries by the middle of this year.

Around 11 billion doses are needed to fully vaccinate 70% of the world's population against Covid-19.

Nkengasong says WHO's target of doing so by mid-year is unrealistic.

Spotlight on vaccine supply

Contrary to popular narrative, vaccine supply is not at the root of vaccine inequity.

The vaccine distribution network, COVAX met its 950 million vaccine-dose target to LMC countries by the end of 2021.

"In terms of getting vaccines out, the first vaccines went to a developing country 39 days after the first vaccine in a highend country. That's never been done before," said Berkley of Gavi.

Poonawalla said the Serum Institute of India had committed to producing 1 billion doses of Covid-19 vaccines a year.

"We landed up producing 1.5 billion doses, and had to stop production in December because we had 500 million in stock. This meant we would've produced 2 billion vaccine doses between January 2021 and December 2021."

Barriers to vaccine distribution

At the start of the global vaccination drive, Berkley and Poonawalla cited barriers to vaccine distribution: export bans, a lack of standardised regulatory framework for vaccines and companies not meeting their requirements to put doses forth.

"We've had to solve each of these problems, raise the money to purchase doses and to ask for dose donations which were not part of the original mandate. With that we were able to get this back on track and now you're seeing an accelerated drive towards getting vaccines out. We expect the next billion vaccine doses to take between four and five months to deliver.

"The challenge is making sure every country can receive them," Berkley said.

He said 29 countries have problems with vaccine absorption.

"With our partners like African Union (AU) and the African Vaccine Acquisition Trust (AVAT), we have been working to create bespoke plans to help these countries with their absorption capacity," Berkley said.

Over 90 million donated doses have been delivered to the continent via COVAX and AVAT and millions more via bilateral arrangements.



R3.5m grant for Pan-African vaccine development

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Vaccine nationalism to blame

We need to guestion a system that puts profit first before people's lives.

This was a warning of Bucher of Oxfam International.

"Some pharma are holding power that not even national leaders have."

She said WHO would only reach its 70% global vaccination target if the entire model around vaccine distribution was overhauled. She said vaccine nationalism and pharma monopolies are to blame for vaccine inequality.

"At the start of the vaccine distribution leaders in wealthy countries were holding vaccines for themselves, and leaving other countries at the back of the queue over and over again. And then because boosters were needed, they once again jumped the queue to the front.

"They've also been protecting those monopolies that pharmaceutical companies have over the vaccines."

Bucher said intellectual property rights on the Covid-19 vaccine should've been lifted from the beginning of global vaccination distribution allowing vaccines to be produced at scale across the world. "That would've been a game changer and we would've avoided not only deaths directly from Covid, but deaths that have been associated with growing inequality and crippled health systems around the world."

The world's existential crisis

Michael Ryan, executive director of the WHO Health Emergencies Programme was no holds barred at the panel discussion.

"We have a tragedy on our hands," he said. "If there isn't a change in the model of global vaccine distribution even more people will die."

"One of the scarcest commodities in this whole pandemic-response has been trust: trust between communities and government, trust between vaccine manufacturers and countries," he added.

He said we are facing an existential crisis, and that the lessons we learn from this pandemic and the solutions we implement as a result, are the ones we will carry into future pandemics.

"It is the responsibility of the multilateral sector, the public and private sector to come together and make the changes needed to make our system fit for purpose.

"Everyone has a stake in that. Everyone is a partner, nobody is a master."



First oral Covid-19 medicine authorised in the UK

8 Nov 2021



Stop deaths; stop hospitalisations

He said while the Covid-19 virus will always be part of our ecosystem, the aim in getting 70% of the global population vaccinated was to stop the global public health emergency, to stop the hospitalisations and deaths.

"This means we need to continue prioritising those most vulnerable to dying from the disease: the aged, the immunocompromised and vulnerable."

He said the aged would need a minimum of four primary vaccine doses to develop robust immunity to prevent hospitalisation and death. "A vulnerable person who needs a third dose because they're old - and whose immune system hasn't yet developed a robust response to the virus - that is an equity issue too, because their chance of dying is high."

He said 85% of people on the African continent hadn't received a single dose of vaccine.

"Surely we can meet both objectives by accelerating coverage in both low-income and industrial countries? I do not see these as opposing principles. They're two problems with equal validity, and both need to be solved.

"And they need to be solved now," he urged.

"That is, if we are to have an impact on the death rates around the world."

To date, 5.5 million people worldwide have died at the hands of Covid-19.

ABOUT KATJA HAMILTON

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