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Opinion [Coronavirus pandemic](#)

## Unequal vaccine access will return to haunt the rich

As developed countries race to roll out Covid-19 jabs, poorer nations fear they are missing out

[David Pilling](#)



*Like the military personnel and members of the public in line to receive the Covid-19 vaccine in Belgrade, developing nations wait to see where they will be placed in the global queue © Oliver Bunic/Bloomberg*

As rich countries race to dispense Covid-19 vaccines, poorer nations have a fear of missing out. The UK has inoculated more than 4m people while South Africa, which has also been severely struck, has yet to administer a single non-trial dose.

[Guinea](#) has barely any vaccine at all: as of January 18, just 25 shots — enough for two dozen “senior officials” and the president. So much for equality.

This uneven start is causing alarm. Tedros Adhanom Ghebreyesus, director-general of the World Health Organisation, has called it a “catastrophic moral failure”. It was wrong, he said, that “younger, healthier adults in rich countries are vaccinated before health workers and older people in poorer countries”.

That is over-egging it. In the UK, which got off to a flying start, almost half of the people over 80 have not yet received their first jab. In a controversial policy, the government is withholding the second dose for up to three months in an effort to get at least some vaccine to as many people as possible. Few young, healthy Britons, other than healthcare workers, have yet received a dose.

So, in his moral outrage, Mr Tedros overstates the case. But he does highlight a real issue. If rich countries look after themselves, cutting out the world’s poor in their scramble to secure vaccines, they will not only be guilty of selfishness. They will also be damaging themselves.

If the virus is allowed to rage unchecked in one part of the world, it will kill more people. It will also be likely to mutate faster, possibly into strains against which existing vaccines offer no protection. Ultimately — as should be obvious by now — we are all in this together.

Both morality and self-interest, then, dictate that vaccines — as well as diagnostics and therapeutics — should be treated as global public goods. In that spirit, led partly by the European Commission, the world has come up with Covax, a sort of buyer’s club and insurance scheme rolled into one. On Wednesday, incoming US president Joe Biden said his country would join.

By ordering in bulk, Covax provides incentives to companies to invent new vaccines. Under its rules, about 90 poor and middle-income countries are eligible for free jabs. Richer nations, from Azerbaijan to South Africa, will pay. While they are not prohibited from pursuing bilateral procurement deals, as Azerbaijan has with China's Sinovac, they might do better in the Covax club than on their own.

If Covax ruled the world, it would distribute vaccines globally, starting with the highest priority groups no matter where they lived. But it does not. No one voted for Covax and the world in which it operates is divided into nation states. Moreover, the pandemic has struck in an era in which me-too nationalism prevails. If it is America first, then it follows it must also be Brazil first, India first, Germany first, Israel first, Djibouti first and so on.

Inevitably, countries with the deepest pockets strike the biggest deals. There is competition among developing countries, too. Adar Poonawalla, chief executive of the Serum Institute of India, the world's largest vaccine manufacturer, told The New York Times: "India gets priority because it's my home country." SII also expects to sell some vaccine to private facilities, meaning that some people will get jabs according to their ability to pay, not their need.

As some barge their way to the front of the queue, Covax has been criticised for falling behind. Peter Piot, director of the London School of Hygiene and Tropical Medicine, says the next five months will be crucial. In Africa, where Covid-19 is surging back, at least 2.5m healthcare workers should be protected immediately, he says. "We're not asking for the moon."

To get doses flowing, companies should waive intellectual property rights and share knowhow so that manufacturers in India, Brazil and elsewhere can ramp up production. They also need to provide regulators with timely data. The WHO has accused some of dragging their feet by prioritising regulators in lucrative markets.

Richard Hatchett, head of the Coalition for Epidemic Preparedness Innovations, which funds vaccine developers, says Covax can secure 3bn doses. It will, he says, start deliveries next month. Africa should get 150m doses in the first half and nearly 600m by the year end. If he is right, it is a promising start.

Eventually, there will be plentiful supplies, particularly if Johnson & Johnson's one-shot vaccine proves effective and, more tantalisingly still, if the \$1-a-shot vaccine being developed by Biological E, a Hyderabad-based company, comes good.

“We have a short window to get this right,” says Benjamin Schreiber, Unicef's co-ordinator for Covid-19 vaccines. For an interconnected world — or one that aspires to be interconnected again — the sharp end of the problem comes now.

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