



## DIALOGUE

# VACCINE APARTHEID

With only 6.6% of Africa's population fully vaccinated against COVID-19, we could describe the current scenario as a kind of "vaccine apartheid". Low vaccination rates and scarce bilateral agreements in the global South have worldwide consequences, with new variants of the virus threatening even countries that stockpiled vaccines.

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Until populations across the world are protected from the threat of the COVID-19 virus, new variants will continue to emerge and spread around the globe.

"Inequity is the common denominator in many of the challenges faced by public health professionals, and this rings true for our attempts to tackle the Covid-19 pandemic," writes Maggie Rae, President of the Faculty of Public Health, in the *British Medical Journal* (BMJ). "While 80% of the UK population is fully vaccinated, this figure stands at only 6.6% for the African continent. While we still seek a definitive answer as to where the Omicron variant of Covid-19 originated, what is certain is that unless populations across the world are protected from the threat of the virus, we will continue to see new variants emerge and spread internationally. Our most important call to governments then, is to support global vaccination efforts through lifting import restrictions and intellectual property protections, while also resourcing and supporting vaccine delivery programmes in low-income countries"<sup>1</sup>.

The idea of applying a waiver on some intellectual property rights provisions around COVID-19 patents and tools including vaccines, drugs, diagnostics, personal protective equipment and other medical technologies for the duration of the pandemic has been under discussion since October 2020, when India and South Africa first proposed it to the World Trade Organization (WTO) in an effort to ensure the equitable distribution on a global scale of tools to fight the virus. The proposal gained the support of most WTO member countries, United Nations agencies including the WHO, UNICEF, UNAIDS and UNITAID, the Holy See, economists such as Joseph Stiglitz, and over 400 worldwide civil society organizations working for global access to essential medicines, but was strongly opposed by the industrialized countries, the same ones that financed the vaccine research effort using huge amounts of public money while failing to negotiate even the most basic price conditions, clinical study transparency levels, or technology transfers with the pharmaceutical industry.

This opposition led to a stalemate, with progress on WTO negotiations being repeatedly postponed. In early 2021 cracks began to appear in the wall of opposition by the U.S., the EU, the U.K., Switzerland, Canada and Norway. The European Parliament (EP) then passed a resolution affirming the urgency of a temporary waiver of TRIPS (the agreement regulating patents) "to enhance global access to affordable COVID-19 vaccines and to address global production constraints and consequent supply shortages". Further hope was offered following statements by European Commission (EC) President Ursula von der Leyen, Italian Prime Minister Mario Draghi (*"Vaccines are a global common good. It is a priority to increase their production, ensuring their safety and removing obstacles that limit vaccination campaigns"*) and U.S. President Joe Biden in support of the temporary patent waiver, but thus far it has all proved to be just an illusion.

With the emergence of the Delta variant in Spring 2021, the main priority of the world's rich countries was to stockpile vaccines through bilateral agreements with the pharmaceutical industry, avoiding vexing it with any talk of vaccines as a global public good. Despite the EP's resolution, in fact, in July 2021 the EC slammed the door on any solution that might call into question the validity of patents even on a temporary basis. From that time on, the pharmaceutical industry – especially the mighty Pfizer – has become the absolute arbiter of vaccine distribution, setting both which countries will be prioritized (at the top of the list, high-income nations) and delivery schedules (at the bottom, not just poor countries but also South Africa, which can afford the vaccines). All of this, alongside the failure of COVAX, the voluntary initiative to ensure equitable access to COVID-19 vaccines by poor countries as well as rich ones (only 25% of the 2 billion doses promised by the end of 2021 have been delivered), has led to an unacceptable, reprehensible situation of vaccine apartheid to Africa's detriment – a situation that, as we have seen with the spread of the Omicron variant, is also coming back to haunt countries that hoarded vaccines, who are now facing a brutal and unanticipated crisis involving thousands of deaths and heavy new restrictions.

## NOTES

<sup>1</sup> Rae M, Omicron: A failure to act with a global focus will continue the proliferation of new variants of covid-19, BMJ 2021;375:n3095