

‘THE COVID-19 VACCINATION GAMES’: MAY THE ODDS BE IN YOUR FAVOUR



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One year has passed since the World Health Organization declared COVID-19 a world-wide public health emergency. Twelve months and over [2 million global deaths later](#), the COVID-19 pandemic has the world locked in its virulent coils, daily exacting a grim toll on the health and livelihoods of billions of people. Nevertheless, human ingenuity and resilience have risen to the challenge. Thanks to the tireless work of scientists and researchers, we now have four COVID-19 vaccines approved for full use, six authorized in early or limited use and over eighty undergoing the first three phases of the vaccine testing and approval process.¹ Countries

¹ Zimmer, C., Corum, J. and Wee, S. (2021), '[Coronavirus Vaccine Tracker](#)', The New York Times, Updated 6 February.

have started rolling out national COVID-19 vaccination programmes with the common goal of having their whole populations protected before the year is out. Will we see the whole world vaccinated by the end of 2021?

My concern is not whether we will overcome the COVID-19 pandemic. I am positive, in the end, we will be able to return to ‘life before COVID-19’, albeit with a few changes. My concern is that the longer it takes, the steeper the price the most vulnerable will have to pay. The success of the titanic COVID-19 vaccination mission hinges upon what lodestar values nations, pharmaceutical companies, and other involved actors decide to follow and abide by. Will profit and nationalism trump solidarity and cooperation? Will myopic, short-term self-interest gain the upper hand at the expense of countless lives? Will the inequalities between the so-called Global North and Global South², between the haves and have nots, determine yet again the future of millions globally?

The countries leading COVID-19 vaccines’ development are the United States, Great Britain, Russia, and China. The contenders for the top five spots in the world per number of vaccines bought are the European Union, India, the US, Great Britain, and Canada³. At the time of writing, the top ten countries ranked according to total COVID-19 vaccinations per a hundred people are in order: Israel, the UK, the US, Spain, Italy, Germany, Belgium, France, Canada, and the Netherlands.⁴ At a glance, wealthy nations are overrepresented in the abovementioned metrics and have the lion share of COVID-19 vaccine stocks. At the risk of stating the obvious, these countries are likely to overcome the COVID-19 crisis much more swiftly than less affluent ones. Even the COVAX initiative, launched under the tripartite aegis of the World Health Organization (WHO), the European Union, and France, and aimed at addressing COVID-19 vaccines’ access for lower-income funded countries, is at risk of seeing its effectiveness diluted due to vaccine overstocking undertaken by so-called developed countries. This

² Whilst the expression ‘Global North’ is used to refer to so-called developed countries in Europe, North America, plus New Zealand, Australia, and a number of Asian countries, ‘Global South’ encompasses so-called developing and least developed nations.

³ Koop, A (2020), [‘Tracking COVID-19 Vaccines Around the World’](#), Healthcare, 18 December.

⁴ According to the [Our World Data website](#) – a partnership between the University of Oxford and the not-for-profit Global Change Data Lab.

means that people living in nations at the end of the queue will have to wait longer.⁵ Despite experts and pundits alike repeating that “*the fight against the virus is a marathon, not a sprint*”, there is still a stark difference depending on where around the world you find yourself ‘competing’.

Nevertheless, if the zigzagged line on the world map separating the Global North from the Global South has become more marked during the COVID-19 pandemic, tears in the fabric holding together the prosperous Western bloc have also started to show. ‘Vaccine nationalism’ has seen the US, the European Union, and the UK vehemently argue amongst each other, with vaccine-producing pharma companies profitably spectating. US President Biden recently confirmed COVID-19 vaccines produced in the US would [not be exported abroad](#) until all Americans get inoculated. Only two weeks ago, AstraZeneca – the British-Swedish company producing the ‘Oxford vaccine’ – stunned the European Union announcing it would not redirect part of its UK production to the former to make up for a shortfall in vaccine delivery due to manufacturing problems in its factories in Belgium and the Netherlands. The UK apparently has an [exclusivity on the doses](#) the company produces in its Great Britain-based plants. After the American and British rebuff, and seeing its own vaccination programme upended, the European Union declared in turn it would introduce new regulations to control and, should pharma companies not have first fulfilled standing orders with the bloc, stop COVID-19 vaccines’ exports from EU Member States-based factories.⁶ A domino effect could very well be triggered with countries enacting protectionist measures, leaving less fortunate neighbours worse off. What is clear now, because of these squabbles, is that vulnerable people who were expecting to be vaccinated soon in mainland Europe have seen their scheduled COVID-19 vaccine jabs postponed.

In the meantime, a larger game is afoot globally. Countries spearheading vaccine trials and approvals are using their end-product to push their personal agendas to either solidify and/or spread their influence. China and Russia have either promised or sold

⁵ It is heartening to know that India, Vietnam, Singapore, and Thailand are developing their own vaccines to limit overreliance on external imports.

⁶ For more information, see Dwarkin, A. (2021), ‘[The EU’s misguided export regulation on vaccines](#)’, European Council on Foreign Relations, Commentary, 4 February.

many of their vaccine doses to countries in Africa, the Middle East, Southeast Asia, and Latin America.⁷ Purporting themselves as generous and supportive actors, they are using ‘vaccine diplomacy’ to curry favour with and pull countries into their sphere of influence at the expense of the US and its allies. China, for instance, with a ‘Russian doll’ like strategy, ostensibly promises vaccine relief whilst subtly linking it to its Belt and Road Initiative (BRI) infrastructure projects.⁸ Governments on the receiving end have in most cases no choice but to accept the deal, not only to jumpstart their struggling economies but also because vaccines developed by Western countries – e.g., Pfizer’s, Moderna’s, and AstraZeneca’s – are harder to come by due to the massive pre-orders made by the same. The Chinese vaccine CoronaVac which is being used in mass vaccination programmes in Indonesia and Turkey has an efficacy rate of just 50.38% whilst the Russian Sputnik V has a reported efficacy of 91%, pending further in-depth tests. In comparison, AstraZeneca, Pfizer, and Moderna vaccines’ efficacy rates go from 70% to about 95%.⁹ What is more important, health or world influence?

In a perfect world, COVID-19 vaccines’ development and rollout would have been a cooperative and inclusive endeavour, following the WHO’s *["some people in all countries, rather than all people in some countries"](#)* guiding principle. Research labs, pharma companies, and governments would have pooled their resources for vaccine development, vaccine production sites and chains would have been either built or repurposed around the world without any gaps, and regulations would have been put in place to ensure equitable access. The world’s top ten richest people would have donated their combined \$540 billion in profits accrued in 2020 to secure vaccines for all.¹⁰ However, we live in an imperfect world, a world where a well off couple flew a private plane 2,000 kms from Vancouver to a [remote Indigenous community](#) in the Yukon to get their COVID-19 shots meant for the Indigenous elders. Our world is marred by entrenched inequalities, deleterious competitions, short-sighted behaviours, and

⁷ Toulemonde, M. (2021), [‘Covid vaccines: Russia, China, India...Who is supplying Africa?’](#), Vaccination Championships, The Africa Report, 27 January.

⁸ Poling, G.B. and Hudes, S.T. (2021), [‘Vaccine Diplomacy Is Biden’s First Test in Southeast Asia’](#), Centre for Strategic and International Studies (CSIS), Commentary, 28 January.

⁹ Mallapaty, S. (2021), [‘China COVID vaccine reports mixed results — what does that mean for the pandemic?’](#), Nature, 15 January; Regan, H. (2021), [‘Confidence in Chinese vaccines has taken a hit. But as coronavirus cases grow, some countries are still pushing ahead’](#), CNN, 17 January.

¹⁰ For more details, see BBC News, (2021), [‘Wealth increase of 10 men during pandemic could buy vaccines for all’](#), Coronavirus pandemic, 25 January.

perilous power plays. These challenges have up until now warped global COVID-19 vaccination efforts, placing the lives of countless people in jeopardy. Will the situation improve going forward? A judgement on the matter may indeed be premature and only in hindsight, with this unprecedented period behind us, will we be able to fully take stock of what worked, what did not, who won, and who lost. Now, we can only remain hopeful that, after such a rocky start, vaccination programmes around the world will proceed as smoothly as possible and that people's health, safety, and security will be prioritized over economic disparities, nationalism, business contracts, and strategic gains. People around the world are at this very moment waiting, hopeful, for their COVID-19 vaccination shot. May the odds be in their favour.

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