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VACCINE NATIONALISM ON THE RISE

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The coronavirus disease (Covid19) has become a global human disaster and economic tragedy. Governments of every country have enforced lockdown, halted international travel, and implemented other public control measures to reduce the illness due to the virus and resultant mortality. As things stand, no vaccine has yet proven effective to fight Covid19 and bring regularity to the disorder. Such a condition demands an effective and safe vaccine produced as soon as possible and which is available to each country and its people at an affordable cost. There has been an exceptional quick path taken in Research and Development (R&D) by the countries to develop an effective vaccine, although applying “short cuts” can lead to blunders with dangerous consequences. The worldwide hunt for the Covid19 vaccine is the most substantial medical problem of the 21st century. The race is noticeable by both fierce cooperation among scientists and intense competition between governments, specifically between the U.S. and China. Headlines worldwide have focused on suitable vaccine candidates, including Moderna and Pfizer in the U.S., CanSino

Biologics of China, and a joint project from the University of Oxford and AstraZeneca. There are many more countries in the race including Russia and India. Such frenzied behaviour by countries shows that vaccine nationalism is already happening.

Handling the biggest vaccination project explicitly calls for global teamwork. In April 2020, the World Health Organization (WHO), the European Commission, and France launched a Covid-19 Vaccines Global Access (COVAX) Facility which is a global effort to help produce and deliver a Covid19 vaccine. More than 172 economies are engaged in dialogues to be a part of the COVAX initiative.¹ But despite the concern shown by many countries, the U.S. and Russia have rejected the COVAX plan, pursuing domestic plans. The Ministry of Health of the Russian Federation, on August 11, approved coronavirus vaccine – *Sputnik V* (formerly referred to *Gam-COVID-Vac*) – which is developed by the Gamaleya Research Institute in Moscow.² Experts raised questions about the vaccine’s effectiveness and safety. The Chinese Foreign

Ministry spokeswoman, Hua Chunying, said that Beijing has supported the COVAX solution and would cooperate with it.³ But China has fallen short in committing to the COVAX project as China has at least four vaccines for the experiment in the last stage of a clinical trial: two are created by state-owned China National Biotech Group (CNBG), and other two are from Sinovac Biotech SVA.O and CanSino Biologics. In September, the United Arab Emirates (UAE) permitted the emergency application of a CNBG vaccine, the first international emergency approval, just six weeks after human trials started in UAE.⁴ COVAX's supporters are still optimistic, expecting support from other wealthy countries. But with renewed deadlines and shifting terms, the project may not materialize as envisioned.

Usually, vaccine advancement takes over a decade. The trials of COVID19 vaccine have sliced that timeline considerably, moving at a reckless pace for weeks rather than years, leading to political, ethical and safety challenges. The effectiveness of a vaccine against a pathogen is a complicated issue and relies on the biology of the virus. Every new production of vaccine follows a strict protocol in R&D which has to be carefully followed before it is licensed to be sold. The vaccine development has an unusual stepwise pattern, including clinical stage which has three phases and requires two regulatory permissions, named as "Clinical Trial Authorization" before human testing. Nevertheless, clinical trials that

obey a special protocol are "time-consuming and rate-limiting." To address the pandemic, the experts are finding innovative ways of data collection. Many vaccine developers are carrying out clinical trials simultaneously (Phase I-II) to cut the time for approval. Some have collected data on potency from Phase II itself. If approved, the effectiveness data on COVID19 vaccine will be ready in a matter of weeks rather than years, although it is risky to grant permission without evidence that the vaccine is potent, immunogenic and safe.⁵

Given the various facts about vaccine production and race, there is an urgent need for vaccine equity. Countries such as China and the US have motivations to distribute the vaccine equally, but once they acquire the vaccine that incentive can fade away. A global equity plan can be designed with the support of the G-7, G-20, and WHO. Moreover, organizations such as the Gates Foundation can help financially by obtaining the vaccine at an affordable cost and then export it to developing countries. Lawrence Gostin, a Director of O'Neill Institute for National and Global Health Law at Georgetown University, warns that countries may share the cure, "*after their own societies have been fulfilled.*" And still, the geopolitics will play a crucial role in the distribution model: "*They may very well share based upon the influence they can get, or the allies that they have, or the trade deals, or other deals that they might get.*" Specialists in epidemiology, social science, and virology must take the lead in

enforcing science-based strategies to decrease the risks of COVID19.⁶

Every country needs a safe and effective vaccine, and the COVAX solution presently offers the right way to attain that. By itself, COVAX will not be sufficient. We need a global framework and vaccine must be distributed on the foundation of the most supreme evidence of what will halt transmission and secure the most vulnerable people, no matter in which country they live. A vaccine can put an end to the pandemic but only if all the nation-states ensure equitable and suitable global availability to it. Distributing vaccines to the topmost bidders is not the way ahead.

(Disclaimer: The views and opinions expressed in this article are those of the author and do not necessarily reflect the position of the Centre for Air Power Studies [CAPS])

Notes

¹ "172 countries and multiple candidate vaccines engaged in COVID-19 vaccine Global Access Facility," *World Health Organization*, August 24,2020 available on <https://www.who.int/news/item/24-08-2020-172-countries-and-multiple-candidate-vaccines-engaged-in-covid-19-vaccine-global-access-facility> Accessed on October 15, 2020

² *Sputnik V: The First Registered Covid19 Vaccine*, available on <https://sputnikvaccine.com/about-vaccine/> Accessed on October 15,2020

³ "China May Support Global Vaccine Program That Trump Has Shunned," *Bloomberg News*, September 2,2020 Available on <https://www.bloomberg.com/news/articles/2020-09-02/china-may-support-global-vaccine-program-that-trump-has-shunned> accessed on October16,2020

⁴ "China in talks with WHO over assessing its COVID-19 vaccines for global use," *Reuters*, October 6,2020 Available on <https://in.reuters.com/article/health-coronavirus-who-china/china-in-talks-with-who-over-assessing-its->

covid-19-vaccines-for-global-use-idINKBN26R1FG
Accessed on October 16,2020

⁵ Mohammad S. Khuroo, Mehnaaz S. Khuroo, Ahmad A. Sofi, Naira S. Khuroo, "COVID-19 Vaccines: A Race Against Time in the Middle of Death and Devastation!" *Journal of Clinical and Experimental Hepatology* September 7,2020 Available on [https://www.jcehepatology.com/article/S0973-6883\(20\)30090-6/fulltext](https://www.jcehepatology.com/article/S0973-6883(20)30090-6/fulltext) Accessed on October 16,2020

⁶ Is 'Vaccine Nationalism' the Next Threat to Global Health? *Brink: The Edge of Risk*, August 3,2020 Available on <https://www.brinknews.com/is-vaccine-nationalism-the-next-threat-to-global-health-covid-coronavirus/> Accessed on October 18, 2020