



VACCINE ACCESS TEST 2.0

Global Summary: April 2021

Background

The COVID-19 pandemic doesn't end with a vaccine. It ends when everyone can get it.

The evidence couldn't be more clear: as long the virus remains unchecked anywhere on the planet, it will continue to mutate, breach borders, and wreak havoc on the global economy.

The Vaccine Access Test: 2.0 assesses how well G20 governments and pharmaceutical companies are improving global access to COVID-19 vaccines. The methodology was updated in 2021 to better capture the urgent actions needed now based on the following metrics:

Global Cooperation

- Financially supports the Access to COVID-19 Tools Accelerator (ACT-A)
- Joins COVAX
- Uses political capital to advance global access
- Leads by example by enforcing clear national allocation guidelines that prioritize the most vulnerable

Increasing Supply for All

- Shares doses, preferably with COVAX
- Supports temporarily loosening trade related restrictions to timely vaccine manufacturing
- Incentivizes participation in the COVID-19 Technology Access Pool (C-TAP)
- Prohibits export bans

What We're Seeing

We have seen a number of countries make progress over the last month (United States, France, Argentina). Still, all countries and companies are clustered toward the middle or lower part of the scale; none have cracked into the "green" zone, reserved for countries and companies that are actively prioritizing and advancing vaccine access and equity.

Two actions have emerged as linchpins for progress: funding and dose sharing. Countries and companies that have taken these actions are moving up in the Vaccine Access Test, while those that are failing to take these actions are hitting a ceiling.

1. **The world's war-chest to stop this pandemic is grossly underfunded.** The ACT-A has raised less than half of what is needed to ensure all countries have access to the tools they need to fight COVID-19 this year, like vaccines, therapeutics, and diagnostics. Countries that have made the most progress on the Vaccine Access Test, like Germany, the UK, Canada, and the US, have moved up largely because of notable commitments to this global partnership. Still, massive gaps exist from key actors, like France, Japan, China, and the EU. And time is running out. [At least \\$22 billion](#) is needed in the next few months. This is a small price to pay to protect the globe from the ongoing health crisis compared to the [\\$9.2 trillion](#) that the global economy stands to lose if governments fail to ensure developing economy access to COVID-19 vaccines.
2. **Too many vaccines are landing in too few countries:** Over half of current and projected doses of COVID-19 vaccines are monopolized by a small number of wealthy countries. [An analysis from](#)

[ONE](#) finds that six countries (Australia, Canada, Japan, South Korea, UK, and US) plus the EU block of 27 countries could share over 1.3 billion doses of leading COVID-19 vaccines with other countries and still retain enough supply to inoculate their entire populations.

This might sound counterintuitive as millions of people in rich countries are still waiting for their vaccination, and it doesn't look like there are stockpiles of excess doses anywhere. But this analysis is like a crystal ball that can look into the future; indeed, these doses have been purchased in legally binding agreements and they will be delivered to these handful of countries regardless of need.

These governments must commit not to hoard their excess doses, and immediately make a plan to share on the most ambitious timeline as technically and politically feasible this year. Doses should be shared multilaterally to avoid a situation where vaccine diplomacy becomes the norm; using vaccines as a bargaining chip will prioritize trading partners and regional neighbors, and inevitably leave the most vulnerable people out.

This path forward is feasible: Norway has already started to share doses through COVAX while it simultaneously scales up its national vaccination program, and President Macron called on the EU and the US to urgently allocate 5 percent of their vaccine supplies to developing countries. The French government then committed to sharing 500,000 doses to African countries by the end of June, meaning donations will happen in parallel with domestic vaccination efforts.

Rise of Vaccine Preference: As various vaccines get rolled out around the world, a dangerous narrative has sprung up. The rise of vaccine preference has made some believe that a couple of the approved vaccines against COVID-19 are better than the others, or worse, that some are dangerous. While concerns related to vaccines should be investigated, all vaccines that have received WHO approval were rigorously tested and would not be released to the public unless they were safe and effective.

However, concerns regarding lower efficacy or chances of health complications have already been written into the public narrative. Click-bait headlines make their way into the public consciousness, which lead to widespread beliefs that some vaccines are inferior or dangerous, when in reality, they are not. These rumors have led to higher levels of vaccine hesitancy, and therefore to higher vaccine abandonment rates.

Vaccine preference slows down the scale up of vaccines around the world. Based on what we know regarding vaccine hoarding in high income countries, we know that bottlenecks in these same countries will lead to delays in getting vaccines around the world. It is crucial that world leaders speak up to instill confidence in their populations regarding vaccine safety and efficacy.

Why Vaccine Access Matters

Ensuring that people everywhere have access to the vaccine in 2021 is the fastest way to end the pandemic, starting with the most vulnerable people and the healthcare professionals and key workers who risk their own lives to protect ours.

The epidemiology tells us that unless we protect people everywhere, the virus will continue to find places to thrive - and evolve into new strains - extending the lifetime of the pandemic and continuing to threaten the lives and livelihoods of people around the whole planet:

- The longer viruses circulate unchecked, the more they mutate. Already there are over 4,000 variants of COVID-19 and some - like the South African and UK variants -- are proving more

transmissible than other strains. The only way to prevent new and possibly more dangerous variants is to dramatically slow transmission of the virus through [widespread vaccination](#).

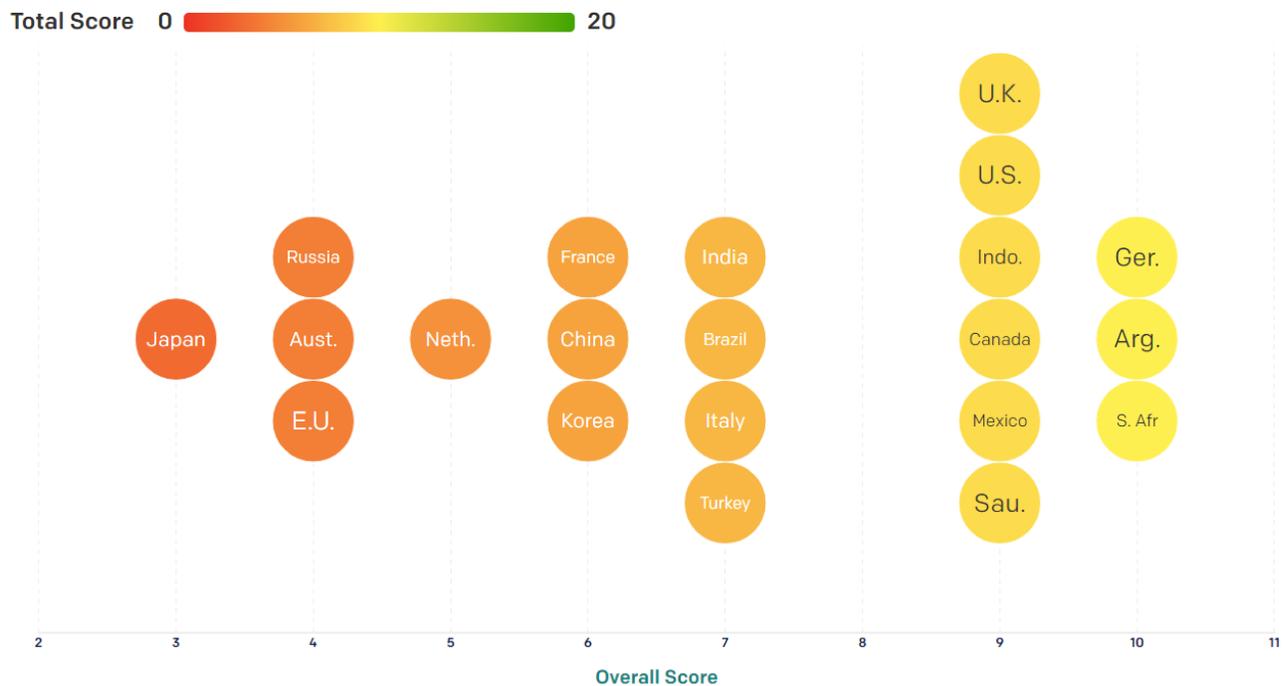
- There could be [twice as many deaths](#) from COVID-19 if rich countries monopolize the first 2 billion doses of vaccines instead of making sure they are distributed globally. This is because even with an oversupply of vaccines in wealthy countries, not everybody will choose to be vaccinated and no vaccine will be 100 percent effective leaving large pockets of the population vulnerable.
- Vaccine hoarding could cost the global economy up to [\\$9.2 trillion](#). Rich countries will bear half those costs because of supply chain disruptions and demand shocks.

What's more, billions in public funding has been spent to speed the discovery and delivery of a COVID-19 vaccine. Now that these investments are yielding results, the payoff must go back to the public and not just the companies that stand to make a profit.

In short: hoarding vaccines in wealthy countries will slow the recovery for everyone, everywhere.

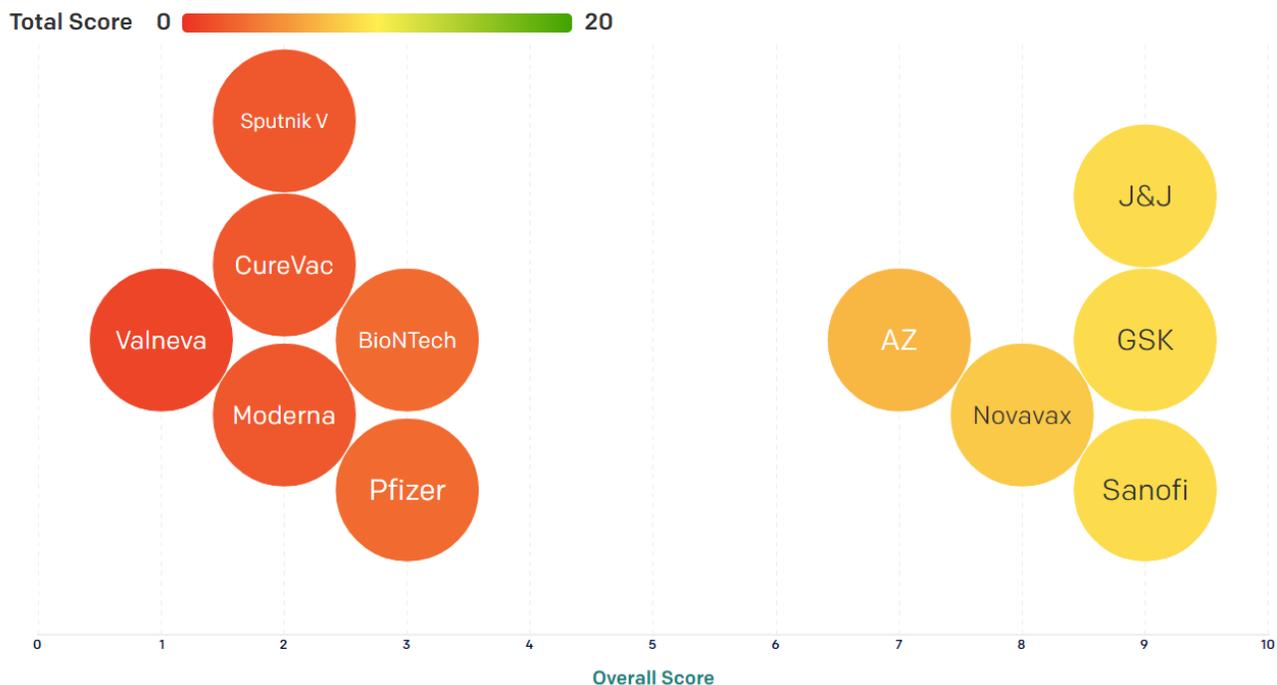
Vaccine Access Test Scores, April 2021

Countries:



Note: total scale out of 20. The highest scoring nations reach only 10 out of 20 points.

Companies:



Note: total scale out of 20. The highest scoring companies reach only 9 out of 20 points.

How Scores have Changed this Month

- **The United States** gained 2.5 points because it increased its commitment to ACT-A by pledging \$3.5 billion to the Global Fund to Fight AIDS TB and Malaria and showed leadership by announcing it will host the investment opportunity launch that will kick off fundraising leading up to Gavi/COVAX's upcoming pledging summit as well as strong statements from both Secretary of State Blinken and Secretary of Treasury Yellen in support of dose sharing and multilateral cooperation, with Blinken adding that the US will not "trade shots in arms for political favors," showing equity comes above political interests.
- **The European Commission** lost 2 points because its pledge to ACT-A is made up of both grants and loans, the latter do not count towards its fair share.
- **France** gained 1 point because of the commitment to share 500,000 doses before the end of June
- **India** lost 2 points due to its decision to pare back shipments so that more supply can be kept for domestic use. Export restrictions like these actively inhibit global supply. Given India's ties to COVAX, doses to low- and middle-income countries are being delayed, leading to more cases and more deaths.
- **Argentina** gained 1 point for passing a law that waives import taxes on vaccines and materials, loosening trade related restrictions helps get vaccines to those that need them.
- **Korea** lost 3 points for buying enough doses to vaccinate more than 100% of its domestic population but not committing to sharing doses through COVAX.
- **Johnson & Johnson** gained 3 points since the March update. It gained 2 points for engaging in technology transfers and another for showing leadership in prioritizing equity by entering into an agreement with AVAT to supply up to 400 million vaccine doses to the African Union member states.
- **Novavax** earned 1 additional point for committing to tiered pricing. Through its partnership, the Serum Institute of India would provide the vaccine to low-, middle- and upper-middle-income countries, while Novavax would retain rights to high-income countries, all with a tiered pricing schedule.
- **Sputnik V** gained 2 points for engaging in technology transfers to enable wide scale production and distribution. The Russian Direct Investment Fund has reported it has signed contracts with more than a dozen manufacturers in 10 countries to produce a total of 1.4 billion doses

What's next

Both countries and pharmaceutical companies should continue to take steps to improve access including:

- Continue to ramp up funding for COVAX, the advanced market mechanism that is procuring vaccines for low-income countries.
- Mobilize the additional funding needed to ensure that all countries can cover their vaccine requirements.
- Implement a vaccine sharing arrangement, whereby wealthy countries with surplus vaccines share them with less wealthy countries – which some G7 countries have recently agreed to in principle but which needs urgent action so that we can wage a global vaccine campaign now.
- Press pharmaceutical companies to participate in the World Health Organization's C-TAP patent pool, so that vaccines can be produced at scale.
- Temporarily loosen trade restrictions that impede the timely manufacture, distribution, and affordability of vaccines.