



Medical staff members in France bring two boxes containing Covid-19 vaccines to Ile d'Hoedic, a small island off the western coast of France on January 29. The island has approximately 100 inhabitants in the winter months.
| Fred Tanneau/AFP via Getty Images

Rich countries are hoarding Covid-19 vaccines

Eighty million Covid-19 vaccines doses have gone out — but only 55 in a low-income country.

By Julia Belluz | @juliaoftoronto | Jan 29, 2021, 10:40am EST

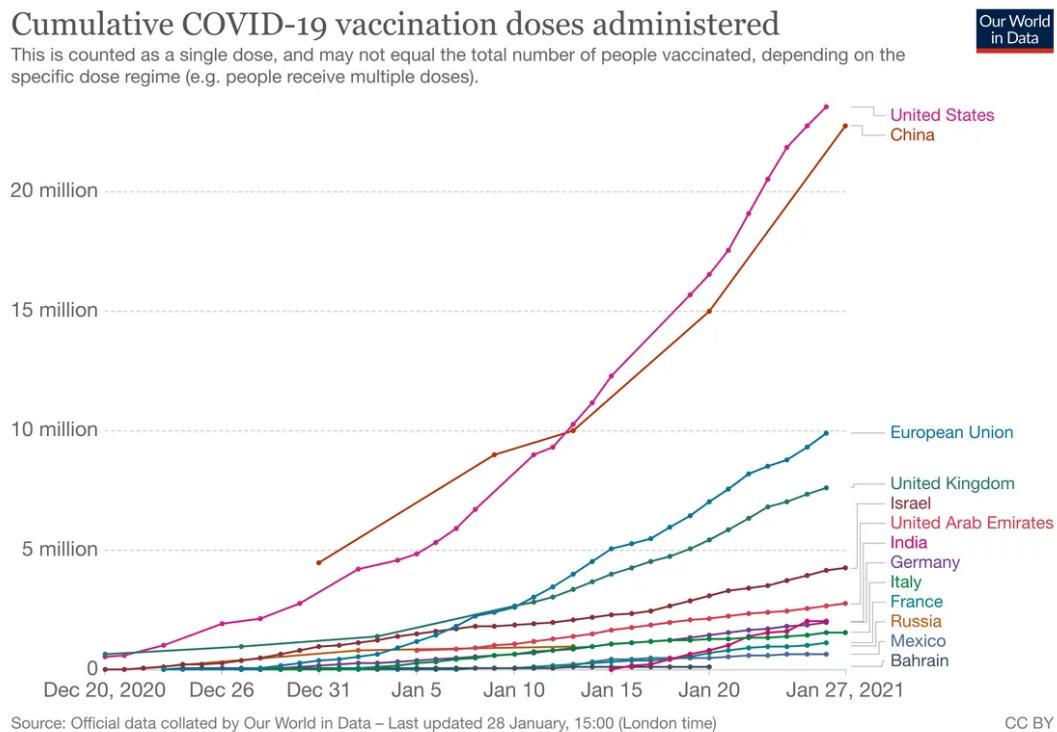
With reporting by Jen Kirby

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More than **80 million Covid-19 vaccine doses** have been distributed around the world so far. Only 55 — 55! — have gone to people in low-income countries. In fact, just one country: Guinea.

Those 55 doses in Guinea don't even represent "the start of a 'real' national vaccination rollout," said Edouard Mathieu, head of data at Oxford University's **Our World in Data**, which has been tracking the global vaccine effort. Rather, a few Guinean public officials were vaccinated at the end of December — with the Russian Sputnik V vaccine — on an experimental basis, the **Associated Press reported**.

"Then nobody was vaccinated after that," added Mathieu. (The Guinea health ministry has not responded to Vox's request for comment.) As a result, Our World in Data stopped tracking Guinea's rollout.



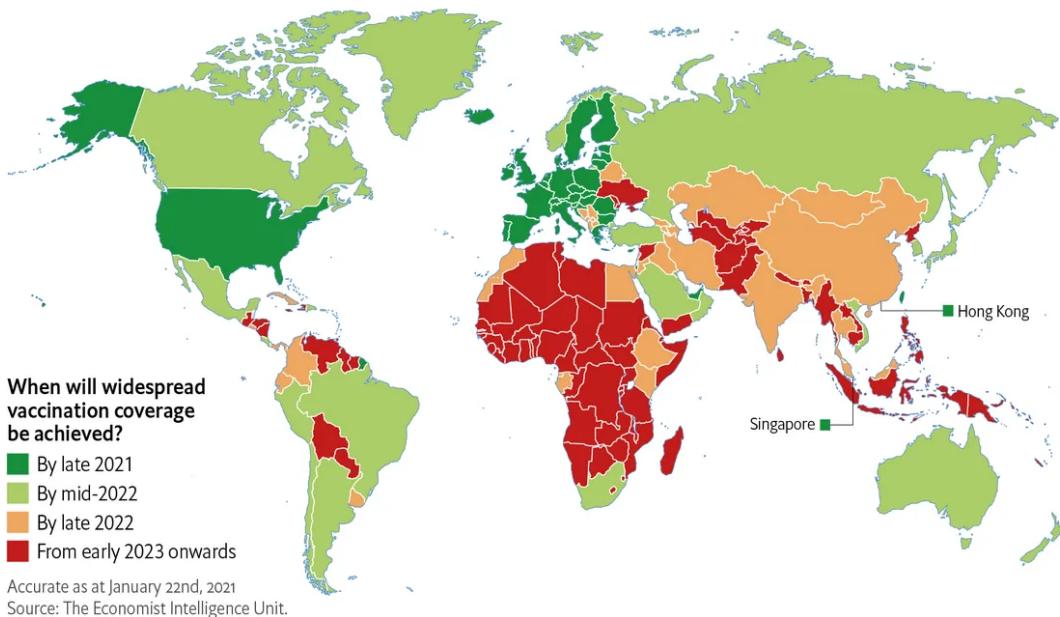
As the coronavirus continues to spread around the world, with **new, dangerous variants** picking up pace, the vaccination campaigns in all the world's poorest countries haven't even begun. Meanwhile, wealthy nations already vaccinating have pre-purchased access to supplies that can more than cover their populations — about **four times over**, in the case of the US, according to a December New York Times analysis.

This doesn't mean there are "warehouses full of extra vaccine doses" sitting around in high-income countries, explained Andrea Taylor, a Duke University researcher who has been analyzing the deals. But the countries with deals have priority manufacturing slots for 2021, "meaning that even if other countries make purchases now, they may have to wait months or even a year for delivery."

The result: "High-income countries have 16 percent of the world's population but currently hold **60 percent of the vaccine doses** that have been purchased," Taylor added.

With this kind of vaccine access, the people in rich countries will start to see their epidemics slow down over the next year, and life may regain some of its pre-pandemic rhythm. People in poor countries, meanwhile, may experience no such benefit. In fact, it will likely take years for many low-income countries to even start fully fledged vaccine campaigns, said **Agathe Demarais**, of the Economist Intelligence Unit, in a **recent briefing**. "Most developing countries will not have widespread access to the shots before 2023 at the earliest."

Rich countries will get access to coronavirus vaccines earlier than others



Economist Intelligence Unit

“That’s not just unconscionable,” said Georgetown global health law professor Lawrence Gostin, “but it also is very much against the interests of high-income countries.”

This greed will help the coronavirus continue to spread globally, allowing more opportunity for variants that resist the vaccines to emerge and Covid-19 outbreaks to reignite, including in rich countries. This is a **cycle that repeats with just about every disease threat**: Rich countries benefit from new health technology first, while poor countries have to wait years, or decades, for it to trickle to them, as the New Yorker’s Michael Specter **wrote**. But there are growing calls to break the pattern — and Norway is showing the rest of the world how it can be done.

Vaccine hoarding

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How rich countries exacerbated the global Covid-19 vaccine scarcity

As of January 27, the majority of the **80.2 million Covid-19** vaccine doses administered worldwide have gone to people in only a handful of high- and middle-income countries and regions (namely, the US, China, the EU, the UK, Israel, and the United Arab Emirates).

Several middle-income countries — the poorest among them include India, Myanmar, Ecuador, and Indonesia — have doled out 2.3 million doses in total. Most — 2.03 million — went to people in India.

But the lowest-income countries — for instance, Zambia, Bolivia, Tajikistan, and Nepal — have not begun vaccinating at all.



A Covid-19 vaccination center in Lucknow, India. | Deepak Gupta/Hindustan Times via Getty Images



A health worker carries Covid-19 vaccines to a boat before they are transported to a remote island to vaccinate health workers in Indonesia. | Chaideer Mahyuddin/AFP via Getty Images



Workers unload a shipment of Covid-19 vaccines being delivered from India to Myanmar on January 22. | Stringer/AFP via Getty Images

So why, in this pandemic, are such disparities allowed? It's pretty simple: Covid-19 vaccines aren't a public good. Capital rules who gets access first, and those with capital — rich and middle-income countries — have bought first dibs in the vaccine supply, through lucrative pre-purchase agreements with vaccine developers.

"That's left a global scarcity and also resulted in a bidding war which has made the prices more expensive," Gostin said. "As a result, [for] countries themselves which are lower income, there aren't any doses to buy and they are too expensive."

Because countries inked deals with manufacturers before clinical trials were complete, betting on which companies might come out with vaccines that work, they each signed multiple agreements, **covering their populations many times over.**

The pre-purchase agreements "made sense in the world we lived in six months ago, because we didn't yet know which, if any, of the

vaccine candidates would come to market,” said Taylor. But the result was that, by November, high-income countries — along with a few middle-income countries — had already **pre-purchased the rights to 3.8 billion vaccine doses**, with options for another 5 billion, according to an analysis by Taylor and her colleagues at Duke.

Yes, that’s just about as many doses as there are people in the world.

This vaccine hoarding happened in parallel with an unprecedented multilateral effort to support the development and equitable distribution of 2 billion doses of Covid-19 vaccines to the world’s poorest countries before the end of 2021, called Covax.

The initiative has two parts: a purchasing pool for higher-income countries, and a fundraising effort for poorer countries. By promising to buy a certain number of vaccine doses from manufacturers, countries that join get access to any **vaccines that are approved** in Covax’s portfolio, while also creating a global market for the shots and driving prices down.

More than **190 countries signed on** — including rich ones. But the bilateral deals have undermined Covax. Rich countries “want to have it both ways,” Gostin said. “They join Covax so they could proclaim to be good global citizens, and at the same time rob Covax of its lifeblood, which is vaccine doses.”

How to stop hoarding

In the first quarter of the year, Covax is planning to begin delivering a first batch of 100 million **vaccine doses**. But vaccine distribution is already lagging in rich countries, where manufacturers have failed to deliver the doses they initially promised, and governments are

struggling to set up systems to get millions of people through the door at once.

The emerging disparity has **prompted calls** for rich countries to **stop hoarding** vaccines and share their excess supply with poorer countries through Covax. It's also stirring discussion about how countries and manufacturers can get creative and bolster supplies for the world.

Right now, "the biggest constraint for everyone to get vaccinated is the number of doses," Nicholas Lusiani, at Oxfam America, told Vox. Instead of fighting over the crumbs, he said, Oxfam has suggested countries build regional vaccine production hubs to churn out vaccines at a lower price in the places they're needed (and where production costs are lower).

The US, Europe, and other high-income countries could also push companies with effective vaccines to collaborate with other manufacturers on production, **sharing their technology**, or even waiving intellectual property rights. (AstraZeneca has already done so, sharing information with the **Serum Institute in India**.)



UPS employees transport one of two shipping containers containing the first shipments of the Pfizer/BioNTech Covid-19 vaccine in Louisville, Kentucky. | Michael Clevenger/Getty Images

Then there's simple donating of vaccines. Gostin and **colleagues** have called on the US to work with other high-income countries and inoculate only their most vulnerable groups — health workers, older adults — first, then give the excess supply to Covax, which could distribute vaccines to high-risk groups in the rest of the world.

"There's a certain ethical and political justification for putting your own country first because every government's first duty is to its own population," Gostin said. "But that's to a point."

Still, Taylor said, "it is complex and there is no easy solution. ... It would be a very hard sell for the leader of a rich country to start donating doses to other countries while still vaccinating their own population — this is what needs to happen, but it is hard to imagine."

Norway has managed to do it. Much like the US, the Nordic country will have access to three times as many vaccines as it needs. "This allows us to redistribute vaccines to other countries," said Norway's

minister of international development, Dag-Inge Ulstein. “The distribution will be started gradually and in parallel to the current vaccination of the Norwegian population as soon as relevant vaccines are approved.”

The Norwegian government decided it was both ethical and self-interested to ensure people in low-income countries can access effective vaccines as soon as possible. “Otherwise,” Ulstein added, “it will be a long time before these countries are able to vaccinate a sufficiently large proportion of their populations. [And] that would not benefit anyone.” Now it’s time for other countries to follow suit.

We have a request

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