LETTER TO EDITOR CODEN: AAJMBG

'Vaccine Nationalism' - A peril to the dream of "Building a fairer, healthier world for everyone"

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Dear Editor:

"The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition". This principle has been the foundation on which the World Health Organization (WHO) was formed in the year 1948 and remained the roadmap that has led the world for over decades in the health sector [1].

The beginning of 21st century has witnessed the undertaking of multiple landmark resolutions in addressing the health inequities at the global Sustainable level. Resolutions such as Development Goals (SDGs) and Universal Health Coverage (UHC) have been adopted at a scale and pace that has never been seen before. This has led to the shaping up and formulation of global and national level policies that not only had the power to bring good health and wellbeing for all, but also had the potential to eradicate the health inequities at the grass root levels from all corners of the world [2].

With all these approaches, "Building a fairer, healthier world for everyone" has not only transitioned from being a distant dream to an achievable goal, but also has become the prime focus for the entire health eco-system of the world. However, the COVID-19 pandemic, that led to the unprecedented global health crisis, had once again brought into focus, the bitter truth of existing health inequities around the world. This pandemic has not just endangered the dream of achieving health equity but also has threatened to push backward the entire world into the previous level of inequities [3-4]. There has been an intense global level effort and co-ordination in understanding the disease, sharing

dissemination of scientific knowledge, deploying strong public health measures and in developing diagnostics & therapeutics to combat the pandemic at an unprecedented scale and pace. The development of COVID-19 vaccines is the best illustration of global co-ordination at a pace and scale like never before in the history of mankind [5].

However, the major challenge has been to make such measures & tools available and accessible around all corners of the world, especially to the most vulnerable groups and countries. But, with socio-demographic, economic and political differences on rise under-sizing these combat efforts to end the pandemic, a new challenge has been on rise in the form of 'Vaccine Nationalism', which is threatening to exacerbate the existing health inequities across the world [6].

Making available, the COVID-19 vaccines in an equitable fashion to all the individuals across all corners of the world has been recognized as the most important global strategy in ending the pandemic [7]. However, an intense competition has raised in-between the states to develop, procure, distribute and also hoard a huge stockpile of vaccines for an early & exclusive administration only to its citizens is leading to 'Vaccine Nationalism', seen as the showcase of the state's power and ability in the international arena. This has led to the disproportionate distribution of vaccines among countries based on their economic status resulting in marginalizing the most vulnerable populations and increasing the risk of transmission, delaying the end of pandemic

Right from the beginning, WHO is at the forefront in the fight against the pandemic, effectively devising the strategies and advocating for the equitable distribution of vaccines based on the risk grouping. COVAX facility, the vaccine arm of Access to COVID-19 Tools Accelerator (ACT-Accelerator) aimed to distribute vaccines to 20% of the world's population in an equitable manner is one such initiative. Still, equitable distribution of vaccines has been of a tremendous challenge and despite of strong advocacy against 'Vaccine Nationalism', it has been on rise. This once again have demonstrated the volatility of health-equity in the face of pandemic and if not dealt with immediately, can be a 'moral catastrophic failure' of the world [9-10].

Although 'Vaccine Nationalism' can be seen as a self defence strategy of the countries by prioritizing the health of the respective citizens, it can significantly cause more harm than good in the combined fight against the pandemic, by increasing the risk of transmission of virus for much longer times. This would have an impact on the duration of the pandemic which in-turn can lead to serious health and economic consequences affecting the lives and livelihood of millions of

individuals across the world. Addressing this issue at the global level, requires much more than the unprecedented global co-ordination, the mankind has witnessed in the times of this devastating pandemic. Leaders and countries once again would have to put aside their political differences and put forth the global health governance by prioritising the global health risks of COVID-19.

The recent initiatives such as allowing the knowledge sharing and technology transfer in between countries for faster development & deployment of vaccines, is the ray of hope in this direction. These initiatives can be more fruitful with the combined participation of all the sectors including the individual citizens. The role of individuals in preventing the 'Vaccine Nationalism' also is of extreme importance. Formulating policies and risk communicating the effects of 'Vaccine Nationalism' to the individuals can enable them to make informed choices for the better good of the humanity. These inclusive and multi-sectoral policies can be a way forward to achieve health equity.

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References

- United Nations. Constitution of the World Health Organization, https://www.who.int/governance/eb/who_ constitution_en.pdf (Accessed 1 June 2021).
- 2. Nhamo et al. COVID-19 vaccines and treatments nationalism: Challenges for low-income countries and the attainment of the SDGs. *Global public health*, 2021; 16(3):319-339.
- World Health Organization. World Health Day 2021: Building a fairer, healthier world for everyone, https://www.who.int/westernpacific/news/events/detail/2 021/04/07/western-pacific-events/world-health-day-2021 (Accessed 15th May 2021).
- 4. Shadmi et al. Health equity and COVID-19: global perspectives. *International journal for equity in health*, 2020; 19(1):1-6.
- Lurie et al. Developing Covid-19 vaccines at pandemic speed. New England Journal of Medicine, 2020; 382(21):1969-1973.
- 6. Lagman JD. Vaccine nationalism: A predicament in ending the COVID-19 pandemic. *Journal of Public Health (Oxf)*, 2021; 43(1):1-2.
- Kupferschmidt K. 'Vaccine nationalism' threatens global plan to distribute COVID-19 shots fairly, https://www.sciencemag.org/news/2020/07/vaccine-

- nationalism-threatens-global-plan-distribute-covid-19-shots-fairly (2020, Accessed 15th May 2021).
- Yamey et al. Ensuring global access to COVID-19 vaccines. The Lancet, 2020;395(10234):1405-1406.
- Eaton L. Covid-19: WHO warns against "vaccine nationalism" or face further virus mutations. *Brit Med J Publ Group*, 2021; 372(8278):292-293.
- World Health Organization. Fair allocation mechanism for covid-19 vaccines through the Covax Facility, https://www.who.int/publications/ m/item/fair-allocation-mechanism-for-covid-19vaccines-through-the-covax-facility (accessed 10th May 2021).

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