



Enhancing UK action and promoting equity of access to global COVID-19 vaccines

Academy of Medical Royal Colleges Statement

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UK progress on COVID-19 vaccination, from scientific innovation to mass rollout should be celebrated. Similarly, the UK has shown leadership through its £548 million funding to the Covax initiative, which should ensure more than 180 countries have fair and early access to COVID-19 vaccines. Though this will help everyone, our global interdependencies show our safety from the virus ultimately depends on vaccine coverage in all countries.

Unfortunately, vaccine programmes internationally to date have been less swift. Covax aims to provide vaccines to 20% of populations in low-income countries by this year. However, delivery seems to be behind schedule due to production delays and pressures from multiple bilateral contracts - this approach will not help us end the pandemic.

Continued transmission of the virus risks creating further variants of concern and re-importation into the UK.¹ Costs to the global economy of vaccine inequity are estimated at \$9.2 trillion, most falling on high-income countries,² generating further job-losses and health harms. Mass vaccination of low-risk adults here, without simultaneous action to make vaccines available to health workers and vulnerable populations elsewhere, risks sending a concerning message about our commitment to equity and human rights.

Commitments from the G7, chaired by PM Boris Johnson, to ensure equitable vaccine access and share surplus doses are also welcome, however we feel the UK should go further. Building on the success of the UK vaccination programme to date we call on the government to:

- **Release 30% of its pre-purchased COVID-19 vaccine orders to countries least able to secure supply**
Sharing vaccine supply need not harm domestic vaccination, with the UK having ordered enough doses to vaccinate the domestic adult population four times over. And while the UK has already committed to sharing surplus doses, the Government urgently needs to define what is meant by 'surplus' and indicate which indicators will be used to determine when doses should start to be shared with those countries least able to secure supply.
- **Invest in and support scaling up local manufacturing capacity, including in low and middle-income countries to boost vaccine supply**
Manufacturers have identified numerous supply chain challenges ranging from raw materials to technology transfer and regulatory oversight of new facilities.³ The UK should support the rapid development of the manufacturing capacity of trusted vaccine producers in developing countries, empowering low and middle income countries to produce vaccine locally. Actions to ensure this include removal of any material intellectual property barriers in line with World Trade Organisation provisions, direct capital investment and sharing of production processes.
- **Support health system strengthening to ensure countries can cope with vaccine roll-out**
Achieving immunisation requires more than just vials of vaccine – networks of distribution are just as important as access to vaccine supply – as the mobilisation of our world-leading system in vaccine delivery has demonstrated. The UK has a traditional role in supporting the strengthening of health systems. To ensure countries can distribute vaccines successfully, while continuing to deliver wider essential health services, the UK should continue to invest in strong primary health care systems and promote this objective throughout its global health and foreign diplomacy. Additionally, the UK should engage with international health system leaders to share expertise regarding the logistical challenges of vaccine delivery.



We hope that Government will take immediate action to engage with global partners to deliver on the above asks. As public health and medical leaders in the UK, we look forward to working with the UK Government to build on our collective achievements to date and deliver on these goals for global COVID-19 vaccine equity.

This global mission must progress alongside our work on domestic delivery of vaccine, and we must strive for vaccine equity in both. Only through this approach can we tackle this global pandemic and protect our health into the future.

This statement supports the position of the Faculty of Public Health

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1. [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(21\)00306-8/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00306-8/fulltext)
 2. <https://iccwbo.org/publication/the-economic-case-for-global-vaccinations/>
 3. <https://www.ifpma.org/resource-centre/meeting-discusses-covid-19-vaccine-manufacturing-bottlenecks-that-must-be-urgently-tackled-for-c19-vaccine-output-to-reach-its-full-potential/>