

COVID-19 VACCINE RACE: AT THE HEART OF GEOPOLITICAL ISSUES

MÉLANIE HÉRIBERT
FEBRUARY 2021



GettyImages-1266808661 | Source : Getty

COVID-19 VACCINE RACE: AT THE HEART OF GEOPOLITICAL ISSUES

As of February 2021, 106 million people worldwide have been tested positive for COVID-19, and 2,300,000 died¹. The increase in the death toll between 2020 and 2021 reflects a situation unprecedented in contemporary history. After traveling around the world several times, returning by waves in some countries, the COVID-19 virus has mutated, calling into question the vaccines' effectiveness in which the world has placed all hopes. Even if the world's regions do not face the same health emergency, billions of people, who have seen their lives turned upside down and their freedoms restricted, only want their States to stop this crisis. Because much more than a pathology, it is a real dramatic economic and social situation that has, at the same time, reshuffled the geopolitical cards of the world.

Public health issues and vaccine strategies

From a public health perspective, all countries must have early access to the vaccine to control the pandemic and prevent the situation from getting worse. But beyond domestic political considerations, intense geopolitical issues surround vaccination against COVID-19.

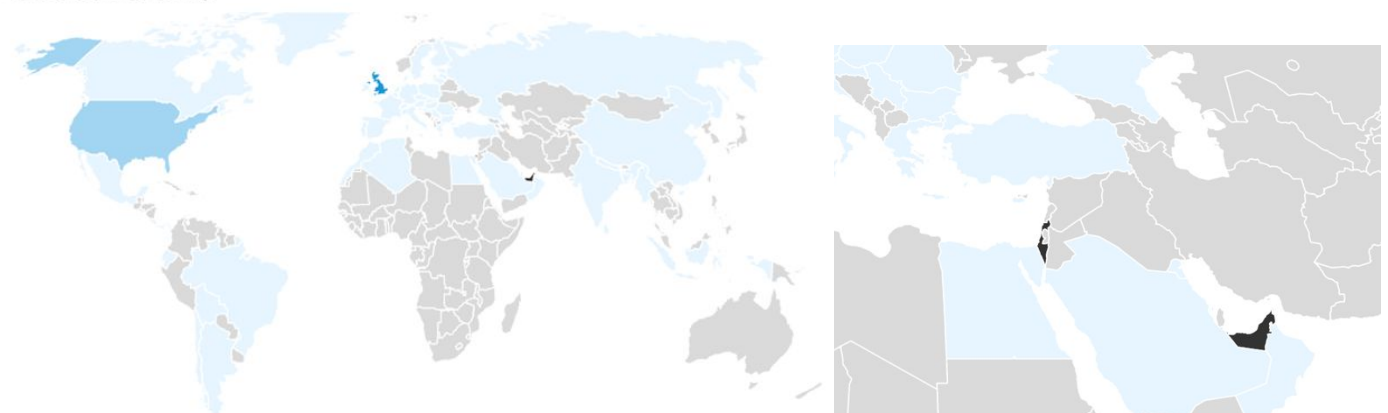
Two hundred and ten candidate vaccines are currently under development around the world, and only ten are operational². The most advanced countries in this "vaccine race" are the United States (Pfizer and Moderna), the United Kingdom (AstraZeneca), China (Sinopharm and Sinovac), and Russia (Sputnik-V). They are recognized in many countries and have already started to be injected into around 50 states. Several countries have followed China and have started their vaccination campaigns since December 2020. For the moment, Israel is the best performing, with more than 44% of its population vaccinated. In comparison, France has only vaccinated 2% of its people and is waiting for more doses to be delivered. In an article dated February 8, 2021, the English newspaper The Guardian collected data from John Hopkins University and presented a map of the countries' vaccination rates³.

Which countries have vaccinated the most people?

Total vaccinations per hundred people, to date



Click to zoom into the map



*Source: Our World in Data. Note: The figures relate to individual doses of vaccine, not people vaccinated. Since the intent is usually to give each person two doses, these figures do not represent a percentage of the population. Numbers as reported by individual countries.

¹ WHO, "coronavirus dashboard disease"

² WHO, "landscape and monitoring project for candidates COVID-19 vaccines"

³ GUTIERREZ Pablio, CLARKE Sean and KIRK Ashley, *Covid world map: which countries have the most coronavirus vaccinations, cases and deaths*, The Guardian, on february 8th 2021

COVID-19 VACCINE RACE: AT THE HEART OF GEOPOLITICAL ISSUES

Obtaining doses of vaccine is a real problem for many States, sometimes forced to fight a tug of war with laboratories. This is the European Union's case with AstraZeneca, which plans to deliver only a quarter of the vaccines promised. Besides Hungary, which has decided to go it alone, the European Union has united by ordering doses together. However, the delivery delays caused localized shortages, slowing the pace of vaccination campaigns. These delays are due to two main reasons: on the one hand, the production lines are unsuitable for mass production, which limits production. On the other hand, producing countries prefer to serve their fellow citizens first rather than exporting their products: this is the mechanism of "nationalization of vaccine production," as illustrated by the delay in delivery of AstraZeneca with the European Union⁴.

What illustrates the tensions between the European Union and AstraZeneca is that laboratories are unable to produce the billions of doses needed to vaccinate the planet. So wouldn't it be wiser for states to have access to patents so that they can produce vaccines in a sufficient number? This is the request made in October 2020 by India and South Africa to the World Trade Organization (WTO). The proposal has been made to lift the patents on the COVID-19 vaccine so that the various vaccines' production capacities are up to the global needs until immunity is achieved globally. The petition published by The Lancet followed, co-signed by roughly twenty Nobel Prize winners. This proposal is all the more relevant given that vaccines have been developed thanks to States' mobilization amounting to 10 billion dollars for the United States and 2.7 billion euros for the EU. In any case, there is nothing in the legislation that can prohibit the lifting of patents, as Pierre Breesé, industrial property advisor, explains: "*in all national laws there is a system of compulsory licensing and licensing office. The first provides that, for remuneration, the patent owner cannot oppose the production of a drug, while the second can operate in the event of a health emergency and does not give rise to any compensation*"⁵. On the other hand, with its article 31, the WTO can temporarily suspend the exploitation monopoly associated with a patent: this is the case in Thailand, India, or South Africa for HIV treatment. Besides, Moderna had announced in October that it would not sue companies that produced its vaccines without respecting its license because, generally speaking, no laboratory can sue a state during a pandemic⁶. In reality, several actors, such as the President of La République en Marche of the Health Commission, consider that it is a "false good idea" because the real subject would be that of the production capacity and conservation: "*it is not because we have the patent that we can produce the vaccine. It's an incredibly complex new technology, messenger RNA, which requires special equipment.*" This is why the French laboratory Sanofi will work with Pfizer to help it produce its vaccine but it will only do the bottling.

For the moment, the European Union cannot compensate for these delivery delays, although BioNTech and Pfizer have promised up to 75 million additional doses. So Brussels plans to buy Russian or Chinese vaccines so as not wasting anymore time⁷. The only condition would be that these producers "show transparency". The President of the European Commission,

⁴ ROBBINS Rebecca, ROBLES Frances, ARANGO Tim, *Here's Why Distribution of the Vaccine Is Taking Longer Than Expected*, The New York Times, on december 3th 2020, updated on january 11th 2021

⁵ QUATREMER Jean, *Should we "nationalize" the vaccine against COVID-19 ?*, Libération, on january 27th 2021

⁶ SENECA ADRIEN, *Covid-19 : should vaccine patents be released to produce more ?*, Le Monde, on february 9th 2021

⁷ LOVELAY MORRIS, *As Europe's vaccination efforts falter, Russia and China are now seen as options*, The Washington Post, on february 5th 2021,

COVID-19 VACCINE RACE: AT THE HEART OF GEOPOLITICAL ISSUES

Ursula Von der Leyen, has declared that she is not opposed to the access of Russian and Chinese vaccines to the EU on condition of "*complying with the examination rules*" of the European Medicines Agency (EMA), joined by Angela Merkel. Similarly, Emmanuel Macron sent a scientific mission to Russia to discuss with teams on the spot. For China and Russia, the stakes are not only health and economic, but diplomatic and geopolitical because, as the political scientist Suerie Moon explains: "*at the level of a country, having 'your' vaccine allows to save the lives of many citizens, to revive the economy and to gain political credit. At the international level, providing access to the vaccine promotes the strengthening of diplomatic relations with the beneficiary countries, which in a way become accountable*"⁸.

Vaccines: between strategic assets, tools of influence, and geopolitical issues

"*Beyond its health importance, this vaccine has become the equivalent of a nuclear weapon in terms of strategic importance, geopolitical importance, the importance of security and national sovereignty*", analyzed the economist of the health Frédéric Bizard. Given the fact that the pandemic has to be stopped all over the world, the stakes surrounding vaccination are colossal. This is an opportunity for several states to advance their pawns on the global political scene.

"*We can see that this strategic rivalry has a scent of Cold War*"⁹, said Pascal Boniface, director of the Institute of International and Strategic Relations. The vaccine geopolitics has indeed revived old dividing lines: the West against the rest of the world. Russia's Sputnik-V vaccine illustrates this perfectly: as a direct reference to Soviet satellites placed in orbit during the Cold War; it shows that Russia perceives its vaccine as an element of national prestige. In 1957, this "Sputnik moment" frightened Americans who, for a moment, believed the Soviet Union was strategically downgrading them. This is the case of France, the 6th or 7th world economic power, member of the Security Council of the United Nations, of the G7, of the G20, holder of the nuclear weapon and which, however, was not able to produce a vaccine, making it dependent on other countries. According to Antoine Levy, french economist and doctoral student: "*the slowness of French vaccination is a symbol of our downgrading*"¹⁰.

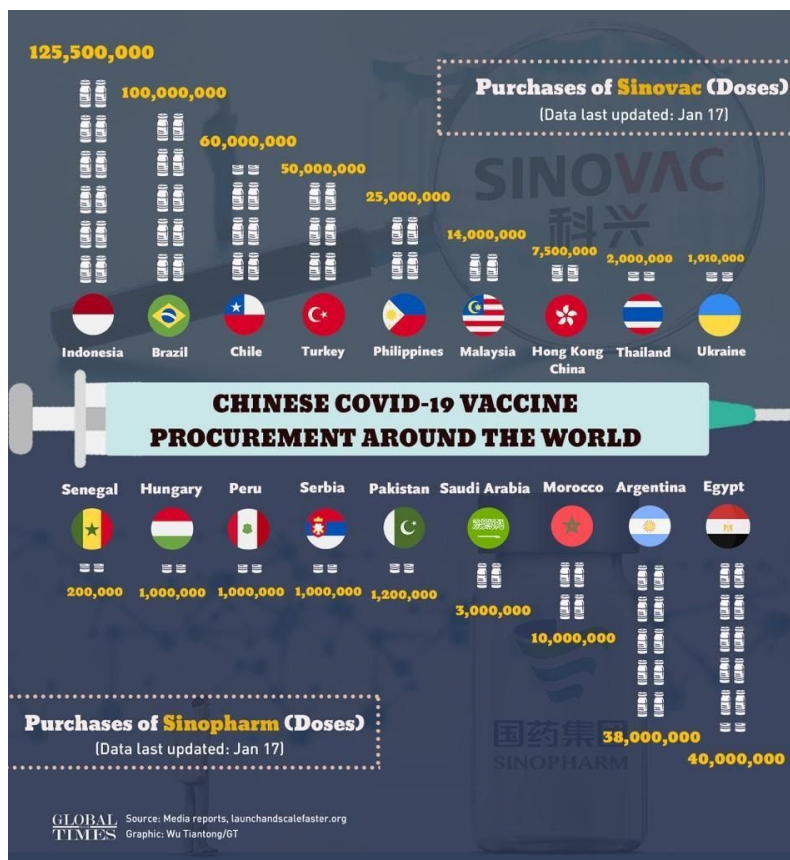
So far, China has rebounded well, going "from the defendant to savior of the world" in a matter of months. It is the only country whose economic growth exceeded 2% in 2020, coupled with record trade surpluses of more than 70 billion dollars. Its soft power is also growing in the countries where its diplomacy of masks and vaccines have been deployed. The Chinese Minister of Industry and Information announced last month the production of one billion doses while having the capacity to meet the national need. China is effectively increasing its production capacity to meet its domestic demand and the large volume that other countries need. During a speech in May 2020, President Xi Jinping positioned the COVID-19 vaccine as a "global public good", adding that "*it will be China's contribution to*

⁸ AEBERHARDT Chloé, *Vaccines have become strategic assets for countries*, Le Monde, on december 18th 2020

⁹ BRUNET Romain, *The anti-COVID vaccine at the heart of geopolitical strategies*, France 24, on january 29th 2021

¹⁰ LEVY Antoine, *The slowness of the French vaccination is a symbol of our downgrading*, Le Figaro, on january 1st 2021

COVID-19 VACCINE RACE: AT THE HEART OF GEOPOLITICAL ISSUES



ensuring accessibility of vaccines in developing countries development". At least 14 countries have bought COVID-19 vaccines from China¹¹, and several have received free doses, such as Kyrgyzstan. According to Sebastian Strangio of The Diplomat, "While there are probably limits to how far Chinese leaders can press their advantage without provoking a backlash, the pandemic has clearly offered Beijing a once-in-a-generation opportunity to advance itself as a reliable - and inevitable - partner of Asian nations as they seek to recover from the pandemic"¹². This strategy aims to establish lasting Chinese influence in these countries and bet on the

future. The countries favored by Beijing are also partly on the maritime trade routes through which 90% of Chinese ships pass. The distribution of vaccines against COVID-19 should thus strengthen the New Silk Roads project, not only because of Chinese subsidies and loans for the purchase of its vaccines but also by coupling the distribution of vaccines to promote other development projects¹³. However, at the same time as the launch of its vaccine strategy, authorities in Beijing blocked the WHO team of researchers tasked with examining the origin of COVID-19.

Vaccines: "A Global Public Good"?

On January 26th, 2021, the President of South Africa, Cyril Ramaphosa, criticized rich countries of the world who "acquired large doses of vaccines (...) and that was aimed at hoarding these vaccines". Despite discourses on "global public good", Westerners have monopolized 80% of the world production. Even if many leaders agreed upstream to provide a multilateral solution to the global pandemic, this logic of solidarity quickly turned into a logic of competition.

Aware of the importance of joining forces for the research related to COVID-19, various international actors, led by WHO, contributed to creating the COVAX mechanism at

¹¹ HUI Zang et YUWEI Hu, *At least 17 countries have purchased China-produced COVID-19 vaccine*, Global Times, January 2021

¹² STRANGIO Sebastian, *China's Southeast Asian "vaccine diplomacy" comes into relief*, The Diplomat, November 5th 2020

¹³ ALBERT Eleanor, *China's Ambitious COVID-19 Vaccine Targets*, The Diplomat, January 7th 2021

COVID-19 VACCINE RACE: AT THE HEART OF GEOPOLITICAL ISSUES

the beginning of the crisis. The aim is to gather state funding to obtain nearly 2 billion doses to protect more than 20% of the population by the end of 2021. Thus 92 low-income countries will be supported by the COVAX funding mechanism to obtain the doses. Pfizer announced in January 2021 an agreement to supply up to 40 million doses. However negotiations are complicated and not a single dose was provided¹⁴.

Indeed, richest countries have unraveled this solidarity mechanism by concluding bilateral agreements, often on secret terms, creating a hyper-competitive market in which the most impoverished countries cannot compete¹⁵. Canada, for example, is able to vaccinate its population five times. Thus, the world is facing a *“catastrophic moral failure (...) the price of this faling will be paid with lives and livelihoods in the world’s poorest countries”*¹⁶, warned the head of the World Health Organization (WHO). Indeed, while the "rich countries" begin to vaccinate their populations, the "poor countries" are still waiting for their first doses. Dr. Tedros said on January 18th: *“The promise of equitable access is at serious risk More than 39 million doses of the vaccine have now been administered in at least 49 higher-income countries. Just 25 doses have been given in one lowest-income country. Not 25 million; not 25 thousand; just 25”*. By necessity, the African Union has taken the plunge by making deals for 270 million doses, according to the Global Health Innovation Center at Duke University. However, manufacturers have asked the agreement of some rich countries, where the profits are the highest. He continues to warn about the possible consequences, namely: *“hoarding, a chaotic market, an uncoordinated response, and continued social and economic disruption”*.

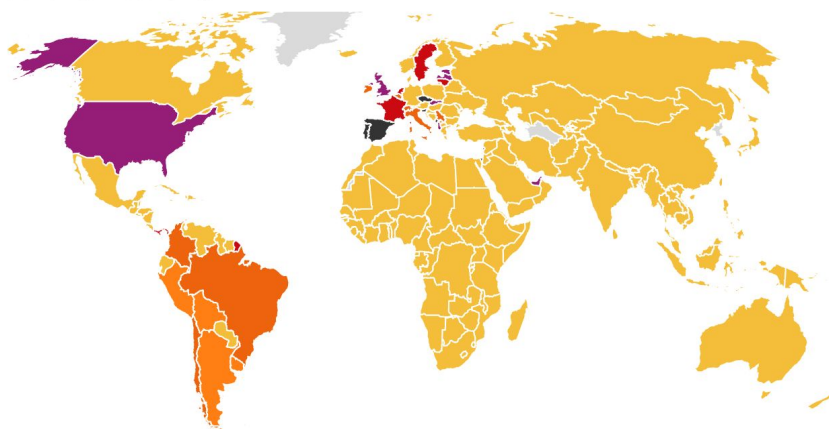
In this context of vaccine scarcity, the most critical data to consider for its granting should be the health emergency degree. Countries should not vaccinate according to the total number of

Which countries are being hit the hardest?

Case rate per 1m, last fortnight



Click to zoom into the map



Source: Johns Hopkins University

their population but according to the health emergency they face. With the map below showing the countries most affected by the COVID-19 epidemic, we can see the importance of quickly vaccinate in Spain, in Sweden and in the United States because they are hardly hit by the crisis. For some African countries, the health emergency is lesser, as explained by Antoine Bondaz, researcher in the foundation of strategic research, the case rate being below than in the rest of the world.

¹⁴ Press release, *Mechanisms for global access to COVID-19 vaccines: 172 participating countries and several candidate vaccines*, WHO, august 24th 2020

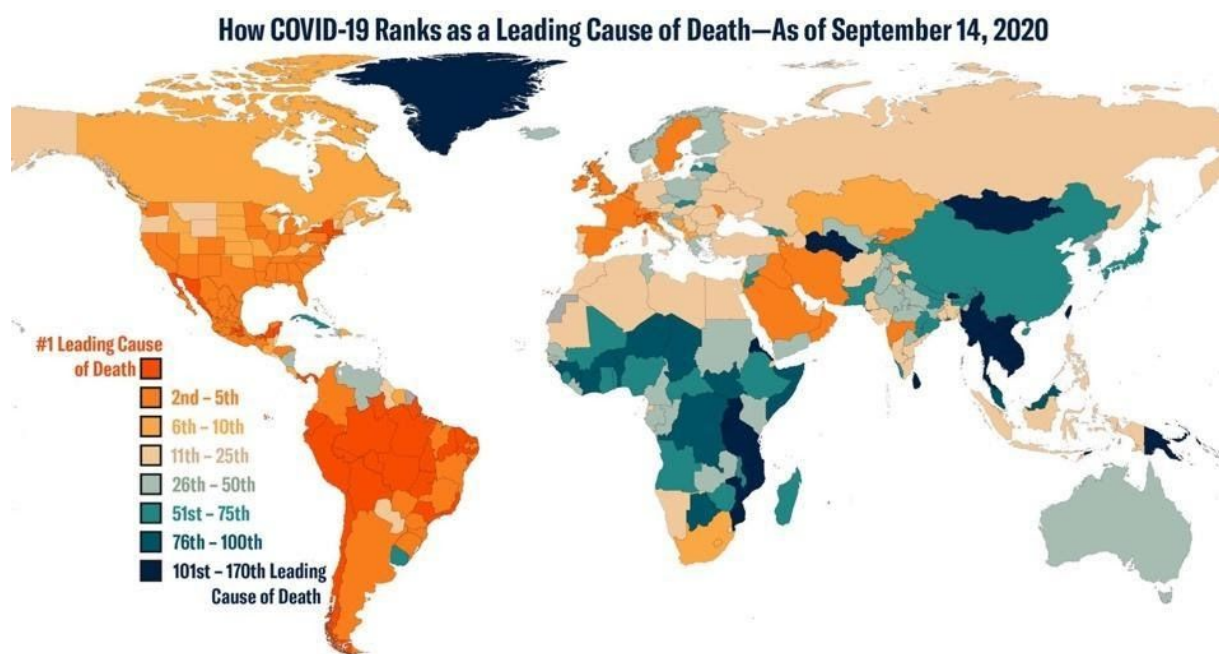
¹⁵ Editorial board, *Rich countries “me first” vaccine hoarding is leaving behind low-income nations*, january 24th 2021

¹⁶ KELLY-LINDEN Jordan, *World faces ‘catastrophic moral failure in race to vaccinate against COVID*, WHO wars, The Telegraph, january 18th 2021

COVID-19 VACCINE RACE: AT THE HEART OF GEOPOLITICAL ISSUES

It is therefore understandable that some countries have doses before others. However, this is a problem when countries face an emergency and have limited access to them (Mexico, Colombia, or Argentina). It is besides in these countries that China is investing heavily. According to Pascal Boniface, *“this will leave traces and resentment within southern countries”*¹⁷.

Since the beginning of this crisis, the world has been focused on COVID-19 and stemming the epidemic. However, other diseases, such as tuberculosis, continue to severely affect some countries and they must also be eradicated. According to The Institute for Health Metrics and Evaluation (IHME), 170 causes of death are taken into account on the map below. This study is based primarily on death data collected by the John Hopkins University Dashboard. Data from China and Turkmenistan were not available. The map shows that the countries with the leading cause of death from COVID-19 are the United States, Mexico, Brazil, Italy, Pakistan, and India. Most African countries are faced with other lethal diseases.



Thus, putting the absolute priority on COVID-19 is dangerous for the countries that have been facing other lethal diseases. It could impact other health issues such as access to health care, price, and vaccination. For example WHO has announced plans to vaccinate 60% of the continent. However, the cost would be monumental and would result in a budgetary shift from eradicating persistent diseases to the vaccine against COVID-19.

¹⁷ “Vaccines against COVID-19: a diplomatic weapon ?”, France 24, January 27th 2021

COVID-19 VACCINE RACE: AT THE HEART OF GEOPOLITICAL ISSUES

How to imagine the future?

Humanity is facing a global crisis, probably one of the greatest of our generation. It is imperative to act multilaterally and decisively, taking into account the consequences of our long-term actions. Of course, the epidemic will be over after the vaccination of the world. According to Yuval Noah Harari, we are actually facing two crucial choices: “*The first is between totalitarian surveillance and the empowerment of citizens. The second is between nationalist isolation and global solidarity*”¹⁸

Some countries like China have been monitoring their populations with technologies, by sanctioning those who do not respect the rules. All this is done with simple smartphones: the Chinese government forces millions of people to report various information about their body temperature or their medical condition and authorities even know who has been in contact with who. Other countries like Israel have also chosen this technique by allowing the Israeli internal security services to deploy surveillance technology usually intended to fight terrorism to track down patients infected with the coronavirus.

There is nothing original about these techniques, which have already been used to track, monitor, or even manipulate populations such as in the Cambridge Analytica affair. The pandemic can then mark a turning point because, beyond the standardization of mass surveillance, the tools might not be abandoned after the end of the pandemic. We don't know exactly how these technologies work and cannot grasp all of their subtleties because of their ultra-rapid evolution. Harari adds that “*temporary measures have a bad habit of surviving emergencies, especially since a new emergency is always on the horizon*”. He explains that this is the case with Israel, which failed to abolish all "temporary measures" taken during the War of Independence in 1948.

But mass surveillance is not the only option, and it is possible to reconcile health protection and containment of the epidemic through the empowerment of citizens. These successful efforts have been achieved in South Korea, Taiwan, and Singapore. Even though these countries have used tracking apps, they have relied more on the voluntary cooperation of a knowledgeable public. Trust and transparency are another way for citizens to comply with their governments' directives : “*a motivated and knowledgeable population is generally much more powerful and efficient than an ignorant and supervised population*”. Therefore, the communication of particular governments and media should change, as the citizens' confidence in them has been declining for several years. From this issue arises the effectiveness of vaccination campaigns ; in France, only 1 out of 2 citizens agreed to be vaccinated in december 2020¹⁹.

The necessity of a global plan

The second important choice we face is between nationalist isolation or global security. The epidemic, the resulting crisis, and the nature of supply chains are global, so every government cannot afford to move forward and make decisions unilaterally. We need to provide a comprehensive and multilateral response to it at all levels.

We must be convinced that cooperation is more useful than competition. A spirit of collaboration and trust is necessary to share information, health equipment, and vaccines. Because if the world is not treated properly, the virus will keep coming back in waves and

¹⁸ HARARI Yuval Noah, *The world after coronavirus*, Financial Times, le 20 mars 2020

¹⁹ IPSOS, *Global attitudes on a COVID-19 vaccine*, december 20th 2020

COVID-19 VACCINE RACE: AT THE HEART OF GEOPOLITICAL ISSUES

very likely endure. To not waste more time and make the situation worse, the countries of the world must agree on a comprehensive strategy.

As in any war situation, an effective strategy must be developed in which several actors will actively work to eradicate the problem in a coordinated manner. Also, economic players should get more involved, as in the Decathlon company, which authorized Italian doctors to adapt their diving masks to respirators by improving them with 3D printers. Above all, this would result in increasing the number of vaccine production chains by requisitioning, for example, companies that have the production capacities. In the immediate term, a multilateral system must be put in place to distribute vaccines to countries where they are needed most and not merely act according to the market laws. In the long term, all countries should have access to doses.

Besides, a comprehensive agreement must be found for trips abroad. Countries must cooperate to at least allow essential travel (scientists, doctors, journalists, politicians) because if all international flights are stopped for months, it will cause enormous difficulties.

Finally, it is essential to learn from the past lessons by preparing for a much more severe illness, as Michael Ryan, the WHO emergency response program chief, warned. Indeed, even though the pandemic has had severe impacts, the lethality rate of COVID-19 is reasonably low. It is necessary to find protocols, and multilateral agreements to prevent and thwart the arrival of new diseases that could be much more serious.

The importance of the long term

Even if the health crisis's resolution must be the priority, it is also essential not to neglect other issues (military, economic or sustainable development) when making long-term decisions. Moreover, it is important not to remain entirely focused on COVID-19 because conflicts persist worldwide, such as in the Sahel or Eastern Europe. The climate issue is also fundamental to consider, and the health crisis has put us in perspectives of possible solutions to explore for the future.



FOLLOW DEF'INSEEC ON

