



VACCINE ACCESS TEST

Global Summary: October 2020

Background

The world is racing to find safe and effective vaccines against COVID-19. And when we do, these vaccines must be made available to everyone who needs them most, regardless of nationality or wealth. Because a fair global distribution of COVID-19 vaccines will end the pandemic faster for every country, save lives and help economies recover. So it's important to ask whether countries actions move us closer to, or further from, global access to COVID-19 vaccines ONE's Vaccine Access Test provides a framework to answer this question based on the following metrics:

- **Access to COVID-19 Tools Accelerator (ACT-A):** Providing financial support to the ACT-A, the only mechanism that is positioned to deliver a coordinated global response, at scale and at speed.
- **Multilateral Leadership:** Working with other countries, companies, and institutions to advance fair and efficient global access to vaccines and therapeutic treatments.
- **Policies:** Instituting and promoting policies to ensure COVID-19 vaccines are accessible to all on a global scale.
- **Deals:** Every deal to secure promising COVID-19 vaccine candidates is scored individually based on a set of metrics for how well it advances global access to vaccines. When countries and companies complete new deals, these are scored, with their average deal score then added to their final score.

ONE has scored G20 countries and pharmaceutical companies that have completed deals for promising vaccine candidates. [See summary scores in Figure 1 below and visit \[ONE.org/VaccineAccessTest\]\(https://www.one.org/VaccineAccessTest\) for detailed scorecards.](#)

What We're Seeing

- 1) Bilateral deals may be the biggest hindrance to access:** A recent analysis from Oxfam shows a small group of wealthy countries have purchased more than half of the expected supply of leading vaccine candidates through bilateral deals with pharmaceutical companies. Most of these deals received low scores on the Vaccine Access Test when it comes to attributes that could improve global access like transparency and the number of doses purchased relative to a country's population. Of the 34 deals signed to date, 27 failed to provide sufficient transparency for us to score this metric, while a further 23 allowed the countries involved to stockpile unnecessary volumes of vaccines. If you take deal scores out of the Vaccine Access Test analysis many countries' scores go up considerably (See Figures 2). To fully understand the implications of this, additional information is needed on how much capacity can be increased with more sublicensing and whether current licenses allow for production at maximum capacity. But based on the information we have, the implications of this are stark: efforts to work multilaterally to improve vaccine access will be undermined if these same principles are not reflected in bilateral agreements.
- 2) Multilateral leadership is separating the leaders from the laggards.** A clear differentiator between countries advancing equity and those lagging behind is willingness to work across borders and advance collective efforts to speed the delivery of vaccines globally. The UK, which holds the top score on the Vaccine Access Test, has joined COVAX and committed nearly \$1.2bn to the ACT-Accelerator, and has co-hosted several high-level international events to encourage other leaders to step up. Likewise, the European Commission, Canada, Germany, France, and Italy have taken similar actions, though more progress could be made if they and other countries increase financial contributions to ACT-A in the months to come.
- 3) Some pharmaceutical companies are stepping up to the challenge on access:** AstraZeneca and Johnson & Johnson have taken some decisive steps to advance vaccine access. AstraZeneca holds the best score on the Vaccine Access Test, in part, by engaging in tech-transferred to scale up technology quickly, collaborating with the ACT-A, and committing to non-profit pricing for the duration of the pandemic. AstraZeneca should take the additional

step of committing to align with the WHO when determining when the pandemic is over. Johnson & Johnson has taken similar actions and notably committed to allocate up to 500 million vaccine doses to lower income countries with delivery beginning mid next year. This is particularly important as their vaccine candidate would only require a single dose which is better suited for low-resource settings. Other pharmaceutical companies have an outsized role to play in increasing access to a COVID-19 vaccine and we hope to see others take similar steps.

Why Vaccine Access Matters

Billions in public funding is being spent to speed the discovery and delivery of a COVID-19 vaccine. The reason governments are making these massive investments is simple: they have a responsibility to protect the lives of their citizens and enable their economy to open up. While it may sound counterintuitive, research shows that the fastest way to achieve that outcome is to ensure that the most vulnerable everywhere get access to the vaccine first.

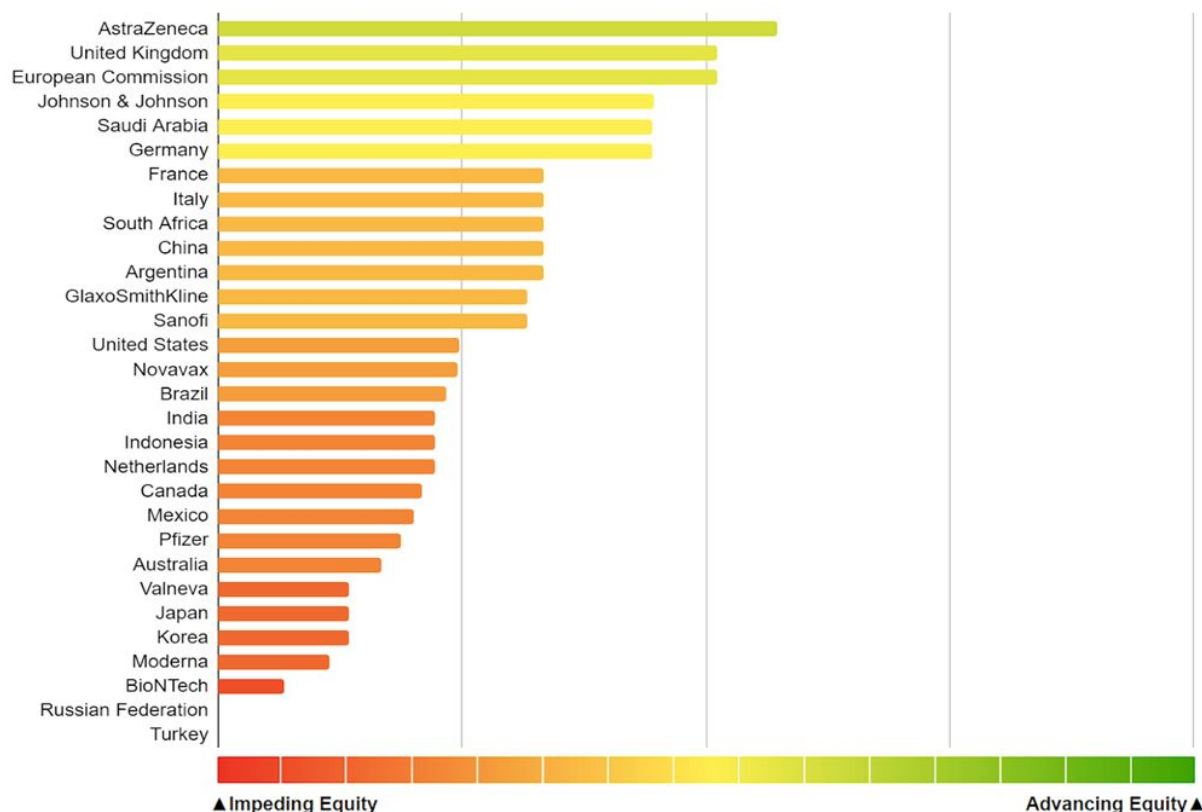
A recent study from Northeastern University's MOBS Lab shows there could be twice as many COVID-19 deaths if rich countries monopolize the first 2 billion doses instead of making sure they are distributed globally. This is because even with an oversupply of vaccines in wealthy countries, not everybody will choose to be vaccinated and no vaccine will be 100 percent effective leaving large pockets of the population vulnerable. If the virus is still circulating unchecked in other parts of the world it will quickly start circulating in wealthy countries when borders reopen. And the longer the virus spreads anywhere in the world it risks mutating making any vaccine less effective over time. In short: hoarding vaccines in wealthy countries will slow the recovery for everyone, everywhere.

What is Next

The Vaccine Access Test is being updated monthly to gauge progress and glean lessons learned. Over the next month, both countries and pharmaceutical companies should continue to take steps to improve access including:

- **Fully fund** the Access to COVID-19 Tools Accelerator (ACT-A);
- **Advance policies to speed up the production & distribution of successful vaccines**, including by expanding access to relevant intellectual property and facilitating technology transfers needed to scale up manufacturing capacity. Given the limited engagement with the WHO's C-TAP voluntary patent pool, the TRIPS waiver proposed by South Africa and India at the World Trade Organization may present a viable alternative to provide countries with additional options to maximize production capacity.
- **Increase transparency** on elements of bilateral deals that have the potential to improve access, such as the timeline for delivery, pricing structure, and provisions to allow for exports. For example, the EU includes non-exclusivity provisions in all of its procurement and R&D investment contracts, ensuring that vaccines produced in EU territory can be exported without restriction, and guaranteeing that results of clinical trials and increased production capacity are to the benefit of all.

Figure 1: Vaccine Access Test Scores, October 2020



How Scores have Changed this Month

- **AstraZeneca** moved into the top spot on the Vaccine Access Test by engaging in tech-transferred to scale up technology quickly, collaborating with the ACT-A, and committing to non-profit pricing for the duration of the pandemic. AstraZeneca should take the additional step of committing to align with the World Health Organization when determining when the pandemic is over.
- **Johnson & Johnson's** score increased by 2.7 points after a new deal with the EU and a commitment to allocate up to 500 million vaccine doses to lower income countries with delivery beginning mid next year.
- **Australia's** score decreased by 0.5 points because of a new deal with CSL Unlimited that lacks transparency and allows the countries involved to stockpile unnecessary volumes of vaccines. This drop is despite a new contribution of \$5.4 million from Australia to the ACT-A diagnostics pillar which is a welcome step in the right direction and should be followed up by greater efforts to fulfil their fair share of \$620 million.
- **Canada** saw a slight bump to their score thanks to increased transparency on their most recent deal with Medicago.
- **The European Union's** score increased by 1.7 after the Vaccine Strategy was released and declared all EU vaccine contracts include non-exclusivity provisions and prohibitions on export bans, making vaccines a global public good, and a favorable new deal with Johnson and Johnson was added to the board.
- **Four new deals** were scored including between Canada and Medicago, CSL Limited and Australia, the European Union and Johnson & Johnson, and Pfizer-BioNTech and New Zealand.
- **Argentina, Korea, and China** all received 1 point each for officially joining the COVAX Facility.

Figure 2: Bilateral deals may be the biggest hindrance to global access

A recent analysis from Oxfam shows a small group of wealthy countries have purchased more than half of the expected supply of leading vaccine candidates through bilateral deals with pharmaceutical companies. Most of these deals received low scores on the Vaccine Access Test when it comes to attributes that could improve global access like transparency and the number of doses purchased relative to a country's population. Of the 34 deals signed to date, 27 failed to provide sufficient transparency for us to score this metric, while a further 23 allowed the countries involved to stockpile unnecessary volumes of vaccines. If you take deal scores out of the Vaccine Access Test analysis many countries' scores go up considerably (See Figures 2). To fully understand the implications of this, additional information is needed on how much capacity can be increased with more sublicensing and whether current licenses allow for production at maximum capacity. But based on the information we have, the implications of this are stark: efforts to work multilaterally to improve vaccine access will be undermined if these same principles are not reflected in bilateral agreements.

Vaccine Access Test: Scores without Vaccine Deals Included (October 2020)

