



Covid-19 Vaccine Policy

This article is based on [“Devising a vaccine strategy for India”](#) which was published in The Hindustan Times on 07/01/2021. It talks about the challenges and solutions in the development & distribution of Covid-19 vaccine.

Recently, India has approved the Covid-19 vaccines developed by [Astra-Zeneca \(Covishield\)](#) and [Bharat Biotech \(Covaxin\)](#). There are several more vaccines that will likely be available later in 2021.

Although India will not need to vaccinate its entire population, it would have to vaccinate at least 30-40% of the people to develop herd immunity fully. Even at a minimum scale, approximately 1 billion doses of **Covid-19 vaccines** will be required, given that most vaccines need a booster dose.

Moreover, other factors, like allocation, distribution, financing, communication, etc., will be impediments to [Covid-19 vaccination](#) drive. Therefore, deploying a robust vaccine development & distribution policy will be very crucial for India.

Associated Challenges

- **Allocation:** Most nations will vaccinate healthcare workers first. They treat those who are infected with Covid-19 and vaccinate the remaining population. After that, it seems logical to prioritise the elderly, who have a higher infection fatality rate.
 - However, premature death costs a young person more years of life than an older adult. This is a more significant concern for India, as 80% of its population is below 50.
- **Distribution:** Moving vaccines from companies to warehouses will be relatively easy, but moving it from warehouses to distributors to end-users will be tricky, given the difficulties with cold chains and storage facilities.
- **Financing:** In the United States, the United Kingdom and Europe, vaccines are likely to be entirely free and administered publicly.
 - However, given the tight fiscal situation, the Indian government faces the dilemma of whether to finance vaccinations publicly or privately.
- **Human Resource:** Administering 30-40 million immunisations (under regular vaccination drive) a year is very different from vaccinating 600 million people in a year.
 - Sourcing the trained human resources necessary to deliver intramuscular shots, without diverting from existing priorities, will not be easy.
- **Public Confidence:** “Optimism bias,” as it is called, makes vaccination seem unnecessary to them. Concerning diseases, a lot of people tend to think that their risk is low.
 - However, this behaviour can prove fatal in battling a pandemic like Covid-19 pandemic.

Way Forward

- **Vaccine Prioritisation:** The protective benefit from vaccination is much lower if one has immunity from a prior infection. Hence, the allocation of the vaccine among the working-age population should consider two factors:
 - It may be prudent to screen people for Covid-19 antibodies and prioritise vaccination of those without antibodies.
 - Areas closest to herd immunity even without suppression require the least number of doses to return to regular economic activity and have higher returns from vaccination.
- **Strengthening Vaccine Supply Chain:** Enhancing **Electronic Vaccine Intelligence Network** (eVIN) system will enhance real-time information on vaccine stocks and storage temperatures across all country's cold chain points.
- **Bridging Human Resource Gap:** Engaging medical students, phlebotomists, paramedics and pharmacists can be rapidly and reliably trained to administer vaccines, will bridge the human resource gap.
- **Hybrid Financing Policy:** India will need a hybrid strategy, where the majority of the population (economically challenged) is vaccinated for free publicly while allowing private markets to operate for rich people.
- **Effective Communication:** A good communication strategy that envisages removing myths associated with Covid-19 vaccine should be science-led, involve regular communication, utilise respected community leaders to widen reach, and clamp down on the spread of misinformation.
- **Need For Vaccine Certification:** To resume normalcy and allow free movement of people, every country will need an internal set of protocols regarding proof of vaccination that is interoperable with norms elsewhere.
 - In other words, proof of vaccination in India or Tanzania must be acceptable to Singapore Airlines or Qantas.
 - This will also require multilateral bodies to play an active role in creating frameworks, around which digital platforms can be developed.

Conclusion

India's Covid-19 vaccine drive will be a monumental mission, not just in terms of vaccinating its own population, but also vaccinating a large part of the world thanks to its position as the world's leading vaccine producer.

Addressing the issues associated with the development and distribution of vaccines will augment the effort to efficiently get vaccines to hundreds of millions in the shortest period of time.

Drishti Mains Question

"Covid-19 immunisation drive will be a different kettle of fish from regular vaccination programs". In light of the statement analyse the challenges in the development & distribution of Covid-19 vaccine.