A more equitable covid vaccine rollout could have saved a life every 24 seconds in 2021

Research published by the People's Vaccine Alliance shows the deadly cost of vaccine inequity

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The World Health Organization (WHO) declared covid-19 a pandemic three years ago, on Mar. 11, 2020. The declaration has not lapsed, and though most cases are mild, more than 20 million people are currently ill with covid.

Since vaccines were rolled out beginning in late 2020, more than 13 billion vaccine doses have been distributed around the world, though not evenly. High- and upper middle-income countries have administered more than 200 doses per 100 people, while lower-middle income ones have administered 140 per 100 people, and low-income only 37 per 100. The gap was especially marked in 2021.

The consequences have been deadly. In a letter published by the nonprofit People’s Vaccine Alliance on Friday (Mar. 10), 200 global leaders call out the results of the...
inequity, highlighting a disheartening statistic: 1.3 million lives could have been saved with more equitable global vaccine distribution in the first year of the vaccine rollout. In other words, a more equitable covid vaccine rollout could have saved a life every 24 seconds.

**Millions died for the greed of rich countries**

The People’s Vaccine Alliance’s, a coalition with the goal of free vaccines for all, made the calculation based on a study published in October 2022 in Nature. The researchers behind the study modeled the impact that a more equitable distribution of vaccines had on covid in 2022 and calculated the damage caused by a lack thereof the previous year.

“That those lives were not saved is a scar on the world’s conscience,” reads the letter, whose signatories include former UN secretary Ban Ki-Moon, former Spanish prime minister José Luis Rodríguez Zapatero, and Nobel laureates Joseph Stiglitz and Richard Roberts.

The letter includes a call for specific steps to prevent a similar tragedy from occurring again: support the World Health Organization’s pandemic accord; invest in scientific innovation outside wealthy nations; remove intellectual barriers that prevent sharing life-saving know-how; and increase public investment in medical innovation.

But whether the global health community is willing to learn any lessons from its past mistakes and adopt these ambitious but reasonable measures remains to be seen. For starters, it will require commitment from current heads of governments—all of whom, with the exception of East Timor president Jose Ramos-Horta, are missing from the long list of People’s Vaccine Alliance signatories.