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## **Limits on the global right to vaccinate against COVID-19**



**Given the complexity of access to and distribution of the COVID-19 vaccine, it is essential to implement global regulation.**

**In this case, implement public action, in which the countries of the world reorganize around the United Nations to implement the global right to the vaccine, giving priority to medical personnel and all persons at risk in all States.**

By Antonio Peña Jumpa\*

February 2, 2021.- With great satisfaction we have received in Peru the news from the President of the Republic who in his message to the nation on 01/31/2021 stated that "Peru will have the necessary vaccines to protect the population during 2021" (newspapers in web, 01/31/2021). However, the global context is adverse to affirm this, especially due to the global dispute in the manufacture, demand and distribution of already approved vaccines, which shows the limits that the world population has to access the vaccine against COVID-19 .

In the Peruvian case, the president of the republic has confirmed that on February 9 the country will receive one million doses of the vaccine from China Sinopharm (out of a total of 38 million doses that are under negotiation). In the same sense, it has confirmed that it will receive vaccines from the "Covax Facility" (the great global private-public alliance, in which the World Health Organization is part of, administered by GAVI -Financial Alliance directed by the Bill and Belinda Gates-, who seeks to democratize the distribution of vaccines) in the first quarter of the year, although without indicating the number of doses (it is estimated that it will be less than one million doses, according to the distribution of the same alliance to other countries).

But the president has also confirmed that his government is in final negotiations with the North American-German laboratory Pfizer-BioNTech (for a total of 9.9 million doses) and has signed a purchase contract with the British-Swedish laboratory AstraZeneca / Oxford (for a total of 14 million doses), whose vaccines would arrive in the country in the second half of the year. Finally, the president has reported that his government is in negotiations with the entrepreneurs of the Johnson & Johnson (United States), Moderna (United States) and Gamaleya (Russia) laboratories.

This good Peruvian government intention unfortunately contrasts with the global economic reality where supply and demand, dispute and selfishness are found both in the manufacture and distribution of the vaccine. Just knowing the presence of numerous multinational companies or laboratories and their forms of financing to obtain and manufacture the vaccine, as well as learning about the various forms of contracts for the sale or supply of vaccines,



confidentiality clauses on the prices that are negotiated and of different interests in the final and initial negotiations given the changing actors on the part of the State and private companies or laboratories, shows the difficult path of access to the vaccine and the clear contingency on the amount of doses to buy and receive by each State

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It is a situation of extreme inequality and a market without rules that prevents the recognition and fulfillment of the global right of everyone to vaccines against COVID-19. There is no equity or justice in the access and distribution of vaccines to counter the pandemic. The director of the World Health Organization has denounced this fact showing extreme figures in the supply of vaccine doses: as of January 18, 2021, "while 39 million doses have been administered in nearly 50 richer countries, only 25 have been given in one lowest income nation" (<https://news.un.org/en/story/2021/01/1082362> [1]).

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This complaint is confirmed through the daily statistics published by the University of Oxford on its portal Our World in Data (online at <https://ourworldindata.org/covid-vaccinations> [2]), in which is showing the number of doses of vaccines given per 100 people in each country:

According to this information, only high-income countries have a high percentage of vaccine doses per 100 people in their country. As of January 31, the top five countries include Israel (with 54.72 doses / 100 people in their country), the United Arab Emirates (with 33.71 doses / 100 people), the United Kingdom (with 13.95 doses / 100 people), Bahrain (with 10.02 doses / 100 people) and the United States (with 9.4 doses / 100 people). At the other extreme, low-income or poor countries, or developing countries like Peru, do not appear.

### What to do?

Given this complex reality that springs from the global market for access to and distribution of the COVID-19 vaccine, it is essential to implement global regulation. As the democratization of vaccines by the private-public alliance "Covax Facility" is not met, or is met with limitations, alternatives such as public action are necessary.

A public action means that the countries of the world reorganize around the United Nations to implement the global right to the vaccine against COVID-19 giving priority to medical personnel and everyone at risk in all States.

A public action means that the countries of the world reorganize around the United Nations to implement the global right to the vaccine against COVID-19 giving priority to medical personnel and everyone at risk in all States. The main objective would be to include companies or laboratories related to the COVID-19 vaccine in the organization so that they become part of the process of rebuilding the world after the disaster situation that the pandemic has brought us. Will we be able to do it?

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