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## NCAER Coronavirus Briefing

### **THE CHALLENGE OF VACCINATING A BILLION INDIANS: HOW TO MEET IT?**

**New Delhi (Wednesday, December 30, 2020): The National Council of Applied Economic Research (NCAER) latest, end-of-the year Coronavirus Briefing discussed the “The Challenge of Vaccinating a Billion Indians: How to meet it?”**

For this special, extended webinar, NCAER hosted policymakers, economists, and public health specialists. The event opened with **Dr Indu Bhushan**, CEO of Ayushman Bharat, and **Dr Ajay Shah**, former Professor at NIPFP, laying out of the issues from a public health and public economics perspective. **Dr Renu Swarup**, Secretary, Department of Biotechnology, **Dr Srinath Reddy**, President, Public Health Foundation of India, **Mr Keshav Desiraju**, Former Secretary, Ministry of Health and Family Welfare, and **Mr Mohammed Suleman**, Additional Chief Secretary, Directorate of Health Services for Madhya Pradesh, then offered their comments and insights. Finally, **Dr Junaid Ahmad**, India Country Director for the World Bank and **Dr Harish Iyer**, Senior Adviser for Scientific Programs, Bill and Melinda Gates Foundation, offered a global perspective. NCAER Director General **Dr Shekhar Shah** will moderate the discussion.

The discussion focused on how the world is on the brink of winning the fastest vaccine race in history, possibly leading us to an end to the Coronavirus pandemic over the next few crucial months. Currently, two mRNA vaccines have been approved for emergency use in some countries and are being administered. However, questions about the purchase and equitable and efficient delivery of the vaccine for large populations in countries like India need to be addressed urgently. There are also larger questions about differential vaccine access between high-income countries and others, despite attempts by WHO and the Global Vaccine Alliance GAVI to ensure fair distribution protocols.

**Indu Bhushan** lauded the unprecedented international cooperation among 30 countries to develop and launch a range of COVID-19 vaccines in less than a year after conducting solidarity trials on subjects across various demographics in different countries. He noted, “*When Coronavirus struck the world at the end of 2019, the very idea of having a vaccine in less than a year seemed like a pipe dream. But*

today, barely a year after the advent of the disease, we are ready to roll out not one but multiple vaccine candidates for COVID-19—this is truly a remarkable feat of human effort to harness science and technology to combat the pandemic.” He also set the context for the discussion by posing five questions. He said that the manner in which these questions would be addressed would determine how the challenge of vaccinating all Indians would play out:

1. Should the Government be financing vaccines? And at what level?
2. Who should be covered under the vaccination programme?
3. What is the connection between the vaccination programme and the prevalence of the virus?
4. How do we ensure that the vaccination programme is implemented comprehensively and equitably across all the States in the country?
5. How do we deal with viral mutations or the unknown length of immunity that the vaccines may provide?

In his presentation **Ajay Shah** discussed the issues from a public health and public economics perspective. He suggested, *“Since health is a State subject, it is imperative to roll out the vaccine across the entire country through decentralisation and a long-term strategy for adult vaccination by adopting similar approaches that have ensured the success of India’s child vaccination programme over the years.”* He emphasized the need to have a range of delivery mechanisms, for example, employers arranging for the vaccination of their employees and their families. In his presentation, he touched upon critical aspects of the administration of the vaccine, including a cost-benefit analysis of the programme, constraints and limitations of administrative capacity at the Central and State levels, vaccine hesitancy among the target population, how herd immunity would impact vaccination, and pricing and dynamics of the product in the private market.

**Renu Swarup** pointed out that the huge challenge of COVID-19 provided an opportunity to all scientists across the world to come together and deliver a range of vaccines in record time. *“Never before have we seen this level of partnership and collaboration among different stakeholders, academia and industry as well as rapid action by the regulatory authorities to take the entire process from development to deployment of a range of vaccines (including the Moderna, Pfizer and Astra-Zeneca) in such a record time frame”*, she said. Highlighting various Government measures that have made this miraculous roll-out of the vaccine possible such as creation of a seed fund, carrying out of clinical trials even in neighbouring countries, setting up a mentor network, and facilitating unhindered research for future programmes, she reiterated, *“Despite the urgency to bring out the vaccine in record time, there has been no compromise on the safety, efficacy and immunogenicity of the programme.”*

**Srinath Reddy**, citing the example of the densely populated Dharavi slum in Mumbai, touched upon the issue of herd immunity, the level at which it could possibly be achieved, and whether it would render the vaccine redundant. He concluded, *“We need more data and more frequent and more representative serological surveys to address the issue of herd immunity, and gauge the level of protection achieved by the people. Until this is proven, there is no room for*

*complacency, and no alternative but to continue with public health measures and precautions.”*

**Mohammed Suleman**, Additional Chief Secretary, Directorate of Health Services for Madhya Pradesh, presented a State perspective on vaccine administration. Asserting the capacity of the State administrations to deliver results in emergencies like the pandemic, he stated, *“I am fairly confident of covering 100% of the population under the vaccination programme in Madhya Pradesh in a few months’ time, while adhering to the Government of India guidelines for target populations.”* He said that the State Government had taken all issues like cold chain capacities, requisite consumables, human resources, and domain knowledge into account for ensuring efficient vaccine delivery.

**Junaid Ahmad** commented that the World Bank was looking to derive lessons from India’s handling of the vaccine programme to assess how these challenges could be addressed in other countries with large populations. *“We need to adopt a multilateral approach, leverage multiple stakeholders, and facilitate comprehensive delivery of the vaccine by piggybacking on the formidable Mission Mode system in India in tandem with the strength of its federalism and State capacities to deliver at local levels.”* He also expressed confidence that this collaboration between the Centre and the States would shift the focus on public health issues and diverse strategies to deal with the challenges, thereby allowing *“a thousand flowers to bloom.”*

**Harish Iyer** touched upon a range of issues, including solidarity trials for the vaccine, therapeutic and antibody assessments, liability and fault compensation system for vaccine manufacturers, biomedical R&D, communication strategies for countering vaccine hesitancy, and logistical challenges like preventing vaccine wastage by ensuring the simultaneous use of all ten vials in the current dosing format for the vaccine. He concluded, *“The pandemic has revived the debate on ‘One Health’ and the need to view this as a public health issue by focusing not only on vaccines but also on holistic healthcare to manage other critical diseases like malaria, Ebola, and influenza, along with COVID-19 across geographies and demographics.”* He reiterated full support from BMGF for implementation of the ‘One Health’ campaign in various States of India.

The rich discussion during the webinar emphasised that in more ways than one, India’s COVID-19 vaccination strategy and its implementation and monitoring would prove to be India’s grand public health challenge of the century — met hopefully by the right vaccines, made available on a priority basis to the right people and at the right price. It will also be an opportunity to fill gaps in our health policy and regulatory capacities, our information and data systems, our health infrastructure, including cold chains and personnel, and in our consultations with communities and beneficiaries.

NCAER Director General **Shekhar Shah**, who moderated the discussion, concluded the webinar by commenting, *“It is gratifying to see the all-round confidence in the vaccination programme among our eminent panel. Hopefully this confidence will translate into efficient implementation of the actual delivery of the vaccine to all Indians who need it, and that this confidence will run through the*

*entire supply chain of the vaccine. I think there is broad agreement that we must use multiple channels of delivery, allowing the ingenuity of individual groups to work to their advantage rather than a one-size fits all, top-down approach.”*

### **About NCAER | The National Council of Applied Economic Research**

Established in 1956, **NCAER** is India’s oldest and largest independent, non-profit, economic policy research institute. NCAER’s work cuts across many sectors, including growth, macro, trade, infrastructure, logistics, land, labour, urban, agriculture and rural development, human development, poverty, and consumers. The focus of NCAER’s work is on generating and analysing empirical evidence to support and inform policy choices. It is also one of a handful of think tanks globally that combine rigorous analysis and policy outreach with deep data collection capabilities, especially for household surveys. More on NCAER is available on [www.ncaer.org](http://www.ncaer.org).

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