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**Health inequality**

According to a July 15 World Health Organization (WHO) report, an estimated “23 million children missed out on basic vaccines through routine immunization services in 2020 -- 3.7 million more than in 2019.”

It should be no surprise that much of these ongoing health crises are occurring in the southern hemisphere. India, for example, which has experienced a devastatingly high number of Covid-19 deaths, lags behind in terms of immunization of other, equally deadly diseases. Over three million children in the world’s second most populous country did not receive the first dose of DTP-1, the combined vaccine for diphtheria-tetanus-pertussis.

While the obvious culprit may seem to be Covid-19, in actuality it is not the pandemic per se that has accelerated this dangerous trend. “The Covid-19 pandemic and related disruptions cost us valuable ground we cannot afford to lose – and the consequences will be paid in the lives and well-being of the most vulnerable,” Henrietta Fore, the Executive Director of UNICEF, sounded the alarm.

Practically, this means that, even when the current pandemic becomes a distant memory, millions of people in poor or relatively poor countries, will continue to pay a price for this unforgivable mismanagement of the global healthcare system.

When WHO declared in March 2020 that Covid-19 was officially a ‘pandemic’, many global intellectuals romanticized the notion that Covid-19 has the potential to bring us closer together. A year and a half later, we realize that such high hopes were mere wishful thinking. If anything, the pandemic has deepened -- and further highlighted -- not only existing global inequalities, but the complete disregard of the poorer, readily exploited South by the wealthier, neocolonial North.

In a thorough investigative report, entitled ‘Vaccine inequity: Inside the cutthroat race to secure doses’, the Associated Press revealed on July 18 the extent of the unfair international distribution of the Covid-19 vaccines. For example, while “Canada has procured more than 10 doses for every resident, Sierra Leone’s vaccination rate just cracked 1 percent on June 20,” AP reported.

The same disquieting paradigm applies elsewhere. While the United Kingdom, the European Union and the US have produced or acquired multiple vaccines for every person, Oman, Honduras, Bangladesh and Zimbabwe are situated firmly at the bottom of the ‘vaccine procurement’ list.

The much-celebrated COVAX, an international project championed by WHO and others to deliver billions of Covid-19 vaccinations to poorer countries in 2021-22, has proven to be a much slower process than once anticipated. Wealthy nations that have pledged to supply the program with the needed dosages seem more consumed with piling up or selling vaccine surplus to the highest bidder.

Then, there is the problem of existing income inequality and widespread corruption in much of the South, which makes access to the few available vaccines nearly impossible for the poorest communities.

Excerpted: ‘The Little Talked About Covid-19 ‘Variants’: Vaccine Mismanagement Will Have Dire Repercussions’

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