

COVID-19 vaccine (in)equity Pandemic complexity through a phenomenological and systems thinking lens

Background

Unequitable vaccine coverage

COVID-19 vaccine coverage (April 2021 – April 2022, Fig 1):

8.7% to 72.4% in high-income countries 0% to 10.6% in low-income countries Contributing to large socio-economic costs and slow recovery.

Wicked problems

'Wicked problems' (e.g., vaccine inequity) no straightforward policy have response that would adequately address their 'wickedness'. Their properties include societal complexity, difficult to be forumated, causal webs, being a symptom of other problems, and more. [2,3]

Phenomenology

Phenomenological research focuses on structural elements of lived experience with foreground-background dynamics of attention. These dynamics occur as researchers or professionals are trained to pay attention to entities relevant to their disciplinary domain ('work-world'). [4,5]

Systems thinking

Systems thinking attempts to understand how systems work in a holistic manner rather than in isolation. Identifying root causes of problems stimulate effective problem-solving of nonlinear and turbulent systems. [6]

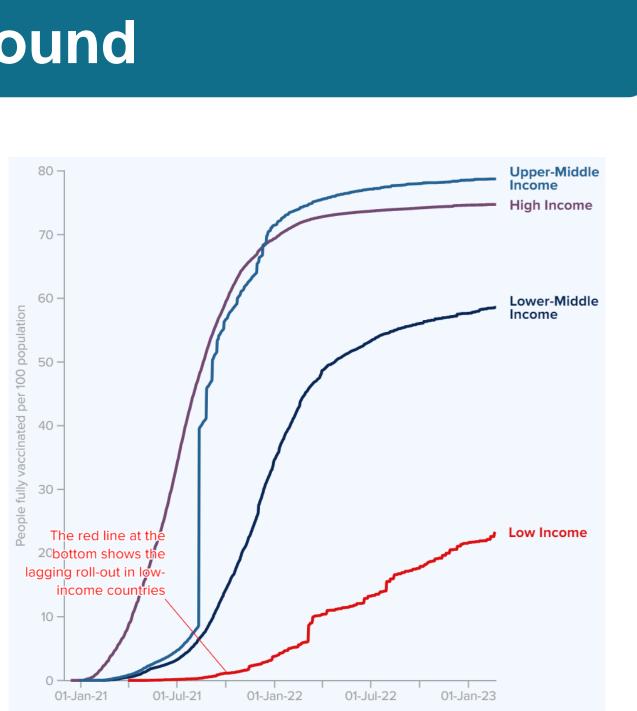


Figure 1: the percentage of people fully vaccinated against COVID-19 over time per income group [1]

Motivation



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Aim

1. Explore the value of combining phenomenology and systems thinking 2. Enhance understanding of wicked problems, such as vaccine inequity

Approach

Global (Fig 2)

economic costs



APPLICATION

Results

Local

emphasis and procuring vaccines via COVAX [9].

Supply and demand: foregrounded production capacity \rightarrow overshadowing capacity issues on the demand side

Procurement: limited concerns for

well-being of other nations \rightarrow vaccine

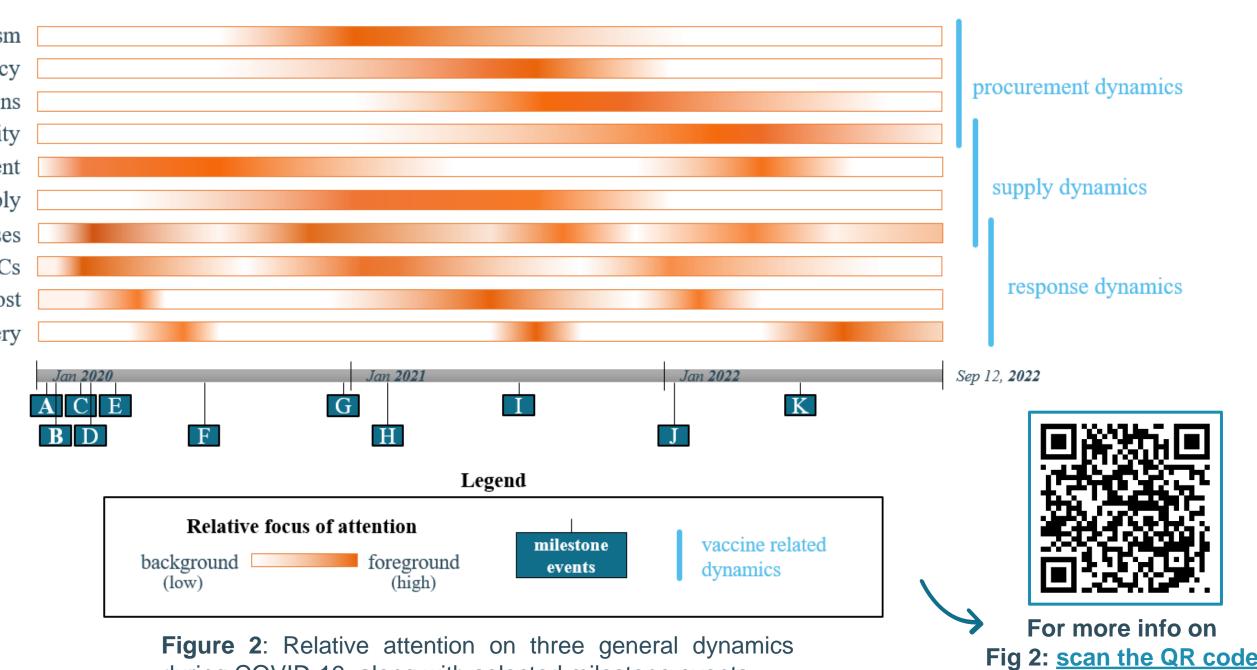
Response: strong focus on non-

pharmaceutical measures \rightarrow less

attention to longer term socio-

nationalism criticism and donations

nationalism diplomacy donations absorptive capacity developmen COVID-19 cases societal cost post-pandemic recovery



during COVID-19, along with selected milestone events.

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Methodology

Facilitate adequate intervention to better design and policy address wicked problems

Global understanding three issues during COVID-19 over time

Local understanding COVID-19 challenges in Tanzania over tim

Tanzania's approach to managing COVID-19 has seen several transitions. In 2020, shifted away from nonpharmaceutical measures towards local remedies for COVID-like symptoms. Treatment protocols, backgrounded, testing increasing attention on practices pushed by political and religious leaders [8]. Following a change in presidency in 2021, a shift in focus was realized, with renewed attention directed towards comprehensive case reporting and

Within COVID-19

- attention to specific issues
- \rightarrow Varying priorities over time: \rightarrow 'Backgrounding' of other essential different 'work-worlds' direct (health) system services: chronic care, routine immunization, sexual and reproductive health, etc. [9]. \rightarrow Unintended consequences due to 'backgrounding': → Repeated cycles of "panic and exacerbated neglect": often focus on one crisis vaccine hesitancy or wastage. at a time \rightarrow 'Backgrounding' can enable traditional 'foregrounding' of problems that → Move beyond were previously overlooked. approaches e.g., integrate social sciences in preparedness and response efforts

Systems thinking Integrated approach

Phenomenology explicitly focus on <u>dynamics of (inter)subjective experience</u> implicitly concerned with the overarching systems level explicitly focus on the overarching systems level implicitly concerned with dynamics of (inter)subjective experience stressing the importance of explicitly focusing on both the dynamics of (inter)subjective experience and the overarching systems level

Combining phenomenology and Wicked problems persist and a good understanding of the problem system thinking enables deeper understanding of how 'wicked' is required to assure adequate interventions and policy design. problems behave. Further research is required to scend demonstrate the value and practical vorkaspect of this combination in policy design, for instance, by extending it ndinc to other wicked problems.

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Dynamics

Beyond COVID-19

Take-aways

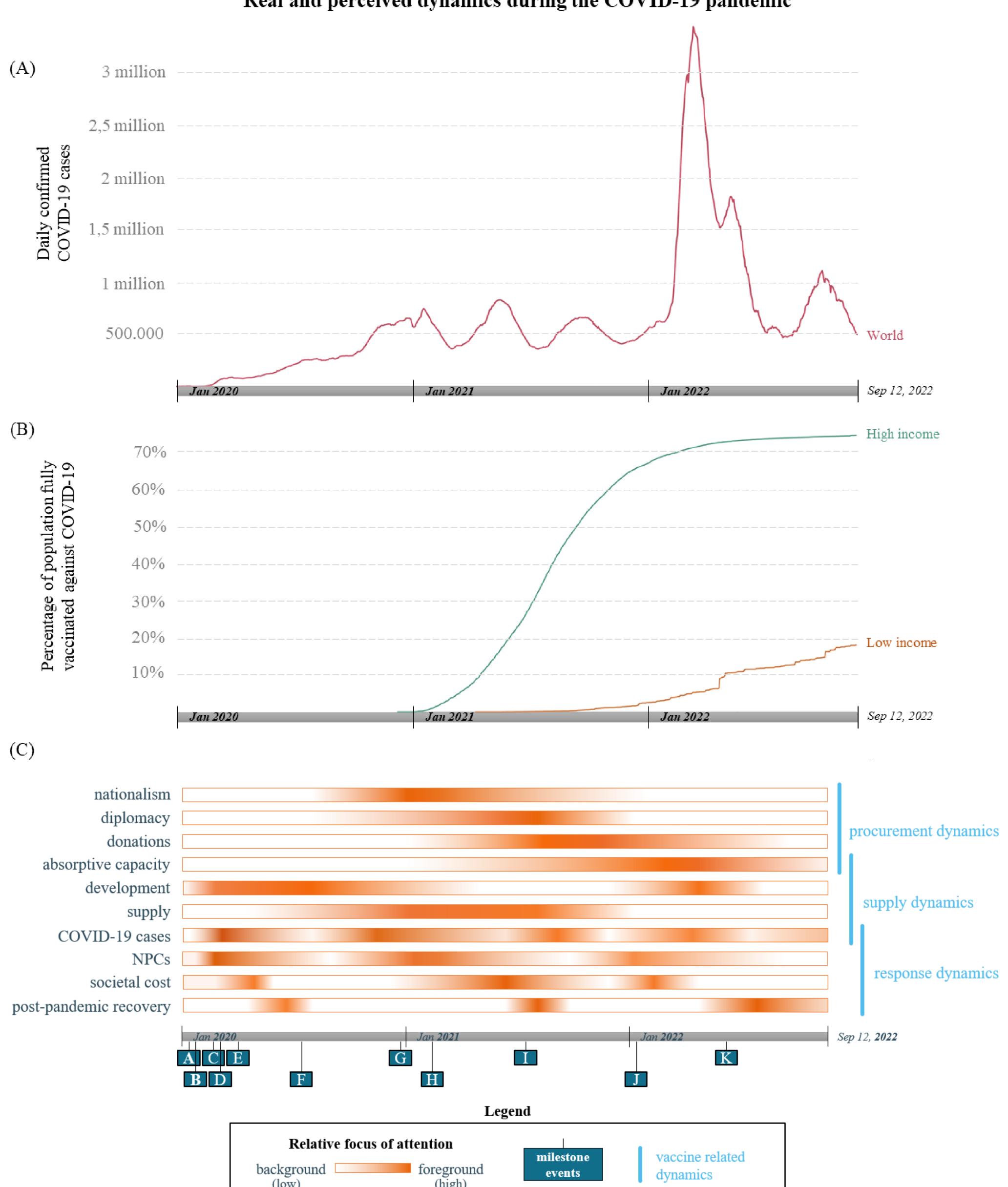




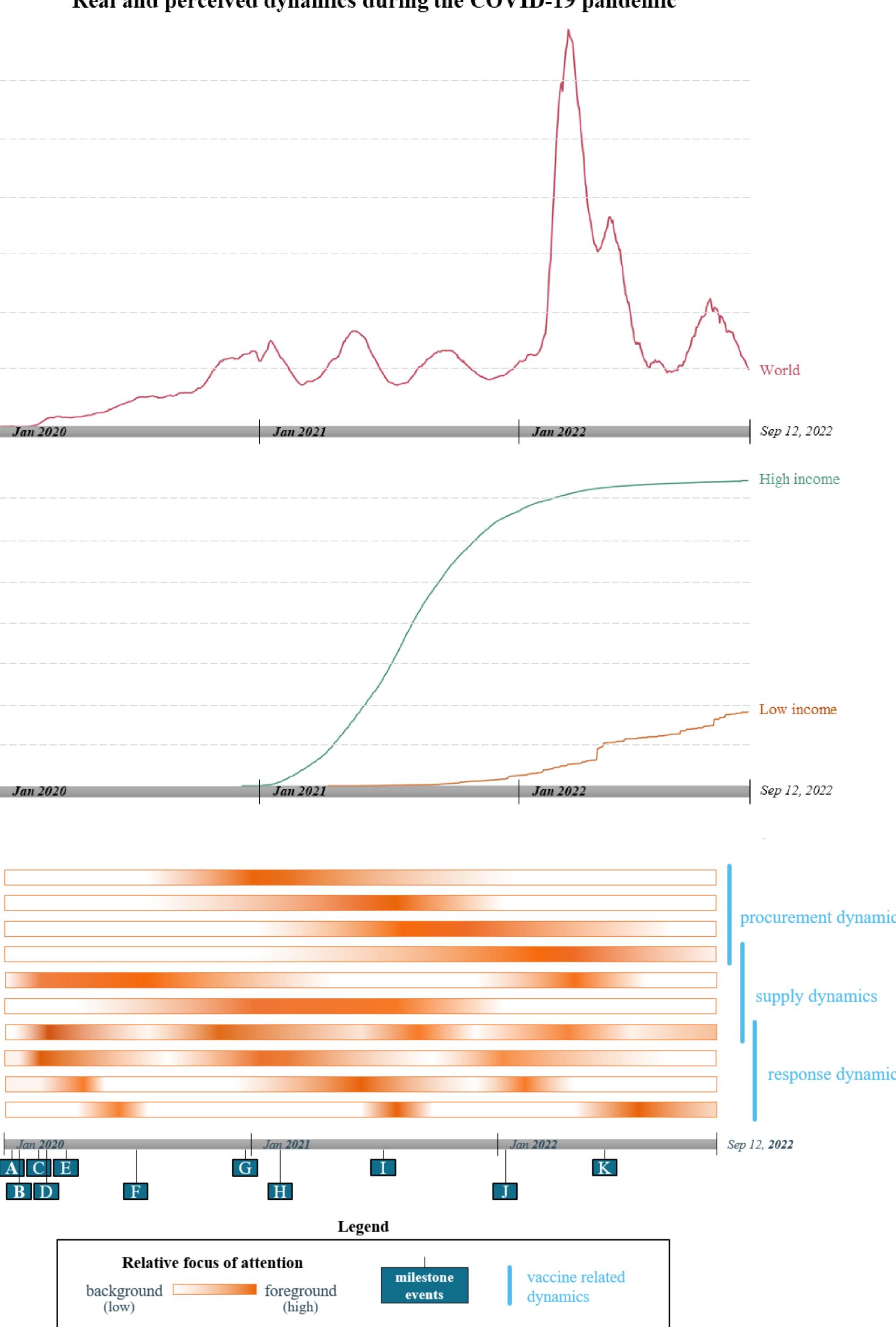




Extended Figure 2



Real and perceived dynamics during the COVID-19 pandemic



Description Figure 2

(A) Global daily confirmed COVID-19 cases over time (1).

(B) Percentage of the population fully vaccinated against COVID-19 in high-income countries (1). Full vaccination refers to receiving all doses prescribed by the initial vaccination protocol (commonly two doses). Those receiving 1 dose of a 2-dose protocol after having been infected with SARS-CoV-2 are not included to improve comparability across regions.

(C) Relative attention on different vaccine related issues evolving over time during the COVID-19 pandemic, along with selected milestone events depicted as letters on the timeline. This is done by approximating the foreground dynamics between the selected topics from a global perspective. These topics are bundled into three sets of issues: competitive dynamics of procurement; vaccine supply and demand dynamics; NPCs and response dynamics. Milestone events:

- concern' (PHEIC) (a)

- disinfection of hands (d)
- ordered 5 doses per capita (e)
- and Pfizer) (f,g)

A: January 30th 2020, the World Health Organization (WHO) declares the first outbreak of nCov-2019 as a 'public health emergency of international

B: February 7th 2020, the European Centre for Disease Prevention and Control publishes report on PPE needs in healthcare settings (b) C: March 11th 2020, Director General of the WHO declares COVID-19 a global pandemic (c) D: March 2020, science communication campaigns in European Union (EU) member states on social distancing, proper use of mouth masks and

E: April 14th 2020, European Commission (EC) puts forward an European roadmap towards lifting COVID-19 containment measures of the first wave; F: July-August 2020, high-income countries start rushing the pre-order of vaccines, thereby exceeding the per capita need, e.g. the UK government pre-

G: December 2020, EC and U.S. Food & Drug Administration grant conditional market authorization for the first COVID-19 vaccine: Comirnaty (BioNTech

H: February 24th 2021, first shipment of vaccines from the COVAX Facility to Ghana (h) I: August 23rd 2021, the U.S. FDA grants full approval of the first COVID-19 vaccine: Comirnaty (i) J: January 2022, COVAX vaccine supply outstrips demand for the first time (j,k) K: August 31st 2022, U.S. FDA authorizes bivalent COVID-19 vaccines against the Omicron variant (I)

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References Figure 2

a: World Health Organization. Statement on the second meeting of the International Health Regulations (2005) Emergency Committee regarding the outbreak of novel coronavirus (2019-nCoV) [Internet]. 2020 [cited 2022 Sep 30]. Available from: <u>https://www.who.int/news/item/30-01-2020-statement-on-the-second-meeting-of-the-international-health-regulations-(2005)-emergency-committee-regarding-the-outbreak-of-novel-coronavirus-(2019-ncov)</u>

b: European Cent suspected or con data/personalscience%20comm ask%20and%20di

c: Sohrabi C, Alsafi Z, O'Neill N, Khan M, Kerwan A, Al-Jabir A, et al. World Health Organization declares global emergency: A review of the 2019 novel coronavirus (COVID-19). International Journal of Surgery [Internet]. 2020;76:71–6. Available from: https://www.sciencedirect.com/science/article/pii/S1743919120301977

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e: Callaway E. The unequal scramble for coronavirus vaccines — by the numbers. 2020 Aug [cited 2022 Sep 27]; Available from: https://www.nature.com/articles/d41586-020-02450-x

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science%20communication%20campaigns%20in%20EU%20member%20states%20on%20social%20distancing,%20proper%20use%20of%20mouth%20m ask%20and%20disinfection%20of%20handsprotective-equipment-ppe-needs-healthcare-settings-care-patients