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Country Position Paper (2022)

COVID-19 Vaccine to All and ensuring Health to End the Health Inequalities

By GCAP Bangladesh and Peoples Vaccine Alliance, Bangladesh

Executive Summary

The position paper of GCAP Bangladesh and the Peoples Vaccine Alliance in Bangladesh tends to analyze the situation of COVID-19 vaccination, addressing the health crisis and access to equitable health services to end health Inequalities. Several consultation sessions were conducted by Noakhali Rural Development Society (NRDS) with CSOs for preparing this document. The main objective of this document is to describe the responses of Bangladesh to tackle COVID-19, specifically, how Bangladesh is dealing with the pandemic situation and aftermath vaccination.

To combat COVID- 19, the government of Bangladesh has taken a number of steps: a) Formation of a national COVID-19 response committee headed by the Minister for Health; b) Cancellation of the father of the Nation's birth centenary celebration programs; Cancellation of celebration of Bangla New Year on April 14; Cancellation of celebration program of the of the 50th Independence Day; c) Closure of all government and private offices and educational institutions; d) Ban of all public gathering and transportation services; Suspension of all domestic and international flights; d) Deployment of the law enforcement agencies to ensure the social distancing;.

The COVID-19 vaccination Process in Bangladesh began the administration of COVID-19 vaccines on 27 January 2021 while mass vaccination started on 7 February 2021. It was reported that the Bangladesh government planned to give permission to Bangladeshi-made Bangavax developed by Globe Biotech Ltd. To conduct the first clinical trial that got listed in the 'Draft landscape and tracker of Covid-19 candidate vaccines' by the World Health Organization (WHO). Access and Equity during the COVID-19 pandemic When COVID-19 vaccines started to arrive in Bangladesh, people felt a rush of hope.

Bangladesh has called for a temporary waiver under the agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) for the production of vaccines, medicines, and other health technologies to effectively respond to the pandemic. Bangladesh has capable of producing vaccines, therapeutics, diagnostics and other medical equipment should get licenses as well as technology and technical know-how to produce the vaccines and health technologies for Covid-19 and those items should be provided to other developing countries free of cost.

Moreover, Bangladesh called for paying due attention to the need to promote mental health across the globe and ensure sustainable funding from World Health Organization



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(WHO) and low-income countries have requested a temporary patent waiver for vaccines at the TRIPS Council.

Covid-19 and Health emergency This Covid-19 pandemic reveal the incompetent healthcare system in Bangladesh. Failure to protect health care in this rapidly changing context exposes health systems to critical gaps in services when they are most needed, and can have a long-lasting impact on the health and well-being of people.

The COVID-19 pandemic also created hostile environments in the overall healthcare system and presents an unprecedented challenge to public health. The pandemic has been affecting the entire public health particularly marginalized people's health and safety.

Health Rights in Bangladesh: "Right to health is guaranteed by the Constitution of the People's Republic of Bangladesh. Different studies mainly identify three responsible issues for the country's deteriorating health care a) Poor governance and increased corruption, b) Inadequate healthcare facilities, and c) Weak public health communication.

Related to health or health-related subjects approximately 90 Laws (Acts, Order, and Ordinance) are prevailing in Bangladesh. These 90 enactments fall under the seven broad subject areas of Health legislation: a) Welfare Legislation, b) Public Health, c) Communicable Disease Control, d) Food and Drugs Control, e) Health Education and Health Practice, f) Environmental Health, and g) Protection of Children and Women.

Opinion Survey of Peoples Vaccine Alliance Bangladesh: Peoples Vaccine Alliance Bangladesh conducted a national survey to know the opinions of marginalized communities regarding exclusion from vaccination and the post-Covid-19 health situation in Bangladesh. Among those consulted with CSOs, participants opined that COVID-19 has exacerbated disparities and they also mention following issues need to address to improve the public healthcare systems beyond the COVID-19 era to reach vulnerable groups, health workers will need to embark on special vaccination drives and raise awareness for those specific communities.



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FULL PAPER

(Peoples Vaccine Alliance a Civil Society Platform with the main theme is to save humanity from COVID19 crisis by ensuring Vaccine for all is a Common Public Goods. COVID-19 has accelerated and prioritised global health issues related to the Global Health Architecture, Sustainable Financing for health, and equitable access to health tools and commodities, especially related to COVID-19 pandemic. The main focuses are (1) Building global health system resilience; (2) Harmonising Global Health Protocol Standards; and (3) Expanding global manufacturing and knowledge hubs for pandemic prevention, preparedness and response (PPR).)

Introduction:

Bangladesh was one of the most adversely affected countries in South Asia by the pandemic. Foremost aim of this document is to describe the responses of Bangladesh to tackle the COVID-19, specifically, how Bangladesh is dealing the pandemic situation and aftermath vaccination with its limited resources. The first case of a COVID-19 patient was detected in Bangladesh on March 8, 2020. Since then, a total of Coronavirus Cases: 2,032,832 peoples are officially reported as COVID-19 infected with 29,402 deaths until October 17, 2022 (<https://rb.gy/gvh5de>).

The official death toll due to COVID-19 stands at about 6.3 million people in the world with the true number based on models reaching an estimated 19.6 million. 54% of all deaths caused by COVID-19 have been in Low Middle-Income Countries [source]. While the world faced this immense death toll, during the pandemic 40 new billionaires were minted just from profits of COVID-19 vaccines, treatments, tests, and PPE.

The current global health architecture simply isn't working for the many, for as long as it is a system that puts profit before lives and for as long as it treats life-saving science as private property and outsources pandemic management to a handful of companies.

Bangladesh response to COVID-19 Pandemic:

Bangladesh, a highly populated developing (lower-middle income) country with an overall population of 161.3 million, is facing a calamity because of the pandemic. Bangladesh is more prone to the transmission of the virus due to its high population density compared to nations with lower population density.

Bangladesh has made a number of efforts to combat the pandemic. Lifestyle adjustments, the use of face masks, movement restrictions, quarantine of doubted people and isolation of infected patients, local or regional lockdown, closure of all government and private offices, increase public awareness and enforce social distancing, etc. In this aspect public authorities and the citizens along with the health experts try to adjust the avenue to balance the harshness from Covid-19.

To address the socio-economic situations, the government announced several financial stimulus packages to begin with about USD 11.90 billion. However, the government got 3



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months since the disease was first reported in China, but the country unsuccessful to making proper strategies including contact tracing, introducing antibody and antigen-based rapid detection kit, also failed to make multi-disciplinary team to combat this disease.

In addition, limited testing facilities and inadequate treatment service along with public unawareness are the major challenges for Bangladesh to tackle this situation effectively. Together with the government, non-government organizations, private organizations, researchers, and doctors are firmly required to mitigate this highly contagious disease. To combat COVID- 19, the government of Bangladesh has taken following steps:

- Formation of a national COVID-19 response committee headed by the Minister for Health;
- Cancellation of the grand inauguration ceremony of the father of the Nation Bangabandhu Sheikh Mujibur Rahman's birth centenary celebration programs;
- Closure of all government and private offices; Closure of all educational institutions of the country; Ban of all public gathering and transportation services; Suspension of all domestic and international flights;
- Deployment of the law enforcement agencies including army and police to ensure that people maintain social distancing and to motivate the people;
- Cancellation of celebration of Bangla New Year on April 14; Cancellation of celebration program of the of the 50th Independence Day;
- Operating the 'Rice for TK. 10 per KG (approx. 12 cents/kg rice)' program for the needy people throughout the country; Extension of social safety net to the poor and distressed people of the society.

Although the government was unable to successfully control the pandemic due to the country's large population. Due to the significant impact of Covid-19 various economic and financial sectors were severely harmed, particularly the garment industry sector. Covid-19 also has an impact on financial institutions such as banks and other financial institutions. Small businesses, start-ups, and other commercial concerns were also severely harmed. The impact of the epidemic on these industries has had a huge impact on all sectors.

Equity, and Justice, during the COVID-19 pandemic in Bangladesh

Transparent, inclusive and responsive public service delivery is an integral part of sustainable development. It includes ensuring access to Equity, and Justice for all. The COVID-19 is deepening the inequity and injustice among the vulnerable communities.

The shutdown of public services and daily activities triggered an economic crisis in addition to the health catastrophe. One-fifth of the country's population lives in poverty, and a sizable part of the workforce is reliant on temporary labor. The closure posed a dilemma between protecting lives and preserving livelihoods.

The country's largest manufacturing business of readymade garments (RMG) employs around 4 million individuals, many of them with unstable work arrangements. When COVID-19 expanded to developed nations that are key importers of RMG sector products,



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customers began to cancel their orders, threatening the livelihoods of employees in the business.

People from vulnerable communities' experience disproportionately adverse impacts of COVID-19. COVID-19 has exacerbated systemic disparities and its long-term negative impact on these populations foretell an impending crisis that could prevail beyond the COVID-19 era.

During the COVID-19 pandemic in Bangladesh schools had been closed for more than 450 days since the pandemic's start in 2020. According to a study 37 million children in Bangladesh are affected due to school closures. Many of them facing barriers to accessing remote education, including lack of internet access, lack of electricity, and needing to work to support their families. Girls in particular faced barriers and nongovernmental organizations reported a concerning rise in child marriage.

The COVID 19 pandemic restrictions have made access to services difficult and have highlighted the gaps in resources available to combat domestic violence. With the government's announcement of lockdown, courts shut and non-governmental organizations (NGOs) providing legal aid closed their offices.

Local authorities and police became burdened with relief distribution. Limited number of shelter homes stopped taking in new survivors due to a lack of testing kits and fear of COVID contamination. Lockdown measures also made it difficult for survivors to access Equity, and Justice through formal channels.

Indigenous communities face a significant lack of access to health and justice systems. Justice is critical to ensure that the individual rights of these communities are protected in these uncertain times. In a crisis like COVID-19, these communities are more likely to face a greater burden of unemployment, which may have a potentially falling impact on their families.

People living in remote areas are more likely to be impacted by travel restrictions imposed by governments, as they need to travel long distances to access healthcare. This is particularly concerning for medical emergencies. With the reorganization of health systems and repurposing of healthcare workers, it may be challenging to avail treatment at health facilities. Travel restrictions will also jeopardize ongoing care of chronic disease patients, who may not be able to access treatment locally.

The burden of COVID-19 has been severe for patients with chronic diseases such as obesity, cardiovascular diseases (heart disease and stroke), cancer, diabetes, chronic respiratory diseases, bone and joint disorders, genetic disorders, chronic neurological diseases (on immunosuppressive therapies (multiple sclerosis) and bulbar weakness (motor neurone disease) and mental disorders.

Patients with chronic disease are at increased risk of COVID-19 infection. Mortality due to COVID-19 among chronic diseases could be substantial. Chronic disease patients with underlying risk factors such as age, obesity, lack of physical activity, tobacco use, poor nutrition and excessive alcohol consumption could be exposed to further risks due to COVID-19.



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COVID-19 vaccination Process in Bangladesh

Bangladesh began the administration of COVID-19 vaccines on 27 January 2021 while mass vaccination started on 7 February 2021. The Oxford–AstraZeneca vaccine was the only COVID-19 vaccine authorized for emergency use from January to April 2021. Bangladesh ordered vaccines produced by Serum Institute of India, however it delivered less than half of the doses as agreed to Bangladesh.

After the vaccine shortage, Bangladesh approved the Russian Sputnik V and Chinese Sinopharm BIBP vaccines for emergency use in late April 2021. Bangladesh has also authorized the emergency use of Pfizer–BioNTech COVID-19 vaccine to be distributed as part of COVAX. It was reported that the Bangladesh government planned to give permission to Bangladeshi made Bangavax developed by Globe Biotech Ltd. To conduct the first clinical trial that got listed in the 'Draft landscape and tracker of Covid-19 candidate vaccines' by the World Health Organization (WHO). However fate of the Bangavax is still uncertain due to an unknown reason.

WHO Global Target of Vaccination 70% population. Target in Bangladesh 119,221,953 (1st dose), vaccination administrated 134,716,292 (113.00 % administrated 1st dose against target, 79.10 % 1st dose against population. 2nd doses administered 123,896,251, against target 103.92% administered. 3rd doses administered 57,234,395, 3rd dose against 2nd dose 46.20%. Total Registration 106,698,359 (Surokha App) registration against total population 89.5%.

Equity, and Justice, during the COVID-19 pandemic in Bangladesh

When COVID-19 vaccines started to arrive in Bangladesh, people felt a rush of hope. Life would maybe feel more normal. Across the country, frontline health workers have been working in urban slums, trekking across fields and navigating rivers to get doses into people's arms.

Bangladesh has a strong track record of rolling out mass vaccination programs, especially for diseases like measles and rubella. But getting COVID-19 doses to communities across the country has presented specific challenges.

In 2021, between June and August, a devastating third COVID-19 wave hit Bangladesh. Although some COVAX vaccines had started to arrive in the country, it took time to widely distribute the doses. To boost the COVID-19 vaccination rate when doses were available, the government launched a mass vaccination campaign to immunize millions of people over the course of several days with the support of WHO and other partners.

The second dose was offered in March as part of that campaign and because of these efforts, the vaccination rate in Bangladesh rose significantly in the first few months of this year. As Bangladesh continues its push to vaccinate millions more people, the country still faces challenges.

There are still many difficult-to-reach populations, including some older, more vulnerable people. Recent data has shown that about 60 per cent of those aged 60 and over have yet



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to be vaccinated in Bangladesh, with some citing a lack of information about where and when they can get the vaccine.

Elsewhere, the pressure on Bangladesh's overstretched healthcare system is intense. In addition to treating COVID-19 patients and helping to vaccinate communities, a lot of health facilities are still trying to cope with the burden of disease that existed before the pandemic.

Uncontrollable crowds at the vaccine centers during the recent mass inoculation seem to indicate that Bangladesh has addressed the challenge of large scale vaccine hesitancy, a key question remains: are we ensuring vaccine justice to all, especially at the margins.

Health Rights in Bangladesh

Right to health is guaranteed by the Constitution of the People's Republic of Bangladesh. If anybody in Bangladesh is deprived of enjoying his life then he can go to the court in order to enforce his right.

The WHO is mainly in charge of monitoring health issue of global significance. The objective of the WHO is to ensure that all peoples maintain the highest possible level of health conditions. The WHO Constitution stipulates those principles in its Preamble as follows:

- The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition.
- The health of all peoples is fundamental to the attainment of peace and security and is dependent upon the fullest co-operation of individuals and States.
- The achievement of any State in the promotion and protection of health is of value to all.
- Unequal development in different countries in the promotion of health and control of disease, especially communicable disease, is a common danger.
- Healthy development of the child is of basic importance; the ability to live harmoniously in a changing total environment is essential to such development.
- The extension to all peoples of the benefits of medical, psychological and related knowledge is essential to the fullest attainment of health.
- Informed opinion and active co-operation on the part of the public are of the utmost importance in the improvement of the health of the people.
- Governments have a responsibility for the health of their peoples which can be fulfilled only by the provision of adequate health and social measures.

The COVID-19 pandemic has had a severe impact worldwide. Developed countries, had their highly efficient medical infrastructure greatly stressed and suffered from high death tolls. Similarly, Bangladesh, a poverty-stricken South Asian country, is losing its battle against the pandemic, but mainly because of its incompetent healthcare system. The casualties are escalating and public sufferings are becoming unimaginable. Different studies mainly identifies three responsible issues for the country's deteriorating health care:

- Poor governance and increased corruption,



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- Inadequate healthcare facilities, and
- Weak public health communication.

Related with health or health related subjects approximately 90 Laws (Act, Order, and Ordinance) are prevailing in Bangladesh. These 90 enactments fall under the seven broad subject-areas of Health legislation:

- Welfare Legislation,
- Public Health,
- Communicable Disease Control,
- Food and Drugs Control,
- Health Education and Health Practice,
- Environmental Health, and
- Protection of Children and Women.

Overcoming pathways Covid-19 in Bangladesh:

National Budget Speech 2022-2023 of Bangladesh titled “Return to the Path of Development Leaving the COVID-19 Behind”. In this National Budget Speech the Finance Minister said that Bangladesh has successfully overcome the adverse economic impact of the COVID-19. He mentioned another important factor behind the rapid economic recovery from the COVID pandemic is the successful implementation of vaccination programs. Commercial production of the COVID-19

Finance Minister said that the government will bring all the citizens of the country under the free CoVID-19 vaccine coverage as soon as possible whatever the cost may be. Despite various challenges in the global supply of vaccines, we have been able to procure the required vaccines from various alternative sources as per the directives two doses of vaccines to almost all citizens of the country above 12 years of age in just one year. We are currently in the process of providing booster doses.

Recommendations:

- Initially, following recommendations made for the further discussion:
- To reach those individuals and other unvaccinated groups, health workers will need to embark on special vaccination drives for specific communities.
- Elected representatives require more training in conducting mediation. They have to respect their formal mandate, national laws, HR principles.
- It is pivotal that they recognize women’s right to respect and dignity and a life free from violence.
- The police need greater orientation on handling domestic violence cases and protecting the rights of the complainants.
- The Citizens’ charter should be displayed publicly to inform people about the services available and their charges.

Conclusion:



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The state should recognize domestic violence as an emergency. It deserves primary services to be transparent, effective and uninterrupted, even during disasters and pandemics.

It is onerous that systemic issues be addressed and efforts to build inclusive and sustainable societies be pursued to ensure the provision of universal healthcare and justice for all. Without these reinforcements, we would not only compromise the vulnerable communities but also severely limit our preparedness and response to a future pandemic.