

## **CSOs call for entire plan to count donated excess COVID-19 vaccines as aid to be scrapped following failure of OECD DAC members to agree**

Last week, the OECD's Development Assistance Committee (DAC) failed to agree on a plan to report the donation of excess Covid-19 vaccine doses as aid. Yet, donors willing to report their excess vaccine donations will still be able to do so as in-kind donations, despite the lack of agreement.

We, Civil Society Organisations (CSOs) across the world, working with communities dramatically impacted by the Covid-19 pandemic and related crises, acknowledge this outcome after repeatedly opposing plans for wealthy countries to report their excess vaccines as part of Official Development Assistance (ODA). Following the non-agreement, the OECD DAC Secretariat will issue a guidance note on how these excess vaccine donations should be reported, using US\$ 6.72 as a reference price for each excess vaccine dose donated. However, donors could also decide to report them at another price. We remain very concerned that the lack of clarity going forward leaves too much room for donors to inappropriately count excessively priced vaccines as aid.

We are now calling on all donors to completely abandon all plans to include these types of vaccine donations as ODA. These intentions were unconscionable - these vaccine doses were never purchased in the interest of development partners and should not be counted as such. Indeed, excess purchases of doses in a context of limited global supply were directly responsible for denying access to these life-saving tools in developing countries. It is time for OECD DAC members to do the right thing and ensure that the credibility of ODA is not undermined any further. Tapping into existing ODA budgets to pay for doses never originally intended for developing countries risks, in some cases, diverting funds away from other vital humanitarian and development programmes.

According to available data from Canada, the UK and the EU and its Member States, using US\$ 6.72 as a reference price for each excess vaccine dose donated, in 2021 could lead to at least US\$ 1.7 billion being allocated to ODA for these donations for these countries alone.<sup>1</sup> And it remains unclear how vaccine doses purchased at less than the reference price, such as AstraZeneca for which purchasers paid a reported average of US\$ 4 per dose<sup>2</sup>, will be reported - with risks to ODA inflation.

Inequitable vaccine distribution across the world has been the result of some of the wealthiest countries failing to make Covid-19 vaccines a global public good - that is, free of charge to the public, fairly distributed and based on the needs of the most marginalised -, while also hoarding enough doses to vaccinate their own populations several times over. In addition, the majority of

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<sup>1</sup> To the best of our knowledge these are donated excess or surplus vaccines rather than vaccines purchased directly for the purpose of donating. The lack of transparency on what is being donated and how makes accurate calculations extremely difficult. The estimation has been done with data extracted from Airfinity (<https://www.airfinity.com/>) which shows that Canada donations amounted to 12.54 million, the European Union and its Member States to 285.26 million and the UK to 24.18 million. Making a total of 321.98 million donations.

<sup>2</sup> See pg. 5 here:

[https://www.oecd.org/officialdocuments/publicdisplaydocumentpdf/?cote=DCD/DAC/STAT\(2021\)28&docLanguage=En](https://www.oecd.org/officialdocuments/publicdisplaydocumentpdf/?cote=DCD/DAC/STAT(2021)28&docLanguage=En).

OECD DAC members continue to oppose the waiving of intellectual property rights and the sharing of vaccine technology with all qualified producers. These measures could have eased the supply crisis in developing countries and reduced the need for donated doses in the first place.

In the midst of this global pandemic, we need a global strategy to vaccinate 70 per cent of the world's population by mid-2022. Thus, the priority right now should be to support a multilateral approach by supporting initiatives such as COVAX - set up to ensure that Covid-19 vaccines reach the world's poorest people. COVAX is facing a funding crisis and [is struggling to accept new vaccine donations](#) because it doesn't have the funds to buy crucial items like syringes.

ODA has a vital role to play not only in providing Covid-19 vaccines, tests and treatments to citizens in developing countries, but also in supporting developing countries to shore up their health systems more generally. ODA should also support developing countries to strengthen their capacity to manufacture vaccines and strengthen their own research and development capacities, which will also require the waiving of intellectual property rights and the sharing of vaccine technology with all qualified producers. It is not only in the interest of the poorest but in the interest of the whole world that the largest number of people across the world have access to effective Covid-19 vaccines.

We will be closely monitoring any reporting of excess vaccine dose donations in 2021 as 'in kind aid' and will raise related concerns. Considering the outcome of these negotiations this would be unacceptable.

Going forward, the DAC should closely monitor broader concerns related to in-kind aid. This has often been criticised because of evidence of it being used as a way to transfer unwanted goods to developing countries, or to tie their aid to the benefit of companies based in donor countries.

We urge DAC members to take into account these issues and concerns as they ramp up their strategies to address the Covid-19 recovery going forward.

Sign on CSOs:

1. Action Aid International, Global
2. The African Alliance, Africa
3. Aid Watch Canada, Canada
4. AKU – Estonian Roundtable for Development Cooperation, Estonia
5. Ambrela – Platform for Development Organisations, Slovakia
6. Bond – The International Development Network, the United Kingdom
7. Commat - Commonwealth Medical Trust, the United Kingdom
8. CNCD-11.11.11 – Centre national de coopération au développement, Belgium
9. CONCORD - European Confederation of Relief and Development NGOs, Europe
10. Cooperation Canada, Canada
11. Coordinadora de Organizaciones para el Desarrollo, España
12. Cordaid, the Netherlands
13. CROSOL – Croatian platform for International Citizen Solidarity, Croatia
14. CSPPS – Civil Society Platform for Peacebuilding and Statebuilding, Global
15. DemNet Foundation for Development of Democratic Rights, Hungary

16. Eurodad – European Network on Debt and Development, Europe
17. FOND – Federatia Organizatiilor Neguvernamentale pentru Dezvoltare din Romania, Romania
18. Global Responsibility - Austrian Platform for Development and Humanitarian Aid, Austria
19. ITUC - International Trade Union Confederation, Global
20. ISER – Initiative for Social and Economic Rights, Uganda
21. I-Watch – Investment Watch Initiative, Cameroon
22. Lithuanian NGDO Platform, Lithuania
23. Oxfam International, Global
24. PAN - Pandemic Action Network, Global
25. The People’s Vaccine Alliance, Global
26. Reality of Aid, Global
27. Reality of Aid – Asia/Pacific, Asia and the Pacific
28. Save the Children, Global
29. SLOGA – Slovenian Global Action, Slovenia
30. SOS CEDIA – Criança e Desenvolvimento Integral De Angola, Angola
31. Vaccine Advocacy Resource Group, Global
32. Wemos, the Netherlands

