Asean last in, last out

nce again, during a healthcare webinar organised last Wednesday by CARI Asean Research and Advocacy on "Covid-19 vaccine rollout and the recovery of the Asean economy", it was clear that the regional organisation had been ineffective in getting member states to work together in facing down the epidemic.

Malaysia's Science, Technology and Innovation Minister Khairy Jamaluddin, who is in charge of the country's vaccine rollout, pulled no punches in his keynote presentation when he stated that there is a lack of solidarity and coordination in Asean.

He made this point when referring to difficulties faced by less-developed countries in accessing vaccines. Actually, rich countries constituting 14% of the world's population have bought up 53% of supply, leaving the rest scampering to lay their hands on available vaccines.

Even the World Health Organization's Covax arrangement, to which 192 countries have subscribed, including Asean member states, is struggling to achieve its promise of supplying vaccines to 20% of the population of its members. Shortage of funds is one obvious problem, but availability of supplies has become chronic as Indian exports of the AstraZeneca vaccine fell short because of domestic needs as well as the blood clot issue surrounding that vaccine.

Vaccine nationalism has become endemic, just like the virus. This matter of access to supplies was well anticipated by the private sector when in June last year, in a report where CARI was the knowledge partner, it had urged Asean to organise pooled purchases of vaccines to give its members greater bargaining strength and buying power. This was contained in its report, "A pathway towards recovery and hope for Asean" (Pathway 225), presented to Asean ministers and leaders in the middle of 2020.

There were a lot of nods in agreement among the officials, ministers and leaders. But afterwards, in a typical Asean way, they nodded off.

Instead of enhancing Asean decision-making at a time of crisis, even if on an ad hoc basis, as suggested in Pathway 225, a

new body had been created — the ACCWG-PHE (Asean Coordinating Council Working Group on Public Health Emergency) — in substitute of real action. This was still just a working group however much it was a being of the Asean Coordinating Council (ACC) — the body comprising foreign ministers that makes decisions to recommend steps or stands to be taken by the leaders at their twice-a-year summits, which is to take place only once this year.

That it has not worked is evidenced by the 28-page statement at the end of the Ase-





an Foreign Ministers' Meeting last September (see my article in Forum, Issue 1337), which made no mention of Pathway 225, let alone pooled purchase of vaccines by Asean. The leaders' summit last November did not touch on a joint effort to get vaccines for member states.

Just last month, at another of those convivial meetings with Asean economic ministers, one minister mentioned something about a pooled purchase of vaccines being discussed by the ACCWGPHE. Yet, Khairy knows nothing of this.

He said that in the past year that he had been working on Malaysia's rollout plan, there had been no Asean communication whatsoever of that sup-

posed discussion on pooled purchase.

In his own words, with which I entirely agree, Asean does not have the institutional mechanism to make decisions. That is why I had specifically put in pathways are for

mechanism to make decisions. That is why 1 had specifically put in Pathway 225 for there to be established that decision-making body — at least at a time of crisis.

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Khairy had suggested that the private sector take over in making things happen.As it is, Asean is behind the curve in acquiring Covid-19 vaccines. In terms of percentage of population who have received at least one dose as at April 5, Singapore leads with 17.95%,

followed distantly by Indonesia (3.16%), Malaysia (1.57%) and Cambodia (1.37%), with the others trailing even further behind. These figures were provided by Dr Khor Swee Kheng, a leading independent health policies specialist, who was a discussant at the webinar.

Khairy, on the other hand, highlighted the Israeli success story in vaccine rollout and recovery of the economy, which is the best record in the world. With nearly 90% of those over the age of 50 vaccinated or having recovered from Covid-19, Israel decided on March 7 – less than two months after the vaccination programme kick-started – that it was safe to reopen the economy. The Israeli central bank now forecasts economic growth to be at 6.3% in 2021 and 5.8% in 2022.

Of course, this is a great story with nice numbers to look at. However, I would caution that there was initially another vaccination rate success story — Chile. But now, it is in lockdown again, after opening and freeing up the economy too prematurely. There is a continued need for discipline in the new normal that, in reality, most people wish to disregard.

Indeed, Khor put across a number of cogent points, which should set Asean thinking, planning and acting. He still emphasised the need for Asean to embark on a pooled vaccine procurement — it is the case of better late than never — but Asean must also consider regional manufacturing. It is hoped that if this takes off, there

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ACCWGPHE must activate Asean's pooled purchase of vaccines

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will not be non-tariff measures suddenly surfacing — unimaginable, but never impossible with Asean.

Even with vaccines, Khor advised, there should be a variant strategy — maximum suppression and genomic surveillance. Again, this is something the ACCWGPHE should already be thinking about and fashioning cooperation for.

Finally, on restarting the Asean economy, Khor took the view that "vaccines are not a magic strategy". He believes antibody passports are better than vaccine passports, although most people would say both would be best.

So, having missed the pooled purchase bus in the first round, there is still plenty for the ACCWGPHE, now under Brunei's chairmanship, to do to justify its existence.

First, it has to activate Asean's pooled purchase of vaccines. Of course, it will not displace national efforts, but it will certainly augment them, especially for member states way behind in the queue.

Second, it should formulate the accept-

able standards of disclosures for a vaccine passport. If based on blockchain technology, the required data — to be determined — can be readily available.

Third, the required and accepted standards of antibody tests have to be agreed upon. The US Food and Drug Administration, for instance, has recently authorised a Covid-19 self-collected antibody test system based on a fingerstick dried blood sample that is self-collected. The experts will know better, but they do not need to spend hours and hours reinventing the wheel, or to not want to move because of national pride, or some private consideration.

On medical equipment, the ACCWGPHE chair should remind all member states that they are to be made available with no tariffs across borders, as provided by the Asean Medical Devices Directive 2015 — signed by all, but only adhered to by Indonesia, Malaysia and Singapore. This has to change.

Finally, dare I say, might it be possible to work on an Asean-wide contact tracing app? There are so many issues involved, apart from the technology, which relate to access to data and invasion of privacy. Maybe this is something that could be attractive in Asean, but I pray it would be for the purpose of reducing the transmission of disease alone as a measure of sustained epidemic suppression.

In sum, there is still plenty to do, even though not much was achieved last year. I just hope I will not be writing this again next year. At the least, Asean should strive for a harmonised approach to testing standards and vaccine passports, which is key to a swift economic recovery in the region.

Even if the harmonised approach cannot be reached from a centralised Asean position on "all" of the four matters mentioned above, the many bilateral bubbles that are being worked on, such as Malaysia-Singapore or Malaysia-China, for particular bilateral considerations should be replicated as far as possible across Asean. Without a multilateral framework, a series of bilateral arrangements would show Asean means something.

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