

**PRESIDENTIAL COMMUNICATIONS OPERATIONS OFFICE**  
**News and Information Bureau**

**CABINET REPORT – THE NEW NORMAL**  
**HOSTED BY PCOO SECRETARY MARTIN ANDANAR**  
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**SEC. ANDANAR:** Pilipinas, ngayong darating na Mayo a-otso magkakaroon ng isang concert na pangungunahan nina Jennifer Lopez, Foo Fighters, Eddie Vedder ng Pearl Jam at ng Filipina-American na si Gabriella Sarmiento Wilson na mas kilala sa kaniyang stage name na H.E.R.

Balak ng konsiyerto na tumawag-pansin at mag-fund raising para sa pagbabakuna ng health workers lalo iyong mga nasa mga lugar na hindi pa nagkakaroon ng pagbabakuna.

Sabi nga ni Hugh Evans ng Global Citizens na siyang organizer ng event, there are 27 million healthcare workers globally who don't have access to the vaccine. Dagdag pa niya, mga animnapung bansa ang 'di pa nakakatanggap ng bakuna kontra COVID.

Ulitin ko po: May mga bansa na 'di pa nakakatanggap ng bakuna!

Sa kabilang dako naman may ilang bansa, mga mayayaman at makapangyarihang bansa na ipinagmamalaki na ang kanilang malawakang pagbabakuna. Ang ugat nito ay ang tinatawag na 'vaccine nationalism'. Ang pinakaangkop na definition siguro ay iyong ginamit sa isang feature sa Al Jazeera media network: "Vaccine nationalism occurs when governments sign agreements with pharmaceutical manufacturers to supply their own populations with vaccines ahead of them becoming available for other countries."

Maging tayo sa Pilipinas nararamdaman ang epekto ng kakulangan ng supply ng bakuna kahit na handa tayong magbayad para sa mga ito at kahit na alam natin na sa iilang bansa ang ating mga kaibigan at mga kamag-anak doon ay nakatapos na sa kanilang pagpabakuna.

Vaccine nationalism at ang pandaigdigang pangangailangan na magpabakuna ang pag-uusapan natin ngayong gabi.

Ito po ang inyong Communications Secretary Martin Andanar, welcome to The Cabinet Report.

[VTR]

**SEC. ANDANAR:** Welcome back to The Cabinet Report. Malawak na ang global reporting tungkol sa usapin ng vaccine nationalism at ang pangangailangan nang pantay na pamamahagi ng mga bakuna sa mundo. Ngayong gabi aalamin natin ang issue na ito mula sa usapin ng international media at sa mga sariling live stream statements ng mga grupo tulad ng World Health Organization o WHO.

Balikan po natin ang September 5, 2020, noon pa lang nagbabala na si WHO Director General Tedros Adhanom Ghebreyesus tungkol sa vaccine nationalism:

**WHO DIRECTOR GENERAL GHEBREYESUS:** In the coming months, we all hope to have good news about a vaccine for COVID-19. But if and when we have an effective vaccine, we must also use it effectively. In time as production increases, we want all people everywhere to have access to vaccines. But initially when supply is limited, clarity must be given to vaccinating essential workers and those most at risk including older people and those with underlying conditions.

In other words, the first priority must be to vaccinate some people in all countries rather than all people in some countries. This is not just a moral imperative and a public health imperative; it's also an economic imperative.

In our inter-connective world, if people in low and middle income countries missed out on vaccines, the virus will continue to kill and the economic recovery globally will be delayed. Using vaccines as a global public good is in the national interest of each and every country. Vaccine nationalism will prolong the pandemic, not shorten it.

**SEC. ANDANAR:** Noong nagsimula na ang pagbabakuna sa ilang bansa noong Enero, muling nagsalita ang WHO laban sa vaccine nationalism. Ito po ang report ng Euro News Noong January 9:

“COVID vaccination programs are rolling out across Europe and the rest of the world. The differences are already emerging in terms of speed and availability. The poorest countries are being left behind once again.

At present, the People's Vaccine Alliance estimates that developing countries will only be able to vaccinate around 1 in 10 people. Rich nations including the EU block have more than enough doses to protect their entire populations 3 times over if all the vaccines ordered are approved for use. The World Health Organization is cautioning against the vaccination race.”

**WHO DIRECTOR GENERAL GHEBREYESUS:** At present, 42 countries are rolling out safe and effective COVID-19 vaccines – 36 of these are high income countries and 6 are middle income countries. So there is a clear problem that low and most middle income countries are not receiving the vaccine yet. Vaccine nationalism hurts us all and is self-defeating.

**SEC. ANDANAR:** January 23, 2021 ibinalita din ng NBC News ang pagkabahala tungkol sa vaccine nationalism:

**MICHAEL SANTOLI/CNBC SR. MARKETS COMMENTATOR:** While the US is on track to have enough vaccines for every American adult by May, other countries will have to wait a while longer. And there are question about whether that's the best strategy in the pandemic. Meg Tirrel joins us now with more. Good morning, Meg.

**MEG TIRREL/CNBC SR. HEALTH & SCIENCE REPORTER:** Good morning, Mike. Well, that is the issue that has been a worry since the beginning of the pandemic. It's initially known as vaccine nationalism, the idea that rich countries would purchase vaccines for their populations first and then that could actually prolong the pandemic around the world.

And what we are seeing is that of course as the United States is expected to have 500 million doses by the end of May, if you compare that with the number of doses expected by that time from the COVAX Facility, that's the World Health Organization and Gavi, and other organization facility to get vaccines to poorer and middle income countries, they expect to have 237 million doses of the AstraZeneca vaccine for a 142 countries by that time. So that's just one example of the sort of inequities we are seeing in vaccine access right now.

An analysis from Duke University suggests that rich countries representing about 16% of the world's population have bought more than half of all COVID-19 vaccine doses. You can see here what they're estimating that the upper middle and high income countries are just purchasing most of the vaccine doses.

We talked to the professor from South Africa, a geneticist; who suggested that the variances are also making this problem even more dire. Here's what he said:

**TULIO DE OLIVEIRA/MANDELA SCHOOL OF MEDICINE GENETICIST:** We also hope that this discovery of the variance is a wakeup call to the rest of the world that we should not leave any country behind. Yes, because otherwise we also have the chance that the country cannot control the pandemic and developing new variants that easily can be introduced in other countries.

**MEG TIRREL/CNBC SR. HEALTH & SCIENCE REPORTER:** So that even if we protect the population in the United States or in other countries, if other countries aren't protected and you can see here the Economist is forecasting many countries in Africa may not have widespread vaccine coverage until 2023 or even later, that these variants can circulate imposing more risks at places around the world. So it's not just being a nice idea to actually... in everybody's self interest to try to protect the world.

**SEC. ANDANAR:** Upang labanan ang kakulangan ng mga bakuna sa ibang bansa lalung-lalo na ng mga mas mahihirap ay binuo ang COVID-19 Vaccines Global Access Facility, isang global initiative upang mapabilis ang research and development, manufacturing at equitable distribution ng mga bakuna. Ito po ang balita ng Channel News Asia noong September 29 nang binuo ang COVAX Facility:

**CHANNEL NEWS ASIA:** More than 150 nations representing nearly two-thirds of the world's population have committed to receiving COVID-19 vaccines through COVAX. The initiatives setup by the World Health Organization aims to ensure 2 billion doses of safe, effective and affordable COVID-19 vaccines by 2021. It's co-chaired by Singapore and Switzerland and joining us now is Ambassador Nora Kronig Romero, she is Vice Director General and Ambassador for Global Health at the Swiss Federal Office of Public Health.

**AMBASSADOR ROMERO:** The real impact is that it really is for us the possibility to share efforts at the global level to participate to risk pooling, meaning that we do put our resource together to have a broader portfolio of vaccines and access to more candidates than what we can have access to hopefully will go only to bilateral agreements or other grouping agreements if that

is possible in some cases. With the possibility together have a better acceleration of research and development of a safe and effective vaccine and also participate to a fair distribution globally.

**SEC. ANDANAR:** Kamakailan lang ay nasimulan na nga ang paghatid ng COVAX sa mga developing countries. Ito ang balita ng Arirang News noong April 9:

**ARIRANG NEWS:** A massive global effort to distribute vaccines to developing nations is underway. The COVAX Facility which ensures vaccines are shared fairly among all nations has delivered nearly 38.4 million doses of COVID-19 vaccines to 102 countries and economies across 6 continents. It's only been 6 weeks since they begun to rollout supplies, Ghana being the first recipient in February.

The program offers a lifeline to low income countries in particular. Even if their governments have not managed to secure vaccines from the manufacturers, COVAX allows them to begin inoculating health workers and others at high risk. Over a 100 countries have been reached so far including 61 benefitting from a mechanism essentially financed by donors. Though there happens on delays in deliveries, COVAX still expects to deliver at least 2 billion doses of vaccines this year and to diversify the offering beyond the AstraZeneca and Pfizer shots is currently supplying.

**SEC. ANDANAR:** Oo, nagsimula na nga ang mga delivery ng COVAX Facility. Maging tayo nakatanggap na rin, kaya lang malayo pa rin ang agwat ng mga bansa tulad ng Pilipinas sa mga mayayamang bansa pagdating sa mga bakunang na-deliver na sa kanila. Ito ang balita ng CNBC nitong April 7:

**CNBC NEWS:** The reality is that the shots are not being rolled out everywhere at the same phase.

**THOMAS BOLLYKY/COUNCIL ON FOREIGN RELATIONS:** In low income nations, the vaccine rollout has been slow. Among the doses we've distributed so far, 75% have been used in just 10 nations. There are few low and middle income countries among those, most notably India where by and large we're talking about wealthy nations. On the other side of the spectrum, there are 80 countries in the world representing 1.5 billion people who have yet to administer a single dose. So the early vaccine rollout has been characterized by this inequity.

**CNBC NEWS:** When looking at the vaccine rollout, so far it is clear that many countries in Africa, South America and Asia have vaccinated only a tiny fraction of their populations. In comparison, Israel, the UK and the United States are a long way ahead in this race. Why is it so hard to see vaccinations picking up in these countries?

**THOMAS BOLLYKY/COUNCIL ON FOREIGN RELATIONS:** So it's been primarily an issue of supply. Right now we have too little of it, doses are scarce and most of that supply has been purchased in advance by a handful nations which were now using doses.

**CNBC NEWS:** The US and the UK which have had high vaccination rates in the early months of 2021 were quick to sign deals with pharmaceutical firms even before they knew whether the

scientific work was going to be successful. These two countries were the first to reach vaccine supply agreements back in May 2020. Japan followed suit in July, while most of Europe, Canada and the few other countries struck their first deals in August. These advance agreements secured their place in line to be among the first recipients of COVID-19 vaccines.

As a result, high income countries had the rights to 4.6 billion doses of COVID-19 vaccines by the first quarter of 2021. On the other hand, lower middle income countries have secured 614 million doses while low income countries are due to receive just 617 million shots.

**SEC. ANDANAR:** Maging tayo ay nakatanggap na ng mga bakuna galing sa COVAX Facility at agad natin itong binahagi sa buong kapuluan. Sa aking pag-iikot para sa ating vaccine information drive, nakikita ko na dumarating na kahit sa ating mga malalayong probinsya ang ating mga bakuna. Tayong mga nahihirapang bansa marunong maghati ng biyayang bakuna, ika nga ng mga millennial “sana all!”

Sa ating pagbabalik, pag-usapan natin ang mga panawagan para iwasan ang vaccine nationalism at alamin natin ang update tungkol sa vaccine distribution dito sa Pilipinas. Keep it here, this is the Cabinet Report.

[AD]

**SEC. ANDANAR:** Welcome back to the Cabinet Report. Malaki at malubha ang epekto ng vaccine nationalism at dahil dito umuugong na ang pananaw at panawagan ng ilang world leader hinggil sa patas na pamamahagi ng mga bakuna. Magsimula tayo sa interview ng Al Jazeera kay WHO Director General Tedros Adhanom Ghebreyesus noong January 3:

**AL JAZEERA:** The WHO says, while wealthy nations fight over supplies, developing countries will continue to miss out. Its warning that so-called vaccine nationalism will prolong the pandemic.

**WHO DIRECTOR GENERAL GHEBREYESUS:** If we hoard vaccines and if we're not sharing, there will be three major problems: One I said it, there will be a catastrophe, moral failure; and two, it keeps the pandemic burning; and three, very slow global economic recovery. So it's morally wrong in terms of arresting the pandemic, it won't help and it won't also bring livelihoods back. Is that what we want?

**SEC. ANDANAR:** Nagsalita din si United Nations Secretary General Antonio Guterres tungkol dito sa panayam niya sa CBC News Radio Canada:

**CBC NEWS RADIO CANADA:** You have said that vaccination in the world has been “wildly uneven and unfair.” For instance, more than a 100 countries have yet to receive a single dose. How concerned are you about vaccine nationalism?

**UN SECRETARY GENERAL GUTERRES:** Now I'm very concerned with this very unfair distribution of vaccines in the world. I mean I'm privileged I'm in New York, I was already vaccinated according to the rules of the country for residents that they generously also extended

to UN Staff. But indeed most of our staff around the world is in countries where vaccination has not yet started. And it's not only unfair, it's not only a matter of justice, it's also a matter of in light of its self-interest enabling the developed world. Because we are seeing all these virus mutates. And as much as it spreads, as much as it mutates.

So even if the global nurse, when they will be fully vaccinated, if the global source is not and if the virus is going to spread in the global source, at a certain moment the mutations will not only leads to what we are already witnessing in relation to being more easily to transmit, being eventually more lethal but also putting into question the efficiency of the vaccines that exists. Which means that all of a sudden, a global nurse fully vaccinated will again be vulnerable to the new variants of the virus.

So it's in the interest of everybody to make sure that as soon as possible and in a fair way, everybody gets vaccinated everywhere and that vaccines are considered to be a truly global public good.

**CBC NEWS RADIO CANADA:** So one of the ways to get that vaccine equity is through COVAX which Canada has contributed to. However Canada has also taken vaccines from COVAX, which it's allowed to do, but I wonder whether you think ethically or morally that is what nations should be doing with COVAX.

**UN SECRETARY GENERAL GUTERRES:** First of all, we are having difficulties with COVAX in relation to the supply of vaccines because there has been a lot of hoarding the vaccines. There are limitations to export and situations of the source, so we are in a very difficult situation with COVAX itself that is also not yet fully funded. But here, I have a principle of equality. I mean, all members of the COVAX have the right to have their own quota of vaccines. The problem is not that some developed countries get those vaccines, the problem is to make sure that COVAX is fully funded and that the quotas of the developing countries are fully respected.

So I'm not worried by the fact that that Canada also has the right to have some COVAX vaccines. What I'm worried is that COVAX is not big enough, COVAX is not supported enough and that too, we are unfortunately having a very difficult time to make sure that the vaccines get everywhere as soon as possible.

**SEC. ANDANAR:** Maging ang Santo Papa sa kaniyang mensahe sa mundo noong Easter Sunday nanawagan sa pagpapabilis ng pamamahagi ng mga bakuna lalo na sa mga mas mahihirap na bansa. Ito po ang coverage ng NBC News noong April 5:

**POPE FRANCIS:** Vaccines are an essential tool in this fight. I urge the entire international community in a spirit of global responsibility to commit to overcoming delays in the distribution of vaccines and to facilitate their distribution especially in the poorest countries.

**SEC. ANDANAR:** Dito sa Pilipinas, ito ang ating update tungkol sa pagbabakuna:

[VTR]

**SEC. ANDANAR:** Magbabalik ang Cabinet Report matapos ang ilang paalala.

[AD]

**SEC. ANDANAR:** Nakatutok pa rin kayo sa Cabinet Report. Pinupuna na International media ang vaccine nationalism at ang implications nito sa tinatawag nilang geopolitics, ito ang mga pananaw ni [Michael] Smerconish sa CNN.

**SMERCONISH/CNN:** More than 48 million Americans now fully vaccinated. But in other countries around the globe, they are not so fortunate. What you are seeing here is in part a result of drug companies that developed and won authorization for vaccines agreeing to sell most of the first doses to the US-European countries and a few other wealthy nations. Or as the WHO put in the Washington Post the entire population and the global economy are in crisis because of that approach and vaccines nationalism.

A New York Times headline echoed the sentiment saying rich countries signed away a chance to vaccinate the world. In it they write this: ‘Residents of wealthy and middle income countries have received about 90% of the nearly 400 million vaccines delivered so far under current projections. Many of the rest, will have to wait years. And while it may sound fair, to make sure that own needs are covered before helping others, it may actually pose a threat to ourselves.’

An example, in Britain where the vaccine rollout have been strong, health officials have tracked a virus variant that emerged in South Africa where vaccines coverage is weak, that variant may be able to lessen the effectiveness of vaccines, meaning even vaccinated people could theoretically get sick.

Joining me now to discuss is Thomas Bollyky, Director of Global Health Program at the Council on Foreign Relations. He warned of the impact of the vaccine nationalism last summer, we discussed the issue right here on this program. Why should we be sharing more of our doses before all Americans themselves are fully vaccinated?

**THOMAS BOLLYKY:** It is understandable that US leaders and the leaders of the other wealthy nations are using many vaccines doses. We would want to vaccinate our own population first. But as you rightly noted a moment ago, it’s prolonging the pandemic for the world, potentially giving rise to new dangerous variants. This virus, it’s also disaster diplomatically, because while the US and the other wealthy democracies are largely providing cash, countries like China and Russia are providing doses to the countries that need.

**SMERCONISH/CNN:** So I’m hearing, I think a threefold argument from you, one is the moral that we should not let people suffer while we have largesse; the second is that it could come back to haunt us because there could be a variant that we are not prepared for; and the third, I think is, that China and Russia are filling the vacuum where the United States is not doing all it can do, is that it?

**THOMAS BOLLYKY:** That’s it! So certainly it’s a moral issue, that right now have—we’ve distributed globally 530 million vaccine doses, just ten countries are responsible for three out of

four of every dose administered. There are still nearly 70 nations with around 900 million people in them that have yet to administer a single dose, when were close to 5 months and to this vaccine rollout.

So that is the moral issue, the health issue is the one you outlined, that keeps this pandemic going and it may give rise to new dangerous variants of this disease. And last it's frankly diplomatically the US is having its launching by other countries that are willing to provide very small amounts of doses but still appreciated in countries that are desperate for more supplies.

**SEC. ANDANAR:** Maging ang kapitbahay natin sa Asya na Indonesia apektado na ang kanilang planong pagbabakuna. Si President Widodo ay nagsalita laban sa vaccine nationalism din. Ito ang interview ng Bloomberg sa kaniya noong April 8.

**BLOOMBERG:** 70 million people to be vaccinated by July you say and the target is a 180 million by the end of the year. Will you get there, will you meet the target given that you are short of vaccines at this point in time?

**PRES. WIDODO:** It depends on vaccine supply, if vaccine supply is in line with the schedule that we have made, the vaccination will be completed in the end of the year. But due to the supply we have only vaccinated 449,000 people at the end of March, still half. But if the vaccine arrives starting with 70 million doses per month, we will be able to inoculate one million doses per day.

**BLOOMBERG:** But where will you get your vaccines from? Because right now even India is holding on to its supply of AstraZeneca.

**PRES. WIDODO:** That's where the problem lies. There are several delayed commitment, but still committed at a great volumes. That is why I am asking world leaders to prevent what is called vaccine nationalism. We must give vaccines excess to all countries, poor countries, developing countries, developed countries must be given equal treatment, if not the pandemic will not end.

**SEC. ANDANAR:** Ang ating Pangulo mas prangkang ibinahagi ang katotohanan tungkol sa isyung ito noong Lunes.

**PRES. DUTERTE:** Pag-umpisa pa lang natin, sinabi ko na sa inyo agawan ito. Tayo mahirap lang, so tayo talaga ang last nito. Ibig sabihin, those who have the money will get it first and those countries who manufactured the vaccine first will have the first supply for their own. Wala tayong magawa diyan!

**SEC. ANDANAR:** Pilipinas, madalas sa puntong ito ng programa nagbibigay ako ng aking pangwakas na pananaw tungkol sa paksang pinag-uusapan natin. Kaya lang sa pagkakataong ito maganda ng pakinggan natin muli si WHO Director General Tedros Adhanom Ghebreyesus sa kaniyang panayam sa World Bank Group noong April 9.



**Q:** As the head of the organization at the forefront of the pandemic, you have stressed the global solidarity that is needed to fight it. Could you share with us what you mean by that?

**WHO DIR. GEN. GEBREYESUS:** As you may remember when I called for global solidarity, I used to also say and I still say national unity. So national unity and global solidarity are important.

And I will start with national unity. As you know, if this pandemic is politicized and if there are—especially politicization at the country level, then the crack between the different political positions could be exploited by the virus and we have seen that in many countries.

So, the first thing countries should avoid is politicization of this pandemic at the country level. Because if it's politicized, then it will exploit, the virus will exploit. And at the same time, if there is national unity that's the basis for global solidarity, because there is already a consensus at the country level that can also bring global solidarity at the global level.

So coming to the global solidarity, global solidarity means, maybe in simple terms, it could start from sharing information. Sharing, you know, information about the outbreak so others can understand, it could be sharing the pathogen, so others can use the pathogen to produce you know technology, then when technologies produced it could be sharing technology like vaccines for instance, sharing vaccines is solidarity.

And not only that, solidarity means working together also. Collaborating, coordinating the response together.

But to be honest since the pandemic started, the solidarity and national unity have been really not as good as one would desire.

So even going for word, I think we need to still advocate for global solidarity because the virus will not be defeated in a divided world. We need to share everything that we have in order to defeat this virus. And the sharing or supporting each other is not charity for me; it is actually the best interest of each and every nation.

As you know, the virus is changing quickly, we have mutation going on and we have several variants actually coming from different countries. If the change in mutation of the virus is significant enough, if the behavioral changes of the virus is significant enough, even the vaccines we have now, may not work.

So if you take one aspect of solidarity, sharing technology or vaccines, unless we increase the coverage of vaccines quickly and defeat the pandemic, the virus, the virus will get a space to continue to spread, circulate and then mutate, then you have more variants and even those countries who have high coverage of vaccines will not be secured, because the new variant that may not be stopped by the vaccines we have will invade the countries who may have even a hundred percent in few months with the existing vaccines. So, it's in the best interest of all of us.

**SEC. ANDANAR:** Pilipinas, uulitin ko na lang ang panawagan ni WHO Director General Tedros Adhanom Ghebreyesus: ‘We need national unity and global solidarity. We cannot politicize the pandemic at the national level, we need national unity. And we cannot afford vaccine nationalism instead we need global solidarity.’

Para sa Cabinet Report ito po si Communications Secretary Martin Andanar. Mabuhay ang Pilipino. Mabuhay ang ating mundo. Mabuhay ang sangkatauhan.

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