

SPEED OVER OPTICS: THE HINDU EDITORIAL ON WHY CENTRE SHOULD PROCURE AND ALLOT COVID-19 VACCINES TO STATES

Relevant for: Developmental Issues | Topic: Health & Sanitation and related issues

The Centre's 'liberalised' policy of [allowing vaccine companies to strike deals with States](#) and private hospitals has borne limited fruit. While the age group of 18-44 years accounts for the bulk of vaccines being administered, attempts by States to negotiate deals with international vaccine companies have come to naught. In spite of opening vaccination for all adults, there were fewer doses administered in May — around six crore — as opposed to 7.7 crore doses administered in April. The Health Ministry has said that close to 8 crore doses were available in May (counting wastage and stocks with States) and that 12 crore will be available in June for the Centre, States and private hospitals. Over 22 crore doses have been administered so far. There is large variability within and among States regarding vaccination. It is in this context that State Chief Ministers, cutting across party divisions, are now [demanding that the Centre be the sole buyer of vaccines](#). The Supreme Court too has [expressed its dissatisfaction over the existing system](#) that puts States in competition with each other and the Centre, almost like another competitor, for vaccine supplies. The Centre has tried to project that it was the clamour from States that forced it to abstain from being the sole purchaser of vaccines, but it was the Centre's miscalculation that there would not be frantic public demand this calendar year and that the output from the Serum Institute of India and Bharat Biotech would be sufficient for India.

International arrangements such as COVAX were premised on India being a large supplier to Africa and several countries around the world with no vaccine development facilities. Now that the Government has prevented the Serum Institute of India from honouring its supply commitments, it is unclear if international suppliers would trust India's demand for large supply. The unpredictability in policy also weakens India's ambit of negotiations now that it seems desperate to increase short-term vaccine supply. Moreover, given that vaccines are the most sought-after goods, it is unlikely India would be prioritised so late in the day. There is optimism of increased and significant supply from Bharat Biotech and SII by August. At this stage, it appears that the Centre has few options other than waiting for its domestic suppliers to hike production. Increased supply from abroad is unlikely in the near future, even if resources for procurement are not a constraint. It must however heed the States' core demand that they be given a greater say in deciding how best to distribute the vaccine. The Centre can be a monitor of and an adviser to the process; and if it becomes the sole buyer, it can spell out a transparent distribution policy. But it ought to prioritise speedy administration over optics.

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