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RESFORUM



EU vaccine distribution strategy
- what it means for Global Mobility

Introduction

Global mobility is no stranger to change. But even for this industry, the pace became relentless as soon as the world locked down against COVID-19. With vaccine roll out intensifying, the hard-thinking shifts to the safe reopening of borders and the resumption of cross-border working. The challenge of mass-testing and the issue of equitable vaccine distribution line the road ahead.

As part of their broader [common path](#), the EU's Digital Green Certificate aims to reopen free movement in the EU. Formed of three separate certificates – vaccine, test and recovery – the lucky owner should see travel restrictions fall away across the EU. The objective is “a sustainable and safe re-opening of our societies and economies.” The intention is to have a system developed and implemented by Member States before the summer.

In partnership with the GLOMO project, the RES Forum put some questions to Monika Mosshammer, Deputy Head of her unit in the EU's citizenship rights and free movement directorate, about vaccine distribution strategy and how the Digital Green Certificate will help open borders.

We've included the unabridged questions and answers below.



A note on the GLOMO project

GLOMO is an international [research project](#), looking at global labour mobility. Funded by the EU, they're investigating the pandemic's effect on mobility, while understanding what impact the EU's common path will have on cross-border working.

The 14-strong team of early-stage researchers (ESRs) are reviewing corporate practice around mobility, while exploring the impact of vaccine distribution equity on a sector that's heavily affected by the pandemic.

The [RES Forum](#), a key partner of the GLOMO project, is pivotal in connecting the ESRs to senior corporate leaders, as well as calling on their worldwide expert network and their own (not insubstantial) experience, to help advance the project.

Alongside their work on the GLOMO project, The RES Forum produced a [series](#) of research papers that examined the pandemic's impact on global mobility. This research compliments a suite of tools that help corporate mobility keep pace with changes to the industry and help the industry keep pace with the needs of corporate mobility.

the interview

Which role has the European Commission played in developing and securing vaccines for Europe?

The European Commission has secured up to 2.6 billion doses of COVID-19 vaccines so far and negotiations are underway for additional doses.

The Commission took the decision to support various vaccines based on a sound scientific assessment, the technology used, and capacity to supply the whole of the EU.

A broad portfolio of vaccines based on different technological approaches maximises the chances of safe and effective vaccines being developed and deployed. With this in mind, on 17 June 2020, the European Commission presented the EU Vaccines Strategy to accelerate the development, manufacturing and deployment of vaccines against COVID-19.

The Commission has so far given 4 conditional marketing authorisations for the vaccines developed by BioNTech and Pfizer, Moderna, AstraZeneca and Janssen Pharmaceutica NV following EMA positive assessment of their safety and efficacy. Other vaccines are at different stages of assessment by the European Medicines Agency (EMA).

Vaccine deliveries to EU countries have increased steadily since December 2020 and vaccination is gathering pace. The Commission is also working with industry to step up vaccine manufacturing capacity.

At the same time it has started work to tackle new variants, aiming to rapidly develop and produce effective vaccines against these variants on a large scale. The HERA Incubator will help respond to this threat bringing together science, industry and public authorities, to speed up work and leverage all available resources to enable Europe to respond to this threat.

The EU is committed to ensuring that safe vaccines reach all corners of the world. The Commission and EU countries have pledged over €2.2 billion to COVAX, the global initiative aimed at ensuring equitable access to COVID-19 vaccines, and are supporting vaccination campaigns in partner countries.

What is the Commission doing to combat misinformation about vaccines?

Vaccine scepticism is not new. But, the COVID-19 pandemic has revealed the complexities of vaccine hesitancy and links to the spread of false or misleading information, giving us the chance to discuss genuine concerns and get the facts out.

The Commission has a dedicated webpage on Safe COVID-19 vaccines for Europeans and works closely with EMA, the European Centre for Disease Prevention and Control, EU Member States, fact-checking organisations, social media platforms and others to make sure everyone has access to accurate information about vaccination and other vital public health issues. Recently the portal European Vaccination Information Portal (vaccination-info.eu) was launched.

Misinformation and disinformation around a possible COVID-19 vaccine has not slowed down and will likely make the eventual deployment and uptake of vaccines more difficult. Coordination and collaboration with actors at both EU and global levels, together with the World Health Organization and online platforms, are essential for monitoring and tackling COVID-19 disinformation and for effectively responding to misinformation challenges.

Clear and timely information and a proactive approach on false and misleading information is key.

We know that in spite of the high quality, safety and effectiveness standards, the very speed at which COVID-19 vaccines are being developed is likely to make citizens raising concerns about the safety of vaccines developed in such a short timeframe. This is why it is to provide citizens with objective, accurate, factual and targeted information about the importance of COVID-19 vaccines. It must be explained that such vaccines are likely to be our only real exit from the ongoing pandemic and that, due to the strict EU market authorisation procedure, no corners will be cut in terms of safety or effectiveness. This is what the Member States, the European Medicines agency, the European Centre for Disease Prevention and Control and the European Commission are trying to do.

What are primary aims of the Green Certificate and what are the main challenges of its implementation?

The Digital Green Certificate system covers three different types of COVID-19 certificates: a vaccination certificate, a test certificate, and a certificate of recovery. Their aim is to facilitate free movement. If a Member State waives restrictions for persons holding certificates, they shall also waive restrictions for holders of certificates issued by another Member State in the digital format.

The main challenge is to have the system developed and implemented by Member States in time before the summer.

The different member states are currently vaccinating at different speeds. Will these intra-EU differences have an impact on the success of the proposed Green Certificate?

The different vaccination speed does not have an impact on the success of the Digital Green Certificate, as being vaccinated will not be a pre-condition to travel. All EU citizens have a fundamental right to free movement in the EU and this applies regardless of whether they are vaccinated or not. The Digital Green Certificate will make it easier to exercise that right, also through testing and recovery certificates. The aim is to lift restrictions on free movement imposed by Member States for public health reasons.

Will individuals who do not get vaccinated have access to mobility on the same terms as those who are immunized?

The Digital Green Certificate does not harmonise the waiving of restrictions. A Member state may waive restrictions for vaccinated persons but may ask tests from those not yet being vaccinated.

Will the Green Certificate be for any kind of travel – including tourism, labour, etc.?

As mentioned above, it will depend on the Member State to lift restrictions on free movement of persons.

Is the European Commission envisioning a strategy to safeguard this data and reassure individuals that their privacy is protected?

The Digital Green Certificate system will not require the setting up and maintenance of a database of health certificates at EU level.

The certificates will only include a limited set of information that is necessary. This cannot be retained by visited countries. For verification purposes, only the validity and authenticity of the certificate is checked, by verifying who issued and signed it. All health data remains with the Member State that issued a Digital Green Certificate.

What is your opinion about private organisations vaccinating their employees?

We don't comment on the MS organisation of their national vaccination plans.

The responsibility for health policy lies with Member States, and national strategies may differ due to several contributing factors such as different healthcare system capacities, population structure or epidemiological situation. What is important is to ensure the coordination of national responses to the pandemic. This includes the distribution and deployment of COVID-19 vaccines once authorised.

Once vaccines authorised and once the deliveries ongoing, Member States should enable an as efficient and targeted rollout as possible. It is important to ensure that vaccination services are able to deliver and distribute vaccines in an ordered manner, within a given timeframe and in line with a rapidly changing epidemiological situation.

The European Commission has also proposed a Green Certificate arrangement for third country nationals legally staying or residing in the EU. How will the Green Certificate work for this group of residents? Will the arrangement be similar to that of EU citizens?

Yes, for those receiving the certificates from a Member State they can make use of those certificates like any EU citizen. For certificates issued by a third country, there are two possibilities:

The non-EU national could request a Digital Green Certificate from a Member State he/she is travelling to or residing in, by providing all necessary information, including reliable proof of vaccination. The Member State would then have to assess if reliable proof has been provided and decide whether to issue a Digital Green Certificate.

In the medium-term, where the Commission is satisfied that a third country issues certificates in compliance with international standards and systems which are interoperable with the EU system, the Commission can issue an "adequacy decision" through an implementing act based on the regulation proposed today. Then, such third country certificates would be accepted under the same conditions as Digital Green Certificates.

In both cases, the rules for acceptance of proof of vaccination would be the same as for EU nationals: vaccines that have received EU-wide marketing authorisation have to be accepted, but Member States can decide to accept other vaccines in addition.

Will it be possible to get a Green Certificate if you have been vaccinated with a vaccine not recognized by the European Medical Agency?

Yes, but a Member State is not obliged to lift restrictions for holders of vaccination certificates where the vaccine has not been recognized by EMA.

Will there be any recommendation from the European Commission to member states on how to practically implement the Green Certificate at the borders?

The Commission is of the opinion that the introduction of the Green Certificate is itself not a reason for the temporary reintroduction of border controls at internal borders. It is therefore not the intention to have the Green Certificate checked by border guards specifically. If there should be a need in some Member States to have the Certificate checked by border guards, they will be able to check it under the same conditions as any other verifier under the DigitalTrust Framework.

Currently, member states differentiate between different reasons for travel when allowing or denying entry. Will member states be able to continue this differentiation after the implementation of the Green Certificate?

If restrictions are waived for holders of specific certificates, it is assumed that the person does not represent any risk to public health (or that the risk is very limited). The reason for travels should then not be decisive any longer.

Is there any aim to abolish intra-Schengen border control completely in the foreseeable future, under the Green Certificate?

The conditions for the reintroductions of checks at internal borders are regulated under the Schengen Borders Code and are not linked to the Green Certificate.