

London Work, Travel, Convene Coalition

Vaccines Update

June 2021

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"Regardless of the variant first identified in India, we would have seen a resurgence of cases as society opens up. Now we will see a doubling (2.5) of this. The advice is to never be first to the party when it comes to COVID-19. If the government announces that people can return to the office, consider your ability as an organisation to do this gradually. Don't be a maverick in the COVID-19 world."

Dr Rodrigo Rodriguez-Fernandez, Global Medical Director, International SOS

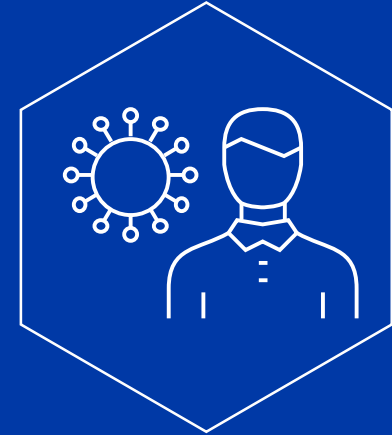


Based on epidemiological data and studies of environmental transmission factors, surface transmission is not the main route by which COVID-19 spreads.



87%

87% of the vaccine doses have been given in wealthier countries.



There have been breakthrough cases of fully vaccinated people catching COVID-19

Introduction: the latest developments

The vaccine rollout in the UK has been heralded as a triumph, and rightly so. By mid-May 2021, over a third of the nation was fully vaccinated. Sadly, this does not ring true globally, and there is a wide disparity across continents, with 87% of the vaccine doses administered in wealthier countries. This disproportion will have implications as the pandemic evolves into an endemic, causing localised pockets of infection. In 4-5 years, COVID-19 will become like yellow fever and malaria, and this could impact travel in the future.

The discovery that surface transmission does not pose as great a risk as previously thought has massive implications for ongoing prevention measures. As the virus is primarily airborne, energies will be channelled away from deep cleaning and handwashing and towards air ventilation.

Many had hoped that once a vaccination ‘tipping point’ was passed in the UK, the government would relax restrictions around masks and social distancing. The ever-growing number of breakthrough cases of fully vaccinated people catching COVID-19 sheds doubt on this much longed-for possibility. The immune escape response of COVID-19 variants is also the subject of an ongoing investigation. Another barrier is that we still don’t know how long immunity will last for the vaccinated. Promisingly, participants in Phase 3 Moderna and Astra Zeneca trials are still showing a high number of antibodies. Nevertheless, vaccine boosters may still be necessary further down the line.

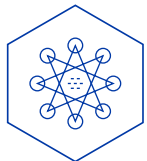


Variants: the firmest handshake



Over the last few months, an increasing number of COVID-19 variants have started to dominate infection rates globally, primarily because each one has a transmission advantage.

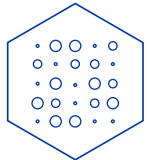
According to Dr Rodrigo Rodriguez-Fernandez, Global Medical Director, International SOS, the three variables to monitor with new variants are:



Their ability to infect



How deadly they are/mortality rate



Their ability to escape vaccines/antibodies.

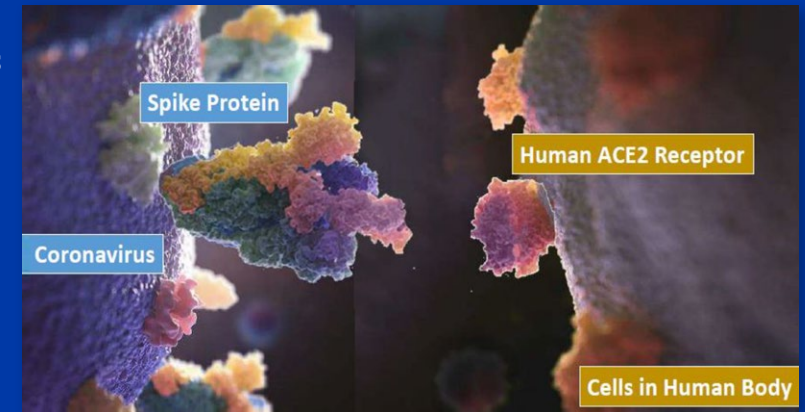
“We don't know the full extent yet, but the variants' ability to escape vaccines will be very important. Only time will tell,”

Dr Rodrigo Rodriguez-Fernandez.

How do variants gain the upper hand?

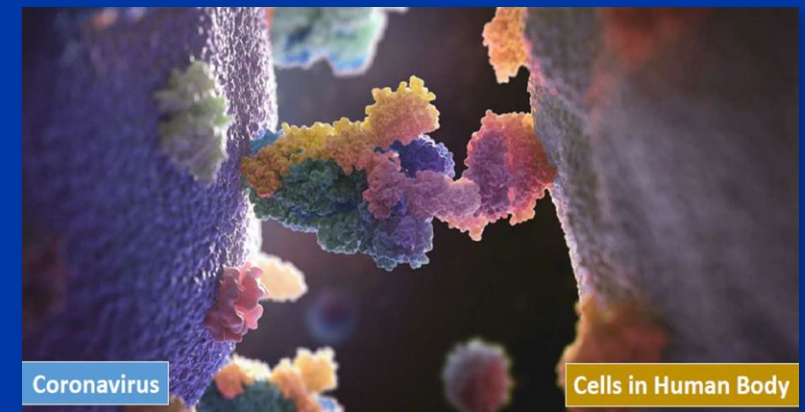
COVID-19 cells have spike proteins, which scatter along the surface of the virus, making it look like it is wearing a crown, hence the name coronavirus. To contract COVID-19, an ACE2 receptor in a human cell has to bind with the spike protein. In a typical coronavirus, the tip of the spike protein is like an ill-fitting puzzle piece. It can latch onto human cells, but the fit is so loose that the virus often falls away and fails to infect the cell. Infection only happens when a mutation occurs, which provides the spike protein with a stronger latch. If we think of this latch like a handshake, the variants then offer an even tighter, firmer grip.

1. The pieces involved – Coronavirus meets the human cell.



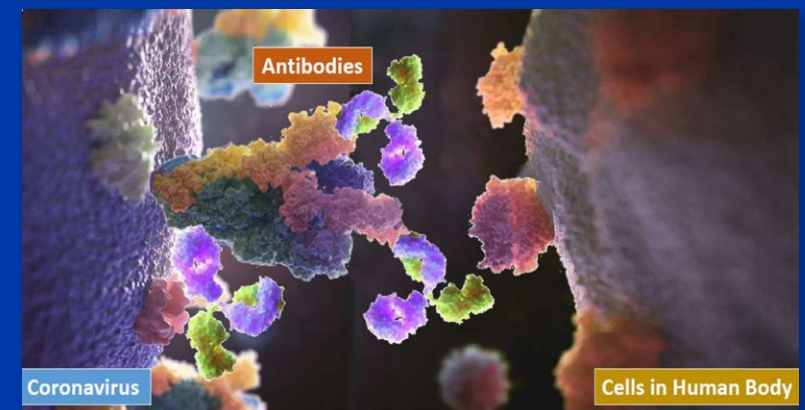
2. Coronavirus and human cell interact

The coronavirus spike protein attaches itself to the ACE2 receptor to start the infection.

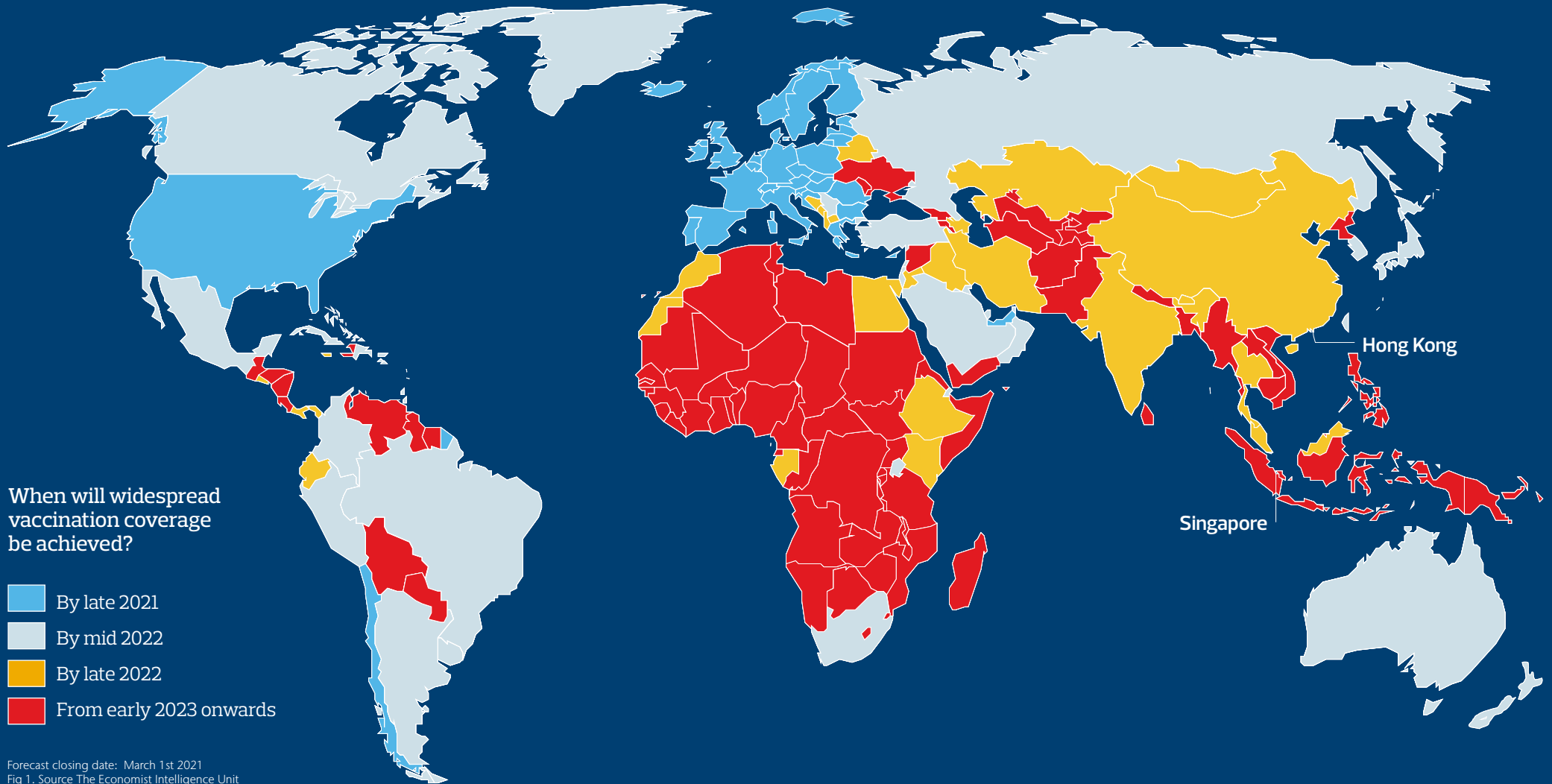


3. Coronavirus and human cell interact

Vaccine-induced antibodies can block the spike protein from attaching to human cells.



Rich countries will get access to vaccines earlier than others



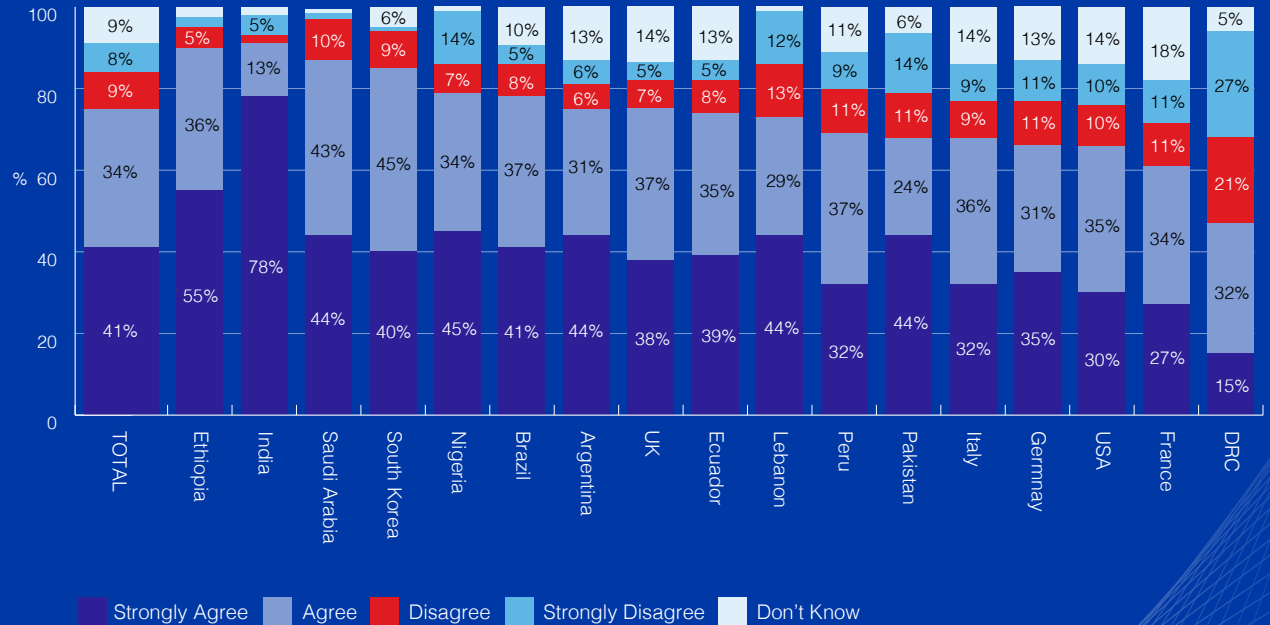
In 4–5 years, the world will likely be in an endemic situation.

Potential bottlenecks:

1. **The ability to purchase vaccines (some vaccine suppliers are demanding national UNESCO sites as collateral, upfront payment, and minimum purchase orders of USD 8 million)**
2. **Delivery issues – Canada, for example, has struggled to receive all the vaccines it ordered**
3. **Distribution/logistic issues – countries are experiencing problems at a local level – especially in regions where the population is sparse**
4. **Vaccination hesitancy.**

Vaccine hesitancy: the spread of toxic misinformation

“If a new Coronavirus (COVID-19) vaccine became publicly available, I would take it.” Agree/Disagree



Q11. Imagine a new vaccine for Coronavirus (COVID-19) was fast tracked and approved by medical professionals and regulators. How strongly do you agree or disagree with the following statements – if a new Coronavirus (COVID-19) vaccine became publicly available I would take it. Base - all respondents (Total=19,243; All countries n=1000 1,577 except DR Congo =500; USA 2,500. All fieldwork conducted between 10 June and 22 July 2020, exact dates vary by country). Values <3% not labelled.

Fig 2. Source: SOS International

The most concerning platforms for false and misleading information

Vaccine hesitancy is much higher in the early stages of a particular vaccine rollout. As a vaccine becomes more established, hesitancy should reduce. Nevertheless, vaccine refusal is increasingly becoming an issue, as hospitalisation data relating to the Deltaⁱ (B.1.617.2 variant) in the UK has shownⁱⁱ. The London School of Hygiene and Tropical Medicine and the World Economic Forum, led by Heidi Larson, are working with Facebook, Twitter, and Google to tackle the publishing and spreading of vaccine misinformation on social media platforms.

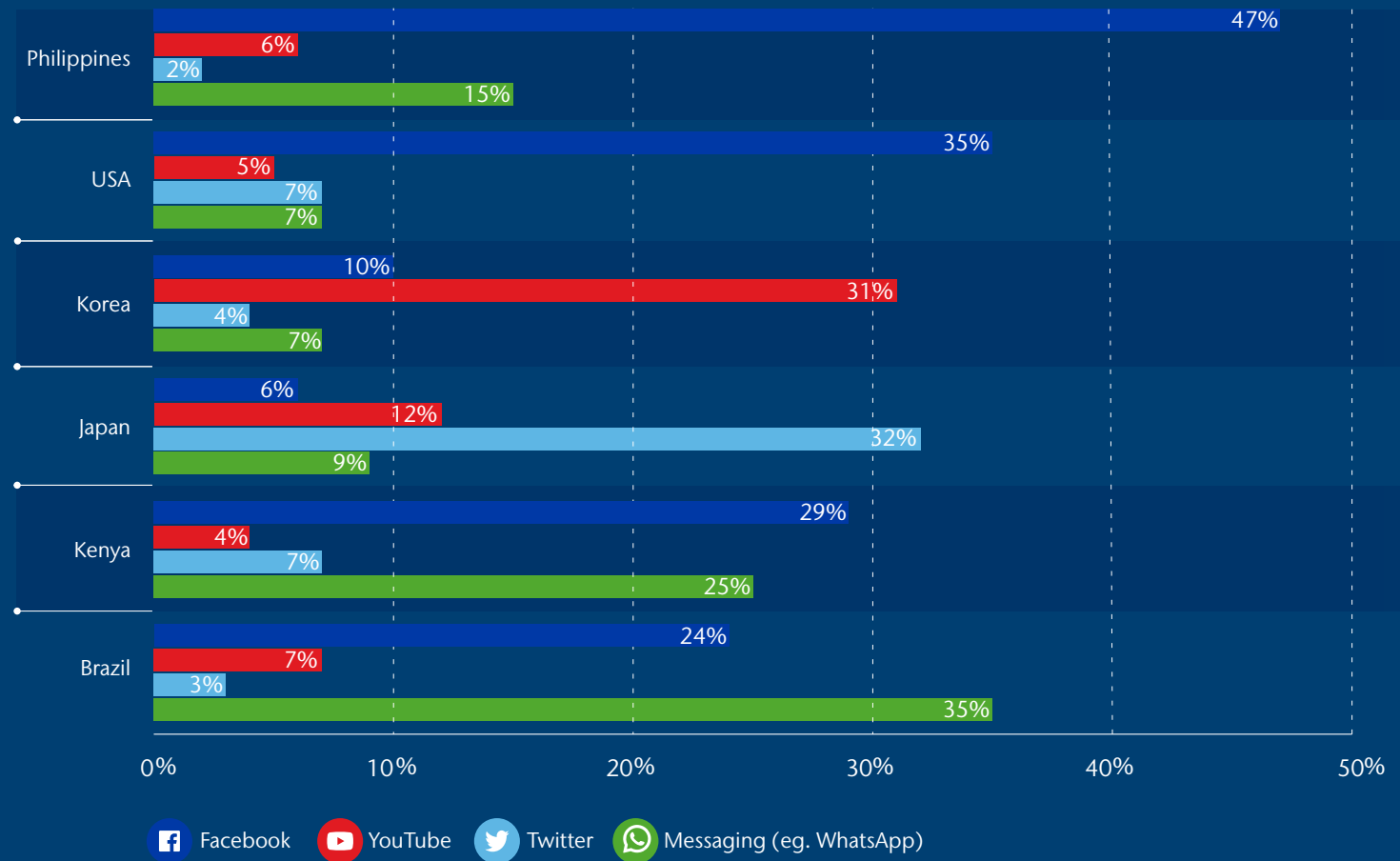


Fig 3. Source: Heidi Larson 2021

FAKE_NEWS_2020c. Which of the following, if any, are you most concerned about online? Please select one. False or misleading information from... Base: Total sample in each market = 2000.

i <https://www.who.int/en/activities/tracking-SARS-CoV-2-variants/>
 ii <https://www.ft.com/content/e3aa3b92-738e-422d-bba0-5b924dfaf368>

The role of the private sector

There is a clear part for the private sector to play in promoting vaccine uptake via a COVID-19 vaccine strategy.

Vaccine strategies need to be consistent, use credible sources and target human behaviour. Organisations need to listen to their employees, map concerns locally and address them via a diverse portfolio of platforms. The vaccination process should be supported with subsidised travel, time off, and services like ‘ask the doctor’ and townhall forums so people can voice their concerns and gain real-time information.

Be imaginative and compelling with communications

Use open dialogue

Use a wide range of platforms

Be honest about uncertainties

Build on local terminologies and understandings

Work with trusted influencers

Digital Health Certificates

There are currently a growing number (15 at last count, June 2021) of digital health certificate pilots in progress globally. Implementation is country-specific, and the NHS app will house proof of vaccination in the UK. Airlines may enforce specific requirements, and the G7 is currently experiencing difficulties in deciding upon a unified approach due to reliability, privacy and confidentiality concerns.

Travel: will digital healthcare certificates offer the freedom to fly?

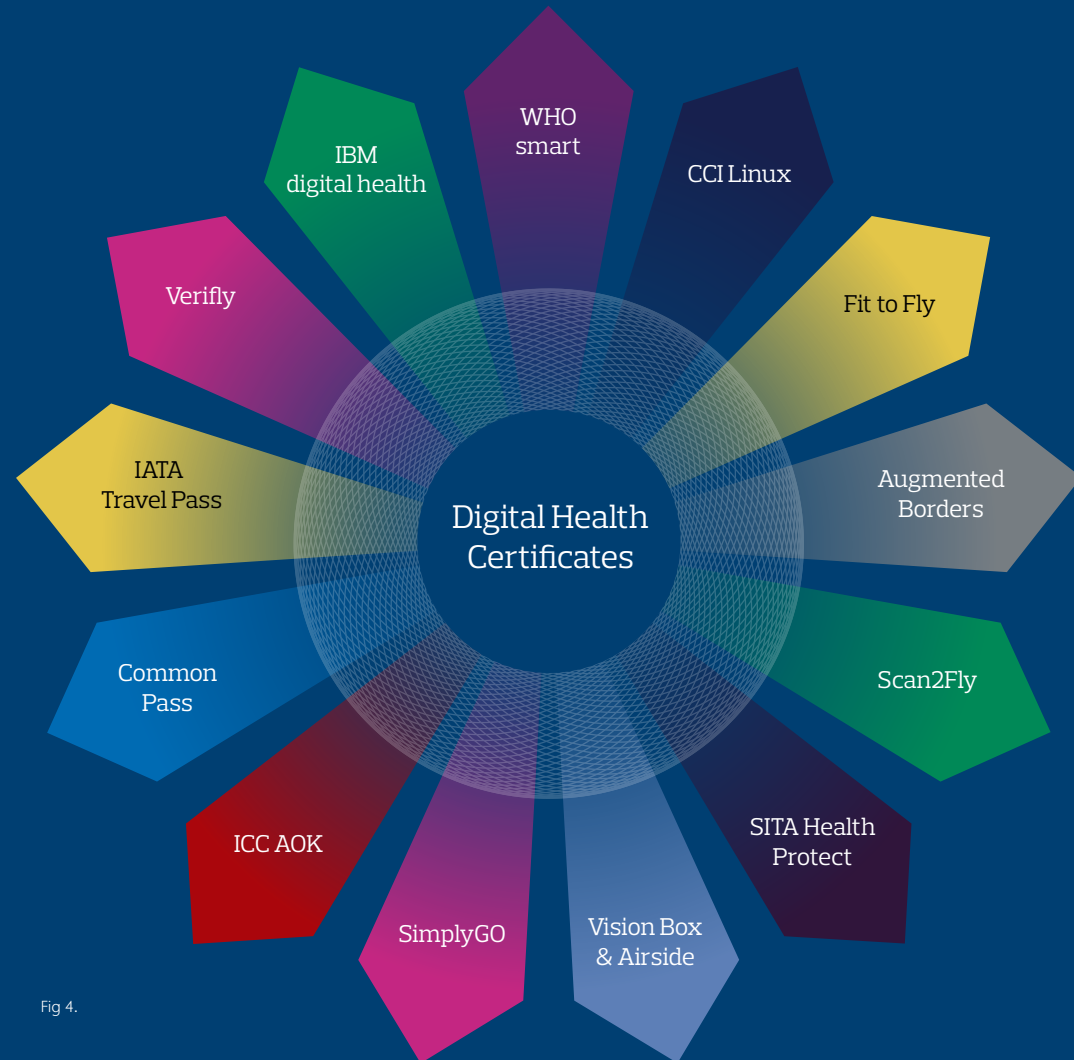


Fig 4.

Direct and indirect health challenges when flying

International Travel - what to consider as a responsible employer and employee:

- Infection rate at the country of destination and controls in place
- Number of new variants circulating and the case numbers (actual number identified and growth rate)
- Non-COVID-19 collateral damage to the country, particularly the healthcare infrastructure. International travel takes a toll, e.g. susceptibility to higher blood pressure, cardiac events. Governments need to ensure that there would be available hospital beds and access to ICUs.

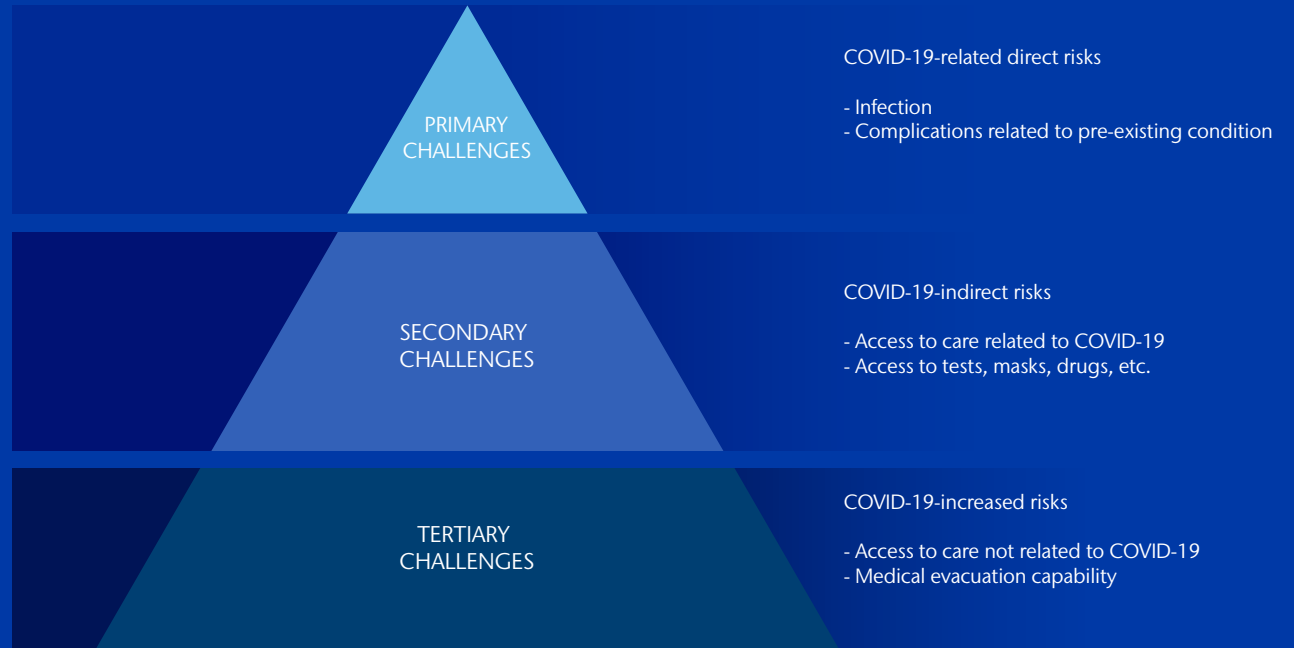


Fig 5. Source SOS International

COVID-19: in it for the long haul

The challenges Long-COVID-19 poses for society are deeply worrying. Considering the number of cases in India alone and the initial data from Wuhan, China (fig 6), many infected parties may expect to experience at least one long-term symptom. Downtime production levels will be severely affected, and governments should have systems in place to combat this.

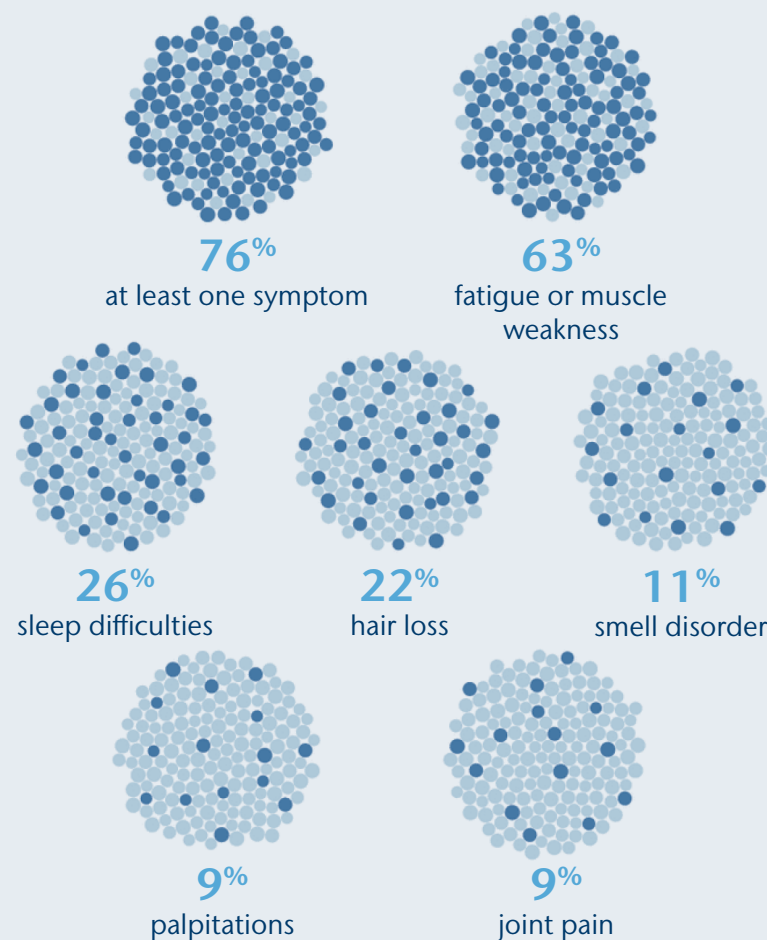
Our previous Work, Travel, Convene Coalition report on Mental Health carried the subheading: every company is now a healthcare company, and we are all aware of the concurrent waves of health issues coming down the tracks. But what does that mean in practice?

Companies should create an environment conducive to good health, both in terms of the physical environment and company policies. The easier it is for people to make good decisions, the greater the likelihood is that they will demonstrate healthy behaviours. Even simple things like Zoom-free days can make a difference.

People should also feel safe and secure at work to reduce lost time. The Centre for Disease Control in the US and Europe have updated their guidelines to improve safety measures. The discovery that COVID-19 is mainly transmitted via airborne particles means that strict guidelines are likely to focus on indoor spaces. Heating, ventilation, and air conditioning (HVAC) systems will be under the spotlight – air filters should be changed regularly, and increased circulation of outdoor air will be necessary.

Various studies and evidence summaries

Ill effects: COVID-19 patients in Wuhan, China six months after being discharged.



● Each dot = 10 people

Fig 6. Source: The Economist / 6-month consequences of COVID-19 in patients discharged from hospital: a cohort study by Huang et al 2021, The Lancet

Conclusion

International SOS has three measures for vaccine efficacy. The ability to:

- Prevent death/hospitalisation
- Prevent clinical signs and symptoms
- Infect others post-vaccination.

With all vaccines nearing 100% effectiveness at preventing death, the attention now turns to how they stack up against infection and symptom prevention. There is still so much to learn here, and as Dr Rodriguez-Fernandez points out, it takes a lot of data points to compare apples with apples. As the Deltaⁱ (B.1.617.2) variant gains traction in the UK – understanding how many infected people require hospitalisation will influence decision-making.

While the UK government is understandably concerned about the growing number of new variant cases, Dr Rodriguez-Fernandez provides a much-needed glimmer of hope: “The current situation is completely different to March 2020, even if we have a huge spike in cases with the new variant. People are vaccinated, and public behaviour has now irrecoverably altered and will reduce transmission. We never thought the vaccine would be the holy grail, but layers of protection are now well established in society.”

ⁱ <https://www.who.int/en/activities/tracking-SARS-CoV-2-variants/>



What is the London Work, Travel, Convene Coalition?

The London Work, Travel, Convene Coalition launched in September 2020. It brings together large employers in the City and Canary Wharf to share key learnings and insights related to planning and operations, to assess impact and measurement of efforts and to evaluate the latest technologies.

The coalition's aim is to develop a set of guidelines to help navigate the challenges businesses face as society re-opens throughout the recovery phase of the COVID-19 pandemic.

Founding members of the coalition include, Accenture, Ashurst, Aviva, Clyde & Co, JLL, Legal & General and others. Member roles range from Chief Operating Officer, Director of People Services, Director of Employee Experience, and Future Workplace Director.

Other coalitions worldwide include Chicago and New York, Dublin, and Singapore.

If you would like to find out more about the coalition, please contact The London Work, Travel & Convene Coalition Team [LondonWTC@aon.co.uk]

About Aon

Aon plc (NYSE:AON) is a leading global professional services firm providing a broad range of risk, retirement and health solutions. Our 50,000 colleagues in 120 countries empower results for clients by using proprietary data and analytics to deliver insights that reduce volatility and improve performance.

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