



**EUROPEAN COMMITTEE OF SOCIAL RIGHTS
COMITÉ EUROPÉEN DES DROITS SOCIAUX**

16 May 2023

Case Document No. 5

Open Society European Policy Institute (OSEPI) v. Bulgaria
Complaint No. 204/2022

**REPLY FROM THE GOVERNMENT
TO THE OSEPI'S RESPONSE**

Registered at the Secretariat on 16 May 2023

Re: Collective complaint No. 204/2022 by the Institute for European Policies of the Open Society Foundation against Bulgaria under the European Social Charter (ESH) (REV.)

Response from the Bulgarian Government to the complainant organisation's response

On December 15, 2022, with our written submissions on the merits of the complaint, we provided detailed information on the allegations made.

Regarding the opinion submitted by two medical experts (Drs. Ranit Mishori and Brianna Da Silva Bhatia, ANNEX 1 to the response) who analysed the effectiveness of the vaccines against COVID-19 and the epidemiological situation in the country and concluded that the low vaccination rate is one of the reasons for the severe course of the pandemic in Bulgaria, combined with demographic factors and the uncontrolled transmission of the virus, we express the following opinion:

The finding made in the document by the medical experts (ANNEX 1) that "weak application of vaccines was manifested at the beginning of the pandemic and continues to the present moment, having contributed to the infections and deaths from SARS-CoV-2 in Bulgaria" is partially true in the second in part - low vaccination coverage in a high percentage of the elderly population contributes to increased morbidity and mortality from COVID-19. We believe that the first part of the finding is incorrect (the low coverage is already evident at the beginning of the pandemic), because in the first months of 2021, the delivered quantities were small and strictly applied according to the adopted National Vaccination Plan. The conclusion made that "the severity of the disease in Bulgaria could most likely have been avoided if the scope of vaccination had been constantly increased" is true in principle, but in practice misleading, as the specific circumstances in the country are not taken into account - voluntary vaccination, ensured access to everyone who wants to be vaccinated by opening a huge number of vaccination Points throughout the country, setting shopping hours only for people over 65, opening green corridors for those who want to be vaccinated outside the groups of the National Plan, outsourced vaccination teams for persons having difficulty moving and those from hard-to-reach places.

In addition, in the document from the medical experts, some studies in support of the above conclusions are indicated incorrectly, since they cover later periods of the pandemic and, at the time commented on in the complaint, cannot be taken into account, for example:

Point 34 - "The most significant risk factor for severe illness or death from COVID-19 is age. Older patients have a higher mortality rate compared to the younger population." – the conclusion is based on studies described from different periods of the pandemic - until 2023, but at the beginning of the pandemic in 2020 it was not clear whether older adults die more often because of higher rates of chronic disease or whether morbidity is just as high as in healthy adults.

Point 55 – in the opinion of "many experts in the field of public health" it is highlighted that until the world is vaccinated, there will be a continuous emergence of new variants, from which it is concluded that "if the world was adequately vaccinated, dangerous and immune - evasive variants such as Omicron would have been less likely to develop". The cited 8 materials, on the basis of which the conclusion was made, are from a time when the national vaccination

plan was long ago adopted and implemented (two materials from December 2021, one from November 2022, four from November 1, 3, 4 and 10.2022 and one from 2023). In addition, a sufficient number of vaccines and time to vaccinate the population all over the world, combined with strict implementation of the basic anti-epidemic measures, to administer booster doses in a timely manner, is practically impossible. There will always be those seriously ill from other diseases where vaccination is delayed.

Point 57 - the conclusion is also incorrect here, as the literature reference indicates a study from July 2022, and it is clear from our previous answers that vaccination was and remains voluntary, the elderly are a prioritized group in the National Vaccination Plan and this is a decision of each country based on the documents and recommendations of the World Health Organization and the European Commission available at the time of the preparation of the Plan.

Point 60 - studies published after the preparation and implementation of the Plan are also indicated (month 09.2021 – quote 213, month 05.2021 – quote 211, etc.);

Point 63 - in Bulgaria, the data on deceased persons are also presented in the unified information portal separately for vaccinated and non-vaccinated;

Points 64 to 67 incl. - cited studies of higher efficacy of two administered doses of vaccine against COVID-19 compared to one administered dose, prolonged COVID-19 with fewer administered doses, which are scientific facts and are beyond the scope of the complaint;

Point 68 - it is confirmed that vaccine policy is a priority of MS, and each MS is responsible for its own national vaccination campaign.

We remain available if any additional information is needed.