
CHALLENGES CONFRONTING YOUNG ADULTS IN THE ERA OF COVID-19 VACCINES

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A troubling pattern has emerged during this pandemic where the needs and interests of youth and young adults appear to have been set aside. Here are three ways in which young adults are being uniquely affected:

Access to Vaccines

In most jurisdictions with access to vaccines the elderly in long-term care facilities are at, or near, the front of the line as they are known to be among the most vulnerable if infected with Covid-19. Similarly, front-line healthcare workers treating Covid-19 patients are at, or near, the top of most priority lists. This is as it should be.

At the back of the line are healthy young adults who are at less risk of becoming seriously ill if they contract the virus. [In Canada, only 3.3% of Covid-19 cases in hospital are people 20-29 years of age.](#) Yet experience suggests that people in this age group who are hospitalized are at serious risk of harm. Recent research in the United States confirms that 5% of people admitted to hospital were non-pregnant adults between the ages of 18-34 years. Among these patients, [21% required intensive care, 10% required mechanical ventilation, and 2.7% died.](#)

Vaccination certificates

A Covid-19 vaccination certificate is a record of immunization for those who have received an approved vaccine – no more, no less. It does not mean that a person who has been vaccinated cannot spread the virus and infect others. Preliminary data for the [Pfizer-BioNTech](#) and [Astra Zeneca](#) vaccines show some ability to prevent transmission, but there is still much we don't know about the level and duration of that transmission-blocking effect. This is now all the more complicated with the new variants.

Despite the lack of evidence about the ability of vaccines to prevent viral transmission, there is considerable enthusiasm among some to turn Covid-19 vaccine certificates into a *pass-partout* – a master key to access benefits denied to those who are not vaccinated. For example, it is proposed that these vaccine certificates be used at border-crossings to facilitate travel and thereby save both the airline and tourism industries, facilitate business and so on. It is also thought that these certificates could be used within borders to both help get people back to work, and return to some semblance of pre-Covid life including, for example, access to bars and restaurants, music concerts, gyms and places of worship.

While there are [many ethical problems with proposed plans to use vaccination certificates in these ways](#), one issue that has not been given sufficient attention is the fact that young adults would be among the last to benefit from any such measures as they are last in line to be vaccinated. What does this mean in practical terms?

Consider the reopening of venues such as bars and restaurants that are mostly staffed by young adults. Do we imagine that they will be able to work, and assume the risk of infection, in the same places that prohibit their patronage? Or, do we imagine that young adults will not be allowed to return to such workplaces without a valid vaccination certificate? If so, then those already bearing the brunt of the economic costs of Covid-19 will be further harmed through unemployment. During the pandemic, the incidence for [persons 15-29 not in employment, education or training in Canada](#) has increased significantly reaching levels that not seen in the past 20 years. Unemployment early in a person's work life is likely to slow career progression and have negative effects on lifetime earnings.

Challenge trials

While young adults can't readily access vaccines or vaccination certificates, they can volunteer for risky trials [that aim to develop vaccines and treatments for Covid-19](#).

hVIVO, a subsidiary of Open Orphan (a for-profit clinical research company), has a [contract with the UK government for Covid-19 challenge studies](#). They are now actively recruiting volunteers between the ages of 18-30 for a first-in-human characterization study to determine the dose at which a person deliberately exposed to SARS-CoV-2 becomes infected. Once this has been determined there will be further challenge studies to test the safety and efficacy of candidate vaccines or possible treatments, all involving healthy young adults.

Young adults have been selected for this research because of their reduced risk of serious infection, which is important because there is no reliable rescue therapy if they get sick after they have been intentionally infected. The risk to those participating includes hospitalization, ICU admission, [long Covid](#) and the, albeit low, risk of death. While challenge trials like those proposed doubtless will provide scientific data, there are other ways of generating useful data without intentionally placing young adults in harms way.

While many young adults are waiting their turn in line for the vaccine, are doing their best to manage the economic consequences of lock-downs, and appear willing to take the risks involved in challenge trials, we think the time has come to reflect on the ways in which we are failing to attend to the needs and interests of young adults.

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