Update on the UNICEF response to COVID-19, with a focus on vaccine roll-out

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Programme Division

UNICEF Executive Board – Informal briefing – 20 May 2021
Launch of ACT-Accelerator, COVAX Facility & UNICEF preparatory efforts

PHEIC
Public Health Emergency of
International Concern

World Health Organization

Launch of the Access to COVID-19 Tools (ACT) accelerator

UNICEF announced as procurement lead for COVAX
3 Sep 2020

UNICEF stockpiles half a billion syringes for COVAX
Oct-Dec 2020

30 Jan 2020
WHO declares PHEIC
WHO declares COVID-19 as a Public Health Emergency of International Concern (PHEIC)

24 April 2020
Launch of ACT-Accelerator
Launch of collaboration to accelerate the development, production and equitable distribution of COVID-19 vaccines, diagnostics and therapeutics

31 July 2020
COVAX Facility launched
Gavi Board approves COVAX Advance Market Commitment (AMC) to secure COVID-19 vaccine doses for 92 countries.

12 Nov 2020
UNICEF & PAHO launch joint tender for COVAX

UNICEF stockpiles and supplies hundreds of millions of units of non-vaccine COVID-19 supplies (e.g., PPE, diagnostics and treatment, WASH) and initiates global effort with WHO to prepare countries for vaccine roll-out
**COVAX** encompasses a multi-partner collaboration
UNICEF plays a critical role, spanning preparedness to delivery
UNICEF embarks on largest logistical effort in history

UNICEF LTAs with SII, Pfizer and AZ
UNICEF signs first COVID-19 vaccine long-term agreements (LTAs) with Serum Institute of India (SII) Pfizer and AstraZeneca (AZ) to turn COVAX deals into physical deliveries

UNICEF delivers first COVAX shipment to Ghana
Ghana becomes first country to receive COVAX shipment, <3 months after first stringent regulatory authority-approved vaccines delivered in higher income country

UNICEF continues to procure & ship other COVID-19 supplies (e.g., PPE, diagnostics and treatment, WASH, cold chain equipment) & to work with countries to support vaccine roll-out

COVAX announces reduction in available supply in March-May
March-May 2021

COVAX reaches more than 120 countries and territories but supply remains constrained
May 2020

UNICEF expecting to sign LTAs with J&J and Moderna to further diversify supply
May 2020

03-25 Feb 2021

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24 Feb 2021

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# COVAX Portfolio and beyond

## COVAX Portfolio

<table>
<thead>
<tr>
<th>Key information</th>
<th>AstraZeneca (AZ)</th>
<th>Serum Institute of India (SII)</th>
<th>Pfizer/BioNTech</th>
<th>Novavax</th>
<th>Moderna</th>
<th>Janssen</th>
<th>Sanofi-GSK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vaccine technology</td>
<td>Viral Vector</td>
<td>Viral Vector: Protein Subunit</td>
<td>mRNA</td>
<td>Protein Subunit</td>
<td>mRNA</td>
<td>Viral Vector</td>
<td>Protein Subunit</td>
</tr>
<tr>
<td>Number of doses (millions) secured on COVAX APA</td>
<td>170 MN</td>
<td>200 MN + option on 900 MN</td>
<td>40 MN</td>
<td>500 MN</td>
<td>500 MN</td>
<td>200 MN</td>
<td></td>
</tr>
<tr>
<td>Type of COVAX agreement</td>
<td>Binding APA</td>
<td>Binding APA</td>
<td>Binding APA</td>
<td>Binding APA</td>
<td>Non-binding MoU</td>
<td>Non-binding MoU</td>
<td></td>
</tr>
<tr>
<td>WHO Regulatory Approval Status</td>
<td>WHO EUL received on 15 Feb 2021</td>
<td>WHO EUL on 15 Feb 2021</td>
<td>Awaiting submission</td>
<td>WHO EUL received 30 April 2021</td>
<td>WHO EUL received 12 March 2021</td>
<td>Awaiting submission</td>
<td></td>
</tr>
<tr>
<td>UNICEF Supply Agreement</td>
<td>In place</td>
<td>In place</td>
<td>In place</td>
<td>Forthcoming</td>
<td>Forthcoming</td>
<td>Forthcoming</td>
<td>Watch this space</td>
</tr>
<tr>
<td>Efficacy estimates</td>
<td>Protection against disease</td>
<td>Covishield: 62% - 90%</td>
<td>TBC</td>
<td>95%</td>
<td>49.4%- 89.3%</td>
<td>94.5%</td>
<td>66% - 85%</td>
</tr>
<tr>
<td></td>
<td>Longevity of protection</td>
<td>Covovax: 49.4%- 89.3%</td>
<td>TBC</td>
<td>95%</td>
<td>49.4%- 89.3%</td>
<td>94.5%</td>
<td>66% - 85%</td>
</tr>
<tr>
<td></td>
<td>Population impact (on transmission)</td>
<td>TBC</td>
<td>TBC</td>
<td>TBC</td>
<td>TBC</td>
<td>TBC</td>
<td>TBC</td>
</tr>
<tr>
<td>Publicly available price range* [Not UNICEF/COVAX prices]</td>
<td>USD 2.19 - 5.00</td>
<td>USD 2.72 - 8.00</td>
<td>USD 7.00 - 19.50</td>
<td>N/A</td>
<td>USD 15.00 - 37.00</td>
<td>USD 8.50 - 10.00</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**APA** – Advance purchase agreement  
**MoU** – memorandum of understanding  
**SOI** – statement of intent  
**UNICEF** – United Nations Children's Fund  
**TBC** – To be confirmed  
**N/A** – Not applicable  

### Select other vaccines

<table>
<thead>
<tr>
<th>Sinovac</th>
<th>Sinopharm/CNBG</th>
<th>RDIF (Sputnik V)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inactivated Virus</td>
<td>Inactivated Virus</td>
<td>Viral Vector</td>
</tr>
<tr>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>N/A</td>
<td>N/A</td>
<td>Date to be set – once all data submitted and inspections completed</td>
</tr>
</tbody>
</table>

* Based on publicly available information, i.e., not UNICEF tender prices nor COVAX APA prices  
** Small-scale study suggests significantly lower efficacy against the South African (501Y.V2) variant  

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**Small-scale study suggests significantly lower efficacy against the South African (501Y.V2) variant**
Country implementation work has shifted

From preparation ...

- Development of guidance and tools
- Roll-out of multilingual training, job aids and explainers e.g., 3 flagship courses with WHO in 11 languages with +75k learners
- Review and approval of national deployment and vaccination plans
- Assessment of cold chain capacity

... to implementation

- Systematically track COVID-19 vaccine implementation, across regions and by:
  - Proactively identifying challenges and risks, such as operational budget gaps, gaps in guidance/tools and technical assistance needs
  - Use country data to guide strategy and share learning to strengthen future roll outs.
<table>
<thead>
<tr>
<th>Countries face diverse set of challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Multiple vaccines in country and supply constraint</strong></td>
</tr>
<tr>
<td>• Optimal use of vaccines in supply-constrained situations with uncertainty about the availability of supply for a timely second dose.</td>
</tr>
<tr>
<td>• Complex logistics and vaccine management if shipments arrive from multiple sources</td>
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<tr>
<td><strong>Knowledge management</strong></td>
</tr>
<tr>
<td>• As new variants emerge, countries require evidence on efficacy, effectiveness and safety of different products</td>
</tr>
<tr>
<td><strong>Monitoring and surveillance</strong></td>
</tr>
<tr>
<td>• Several countries are not reporting vaccination data</td>
</tr>
<tr>
<td>• Data not granular enough to monitor equitable uptake among different target groups</td>
</tr>
<tr>
<td><strong>Quality of service</strong></td>
</tr>
<tr>
<td>• Delays in training and concerns about service quality</td>
</tr>
<tr>
<td><strong>Costing &amp; financing</strong></td>
</tr>
<tr>
<td>• Late start of vaccination due to lack of operational funding</td>
</tr>
<tr>
<td><strong>Vaccine hesitancy</strong></td>
</tr>
<tr>
<td>• Suspension or reduced use of products in high-income countries due to reports of adverse events following immunization having a big impact on low and low-middle-income countries</td>
</tr>
<tr>
<td>• Hesitancy among health workers, particularly younger health workers</td>
</tr>
</tbody>
</table>
Opportunities to build back better

• Use +USD$100 million investment for COVID-19 cold chain to build more resilient immunization cold chain systems

• Roll out digital health solutions, such as electronic registries, track & trace solutions and satellite mapping to strengthen service delivery for all vaccines

• Engage communities to strengthen demand for COVID-19 vaccines and all immunization services
Solutions that reduce global inequity are needed

“We need speed and simplicity to remove barriers to the acquisition, manufacture and distribution of COVID-19 vaccines globally” – Henrietta Fore

Three urgent actions:

- **Simplify intellectual property rights (IPR) through voluntary and proactive licensing by IPR holders.** Governments must build on - and increase - recent manufacturing partnerships and support proactive partnership and cooperation between manufacturers.

- **End vaccine nationalism.** Governments should remove direct and indirect export- and import-control measures that block, restrict or slow down exports of COVID-19 vaccines, ingredients and supplies.

- **Ensure equal access to vaccine supplies.** Governments that have contracted to receive more doses than required to vaccinate their entire adult populations, should immediately loan, release or share doses now, and most or all excess contracted doses for 2021.

Longer term:

- **Build on lessons from COVID-19 for future pandemic preparedness.**

- **Create rotating stockpiles (e.g., for PPE, diagnostics, vaccines) for pandemic preparedness.**
Safe injection equipment to support COVID-19 vaccination

- UNICEF has stockpiled 520 million auto-disable (AD) syringes in its warehouses.
- Part of a larger plan to procure 1 billion AD syringes in 2021 and to guarantee supply and ensure that syringes arrive in countries before COVID-19 vaccines.
- This is on top of the 800 million AD syringes that are needed for routine/ongoing vaccine programmes in LICs/MICs that UNICEF will support in 2021.
- Unlike almost all other COVID-19 vaccines under development, the first licensed vaccine (Pfizer-BioNTech’s mRNA vaccine) will require a non-standard 0.3ml syringe. UNICEF has set up new framework agreements for newly PQ’d syringes from several manufacturers and purchases quantities for the first wave roll-out of Pfizer’s vaccine in COVAX participating countries.
COVAX and UNICEF are operating in a complex and competitive market – in which doses are committed to - and being prioritized for distribution to - those with greatest financial capacity

**Bilateral/multilateral deal volumes by recipient**

Last updated: April 12, 2021

<table>
<thead>
<tr>
<th>Vaccine Developer</th>
<th>Doses</th>
</tr>
</thead>
<tbody>
<tr>
<td>AstraZeneca</td>
<td>2.903M</td>
</tr>
<tr>
<td>Moderna</td>
<td>1.839M</td>
</tr>
<tr>
<td>Novavax</td>
<td>1.655M</td>
</tr>
<tr>
<td>Pfizer/BioNTech</td>
<td>1.110M</td>
</tr>
<tr>
<td>Sinovac</td>
<td>838M</td>
</tr>
<tr>
<td>Janssen</td>
<td>570M</td>
</tr>
<tr>
<td>Gamaleya</td>
<td>150M</td>
</tr>
<tr>
<td>Others</td>
<td>18M</td>
</tr>
<tr>
<td>World Bank country groupings: HIC = high-income countries; UMICs = upper-middle-income countries; LMICs = lower-middle-income countries; LICs = low-income countries</td>
<td></td>
</tr>
</tbody>
</table>

N.B.: Only includes formalized deals.

Vaccine dose sharing to bridge the gap

Almost 27 million doses "shared" to date – A tiny fraction of what’s needed

India and China are the largest ‘doses donors’ to date... but recent news from the Government of the United States could change this rapidly

A few issues need focus here:
- Speed/timing
- Scale
- Appropriateness of products

Note: The table above is excerpted from the COVID-19 Vaccine Market Dashboard. Go to the website for full list of dose donors, recipients, etc.

Thank You.