Highlights

- UNICEF is leading efforts to procure and supply doses of COVID-19 vaccines for COVAX, and other vital supplies.
- Since the start of 2021, UNICEF has procured and delivered 59 million COVID-19 vaccine doses on behalf of the COVAX facility to 122 countries.
- UNICEF delivered 9,984 COVID-19 rapid diagnostic tests to low-and middle-income countries and is in the process of working with ministries of health in several countries to prepare to receive additional tests.
- UNICEF and partners have supported 88 countries to prepare national plans and get ready for vaccine roll-out.
- In 66 countries, UNICEF is implementing localized risk communication and community engagement (RCCE) responses around ACT-A. Promoting protective behaviors remains a powerful weapon to reduce the pandemic’s spread; UNICEF is working to tackle misinformation around COVID-19 and increase adoption of vaccines, treatments and tests.

UNICEF’s Response and Funding Status

<table>
<thead>
<tr>
<th>Eligible countries that are ready to administer COVID-19 vaccines</th>
<th>96%</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID-19 vaccine doses administered in eligible countries and humanitarian contexts</td>
<td>19%</td>
</tr>
<tr>
<td>Funding status</td>
<td>23%</td>
</tr>
<tr>
<td>COVID-19 diagnostic tests procured for delivery in low- and middle-income countries</td>
<td>0.2%</td>
</tr>
<tr>
<td>Funding status</td>
<td>0%</td>
</tr>
<tr>
<td>Countries implementing ACT-A related risk communication and community engagement</td>
<td>132%</td>
</tr>
<tr>
<td>Funding status</td>
<td>21%</td>
</tr>
<tr>
<td>COVID-19 treatment courses procured for delivery in low- and middle-income countries</td>
<td>0%</td>
</tr>
<tr>
<td>Funding status</td>
<td>0%</td>
</tr>
</tbody>
</table>

UNICEF ACT-A Appeal 2021
US$ 659 million

- Requirement $659m
- 19.0% Received
- 80.9% Carried Over
- 0.2% Gap

2 This target has changed to 100 million – See page 9 - https://www.who.int/publications/m/item/act-now-act-together-2020-2021-impact-report
Funding Overview & Partnerships

UNICEF’s 2021 ACT-A Humanitarian Action for Children appeal requires US$659 million at the global level to support ACT-A, across the vaccines (COVAX), therapeutics and diagnostic pillars, and the health systems connector. As part of the US$510 million required to support vaccine delivery, an estimated US$120 million is for the delivery costs of doses supplied under the COVAX humanitarian buffer (which is a provider of last resort for at-risk populations not covered by national immunization programmes). As of 30 April 2021, UNICEF has received $126 million against the ACT-A 2021 appeal with thanks to the following top two donors and partners: Japan and US National Committee, and thanks to Australia for its multi-year contributions (for a list of all contributions received, see here). UNICEF has a funding gap of $533 million against the ACT-A 2021 HAC and is seeking flexible and timely contributions to ensure ACT-A interventions and tools are rolled out in countries most in need.

<table>
<thead>
<tr>
<th>Pillar</th>
<th>2021 Requirements (US$)</th>
<th>Allocated</th>
<th>Gap</th>
<th>Gap in %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vaccine distribution cost, including humanitarian buffer</td>
<td>$510.0 M</td>
<td>$114.9 M</td>
<td>$395.1 M</td>
<td>77%</td>
</tr>
<tr>
<td>Risk communication and community engagement</td>
<td>$24.0 M</td>
<td>$5.0 M</td>
<td>$19.0 M</td>
<td>79%</td>
</tr>
<tr>
<td>Diagnostics</td>
<td>$70.5 M</td>
<td>$6.2 M</td>
<td>$64.3 M</td>
<td>91%</td>
</tr>
<tr>
<td>Therapeutics</td>
<td>$54.5 M</td>
<td>$0.0 M</td>
<td>$54.5 M</td>
<td>100%</td>
</tr>
<tr>
<td>Total</td>
<td>$659.0 M</td>
<td>$126.1 M</td>
<td>$532.9 M</td>
<td>81%</td>
</tr>
</tbody>
</table>

Situation Overview & Humanitarian Needs

The pandemic is far from over as COVID-19 cases continue to rise at an alarming rate. As of 10 May 2021, 157.9 million COVID-19 cases and 3.28 million deaths have been reported globally\(^2\), however official figures are likely underreported due to asymptomatic cases, and weak surveillance and testing capacity. Several COVID-19 variants have emerged which are spreading more easily, risking significant setbacks in the fight against the pandemic. COVID-19 vaccines, as well as public health measures to reduce transmission including wearing of masks, physical distancing, good ventilation, avoiding crowded places and frequent handwashing continue to work in reducing the amount of viral transmission, which also helps to reduce the chance for the virus to mutate. However, not all governments are enforcing COVID-19 public health measures equally and there is fatigue among many populations to follow them. In addition, the scale up of COVID-19 vaccination has been slow due to lower-than-expected vaccine doses, hesitancy among some populations, and lack of operational funding in many countries to kick-start the campaigns.

Shocking imbalance in the distribution of COVID-19 vaccines persists globally, with low- to lower-middle income countries having received significantly fewer doses, and also much later than high income countries. Over 87% of COVID-19 vaccines have gone to high income or upper middle-income countries, while low-income countries have received just 0.2%\(^3\). Equitable access to COVID-19 vaccines by all countries remains critical. Equity in how vaccines are distributed within countries will be the next challenge, as certain gaps, including gender barriers, are emerging and need to be addressed to ensure no one is left behind.

Preparedness efforts through the development of National Deployment and Vaccination Plans (NDVP) have been put in place in 88 countries, however, despite a promising start, several countries are at risk of vaccine stockouts due to global supply shortages and will face challenges in vaccinating their populations in time for the second dose required. Other challenges are that vaccines come with relatively short expiration dates and require quick use and implementation, that in turn requires adequate levels of timely operational funding, which is often lacking. Finally, questions on safety and decisions about certain vaccines by high income countries have impacted the delivery of vaccines in low-income settings. More doses are urgently needed to keep up the momentum and to meet the objectives detailed in each country’s NDVP.

Humanitarian Leadership, Coordination and Strategy

The Access to COVID-19 Tools Accelerator (ACT-A) is a global collaboration to accelerate development, production, and equitable access to COVID-19 tests, treatments, and vaccines. As part of the global ACT-A, UNICEF and partners have been delivering lifesaving vaccines (through the COVAX Facility), therapeutics and diagnostics, while also rolling out risk communication and community engagement activities and building on country preparedness efforts for the vaccine roll out, while strengthening health systems across the globe.

Within ACT-A’s vaccine pillar UNICEF has been providing supplies needed for safe vaccine administration, such as cold chain equipment, personal protective equipment (PPE), and hand hygiene supplies (soap and hand sanitizer) and

---

\(^2\) WHO COVID-19 Dashboard - https://covid19.who.int/

\(^3\) https://www.who.int/director-general/speeches/detail/director-general-s-opening-remarks-at-the-media-briefing-on-covid-19-9-april-2021
has been covering operational costs for vaccine delivery and associated technical assistance. UNICEF will also cover support for vaccine delivery to humanitarian populations through the COVAX humanitarian buffer. Within ACT-A’s diagnostics pillar UNICEF is purchasing and delivering rapid COVID-19 diagnostic tests and is providing the associated technical assistance for roll-out and rapid scale up of novel technologies in countries. Within ACT-A’s therapeutics pillar UNICEF is purchasing and delivering novel and repurposed treatments for COVID-19 and its associated technical assistance for country preparedness activities, including drug safety surveillance and reporting, as well as the training of staff. Under the ACT-A’s health systems connector, UNICEF is providing RCCE in countries to promote trust and support adoption for COVID-19 vaccines, treatments and tests.

Summary Analysis of Programme Response

Since the start of 2021, UNICEF has procured and delivered 59 million COVID-19 vaccine doses on behalf of the COVAX facility to 122 countries. Although COVID-19 vaccines have been and continue to be developed as rapidly as possible, they must go through rigorous testing in clinical trials to prove that they meet internationally agreed benchmarks for safety and effectiveness. Only if they meet these standards can a vaccine receive validation from WHO and national regulatory agencies. UNICEF only procures and supplies COVID-19 vaccines that meet WHO’s established safety and efficacy criteria and that have received the required regulatory approval. UNICEF has been working with governments, Gavi and WHO to ensure that countries are ready to receive the vaccines, through support with appropriate cold chain equipment, PPE, trainings for health workers, technical assistance, and operational costs for in country storage and delivery of vaccines. UNICEF has also delivered 9,984 COVID-19 rapid diagnostic tests and is in the process of working with ministries of health in several countries to prepare to receive additional tests.

In May 2021, with vaccines delivered by UNICEF through the COVAX initiative, the COVID-19 vaccination campaign in Goma, North Kivu province was launched. Maseka Bin Mirimo, a health worker, receives his first dose of vaccine at Goma General Hospital. "When I get home, I will sensitize my relatives to come and take the vaccine. I will start with my wife and children because it is better to prevent a disease than to cure it. I have just taken the vaccine not only because I am a health worker but also as a person living in an area that has recorded positive cases of the coronavirus disease. I think this is the safest way to protect yourself from COVID-19," he says.

In Afghanistan, teachers at the Al-Fateh girls’ high school in Kabul receive vaccines delivered through COVAX. Head teacher Aziza Barakzai says: “The wait is over, and the tension has subsided, receiving the COVID-19 vaccine shot is really a welcoming news, I will be able to concentrate on teaching the young generation of Afghanistan without being worried about the risk of transferring the virus. Thank you to everyone involved in making this day a reality.”

To build trust in vaccines and to tackle misinformation around COVID-19, UNICEF teams have been working in 66 countries to develop and roll out risk communication and community engagement (RCCE) messages and activities around ACT-A. People’s behaviours and their willingness to follow public health and social measures remain the most powerful weapons to stop the spread of the pandemic. Consequently, RCCE plays a significant role in breaking the chains of transmission and mitigating the impact of the pandemic. Public uncertainty in the COVID-19 pandemic has been exacerbated an “infodemic,” a mix of information, misinformation, rumors and gaps in information. To help governments amplify their RCCE efforts, UNICEF has been supporting regions and countries to establish and use social listening systems and other offline feedback mechanisms. These systems and mechanisms listen to communities and track the real-time spread of information, rumors and disinformation related to COVID-19 and immunization. This information becomes the basis for developing and informing context-specific and national plans for the introduction of new COVID-19 tools. UNICEF teams have also been supporting governments to engage with religious and community leaders in building trust in national vaccination plans. Through these efforts and others, UNICEF continues to support the dissemination of correct information and built trust among communities in COVID-19.
vaccines and public health measures put in place to curb transmission and ensure equitable access to vaccines, tests and treatments.

In Kireche District in Rwanda, Odette (left) is one of the four risk communication, community engagement and health promotion consultants hired by UNICEF deployed to the Health Communications Division of the Rwanda Biomedical Centre to support effective coordination and reporting of communication for development interventions related to COVID-19 preparedness and response. In a pick-up truck loaded with loudspeakers and other sound equipment, Odette and her colleagues choose one of Kirehe’s 12 sectors and drive slowly through the community. The loudspeakers blast pre-recorded messages urging residents to help fight COVID-19 by adhering to public health guidelines: regular handwashing with soap and water, physical distancing, and wearing a mask at all times when out in public. The pickup truck slows to crawling speed when in a densely populated part of the sector, and finally parks outside a bustling market area. Odette disembarks from the pickup truck and briefs a small team of youth volunteers on the task ahead: to work the crowds in the marketplace, reminding them to respect the physical distancing regulations and to also wear their masks properly.

Working hand in hand with the district’s youth volunteers, the communications cell team members spend the entire morning canvassing the market spreading the word and reinforcing the message of how to avoid contracting the coronavirus, and what to do if you do fall ill. Despite the relentless efforts by Odette and her fellow communications cell members, there remains a lot more work to be done. Ensuring that residents maintain physical distancing in crowded areas like markets and bus parks remains a challenge. Proper wearing of masks continues to be a challenge as well; when supervised by law enforcement and district officials, resident will comply, only to drop their masks to their chins or remove them altogether when unsupervised. With over 400,000 inhabitants across Kirehe’s 12 sectors, Odette and her colleagues have their work cut out for them if they are to keep the number of COVID-19 cases at a minimum.

External Media Links

- COVAX Information Center - [https://www.unicef.org/coronavirus/covax](https://www.unicef.org/coronavirus/covax)
- Vaccines Work - [https://www.unicef.org/immunization/vaccines-for-all](https://www.unicef.org/immunization/vaccines-for-all)

Next SitRep: July 2021


Who to contact for further information:

Manuel Fontaine  
Director of Emergency Programmes  
Tel: +1-212-326-7163  
Email: mfontaine@unicef.org

Aboubacar Kampo  
Director of Health, Programme Division  
Tel: +1-212-326-7540  
Email: akampo@unicef.org

June Kunugi  
Director Public Partnership Division  
Tel: +1-212-326-7118  
Email: jkunugi@unicef.org

Etleva Kadilli  
Director of Supply Division  
Tel: +45-45-335-700  
Email: ekadilli@unicef.org