A nurse vaccinates a baby at Fort Portal Regional Referral Hospital. In 2021, UNICEF procured vaccines to reach 46 per cent of the world’s children under 5 years old.
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UNICEF global procurement statistics
In Khartoum, a health worker administers a free COVID-19 test. Testing and other public health measures like hand washing and social distancing were key to slowing transmission as the country rolled out its district-by-district COVID-19 vaccination campaign in 2021.
2021 was a historic year for the world—and for UNICEF, calling upon the organization to work at an unparalleled scale and speed, seeking unforeseen solutions.

COVID-19 was the worst global health crisis since the 1918-1919 influenza pandemic, and the magnitude of the response was unprecedented. Overall, UNICEF procured a record $7.181 billion in goods and services in 2021, 61 per cent higher than in 2020, to support the pandemic response, other emergencies and regular programmes.

It was a year of accomplishment and adversity. The euphoria of the first touchdown of COVAX COVID-19 vaccine doses in Ghana on 24 February – only 39 days after the first vaccination in a high-income country – was tempered by export bans and other logistics challenges. Nevertheless, COVAX delivered 957.7 million doses to 144 countries, including donated doses, which backed equitable access to vaccines.

It has been a privilege for UNICEF supply and logistics operations to play a central role in the pandemic response and advance the equity agenda. Decades of expertise in vaccine procurement and delivery, deep logistics and shipping knowledge and our convening power came to the fore. The global COVAX partnership recognised their complementary strengths, together making a stronger, innovative whole.

As the Procurement Coordinator and, with PAHO, a Procurement Agency, UNICEF had a critical role in the COVID-19 vaccine rollout and worked end-to-end to get infrastructure ready and ensure doses quickly turn into vaccinations. We:

- Supported access to oxygen therapy and equipment in low- and middle-income countries, by procuring over 28,000 oxygen concentrators and developing the Plant-in-a-Box, an innovative and sustainable oxygen response.
- Launched the COVID-19 Vaccine Market Dashboard, the go-to public resource for the latest market data and information.

At no point did UNICEF reduce regular programming and emergency efforts. Supply lines for programmes such as routine immunization remained open and UNICEF delivered $687.5 million worth of supplies to protracted and sudden emergencies in 139 countries and territories. We supported the ongoing emergency in Yemen, mostly through cash-based transfers and construction services. As ports closed in Afghanistan, in-country stocks of medicine, therapeutic food and supply kits were available. After a devastating earthquake in Haiti, UNICEF dispatched $7.8 million worth of critical supplies and deployed staff to support their distribution.

COVID-19 supplies account for much of the rise in procurement value but other areas also increased, e.g., construction services ($257.1 million) and international freight services ($226.3 million), which rose 71.6 per cent despite disruption to supply chains and transport routes. Over 4,155 international vaccine shipments (>50 per cent growth on 2018-2020 yearly average) delivered 3.170 billion doses to 123 countries for both routine and outbreak immunization. Global problems require global responses—with exceptional willingness from private sector partners UNICEF was able to galvanise flexible solutions.

Behind all of this is an exceptional team committed to the UNICEF mission and helping the most vulnerable. The Supply Community spans the globe and its contributions touched children and saved lives. It achieves marvels through creativity, motivation, and innovative solutions. All the while personally living through the difficulties of the pandemic. For this I am grateful. It is an honour to work alongside UNICEF colleagues who together make up our greatest asset to drive positive change for the future.

Etleva Kadilli
Director, UNICEF Supply Division
In 2021, UNICEF provided warm winter clothes to 109,178 children in internally displaced persons (IDP) camps, collective shelters, and vulnerable communities in Syria. All children’s clothes were gender neutral and locally procured.
EQUITY ACCESS SPEED AMID A HISTORIC YEAR
In 2021, the UNICEF supply and logistics function procured $7.181 billion worth of goods and services for children in 160 countries and areas.

$3.925 billion
Procurement services for 138 countries
on behalf of governments and partners

$687.4 million
Emergency supplies procured for 139 countries and areas
Global supply hubs delivered $278.1 million in goods

141,315 kits delivered to 77 countries and areas

- 42,968 standard classroom kits
- 40,748 medical kits
- 20,820 early childhood development kits
- 18,781 recreation kits
- 13,787 WASH and dignity kits
- 4,211 country-specific classroom kits

For six decades, kit packing has been a vital warehouse function of UNICEF’s Global Supply and Logistics headquarters in Copenhagen. A range of standard and customised kits helps to fill critical gaps in health, water, sanitation, and hygiene (WASH), and education, especially during emergencies.
UNICEF procured $5.657 billion worth of goods in 2021. The largest commodity groups, and examples of supplies procured or delivered, are highlighted.

### $4.121 billion Vaccines/biologicals
UNICEF procured 2.299 billion doses of paediatric vaccines for 109 countries to reach 46 per cent of the world’s children under 5 years old. 48.5 per cent of these vaccines went to routine immunization programmes. The remainder supported supplementary immunization activities, outbreak response, and humanitarian situations.

In 2021, COVAX delivered more than 957.7 million doses of COVID-19 vaccine to 144 countries.

UNICEF managed the delivery of more than 884.2 million COVID-19 vaccine doses to 110 countries.

### $397.5 million Medical supplies and equipment
including COVID-19 non-immunization supplies (page 13)
- 2 billion syringes for immunization, including 1.9 billion auto-disable syringes, 82.4 million re-use prevention syringes delivered
- $72.8 million worth of safe injection equipment (SIE) delivered to 111 countries
- 18.4 million safety boxes delivered
- 4.6 million malaria rapid diagnostic tests delivered to 18 countries
- 1.8 million HIV rapid diagnostic tests delivered to 26 countries, including 0.7 million HIV/syphilis combination diagnostic tests to 13 countries and 58,250 HIV self-tests to 5 countries
- 40,748 medical kits delivered from UNICEF global supply hubs for 18 countries

### $204.9 million Cold chain equipment
- $73.2 million in solar-powered systems procured for 63 countries

### $175.6 million Nutrition supplies
67 per cent of ready-to-use therapeutic food (RUTF) was sourced from programme countries.
- 44,554 metric tons of RUTF delivered to 59 countries. An additional 7,206 metric tons was delivered to 12 countries as contributions in kind (CIK)
- 433.2 million vitamin A capsules, including 383.8 million capsules as CIK to 68 countries
- 119.3 million deworming tablets delivered to 44 countries
- 665 million sachets of multiple micronutrient powder delivered to 38 countries
- 566 million iron and folic acid tablets delivered to 28 countries

### $155.3 million Education supplies
UNICEF procured education supplies for 105 countries in 2021, including laptops for a large digital education project in El Salvador.

86,780 education kits were delivered from UNICEF global supply hubs for 64 countries, including:
- 42,968 standard classroom kits
- 20,820 early childhood development kits
- 18,781 recreation kits
- 4,211 country-specific classroom kits
The Democratic Republic of the Congo

Compared to 2020, UNICEF’s delivery of education supplies increased by 60 per cent, reflecting UNICEF’s commitment to education during the ongoing pandemic.
UNICEF procured **$1.524 billion** worth of services in 2021. The six largest categories account for 69 per cent of the total value of contracting for services.

**$257.1 million**
**Construction services**
Most construction services were procured in the Middle East and North Africa region ($106.7 million), the West and Central Africa region ($64.6 million), and the Eastern and Southern Africa region ($64.1 million), and included support for:
- water supply and water and sanitation facilities in schools for WASH programmes
- construction and rehabilitation of schools and learning facilities
- construction related to health facilities

**$173.0 million**
**Cash and voucher assistance**
Includes programmes in which cash transfers or vouchers are directly provided to beneficiaries and can be used for goods or services.

**$118.5 million**
**Research, surveys, monitoring and evaluation services**
Includes programmatic research and surveys, market and supply chain analysis, and research and monitoring and evaluation of programme implementation.

**$226.3 million**
**International freight services**
This figure is the highest ever reported. It is a 71.6 per cent increase from 2020, and represents 12,968 international shipments in 2021.

**$91.4 million**
**In-country logistics and warehousing services**
Support to programmes includes road cargo transport, storage, local aircraft charters, and customs brokerage and clearance services, as well as warehousing services.

**$184.1 million**
**Local technical workforce**
Human resources required for programme support included working in countries to:
- share expertise with partner governments
- implement social mobilisation campaigns
- provide temporary labour for programmes
Countries from which procurement exceeded $20 million based on country of invoice in $ million

<table>
<thead>
<tr>
<th>Country</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>China</td>
<td>1,302.2</td>
</tr>
<tr>
<td>United States</td>
<td>777.6</td>
</tr>
<tr>
<td>India</td>
<td>669.5</td>
</tr>
<tr>
<td>Belgium</td>
<td>601.5</td>
</tr>
<tr>
<td>Switzerland</td>
<td>562.2</td>
</tr>
<tr>
<td>Sweden</td>
<td>328.4</td>
</tr>
<tr>
<td>Denmark</td>
<td>303.6</td>
</tr>
<tr>
<td>France</td>
<td>253.0</td>
</tr>
<tr>
<td>Yemen</td>
<td>250.1</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>249.9</td>
</tr>
<tr>
<td>Republic of Korea (the)</td>
<td>139.0</td>
</tr>
<tr>
<td>Pakistan</td>
<td>96.1</td>
</tr>
<tr>
<td>Netherlands (the)</td>
<td>83.5</td>
</tr>
<tr>
<td>Germany</td>
<td>80.9</td>
</tr>
<tr>
<td>Lebanon</td>
<td>79.5</td>
</tr>
<tr>
<td>Luxembourg</td>
<td>75.5</td>
</tr>
<tr>
<td>Afghanistan</td>
<td>61.8</td>
</tr>
<tr>
<td>Singapore</td>
<td>50.8</td>
</tr>
<tr>
<td>Kenya</td>
<td>50.8</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>48.8</td>
</tr>
<tr>
<td>Russian Federation (the)</td>
<td>47.2</td>
</tr>
<tr>
<td>Jordan</td>
<td>45.0</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>42.5</td>
</tr>
<tr>
<td>South Sudan</td>
<td>42.5</td>
</tr>
<tr>
<td>United Arab Emirates (the)</td>
<td>37.9</td>
</tr>
<tr>
<td>Democratic Republic of the Congo (the)</td>
<td>33.9</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>31.8</td>
</tr>
<tr>
<td>South Africa</td>
<td>28.8</td>
</tr>
<tr>
<td>Sudan (the)</td>
<td>27.1</td>
</tr>
<tr>
<td>Madagascar</td>
<td>26.8</td>
</tr>
<tr>
<td>Niger (the)</td>
<td>26.6</td>
</tr>
<tr>
<td>Spain</td>
<td>26.6</td>
</tr>
<tr>
<td>Nigeria</td>
<td>25.6</td>
</tr>
<tr>
<td>Indonesia</td>
<td>25.4</td>
</tr>
<tr>
<td>Iraq</td>
<td>21.7</td>
</tr>
<tr>
<td>Chad</td>
<td>21.6</td>
</tr>
</tbody>
</table>

Where supplies were used

- **42%** sub-Saharan Africa
- **38%** Asia
- **13%** Middle East and North Africa
- **5%** Central and Eastern Europe
- **2%** Central and South America and the Caribbean

Türkiye

Around the world, UNICEF delivered PPE, soap, disinfectant, and digital thermometers to help ensure the safe reopening of classrooms.
UNICEF achieved a total of **$117.9 million** in savings for donors and partners through strategic procurement across products and services, exceeding its target by $47.9 million.

UNICEF uses strategic procurement, price and information transparency, special contracting terms, and multi-year arrangements, along with partner collaborations (e.g., joint forecasting, coordinated procurement) to provide longer-term visibility on levels of demand. To ensure sustained availability and accessibility of strategic supplies for children, UNICEF focuses on a holistic procurement impact, considering price savings and, increasingly, other value elements such as social and environmental impact.

**Savings targets and results 2018–2021**

<table>
<thead>
<tr>
<th>Year</th>
<th>Targets</th>
<th>Excess savings</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>$260.0</td>
<td>$91.2</td>
</tr>
<tr>
<td>2019</td>
<td>$270.0</td>
<td>$93.3</td>
</tr>
<tr>
<td>2020</td>
<td>$106.6</td>
<td>$70.0</td>
</tr>
<tr>
<td>2021</td>
<td>$70.0</td>
<td>$70.0</td>
</tr>
</tbody>
</table>

**Indonesia**

A nurse administers a dose of the pneumococcal conjugate vaccine (PCV) in West Nusa Tenggara Province, Indonesia. Pneumonia is the single largest infectious cause of death in children worldwide. The PCV protects children from pneumonia caused by bacteria.
## Savings by product and services

<table>
<thead>
<tr>
<th>Product/Service</th>
<th>Amount</th>
<th>Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pneumococcal vaccine</strong></td>
<td>$70.578 M</td>
<td>- Bill &amp; Melinda Gates Foundation (BMGF), Gavi, the Vaccine Alliance, WHO, advance market commitment donors</td>
</tr>
<tr>
<td><strong>Immunization ice-lined and solar direct drive refrigerators</strong></td>
<td>$2.165 M</td>
<td>- Gavi, BMGF, suppliers</td>
</tr>
<tr>
<td><strong>Antimalarials – artemisinin-based combination therapies</strong></td>
<td>$1.619 M</td>
<td>- Medicines for Malaria Venture, PAHO, WHO, RBM, Partnership to End Malaria suppliers</td>
</tr>
<tr>
<td><strong>COVID-19 diagnostics</strong></td>
<td>$16.718 M</td>
<td>- African Union (AU), Centers for Disease Control and Prevention (CDC), Foundation for Innovative New Diagnostics (FIND), Global Drug Facility (GDF), Global Fund, Pan American Health Organization (PAHO), Islamic Development Bank (IsDB), UN Development Programme (UNDP), Unitaid, WHO, World Bank suppliers</td>
</tr>
<tr>
<td><strong>Inactivated polio vaccine</strong></td>
<td>$11.207 M</td>
<td>- WHO, Gavi, Global Polio Eradication Initiative (GPEI), BMGF suppliers</td>
</tr>
<tr>
<td><strong>Oxygen therapy products</strong></td>
<td>$0.938 M</td>
<td>- suppliers</td>
</tr>
<tr>
<td><strong>Freight service costs</strong></td>
<td>$0.935 M</td>
<td>- UN agencies, suppliers</td>
</tr>
<tr>
<td><strong>Ready-to-use therapeutic food</strong></td>
<td>$7.570 M</td>
<td>- USAID Bureau for Humanitarian Assistance (BHA), UK Foreign, Commonwealth and Development Office (FCDO), Codex Alimentarius Commission, WHO, academia suppliers</td>
</tr>
<tr>
<td><strong>Rotavirus vaccine</strong></td>
<td>$2.392 M</td>
<td>- Gavi, WHO, suppliers</td>
</tr>
<tr>
<td><strong>Long-lasting insecticidal nets</strong></td>
<td>$1.300 M</td>
<td>- African Leaders Malaria Alliance (ALMA), RBM, Alliance for Malaria Prevention, Unitaid, UN Special Envoy for Malaria, UNDP, United States Agency for International Development (USAID), FCDO, WHO, World Bank suppliers</td>
</tr>
<tr>
<td><strong>Children’s winter clothes</strong></td>
<td>$0.593 M</td>
<td>- Gavi, WHO, suppliers</td>
</tr>
<tr>
<td><strong>Hygiene kits</strong></td>
<td>$0.117 M</td>
<td>- suppliers</td>
</tr>
<tr>
<td><strong>Tetanus toxoid-containing vaccines for adolescents and adults</strong></td>
<td>$0.388 M</td>
<td>- suppliers</td>
</tr>
<tr>
<td><strong>Hepatitis B vaccine</strong></td>
<td>$0.003 M</td>
<td>- suppliers</td>
</tr>
<tr>
<td><strong>COVID-19 diagnostics</strong></td>
<td>$0.075 M</td>
<td>- UN agencies, suppliers</td>
</tr>
<tr>
<td><strong>Hepatitis B vaccine</strong></td>
<td>$0.135 M</td>
<td>- suppliers</td>
</tr>
<tr>
<td><strong>Antiretrovirals</strong></td>
<td>$0.488 M</td>
<td>- Global Fund, Medicines Patent Pool, UNAIDS, WHO, suppliers</td>
</tr>
<tr>
<td><strong>Rotavirus vaccine</strong></td>
<td>$0.232 M</td>
<td>- Gavi, WHO, suppliers</td>
</tr>
<tr>
<td><strong>Pneumococcal vaccine</strong></td>
<td>$0.03 M</td>
<td>- suppliers</td>
</tr>
<tr>
<td><strong>Ready-to-use therapeutic food</strong></td>
<td>$0.03 M</td>
<td>- suppliers</td>
</tr>
<tr>
<td><strong>Rotavirus vaccine</strong></td>
<td>$0.04 M</td>
<td>- suppliers</td>
</tr>
<tr>
<td><strong>Long-lasting insecticidal nets</strong></td>
<td>$0.05 M</td>
<td>- suppliers</td>
</tr>
<tr>
<td><strong>Children’s winter clothes</strong></td>
<td>$0.01 M</td>
<td>- suppliers</td>
</tr>
</tbody>
</table>

### Procurement approaches used
- Leveraging partnerships (e.g., coordinated forecasts and procurement, LTA-sharing)
- Price transparency
- Special contracting
- Strategic procurement
- UNICEF long-term arrangements (LTAs)
- Other (e.g., reduced material costs)

* Local procurement, Middle East and North Africa region.
COVID-19 RESPONSE
A 19-year-old mother receives her first dose of COVID-19 vaccine in Chiwinga Village, Kasungu District, thanks to the Government’s mobile outreach vaccination strategy. The commitment to vaccine equity has united UNICEF, governments, health partners, and the private sector in the immense effort to deliver vaccines where they were needed, no matter how difficult or far.
Hand in hand with partners, UNICEF is using innovative approaches to ensure that no country is left behind in accessing tools to curb the COVID-19 pandemic.

UNICEF is one of 10 leading health and development agencies that form the Access to COVID-19 Tools Accelerator (ACT-A), a global collaboration which aims to accelerate the development, production, and equitable access to COVID-19 tests, treatments, and vaccines.

As a key cross-cutting partner in all of the four ACT-A pillars – Vaccines (COVAX), Therapeutics, Diagnostics, and Health Systems and Response Connector – UNICEF plays an end-to-end role in procuring, shipping, and preparing countries for the rollout of critical supplies including vaccines, treatments, tests, injection devices, cold chain equipment, and personal protective equipment (PPE) for health workers.

COVAX, the vaccine pillar of ACT-A, is co-convened by the Coalition for Epidemic Preparedness Innovations (CEPI), Gavi, the Vaccine Alliance, UNICEF, and the World Health Organization (WHO).

As the lead procurement agency for COVAX, in collaboration with the Pan American Health Organization (PAHO), UNICEF established long-term supply agreements to help 92 low- and middle-income countries and more than 97 upper middle-income and high-income nations get access to COVID-19 vaccines. Together, these countries represent more than four-fifths of the world’s population.

Cambodia

The COVID-19 vaccine rollout in Battambang Province was made possible through the principle of country-to-country dose sharing through the COVAX Facility, and delivered by UNICEF.
Supporting COVID-19 vaccine procurement beyond COVAX

In response to COVID-19, national governments used all means within their power to secure rapid access to COVID-19 supplies, often using multiple procurement channels. These included:

- Procuring vaccines directly from manufacturers
- Procuring via COVAX
- The African Vaccine Acquisition Trust (AVAT), launched by the African Union (AU), aiming to secure secure vaccine doses to complement initiatives such as COVAX
- Procuring via organizations such as UNICEF or PAHO, independent of other initiatives
- Receiving vaccines through country-to-country donations

UNICEF widened its approach in order to deliver vaccines as quickly as possible. By acting as a procurement agency for countries using multiple channels, UNICEF aims to complement and supplement COVAX and facilitate progress towards the common goal of ensuring equitable access to quality-assured COVID-19 vaccines.

This multi-pronged effort helps countries to secure access to more doses sooner, while providing long-term visibility into vaccine supply issues. The result is faster rollout of COVID-19 immunization programmes. In 2021, UNICEF supported the procurement and delivery of over 884.2 million doses of COVID-19 vaccine.

Working simultaneously through the ACT-A partnerships and the multi-lane approach, UNICEF strengthened countries’ efforts to curb the devastating impact of the pandemic, particularly on children.

ACT-A Supplies Financing Facility

In March 2021, UNICEF launched the ACT-A Supplies Financing Facility (ACT-A SFF), a fund designed to support the immense global effort to provide equitable access to COVID-19 tests, treatments, and vaccines.

In 2021, against a target of $2.5 billion, contributions of $1.124 billion were raised for ACT-A SFF in support of the largest health and logistics operations ever undertaken. In 2021, ACT-A SFF supported COVID-19 response efforts in 89 countries, while securing access to in-demand supplies for additional low- and middle-income countries.

Funds received by ACT-A SFF secured COVID-19 supplies, including

- Over 20 million units of personal protective equipment (PPE)
- Approximately 21 million COVID-19 vaccines plus accompanying syringes and safety boxes
- Over 1,000 units of cold chain equipment
- Over 1 million COVID-19 diagnostic tests
- Approximately 20 million COVID-19 therapeutic products
- Nearly 7,000 oxygen concentrators and other oxygen therapy supplies
COVID-19 upended the lives of children and their families across the globe. As the pandemic entered its second full year in 2021, case numbers soared, lives were tragically lost, and new, highly transmissible variants emerged.

The broader effects of the pandemic have deeply affected children, disrupting their education, social and family life and deepening poverty levels. The mental health impacts on children, adolescents and families continue to rise.

UNICEF has been at the forefront of efforts to vaccinate the world against this deadly disease and end the acute phase of the pandemic. In 2021, the largest vaccine supply operation in history got underway, with UNICEF leading the procurement and delivery of COVID-19 vaccines on behalf of COVAX.

COVAX – the vaccines pillar of the Access to COVID-19 Tools Accelerator (ACT-A) – is a global collaboration dedicated to the development, production, and equitable distribution of vaccines around the world.

Through the COVAX Facility – and working with Gavi, the Vaccine Alliance, the World Health Organization (WHO) and the Coalition for Epidemic Preparedness Innovations (CEPI) – UNICEF is leading efforts to procure and supply COVID-19 vaccines globally, while the Pan American Health Organization (PAHO), is supplying the region of the Americas.

In 2021, UNICEF established eight long-term agreements (LTAs) with vaccine manufacturers to support all COVAX-participating countries and territories, including advance market commitment (AMC) and self-financing countries.

Thanks to giant leaps in research and development, and a huge expansion in manufacturing capacity to produce vaccines, COVAX established a diverse portfolio of COVID-19 vaccines in 2021 following their approval by WHO for Emergency Use Listing.
The first international COVAX delivery

For many, the COVAX journey truly began with the first international delivery of 600,000 vaccines to Ghana on 24 February 2021. The country’s President, Nana Akufo-Addo, reflected on the moment.

“COVID-19 has changed the world. It has cost lives, battered health systems, and damaged livelihoods,” he said. “But, through these challenges, we have seen the best of humanity exemplified through strong multilateral cooperation.”

Delivering supplies around the world, from remote Himalayan villages to tiny island communities in the Pacific, this complex and carefully coordinated operation was unprecedented. Within a few short weeks, UNICEF had shipped millions of vaccines to dozens of countries, overcoming a range of obstacles.

Political upheaval and conflict made some vaccine deliveries more difficult than others. The strong support from transport and logistics partners was essential to overcoming many challenges. For example, charter flights were used to deliver COVID-19 vaccines to Afghanistan and Yemen when commercial airspace was closed or difficult to access.

But soon after this promising start, stumbling blocks began to appear.

Much of the early vaccine supply had been bought up by wealthy nations before COVAX had the required financing to secure supplies. Manufacturers struggled to scale up production to meet overwhelming demand, while vaccine nationalism and export bans made supplies even scarcer.

Extraordinary collaboration

In June 2021, UNICEF and COVAX partners launched a major public campaign calling on well-supplied donor countries to share doses with others. As a result, more donated doses began to flow to COVAX.

Donors were not alone in rising to this extraordinary challenge. Manufacturers stepped up to accelerate the development and production of vaccines. Airlines and the freight and logistics sectors signed agreements with UNICEF that prioritised the delivery of COVID-19 vaccines, medicines, medical devices, and other supplies essential for the pandemic response.

As soon as vaccines became available, governments showed commitment and agility in scaling up national vaccination campaigns that targeted at-risk groups. The valiant efforts of front-line health workers were unstinting, turning vaccines into vaccinations while also testing and caring for those affected by COVID-19 and other illnesses.
**Delivering at scale**

During the final months of 2021, vaccine deliveries to low-income countries significantly increased, ensuring a steady volume of supplies. In total, COVAX delivered 957.7 million doses to 144 countries in 2021, of which 59 per cent were donated. In December alone, UNICEF and PAHO delivered 340 million doses, matching the total quantity delivered during the first nine months of operations.

It’s not just vaccines that are required for this monumental task. UNICEF has been delivering syringes, safety boxes, cold chain equipment, oxygen supplies, personal protective equipment (PPE) and other supplies to help respond to COVID-19 and strengthen health systems over the long term.

The COVAX Facility is committed to global vaccine equity. Over 80 per cent of all COVAX doses have been shipped to low and lower-middle income countries. Protecting those most at risk, including health workers, is crucial to mitigating the public health and economic impact of the pandemic while alleviating disruption to essential services for children.

**Innovation**

COVAX has given rise to innovations that will leave a legacy beyond this pandemic. Examples include the no-fault compensation scheme, standardised indemnity and liability for vaccines, and pandemic labelling.

UNICEF is committed to transparency in its vaccine procurement and delivery operations, making information on vaccine pricing, procurement, and country support publicly available on its website. UNICEF’s COVID-19 Vaccine Market Dashboard became the go-to resource for governments, researchers, the media and more throughout 2021.

**The journey continues**

In 2022, access to COVID-19 vaccine supplies is no longer considered constrained. However, closing the vaccine equity gap remains a challenge. Demand for COVID-19 vaccines will vary from country to country based on national response plans and epidemiology.

Going forward, the equity-based approach will mean helping countries with higher absorption capacities to reach their vaccination targets and working hard to provide tailored support for others to ensure no country is left behind.

Every country must have equal access to the whole range of COVID-19 countermeasures, such as tests, treatments, and PPE to protect health services and front-line workers and reduce the risks of more dangerous variants emerging in the future.

UNICEF, Gavi, and WHO have spent the last two decades working with countries to support the strengthening of health systems – work that supports monitoring, readiness, and delivery for COVID-19 vaccines in lower-income countries.

“Around the globe, we continue to work hand in hand with countries to build back better health systems,” said Etleva Kadilli, Director of UNICEF Supply Division. “Even while we are doing our utmost to respond with the urgency this crisis demands, we are also keeping a vigilant eye on the future, so we can better prepare for the next pandemic.”

**Together, delivering COVID-19 vaccines to the world**

In collaboration with the Pan American Health Organization (PAHO), UNICEF is leading COVID-19 vaccine procurement and delivery on behalf of COVAX. UNICEF and PAHO worked together to ensure quality-assured vaccines were shipped to countries as soon as possible to protect high-risk and vulnerable groups and front-line health workers.

By the end of 2021, UNICEF and PAHO delivered more than 912.7 million COVID-19 vaccines to 133 countries. As soon as vaccines touched down at airports, UNICEF and PAHO supported governments in rolling out their vaccination campaigns, including in difficult-to-reach areas such as mountain villages, Pacific islands, and conflict settings.

This work was built on the back of UNICEF and PAHO’s joint vaccine tender launched in late 2020.
Sudan
UNICEF Supply and Logistics Officer Amna Osman welcomes the delivery of COVID-19 vaccines at Khartoum International Airport on 3 March 2021. Sudan was the first country in the Middle East and North Africa region to receive COVID-19 vaccines through the COVAX Facility.
UNICEF pre-positioned 1 billion auto-disable syringes so that global immunization efforts could begin when vaccines arrived.

By February 2021, the world was on standby to receive the first shipment of COVID-19 vaccines through the COVAX Facility – the largest vaccine procurement and delivery operation ever undertaken.

The operation began months earlier when UNICEF’s global supply hubs in Copenhagen and Dubai began stockpiling hundreds of millions of auto-disable syringes and safety boxes. The aim was to have these critical supplies pre-positioned in low- and middle-income countries so that vaccination campaigns could be launched as soon as the first COVID-19 vaccines arrived.

Journey of the syringe

The first delivery of 100,000 syringes landed in Malé, the Maldives on 23 February. UNICEF and its COVAX partners delivered 845.7 million syringes to 92 countries by the end of the year. They included 0.5ml, 0.3ml, and dilution syringes for different vaccines in the COVAX portfolio. In addition, 8.7 million safety boxes were delivered to ensure used needles could be disposed of properly.

In non-pandemic times, UNICEF transports syringes and safety boxes by sea. However, since time was of the essence, UNICEF used custom charter flights for deliveries to emergency locations and remote destinations – for example, some of the Pacific islands.

Overcoming supply bottlenecks

By mid-2021, global demand for syringes exceeded supply. UNICEF renegotiated supplier contracts and signed long-term agreements (LTAs) with new manufacturers. As a result, auto-disable syringe availability was maximised to support global vaccination efforts into 2022.
In addition to effective vaccines, the global drive to contain the COVID-19 pandemic depended on cold chain equipment: cold rooms, refrigerators, and freezers.

UNICEF and COVAX partners anticipated that most COVID-19 vaccines would require storage between 2°C and 8°C. However, with the scale of MnRA donations from governments, investments in ultra-cold chain (UCC) were needed for storage between -60°C and -86°C.

**Anticipating cold chain needs**

Thanks to long-term agreements established with UCC manufacturers in 2020, UNICEF could place orders quickly, and manufacturers ramped up production without delay.

End-to-end installation and capacity building would usually take up to 18 months. However, in collaboration with Gavi, the Vaccine Alliance, manufacturers, donors, COVAX partners, the transport sector, and country teams, UNICEF completed 95 per cent of its first-round targets in four months.

**Delivering cold chain at scale**

In 2021, UNICEF delivered 400 cold rooms and over 47,000 vaccine refrigerators to more than 90 countries. Over 200 cold rooms and 5,000 vaccine refrigerators were procured through COVAX. UNICEF also delivered over 800 UCC freezers to more than 70 countries. Two-thirds were completed on behalf of COVAX, and the rest was through bilateral support.

**Building back better**

In partnership with the Gavi-developed Cold Chain Equipment Optimization Platform (CCEOP), UNICEF is working with multiple stakeholders to expand cold chain capacity and make vaccine equity a reality for all.

**Mongolia**

Specialised freezers at the National Center for Communicable Diseases in Ulaanbaatar are keeping COVID-19 MnRA vaccines ultra-cold for distribution.
In 2021, UNICEF was a leading agency procuring and delivering personal protective equipment (PPE) such as surgical masks, face shields, gloves, coveralls, boots, and medical gowns.

All PPE procured and delivered by UNICEF meets strict technical quality and performance specifications set by the World Health Organization (WHO). They protect front-line workers supporting the rollout of COVID-19 vaccinations and the resumption of routine immunization programmes.

Pre-positioning for fast delivery

Through a joint tender process, 11 UN agencies and two international non-governmental organizations worked together to establish long-term agreements (LTAs) with an expanded and diversified PPE manufacturing base. A strong and resilient supplier base is critical in mitigating stockouts of life-saving supplies in any future health crisis.

The delivery of PPE stockpiled in global supply hubs in Copenhagen, Dubai, Shanghai, and Panama City UNICEF helped overcome the ongoing turmoil in the logistics sector. In 2021, UNICEF shipped 434 million PPE items worth $131.4 million.

Consolidating and customising the supply response

The Democratic Republic of the Congo, Ethiopia, Lebanon, Yemen, and Zimbabwe received the largest consignments of UNICEF-procured PPE. Sizeable quantities were also shipped to emergencies in Afghanistan, Sudan, and the Syrian Arab Republic.

UNICEF frequently consolidated PPE with other supplies using customised transport solutions such as air cargo charters. For example, Venezuela received PPE, vaccines, and water and sanitation kits in a single shipment.

Bundling PPE to meet complex needs

To facilitate the rollout of infection prevention and control (IPC) measures in health facilities, UNICEF designed four PPE kits containing appropriate combinations of items to cover a range of low- and high-risk infection exposure scenarios.

434 million items of personal protective equipment protected health-care workers and health systems in 115 countries.
UNICEF increased access and affordability of COVID-19 treatments in more than 83 countries.

At the beginning of 2021, therapeutic options for COVID-19 were mainly limited to corticosteroids such as dexamethasone. Dexamethasone was the first therapeutic available through the UNICEF Supply Catalogue. In partnership with Unitaid and with support from donor governments, UNICEF delivered more than 17.3 million units of dexamethasone to 37 low- and middle-income countries.

When the World Health Organization (WHO) recommended additional therapeutics, including IL6 receptor blockers and neutralising monoclonal antibodies, access was limited.

**Securing access to novel therapeutics**

In a July industry consultation on novel oral antivirals, UNICEF and Access to COVID-19 Tools Accelerator (ACT-A) partners outlined their interest and market needs.

UNICEF became the first procurement agency in ACT-A partnership to establish long-term agreements (LTAs) for novel COVID-19 oral antivirals with the original manufacturer and generic suppliers. This included a supply agreement for Molnupiravir, for which procurement depended on clinical recommendations, regulatory approvals, and quality assurance.

**Building on oxygen innovations**

The pandemic accelerated UNICEF’s work in oxygen innovation which had been focused on treating pneumonia and other respiratory illnesses. UNICEF deployed the Oxygen System Planning Tool to support Bangladesh, Ghana, Mongolia, and other countries to map oxygen demand and plan the implementation of oxygen supplies in health facilities.

In all, more than 28,000 oxygen concentrators were procured. Other critical supplies included oxygen plants, cylinders, and infant nasal cannulas.

**Ukraine**

In Kharkiv, an infection specialist wearing full PPE adjusts an oxygen concentrator tube for her elderly patient. In 2021, UNICEF accelerated innovations for health systems to produce oxygen quickly and reliably.
Equitable access is key to ending the pandemic. UNICEF shipped 12.4 million tests to 66 countries.

COVID-19 diagnostic tests allow governments to track the level and spread of infections and take measures to limit transmission. However, at the start of the pandemic, many low- and middle-income countries lacked sufficient equipment and facilities.

**Delivering affordable diagnostic tests**

In 2021, UNICEF delivered 7.0 million rapid diagnostic tests and 5.4 million molecular tests, isolation kits, sample collection kits, and laboratory equipment required for polymerase chain reaction (PCR) testing.

UNICEF pooled demand from countries and engaged with suppliers and partners to negotiate the most competitive pricing for WHO-approved quality-assured test kits – including the most affordable $2.80 per test PCR test kit.

UNICEF expanded its COVID-19 diagnostics manufacturer base to 19, helping to ensure uninterrupted access.

**Partnerships for results**

Through the Access to COVID-19 Tools Accelerator (ACT-A) and in collaboration with other partners, UNICEF has been working on expanding global access to equipment and testing wherever they are most needed. UNICEF also collaborated with 13 operational research projects and 21 advocacy projects in low- and middle-income countries to support the scale-up of testing at community level.

ACT-A supported research and development investments for manufacturing rapid antigen tests in Brazil, China, India, and Senegal. A request for proposals was issued to accelerate the manufacturing availability of molecular diagnostics in low- and middle-income countries.
Nepal
At a border crossing into Nepal, individuals and families are met by health workers for temperature checks and COVID-19 antigen tests.
For patients with severe COVID-19, access to oxygen can be the difference between life and death.

Before the pandemic, oxygen was rarely available in low- and middle-income countries outside capital cities or private hospitals. The terrible consequence of this shortfall is seen among the youngest patients with pneumonia – a disease that, every year, claims the lives of 700,000 children under 5 years old.

The pandemic turned this gap into a crisis. As health systems became overwhelmed, medical staff were forced to choose the patients who would receive limited oxygen supplies.

In response, UNICEF set to work with industry partners on an innovative emergency solution: the Oxygen Plant-in-a-Box. The package includes everything needed to quickly install and operate a fully-functional pressure swing adsorption (PSA) oxygen plant at a health facility. The device can produce enough oxygen to treat up to 50 COVID-19 patients or 100 children with severe pneumonia.

The innovation transformed rapidly from idea to reality. By mid-December, patients at the Soroti Regional Referral Hospital in Uganda were the first to receive life-saving oxygen from a UNICEF Oxygen Plant-in-a-Box. By the end of the year, over 16 other countries were in the process of ordering this innovative product to respond to COVID-19 and strengthen health systems for the long term.
**500 pieces of equipment and accessories packaged for a rapid and comprehensive response**

The procurement and installation of standard oxygen plants is a highly complex and technical process. Most plants are custom-ordered to suit the individual needs of each facility. This results in long lead times in designing, ordering and installing the equipment.

To simplify the process, UNICEF worked with suppliers to design a series of standardised small, medium and large plant packages, with competitive long term agreements (LTAs) that helped reduce the price. The large plant packages comprise more than 500 different pieces of equipment and accessories, including oxygen generators, cylinders, humidifiers, and trolleys.

Critically, the equipment needed to be robust, capable of operating in extreme heat or high altitudes, and withstand electrical voltage fluctuations common in the challenging environments where they would be used.

By using an innovative approach to standardise procurement and enable short-term pre-positioning, UNICEF shortened lead times from as long as 16 weeks to two. If a country faces a sudden surge of COVID-19 cases or another health emergency, a plant can be delivered by air freight and made operational within four weeks.

Key to the success of the project has been the technical support provided by UNICEF Supply Division to guide countries in preparing health facilities for plant installation.

**Building stronger health systems for the future**

Improving access to therapeutic oxygen remains critical to UNICEF’s response to the COVID-19 pandemic. More equitable access to oxygen serves the broader goal of child survival programmes by strengthening the capacity of health systems to treat pneumonia and other childhood diseases.

To that end, the UNICEF Oxygen Plant-in-a-Box has been carefully designed to ensure sustainability.

While all plants include cylinder filling stations, which allow for the immediate delivery of oxygen, they also have the necessary equipment to connect to a permanent ward piping system if or when one is available. Spare parts and maintenance kits are part of the package. So are two years of preventative maintenance service visits by the manufacturer’s in-country partner and 24/7 remote support.

In this way, the investments made in medical oxygen in response to COVID-19 will continue to save thousands of children’s lives long into the future.

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**Finding innovative solutions to deliver oxygen in challenging settings**

- **Oxygen System Planning Tool**: UNICEF developed the Oxygen System Planning Tool to help governments plan sustainable oxygen systems. This tool calculates oxygen demand at facilities, recommends oxygen source solutions, provides comprehensive procurement lists, and calculates capital and operational costs.

- **Multi-modal Acute Respiratory Infection Diagnostic Aid (ARIDA)**: UNICEF is working to scale up the use of innovative multi-modal devices to help health workers monitor oxygen levels in patients’ blood so they know when to increase, decrease, or discontinue the provision of oxygen.

- **Resilient Oxygen Concentrator**: UNICEF is driving the development of oxygen concentrators resistant to dust, high heat, humidity, and power-related issues.

- **Resilient Bubble Continuous Positive Airway Pressure (bCPAP) to deliver oxygen to newborns**: UNICEF is seeking innovative solutions to develop a low-cost and resilient machine to deliver oxygen to newborns. Current products are expensive and not suitable for low resource settings.
UNICEF and long-standing transportation partners joined forces to deliver life-saving supplies.

Intensified disruptions to international aviation, rising demand for air freight cargo space, and a severe shortage of shipping containers threatened to derail UNICEF’s efforts to deliver essential supplies.

As a key COVAX Facility partner, UNICEF was tasked with procuring and delivering urgently needed COVID-19 supplies, including vaccines, auto-disable syringes, personal protective equipment (PPE), and cold chain fridges and freezers.

Meanwhile, deliveries of childhood vaccines, nutrition supplies, medical items, education kits, and water and sanitation equipment faced extended shipping timelines averaging six weeks from booking to arrival – almost triple compared with transit in pre-pandemic times.

In an intensely challenging year, collaboration and engagement between UNICEF and the logistics sector helped keep delays to a minimum. For example, through the in-kind contribution of logistics support from the HOPE Consortium, UNICEF was able to transport vital supplies, including vaccine freezers.

**The Humanitarian Airfreight Initiative**

January saw the launch of the Humanitarian Airfreight Initiative (HAI), the first-ever collaboration between UNICEF, the airline industry and its umbrella body, the International Air Transport Association (IATA). 16 major airlines committed to ensuring faster deliveries of COVAX vaccines and other COVID-19 supplies through prioritised bookings, fair pricing, and other measures.

By the end of 2021, HAI partners completed 1,600 shipments and delivered more than 957.7 million COVID-19 vaccines. Some required multi-stop charter flights and other customised transport solutions to deliver consignments to remote and difficult-to-reach destinations such as the Pacific islands and countries facing emergencies.

**Delivering COVID-19 supplies to the world**

1,160 **UNICEF staff**
specialising in supply and logistics in 150 countries worked to facilitate the arrival and rollout of vaccines, syringes, and other COVID-19 related supplies

16 **international airlines**
through the Humanitarian Airfreight Initiative (HAI), prioritised UNICEF deliveries of COVID-19 vaccines and supplies – a commitment that built on a Charter signed by 18 transport and logistics industry CEOs, UNICEF, and the World Economic Forum, to support UNICEF and COVAX countries

6 **international freight forwarder partners**
underpinned UNICEF’s efforts to ensure fast and secure international transport bookings

4 **major shipping line partners**
prioritised UNICEF’s COVID-19 deliveries

**Maldives**
In Malé, on 23 February 2021, Communication for Development Officer Mohamed Yasir receives syringes and safety boxes, part of the first wave of COVID-19-related shipments delivered by UNICEF on behalf of the COVAX Facility.
Freight and logistics partnerships

Alongside airlines, some of the world’s leading shipping and logistics companies supported UNICEF’s mission to ensure equitable access to supplies for children and their families:


- Deutsche Post DHL Group gave its expertise to help UNICEF track COVID-19 vaccine shipments, monitor supply forecasts and manage COVAX supplies pre-positioned in Dubai.

- Dubai Ports World provided critical warehousing to pre-position and distribute vaccines and other COVID-19 supplies in a multimillion-dollar partnership with UNICEF.

- Flexport donated airlifts to bring cold chain equipment to Venezuela and move pre-positioned supplies from Shanghai to the UNICEF supply hub in Dubai.

- The HOPE Consortium provided transport, storage, handling, global distribution services, and additional logistics capacity to support COVAX.

- Kuehne + Nagel supported UNICEF by managing emergency stock in the Dubai International Humanitarian City (IHC) and facilitated the first COVID-19 vaccine shipment under COVAX.

- The Port of Antwerp partnered with UNICEF to promote more sustainable supply chains, optimise transport corridors, and reduce bottlenecks in West Africa.

- The UPS Foundation assisted with delivering 3,000 oxygen concentrators to India to support health systems coping with a deadly second wave of COVID-19.

A HOPE Consortium’s delivery supporting COVAX transited through Liège Airport in Belgium, a strategic partner for UNICEF that consolidates supplies, for example, oxygen concentrators, ultra-cold chain freezers from China. From Liège Airport, HOPE Consortium’s airline partners and UNICEF’s freight forwarders combined with one charter flight to reach multiple destinations in Africa – all in one go.
In the aftermath of hurricanes Eta and Iota, newly distributed UNICEF backpacks and school supplies reaffirm that children’s right to education matters, even during crises.
A year of milestones towards equitable access to vaccines for children.

In 2021, UNICEF procured 2.299 billion doses of vaccines that protect children against diarrhoea, measles, pneumonia, polio, tetanus, tuberculosis, and other preventable diseases.

Thanks to the procurement principle of having multiple vaccine suppliers in place and ensuring buffer capacity in each market, UNICEF could place orders with a range of suppliers even if one or more faced constraints during the COVID-19 pandemic.

Expertise in forecasting and anticipating demand trends and a strong knowledge of market dynamics and the vaccine industry enabled UNICEF to consider the challenges facing production and supply chains. Planning helped minimise risks to countries and ensured timely access to vaccines.

**Complex logistics key to Pakistan’s MR vaccine introduction**

UNICEF procured over 113 million measles-rubella (MR) vaccine doses to target every child between 9 months and 15 years in Pakistan.

Transporting such a massive quantity of vaccines – the second-largest MR vaccine procurement in UNICEF’s history – required lengthy and complex logistical arrangements. MR vaccines were delivered in 41 commercial air shipments over five months without a single delay. The volume of auto-disable syringes needed for the campaign could fill more than 180 40-foot containers.

Careful planning ensured Pakistan’s health system could complete the campaign in two weeks. More than 386,000 health professionals, including 76,000 vaccinators and more than 143,000 social mobilisers, were involved.

**Towards a diverse and resilient supplier base in Africa**

In April, UNICEF welcomed the African Union (AU) and Africa Centres for Disease Control and Prevention (Africa CDC) commitment to increase the share of vaccines produced in Africa from 1 per cent to 60 per cent by 2040.

In line with its efforts to support a more diverse and resilient supplier base across the continent, UNICEF introduced an additional positive weighting in vaccine tender evaluations for prospective manufacturers who could contribute to strengthening the public health systems in African countries.

**Malaria vaccine – a study in market shaping**

Malaria is a leading cause of child mortality, and a preventative vaccine has been decades in the making.

In 2019, a pilot rollout of the malaria vaccine RTS,S/AS01e was launched in Ghana, Kenya, and Malawi. UNICEF provided demand forecasting, supplier coordination, and vaccine delivery for the Malaria Vaccine Implementation Programme (MVIP).

By 2021, 1 million children had received the malaria vaccine in the three pilot countries. Evidence showed it reduced deaths by almost a third.

As optimism grew around these results, UNICEF joined an advisory group for a WHO-commissioned malaria vaccine market study. In March, UNICEF began consulting with manufacturers and partners to design a procurement strategy to shape the first tender with the aim of accessing the largest quantity of malaria vaccine as quickly as possible.
Based on data generated by the pilot, WHO recommended the widespread use of the malaria vaccine for children in sub-Saharan Africa and other regions with moderate to high P. falciparum malaria transmission.

In December, UNICEF issued its first malaria vaccine tender. Using special contracting tools such as firm procurement commitments, flexible pricing, and preparedness to maximise dose procurement, UNICEF underlined its readiness to incentivise vaccine manufacturers and developers and mitigate supplier risk.
Between 2017 and 2021, UNICEF procured some 12,500 metric tons of ready-to-use therapeutic food for the country with the highest child malnutrition in the Pacific region.

Polo Stanley was just 6 months old when he was diagnosed with severe wasting. His mother had given him up for adoption, and his grandmother, Mina Pok, took him under her care.

In November 2021, Mina brought Polo to the Morata Clinic in the National Capital District of Papua New Guinea (PNG), a government health facility supported by UNICEF. When health worker Sister Vivian Mufi examined him, Polo weighed just 5.9 kilograms and had a mid-upper arm circumference (MUAC) measurement dangerously close to the severe wasting level.

Polo was immediately prescribed two months of treatment for severe wasting, including daily sachets of ready-to-use-therapeutic food (RUTF) and weekly monitoring of his weight and MUAC measurement.
In the past two decades, RUTF has become a vital commodity for UNICEF and other nutrition partners in treating potentially life-threatening cases of malnutrition among young children. RUTF is a highly nutritious, peanut-based paste that can be eaten directly from the sachet. It needs no cooking or refrigeration and is easily digestible with an appealing taste.

Over the last four years, UNICEF has procured between 75 and 80 per cent of the world’s RUTF – equivalent to 49,000 metric tons for use in its nutrition programmes worldwide. Between 2017 and 2021, UNICEF procured some 12,500 metric tons for PNG.

During his treatment, Polo was given a total of 72 RUTF sachets. After two months, he weighed 10 kilograms and had a MUAC of 14.5 centimetres – comfortably out of the malnutrition danger zone.

Sister Mufi was delighted by Polo’s weight gain.

“How fast he recovered is amazing,” she said.

Across PNG, thousands of children suffer from potentially lethal levels of malnutrition. The condition remains a significant underlying cause of illness and death among children under 5 years old.

“Papua New Guinea has the highest rates of all types of child malnutrition in the Pacific region,” said Andrew Musyoki, Chief of Nutrition with UNICEF Papua New Guinea. “The country is off-track in reaching the global nutrition targets set by the World Health Assembly.”

“At present, 600,000 children under 5 – almost 50 per cent of all children in this age group – are stunted. This malnutrition prevalence is among the highest in the world. In addition, 14 per cent of children are wasted and in need of urgent care and treatment.”

At such levels, malnutrition has serious implications for the country’s long-term development.

UNICEF’s priority is to help the Government provide improved nutrition and care practices, particularly in disadvantaged and marginalised communities. This support includes making available globally standardised therapeutic foods and nutrition supplies like RUTF. The package also includes vitamin A for all eligible children and iodine supplementation for communities with limited access to iodised table salt.

The early detection of severe wasting cases in the community and the provision of treatment for children not suffering from associated medical complications are other important elements of the approach. Meanwhile, to ensure effective service delivery, UNICEF works with the Government to provide training for health workers. The pre-service curriculum for health worker cadres is currently under review.

“We need to reach more children by taking this life-saving approach to scale,” said Musyoki. “Limited funding is a key constraint, unfortunately.”

**Papa New Guinea**

In 2021, Polo Stanley was one of 600,000 children under 5 years old in Papua New Guinea who suffered from malnutrition. A course of RUTF was key to getting Polo to a healthy weight after being diagnosed as dangerously close to wasting.
For Poheli Chakma, the joy of being a new mother was interrupted nine days after delivering her first child, a son, on 26 February 2022. Poheli’s baby had been born via C-section at the Rangamati General Hospital – a one-hour boat journey from her village. While recovering in hospital, Poheli received counselling on newborn care. She learned to watch for the symptoms and danger signs that would signal that her newborn needed treatment at the UNICEF-funded Special Care Newborn Unit (SCANU), which opened on 14 December 2021.

On 7 March, when her baby developed a rash and fever, she rushed him back to the Rangamati General Hospital, and he was admitted to the SCANU. A diagnosis of neonatal sepsis was made quickly, and after five days of treatment, he was well enough to be discharged.

“We received wonderful service from such a well-equipped and clean facility,” said Poheli.

Paediatric consultant Dr Md. Abdul Hai remembered the hospital’s situation before the SCANU. “We used to refer such cases to hospitals in the city, which is not convenient for poor families who live in remote locations,” he said. “We are very happy to have this facility in our hospital now – it really means a lot.”

Improving health-care infrastructure for newborns

A decade ago, many hospitals in Bangladesh did not have adequate facilities to manage sick newborns. Seriously sick babies were cared for in ordinary paediatric wards. But without proper safety procedures, case fatalities were high.

Since 2011, UNICEF has been helping the Ministry of Health and Family Welfare develop standard operating procedures while implementing a generic layout design for SCANUs in an expanding number of health facilities.

During the pilot phase, UNICEF helped set up SCANU models in six hospitals and provided essential newborn care equipment such as oxygen concentrators, flowmeters, radiant warmers, phototherapy machines, pulse oximeters, and resuscitators.

By 2021, SCANUs had been established in 37 secondary and tertiary level hospitals covering 34 districts. In 15 additional districts, with UNICEF technical support, the Government replicated the SCANU model using domestic resources.

“All medical equipment in SCANUs must function properly in low-resource settings. Where possible, devices are equipped with battery backups and can operate without needing an external supply of oxygen or medical air,” said Abdallah Makhlof, Chief, Health Technology Centre of UNICEF Supply Division.

An assessment of 200 health facilities in Bangladesh revealed that 70 per cent did not have adequate oxygen infrastructure and essential oxygen equipment to treat COVID-19 and non-COVID-19 cases. In response, UNICEF collaborated with the Government to install an oxygen pipeline to all SCANU beds through an additional supply of oxygen concentrators and pulse oximeters.
Bangladesh
Paediatric consultant Dr Md. Abdul Hai examines a newborn at a Special Care Newborn Unit (SCANU) in rural Bangladesh. UNICEF provided specialised medical equipment in 37 SCANUS in 2021, giving sick newborns a fighting chance to survive.
At the start of 2021, COVID-19 lockdown restrictions kept many classrooms closed. In September, UNICEF estimated that children worldwide had already lost 1.8 trillion hours of in-person learning.

In the course of the year, UNICEF provided essential supplies to allow governments and education authorities to reopen schools safely. The provision of thermometers and personal protective equipment (PPE) meant that children could be screened, and mask policies enforced. With UNICEF’s support, handwashing facilities were installed or refurbished, and hand sanitiser, soap, and disinfectant supplies were distributed.

The sight of children carrying their precious books and school supplies in a blue UNICEF backpack has come to symbolise the start of a new academic
year. In 2021, UNICEF shipped nearly 1.3 million blue backpacks to Africa, Central Asia and Latin America as part of its support for children’s learning all around the world.

In countries experiencing emergencies, the bags are a tangible reminder of every child’s right to education. For children and young people who have lost everything due to conflict or other disasters, receiving an individual backpack reaffirms that each child matters and that their learning will always be important.

**Yemen: Ensuring children can learn amid conflict**

The brutal conflict in Yemen is now seven years old. Children entering the first years of school have never known a day of peace.

In 2021, 70 per cent of the population – nearly 24 million people – needed humanitarian assistance while nearly 4 million, including 2 million children, were internally displaced.

By October 2020, schools across Yemen had emerged from the pandemic, and in-person learning resumed. However, close to 3,000 schools had already been destroyed, damaged, or occupied – and were no longer fit for purpose.

To help address the situation, UNICEF created a customised school bag kit specially designed for children in Yemen. Introduced in 2018 in consultation with Yemeni education authorities, the kit consists of a backpack filled with pens, pencils, exercise books and other essential stationery supplies.

The school bag kit is given to children whose families are most affected by the economic consequences resulting from the humanitarian crisis in the country. For parents who cannot afford to buy school supplies, the school bag kit is an incentive to support their children to continue learning.

The kit is particularly important for children who have lost everything as a result of being displaced from their homes. The kit allows them to continue attending school either in host communities or in safe spaces for learning and play set up in camp settings.

During 2021, UNICEF Yemen provided individual learning materials to over 220,000 children, 43 per cent of them girls. This was achieved despite disruptions to the international movement of goods and a severe shortage of shipping containers.

Security issues compounded the situation, frequently hindering the movement of supplies from ports on the Gulf of Aden to the capital city of Sana’a and other destinations. Coping with these ongoing logistical issues required a mix of caution and agility – and always having a Plan B ready just in case.

In 2021, UNICEF’s flexibility and coordination with government and implementing partners helped provide 720,000 children with access to formal and non-formal education, including early learning.

**Myanmar**

Two 7-year-olds with their new UNICEF backpacks shortly after school resumed in November.
A range of UNICEF programme supplies are helping the most vulnerable children in Pakistan survive and thrive.

Not so long ago, 16-year-old Malook was among an estimated 23 million children in Pakistan not attending school. But in 2018, she joined a UNICEF-supported Accelerated Education Programme (AEP) centre in the Bahawalpur district, Punjab.

Since then, Malook walks with a group of girls to attend AEP classes – each one carrying her distinctive blue UNICEF backpack. Backpacks were among the $1 million in education supplies that UNICEF provided to Pakistan in 2021. Malook will soon finish her AEP studies and is closer to realising her hope to become a teacher.

“Education has given me the confidence to fulfil my dreams,” she says.

Children and adolescents attending the AEP have either never had the opportunity to study or had to drop out before completing their primary school years. When they graduate from the AEP, they can be mainstreamed into lower secondary grades in public schools. UNICEF supports 240 AEP centres in Punjab. As a result, some 10,000 children are learning and looking toward a brighter future.

**Addressing health and nutrition needs**

UNICEF delivered 30,000 cartons of ready-to-use therapeutic food (RUTF), worth $6 million, to treat severe acute malnutrition (SAM) in children under 5 years old. In 2021, some 70,000 children diagnosed with SAM were given RUTF at UNICEF-supported health facilities. Nearly 600,000 children received
multi-micronutrient supplements to fortify foods and protect against anaemia and vitamin and mineral deficiencies. Over 287,000 trained front-line workers provided 32 million children under 5 years old with vitamin A supplements in a door-to-door campaign.

Pakistan is one of two countries where the wild poliovirus continues to circulate. UNICEF delivered over $400 million in polio and other childhood vaccines and biological supplies. A UNICEF-supported national polio campaign reached 40 million children.

**Pandemic response**

UNICEF delivered over $30.7 million in health supplies to Pakistan. $22.3 million in cold chain equipment will support current and future vaccination campaigns. As part of the COVAX Facility, UNICEF was involved in delivering more than 100 million COVID-19 vaccine doses. To support this, 141 ultra-cold chain freezers were also procured, with the first 41 installed with the required generator sets and air conditioning in 2021. By the end of 2021, 63 per cent of the eligible population had received at least one dose of the COVID-19 vaccine and more than 45 per cent were fully vaccinated.

UNICEF delivered 1,300 oxygen concentrators to health facilities to treat patients with severe COVID-19. Oxygen equipment was also used to treat newborns and children with severe pneumonia.

To support the continuity of Pakistan’s essential health services, UNICEF provided personal protective equipment (PPE) for over 25,000 health-care workers. COVID-19-related PPE supplies included 2.4 million surgical masks to protect health workers during the vaccine rollout.

**Pakistan**

Malook Akram carries a UNICEF backpack while walking through mustard fields to get to the Accelerated Education Programme (AEP) centre in Basti Jhabail, Bahawalpur district, Southern Punjab.
Since 1962, UNICEF’s global warehouse hub in Copenhagen has been inspired by the goal of equitable access to life-saving supplies.

With its robot technology and brisk packing lines, the UNICEF warehouse in Copenhagen embodies the expertise, adaptation, and innovation that have driven Supply Division – UNICEF’s Global Supply and Logistics headquarters – for six decades.

Today, UNICEF’s global warehouse covers 20,000m² and stocks over 1,000 different supply items for children. Its storage bays soar eight storeys high and hold 36,000 pallets. Paperless, real-time technology tracks each supply item when it arrives and is quality assured, to when it is packed and loaded into a 40-foot shipping container.

Warehouse staff are skilled in every detail of warehouse operations, from taking inventory, driving forklifts, and packing kits – to installing warehouse tents during emergency deployments.

UNICEF and supplies for children have been synonymous since 1946, providing food and clothing for children in post-war Europe. After 1950, UNICEF’s direction broadened to focus on the well-being of children in developing countries and in emergency situations everywhere.

In October 1962, UNICEF relocated its fast-expanding Packing and Assembly Centre (UNIPAC) from New York to a disused armament factory in Copenhagen’s Freeport. Access to international shipping lanes and world-class transport infrastructure made Copenhagen an ideal new home for UNICEF’s supply operations.

UNIPAC assembled and shipped kits that helped train doctors, nurses, and teachers in Africa, Asia, and Latin America. Kits for midwifery, tuberculosis control, and teaching science were in high demand. From the start, UNIPAC generated considerable savings through bulk purchases, consolidated shipments, and efficient distribution.

By 1975, UNIPAC had expanded into more than 20 separate buildings in the Freeport. When the biggest warehouse, Shed 24, became vacant, UNIPAC consolidated into one facility. In 1984, the Danish Government built a new office and in 1992, added a second.

In March 2012, UNICEF moved to its current state-of-the-art warehouse – the world’s largest humanitarian warehouse for children.

Kit packing is still a vital warehouse function. UNICEF packs and delivers a range of standard and customised kits to fill critical gaps in public
health and education services. In a single day, the warehouse packing line can produce 2,000 school-in-a-box kits, each one capable of transforming a safe space in a refugee camp into a classroom for 40 children.

UNICEF’s global warehouse hub in Copenhagen is complemented by global hubs in Accra, Brindisi, Dubai, Shanghai, and Panama City. By managing supply forecast and replenishment, the warehouse helps maintain optimum stock levels to meet the needs of 250,000 people for three months in any sudden-onset emergency.

Despite their size and spread, only 5 per cent of supplies pass through Copenhagen and the global hubs. Most deliveries are shipped from suppliers directly to the destination country.

Through 60 years of learning and acquiring knowledge and expertise, UNICEF has gained considerable experience and purchasing power. For example, UNICEF procures vaccines to immunize 46 per cent of the world’s children under 5 years old. At this scale, Supply Division can leverage UNICEF’s market influencing capacity and expertise to make vaccines and other life-saving products more affordable.

Product innovation ensures that supplies that keep children learning, healthy, and safe are appropriate and useable regardless of the context of where they live.

Through innovative financial partnerships, Supply Division helps countries to build end-to-end supply chain solutions and expand access. Supply Division serves as a convener of industry and practitioners in vaccines, medicines, and nutrition products – creating a space to galvanise partnerships and build capacity to facilitate equitable access to essential supplies.

Supply Division’s strength is founded on its agile, diverse, and connected Supply Community – today, 1,238 strong. Investing in multidisciplinary talent ready to meet the challenges of fast-changing global supply networks is critical to reach every child in the next 60 years.

Denmark
The UNICEF Global Supply and Logistics hub is the world’s largest humanitarian warehouse for children and is situated in Copenhagen’s north harbour. Supply Division moved into this facility, a gift from the Government of Denmark, in 2012.
I feel privileged and proud to be part of UNICEF and to have contributed to our response to COVID-19 and other emergencies. But there are, of course, things that keep me awake at night.

One thing that deeply worries me is getting children back to school. Millions of children missed out on learning when COVID-19 disrupted education systems and while digital solutions connected many children, many others remained adrift, unable to access learning.

As a mother, I saw the impact of school closures on children first-hand; how difficult it is for them to lose not just the learning aspect of school but also the social fabric. A whole generation faced this challenge. Getting children back to school will not be easy but must be a priority—especially for girls who face additional hurdles in some settings. Education is the backbone of children’s future and well-being. They need to be able to learn, be with friends, and have a happy childhood.

I am concerned that this pandemic is not over. There is still much to be done, and we cannot ease up efforts.

We have done a phenomenal job with our partners reaching people at risk with the COVID-19 vaccine, but I am keenly aware that we are far from our target of 70 per cent vaccination coverage in all countries. Indeed, in some low- and lower-middle-income countries, coverage rates are a fraction of this.

Now is the time to tap into our innovative spirit and collaborate with teams in country offices and our partners to support countries to ramp up vaccinations, especially for health workers who are the foundation of a strong health-care system.

We know another health emergency will come. We may not know its scope nor when it will happen, but we can and should start preparing. We can support governments with foresight and strengthen their systems from end-to-end, continue our work in market shaping and further improve vaccine rollout mechanisms.

I am kept awake by the increase in emergencies across the world, both in terms of number and duration.

We need a better understanding and preparedness for the disparity of ongoing and concurrent emergencies. It has been sad to witness the continuation of crises such as those in South Sudan, Syria, and Yemen and the emergence of new crises resulting from natural disasters, human conflict, or environmental pressures.

The uncertainty and anxiety engendered by these situations is hardest on the most vulnerable, often children and families. No child should have to feel this pressure, and I hope we can provide them with a safety net so they can have continued access to services and remain with their communities. My hope is that we build capacity to be ready to scale up and respond to a new emergency while already responding to protracted crises.

The UNICEF supply teams work around the clock, and their well-being keeps me awake at night. They are the backbone of our success, showing resilience and determination to keep UNICEF programmes running throughout the pandemic. Their effort and willingness to put all hands on deck is even more impressive because while they were supporting our COVID-19 response, which is historic in terms of scale and speed, they were personally affected, living through the challenges of the pandemic.

I am immensely proud of this amazing team and inspired by their dedication and connection to our purpose and mission.

We can only do so much alone. I am fortunate to work with colleagues and partners who realise that together we can move mountains. I take strength from this truth when I am kept awake at night.
EQUITY ACCESS SPEED AMID A HISTORIC YEAR
RESPONDING TO EMERGENCIES
Children from the Kingonze internally displaced persons (IDP) camp, Ituri province, play in a safe space set up by UNICEF.
EMERGENCY RESPONSE: A YEAR OF DAUNTING CHALLENGES

Supply planning, local procurement, and online tracking strengthened Supply Division’s emergency response in a demanding year.

For Supply Division’s Emergency Coordination Unit (ECU), dealing with the unpredictable outcomes of armed conflicts, health emergencies, droughts, cyclones, and earthquakes is part of an average year’s business. But in an unusually demanding year, the challenges faced by the ECU Team were even more daunting than usual.

In 2021, the ECU team responded to a dozen national-level emergencies, including Afghanistan, northern Ethiopia, the Syrian Arab Republic, and Yemen. Each one had grave implications for children and their families.


With UNICEF country offices placing parallel and overlapping demands for Supply Division stocks of emergency health, water, sanitation and other goods, careful management and coordination were vital. Care was taken to balance the requests from different offices, ensuring that each received at least a small portion of its requirements.

“A lot of it is liaising with the warehouse and transport teams and balancing the loads,” said Emma Maspero, ECU Chief. “If we see a particularly high demand for one type of product, we may ask that a portion be diverted to a new emergency in a different country.”

In 2021, careful planning like this was more critical than ever.

“By preparing detailed supply plans as far as possible into the future, we had a much better idea of what any country office was likely to order in an emergency. That way, we were prepared and able to pinpoint where we were likely to have runs at the same items.”

One shift during 2021 was an increased emphasis on local procurement to address the urgent supply needs.
in countries. Provided they are of adequate quality, locally-sourced goods can be bought immediately. Locally-procured supplies always have a vital role in any emergency response because they save costs, shorten delivery times, and help sustain the local economy.

In a year when freight services were disrupted, and delays at ports often stretched into months, the argument for sourcing supplies locally made better sense than ever. “The need for local procurement was reinforced during the pandemic,” said Maspero. “It gave countries the incentive to make more use of local and regional markets.”

Amid the pandemic and a vast increase in throughput, the need for an effective tracking system showing the progress of every supply order in real-time was never more evident.

Working with Supply Division’s Monitoring Strategic Data Evidence Centre (MSDEC), the ECU developed a Supply Chain Dashboard, indicating at a glance where each supply order was in process, which authorisations were still needed, and when delivery was expected.

“The Dashboard allows us to see at any given time what is potentially going to be late while providing us with sufficient time to take corrective action,” said Maspero. “By automating the process, everybody can look at the same information generated on the same day and see quite quickly what is running nicely and which are the problem orders that we need to do something about.”

The Philippines
In the aftermath of Typhoon Rai in December, Operations Assistant Yayang Tacsan helps affected residents of Siargao Island set up a UNICEF emergency tent.
In 2021, UNICEF determined that 13 countries (see map) faced crises that required a Level 2 or Level 3 emergency response*. A Level 2 or Level 3 emergency response is activated in urgent large-scale situations when the UNICEF country office requires additional support. For each of these affected countries or areas, the map indicates the total procurement value of emergency supplies, and the largest commodity groups.

**139 countries and areas**

$687.4 million

Total procurement

In 2021, UNICEF procured **$687.4 million** in emergency supplies for 139 countries and areas. The four largest commodity groups account for 80 per cent of the total value of emergency supplies procured.

- **$399 million** Medical supplies and equipment
- **$57.9 million** Water and sanitation supplies
- **$54.4 million** Vaccines/biologicals
- **$45.1 million** Pharmaceuticals

**Legend: Commodity groups**

- Vaccines/biologicals
- Medical supplies and equipment
- Pharmaceuticals
- Nutrition supplies
- Education supplies
- Water and sanitation supplies

* Level-2 emergency response: The affected UNICEF country office (CO) needs additional support from UNICEF headquarters, the relevant regional office (RO), and other COs to scale up and respond to the crisis. The Regional Director provides leadership, and RO support is enhanced.

* Level-3 emergency response: UNICEF’s Executive Director declares that organization-wide mobilisation is needed to scale up and respond, and appoints a Global Emergency Coordinator. RO support to the CO is enhanced.

**Legend:**

- Water and sanitation supplies
- Medical supplies and equipment
- Vaccines/biologicals
- Education supplies
- Nutrition supplies
- Pharmaceuticals

**Legend:**

- Water and sanitation supplies
- Medical supplies and equipment
- Vaccines/biologicals
- Education supplies
- Nutrition supplies
- Pharmaceuticals
Central Sahel (Burkina Faso, Mali, Niger) $14.3 million Total procurement
- $8.1 million
- $2.9 million
- $1.0 million

The Democratic Republic of the Congo $18.2 million Total procurement
- $14.0 million
- $1.7 million
- $0.8 million

The Syrian Arab Republic $34.5 million Total procurement
- $6.0 million
- $5.1 million
- $3.7 million

Yemen $104.3 million Total procurement
- $28.2 million
- $20.4 million
- $17.6 million

Afghanistan $26.2 million Total procurement
- $7.5 million
- $6.5 million
- $4.4 million

Northern Ethiopia $25.7 million Total procurement
- $19.6 million
- $2.0 million
- $1.8 million

Myanmar $21.8 million Total procurement
- $7.7 million
- $7.6 million
- $3.0 million

Southern Madagascar $7.2 million Total procurement
- $3.7 million
- $2.4 million
- $0.3 million

Mozambique $21.2 million Total procurement
- $17.2 million
- $1.8 million
- $1.0 million
Central Sahel

The crisis in the Central Sahel countries of Burkina Faso, Mali, and Niger is having a devastating impact on children’s survival, education, and protection amid unprecedented levels of armed violence and displacement. Between January and December, the number of displaced people grew from 2 million to 2.5 million, including more than 1.5 million children.

In Burkina Faso, UNICEF supported the immunization of 144,780 children (75,286 girls) – 90 per cent of the annual target – including 37,807 under-fives through campaigns and intensified “Immunization Days” launched in response to multiple measles outbreaks. UNICEF worked with partners on the ground to furnish 2,166 schools, rehabilitate 20 classrooms, and install emergency classrooms.

In Mali, UNICEF’s distribution of WASH kits provided 99,276 people with water purification tablets and other sanitation and hygiene supplies. 131,034 students received individual learning kits, and 345,057 children were vaccinated against measles.

UNICEF and the Government of Niger, together with UN and international partners within the Rapid Response Mechanism (RRM), provided 117,003 people with blankets, plastic sheets, hygiene kits, and other non-food items. 79,732 people received shelter assistance.

Bolivarian Republic of Venezuela

The complex humanitarian situation in Venezuela continued in 2021, exacerbated by the COVID-19 pandemic, clashes in border states, and heavy rains. More than 54,000 people in 10 states were affected by flooding and landslides. UNICEF found that global acute malnutrition (GAM) was concentrated in the states of Cojedes, Yaracuy, Falcón, and Trujillo, with nine other states having moderate GAM levels.

Between January and December, UNICEF reached approximately 1 million children with essential services and life-saving support. Timely and appropriate treatment was provided to 15,786 children with global acute malnutrition (GAM), including 11,554 suffering from wasting, 4,232 with severe wasting, and 18,497 underweight pregnant or lactating women.

UNICEF procured 6.5 million doses of seven essential vaccines and reached over 2 million children under 10 years old and more than 530,000 pregnant women through the Expanded Program on Immunization (EPI). Lockdown measures contributed to 255,143 children under 12 months (48 per cent of the total) not being fully immunized.

In coordination with the Pan American Health Organization (PAHO), UNICEF participated in the National Technical Consultative Committee that enabled Venezuela to access 12 million doses of COVID-19 vaccine for health and other front-line workers and vulnerable populations. UNICEF provided 100 freezers to 100 mass COVID-19 vaccination centres and dual solar refrigerators/freezers for vaccine storage.

In partnership with the Ministry of Education, UNICEF led the safe reopening of schools. 304,408 children received educational materials, and 110,272 were provided with nutritious meals.
Yemen

In Yemen, seven years of conflict have resulted in nearly 24 million people needing humanitarian assistance. At least 13 million are children. Children and families are vulnerable to disease outbreaks, natural disasters, socio-political upheaval, and deteriorating economic conditions. Half of the 4 million people forced to leave their homes are children.

UNICEF screened 7.5 million children under 5 years old for malnutrition and found two out of five – 2.2 million children – acutely malnourished. More than half a million suffer from severe acute malnutrition (SAM). In 4,465 primary health-care facilities and 34 therapeutic feeding centres, UNICEF helped identify 346,000 for admission into outpatient programmes to treat wasting. UNICEF provided vaccinations for 4 million children who have little to no access to primary health care.

UNICEF facilitated access to safe drinking water to 8.8 million people (5.3 million children) by bringing water by truck, installing water distribution points, and expanding water supply systems to internally displaced persons (IDP) camps. UNICEF provided fuel to help produce and distribute safe water to 36 local water and sanitation corporations in 15 governorates.

The Syrian Arab Republic

In 2021, 13.4 million, including 6.08 million children, needed humanitarian assistance and protection. This 21 per cent increase from 2020 was due to Syria's ongoing economic crisis, violence in the northwest and other parts of the country, mass displacement, the devastation of public services, and the exacerbating impact of COVID-19.

Humanitarian services supported by UNICEF reached 11.3 million people, including 7.3 million children, prioritising 276,000 people who were more difficult to reach and 1.8 million in moderately accessible areas. Between the start of the pandemic and December, Syria registered 179,895 cases of COVID-19, including 6,666 deaths. At least 1.5 million people were vaccinated.
In 2021, UNICEF dispatched over $16 million in life-saving supplies to Tigray, Amhara, and Afar.

Statistics barely capture the extent of the humanitarian crisis that gripped Ethiopia in 2021. The year was marked by intense conflict, a third year of severe drought, and multiple health emergencies – all contributing to the plight of nearly 30 million people – more than half of them children – who urgently needed assistance.

Northern Ethiopia experienced months of intense fighting. More than 9 million people needed urgent humanitarian assistance, and 2.2 million were acutely food insecure.

With cases of severe wasting among young children rising fast, it was essential to deliver ready-to-use therapeutic food (RUTF) and other critical nutrition supplies. But the conflict severely hindered humanitarian operations, restricting the movement of staff, cash, fuel, and life-saving supplies.

The Government introduced rigorous procedures that slowed the movement of supplies to the north. At one point, UNICEF had 22 trucks stopped at the provincial border into Tigray for five months.

“From the start of the fighting, it was difficult even to reach the northernmost state, Tigray, by road,” said Stephane Arnaud, Supply and Logistics Chief with UNICEF Ethiopia. “We had to adapt every day, changing the plan according to the fighting and new processes.”

Ad hoc logistics solutions helped ease the situation. These included chartering special flights operated by the European Union (EU) and the UN Humanitarian Air Service and opening two new warehouses in Tigray’s capital, Mekele when the fighting intensified. Together with the Ethiopian Red Cross Society (ERCS), UNICEF operates a network of 10 warehouses nationwide with pre-positioned supplies valued at over $3 million to ensure a timely emergency response.

In 2021, over 36,000 children were treated for severe malnutrition, and nearly 600,000 medical consultations were conducted through mobile health and nutrition clinics.

UNICEF Ethiopia tapped into investments and partnerships developed in previous years. Among them was a network of neonatal intensive care units (NICUs), part of a $24 million project led by the Ministry of Health and supported by the Country Office and Supply Division.

Currently, NICUs provide vital care and support to premature babies in 80 hospitals throughout the
Ethiopia

UNICEF Nutrition Specialist Joseph Senesie screens a child for malnutrition in Tigray. With food insecurity touching 2.2 million lives, children are the most vulnerable. Despite the urgent need for RUTF and other life-saving supplies, in-country logistics was often hindered by conflict.

Across the country, malnutrition remains a huge threat to children’s health and well-being. Over 1.2 million children under 5 years of age need treatment for wasting – the most immediate, visible, and life-threatening form of malnutrition.

During a visit to Ethiopia in September, UNICEF Supply Division Director Etleva Kadilli was able to see firsthand some of the innovative ways in which the country is tackling malnutrition. Among the projects she visited was a UNICEF collaboration with the University of Addis Ababa and two local private sector companies to produce egg powder as a nutritious, safe, and affordable food supplement that could help many poorer families improve their diets. A similar project using avocado powder as a food supplement is underway.
After decades of conflict and underdevelopment, 2021 took the humanitarian crisis facing the Afghan people to a new level.

The deteriorating political and economic situation placed an even greater responsibility on agencies like UNICEF to help address the dire situation of nearly 13 million children.

For the Supply team in UNICEF Afghanistan, adaptation and flexibility were watchwords in navigating not just a dramatic political transition but a collapsing banking sector, an economy in freefall, and a lack of warehouse storage space. Against this grim backdrop, the country grappled with the repercussions of the COVID-19 pandemic, the worst drought in 37 years, and severe disruptions to global supply chains.

Despite the uncertainties after the Taliban assumed power in mid-August, UNICEF did everything possible to limit any interruption to providing support to children. While some UNICEF staff were initially relocated, 100 others were recruited in the last three months of 2021, including help for the Supply team.

When the crisis affecting global supply chains made it nearly impossible to bring in even the most urgent supplies, UNICEF explored new approaches to procurement and delivery. For example, regional procurement would reduce freight costs that rose considerably since the pandemic.

UNICEF also negotiated with a local airline to collect essential health and COVID-19 items from suppliers in China – four flights in all. During this time, UNICEF was one of the few agencies able to bring supplies into the country.

Similar innovative thinking helped identify and activate new supply routes crossing into Afghanistan’s northern border and reducing dependence on roads through Pakistan and Iran. Suppliers in Uzbekistan, for example, delivered hygiene kits, jerrycans, and other WASH items within two to four weeks. Meanwhile, more supplies were sourced from local markets, including winter clothes, hygiene kits, and soap.

As well as responding to overlapping emergencies, work continued on longer-term projects, including strengthening the national vaccine cold chain. Afghanistan is one of many countries benefitting from a collaboration between Gavi, the Vaccine
Alliance and UNICEF. Through the Cold Chain Equipment Optimization Platform (CCEOP), UNICEF is helping to extend cold chain technology into remote regions where power supply is unreliable or unavailable.

“We bring all the solar panels and other materials into the country, carry out the installation, conduct the training, and then we do a handover to the community,” explained Moses. “This has really supported the cold chain. The system is up and running and working well.”

Despite delays to the project in 2021, the installation of 1,222 refrigerators procured under CCEOP resumed in December.

Afghanistan
In a moment of calm, children play next to a new UNICEF High-Performance Tent. In December, UNICEF launched its largest-ever single-country appeal to urgently respond to the humanitarian needs of over 24 million people in Afghanistan, half of whom are children. Malnutrition rates are soaring; millions of children remain out of school.
In 2021, 4.1 million people needed humanitarian assistance in Haiti. More than half were children.

Following the President’s assassination on 7 July 2021, gang violence in Port-au-Prince and other metropolitan centres forced an estimated 19,000 people to leave their homes for safety. Then, on 14 August, a magnitude-7.2 earthquake struck southwest Haiti, intensifying suffering in a country reeling from political instability, deteriorating socio-economic conditions, rising food insecurity, and malnutrition.

The earthquake killed more than 2,200 people. 115,000 homes, 1,250 schools, and 60 per cent of the health facilities in three departments were damaged or destroyed. 800,000 people were affected, including 340,000 children.

Health and nutrition supplies, water and sanitation and hygiene (WASH) kits, and flexible water storage tanks pre-positioned in UNICEF’s Port-au-Prince warehouse enabled the first consignment to reach hardest-hit areas within 48 hours. While waiting for donor funds to materialise, Supply Division provided $1.7 million in bridge funding to avoid delays in dispatching life-saving supplies.

Thirty tents were temporarily installed in 27 damaged health facilities, and 135 medical health kits provided 30,000 people access to primary health care for three months. UNICEF deployed 24 mobile clinics to 18 earthquake-affected municipalities, providing childhood immunization, antenatal care, nutrition, and other vital services to 52,000 people. COVID-19 vaccinations were also offered. UNICEF repositioned emergency supplies to care for over 27,000 children under 5 suffering from acute malnutrition. Nearly 22,000 were screened, and 4,800 were treated.

UNICEF provided 23,198 hygiene kits (e.g., soap, water purification tablets, menstrual hygiene products, and other critical supplies) for 121,000 people. An emergency water supply delivered by truck reached 419,000 people.

Riots, shootings, kidnappings, and fuel shortages threatened supply lines to vulnerable communities and health facilities. Partnerships with community-based civil society organizations were critical in delivering high impact health interventions and medical supplies to internally displaced persons (IDPs) and seven health facilities.

In November, UNICEF warned that schools were increasingly at the mercy of gangs, with children being kidnapped and school directors becoming targets of robbery or ransom. UNICEF rehabilitated seven schools in areas where displaced families had
Haiti

As the country struggled to recover from a massive earthquake, escalating gang-related violence targeting schools put children’s lives at increased risk. UNICEF supported the repair of damaged schools and distributed school kits to 70,000 children.

Haiti was the last country in the Americas to receive COVID-19 vaccines. A donation of half a million doses from the United States arrived on 14 July. UNICEF worked around the clock to strengthen in-country logistics and the cold chain. UNICEF and the Ministry of Public Health and Population (MSPP) installed over 960 solar refrigerators and two cold rooms. In parts of Haiti where electricity is available for less than two hours a day, strengthening the country’s cold chain system with solar-driven equipment will help ensure children’s access to vaccines well beyond the pandemic.

“Thousands of children in Haiti are missing out on routine immunization and are vulnerable to many preventable diseases,” said Bruno Maes, UNICEF Haiti Country Representative. “Using the sun as the energy source to strengthen the cold chain can reduce the adverse effects of climate change and improve the immunization rate of children.”
Students of Ham Rong preschool in Lao Cai province were excited to use digital learning technology supported by UNICEF.
EQUITY ACCESS SPEED AMID A HISTORIC YEAR
In 2021, the Supply Community demonstrated unparalleled resilience, determination, and tenacity. As the dimensions and scope of UNICEF’s pandemic response grew, we faced supply chain disruptions, local complexities, and access issues – and delivering aid was never so complex. The Supply Community took on the challenge by working together, becoming stronger and more connected.

To successfully navigate contextual, economic, and logistical barriers – and deliver with speed – we leaned on a wide range of skills and talents, upskilling and reskilling while keeping pace with the high volume of work. Our technical expertise is the foundation on which we could rethink and recalibrate our delivery models, nurture our partnerships, strengthen systems and local capacities, and create innovative solutions in financing, data, and digitalisation.

The following testimonials offer a glimpse into the Supply Community and our journey in 2021. For us, no challenge is insurmountable – and we won’t give up. Upwards and onwards!

**Raji Jaimon**
Supply Community Manager a.i.
1,238 staff with 10,365 cumulative years of experience working for UNICEF representing more than 147 nationalities

54% identify as men
46% identify as women

72% from programme countries
28% from donor countries

Where does the Supply Community work?
187 offices
119 countries

Supply Community’s presence in UNICEF programme countries

- 27% West and Central Africa
- 25% Eastern and Southern Africa
- 18% Middle East and North Africa
- 13% South Asia
- 8% East Asia and the Pacific
- 6% Latin America and the Caribbean
- 4% Europe and Central Asia
**Abel Barros – UNICEF Argentina**  
Administrative and Supply Associate

From March to June 2021, I was asked to help out with the migration crisis on the border with Mexico. Nearly 500 people were arriving at the border each day, including many children and pregnant and lactating mothers. Our emergency response focused on providing WASH supplies to the shelters, along with hygiene kits and other materials to help support the families while they were waiting for a legal solution to their migration status. The biggest challenge was to coordinate efforts with other UN agencies, NGOs, and government counterparts, which we managed to do through shared planning, good communication, and a strong commitment to leave no child behind. What made the work rewarding was to see the relief and joy on the children’s faces, as well as on those of their mothers and local communities when they received the supplies or accessed the health, education, and protection services which were unavailable to them back home.

**Adaman Ouattara – UNICEF Côte d’Ivoire**  
Administrative and Supply Officer

With the pandemic, the biggest challenge we faced in Côte d’Ivoire was making purchases and delivering supplies when flights and ships were becoming increasingly scarce. Delays for both international and local supplies were getting longer. In such difficult times, the order we placed for nearly 1.8 million reusable masks for primary and secondary school students in public schools was really an achievement. My work involved preparing a detailed tender taking into account the specific needs of each age group and then finalising the purchasing process. I had to follow up on preparing the order within a very tight deadline to ensure that students would receive their masks as quickly as possible since the pandemic was already at a very high level. The challenge was met, and we delivered the masks according to our distribution plan.

**Safa Belhaj – UNICEF Libya**  
Supply Associate

I handle end-to-end supply-related actions, and in 2021, this included acting as the COVID-19 vaccination supply focal point to ensure UNICEF delivered on its commitment to the Libyan Government to bring the very first COVID-19 vaccine consignment into the country. By the end of the year, despite the difficult logistics related to the pandemic and the local security situation, UNICEF managed to procure and deliver 2.4 million vaccine doses – 65 per cent of COVAX’s total allocation for Libya. Working full time for two country offices – Yemen and Libya – for three months was a particularly challenging experience. It exposed me to new ways of working while also placing me under enormous pressure and workload. But it was also a rewarding time, and I managed to handle the workload smoothly.

**Radu Bradescu – UNICEF Moldova**  
Procurement and Administrative Associate

As 2021 was overshadowed by the COVID-19 pandemic, the biggest proportion of the services and supplies we procured were used to reinforce the capacity of national health-care institutions. As part of that effort, UNICEF Moldova procured and delivered disinfectant and hygiene and cleaning supplies needed by 8,000 front-line health workers in 1,300 primary health-care institutions. Another major accomplishment was our contribution to reinforcing the national immunization cold chain. 350 specialised vaccine refrigerators were purchased and distributed to ensure that COVID-19 and other vaccines could be safely stored in health-care facilities in every district and village. So far, more than 1 million Moldovans out of a total population of 2.6 million have been vaccinated against COVID-19.
Abolfazl Khosravi – UNICEF Iran
Senior Supply Associate

With Iran under sanctions, making sure COVID-19 vaccines could be delivered required some unique approaches. As a member of UNICEF Iran’s COVAX task force, I was responsible for working with different stakeholders, including Supply Division, Gavi, WHO and the Iranian authorities. Day-to-day coordination and follow-up were essential to make sure UNICEF could provide the necessary support to the Government in preparing and submitting the proper documentation needed to take delivery of the vaccines.

These joint efforts taught us a lot. We in the Supply Community were massively engaged. One highlight was UNICEF’s procurement of almost 22 million masks from local suppliers – a historic first for the Country Office. The satisfaction of delivering the goods to children and health workers made it easier to forget all the obstacles we faced during the procurement process. I would never change this moment of joy for anything!

Nadia Salamou – UNICEF Kyrgyzstan
Supply and Logistics Associate

In 2021, UNICEF Kyrgyzstan’s shifted its focus from addressing COVID-19 in hospitals to providing equipment and supplies for the COVID-19 vaccination programme. The local vaccination infrastructure required more warehouses and cold chain equipment. Customs clearance was needed for vaccines as they arrived, and new cold chain equipment had to be transported to vaccination points. On top of my regular supply responsibilities, work-life balance became a big personal issue for me. However, we kept on going, resolving challenges one by one in a joint effort with the Country Office Health team.

Another achievement was the support we gave to Kyrgyzstan’s first-ever National Integrated Micronutrient and Anthropometric Survey, which provided key data for the national nutrition programme. The special supplies needed for the survey required a lot of detailed attention and involved a heavy contracting load. As a result, this major study was carried out successfully in autumn 2021.

Fridah Karimi Mwirigi – UNICEF Iraq
Contracts Specialist

My best moment in 2021 was during a monitoring visit to a UNICEF-supported school in Duhok, Northern Iraq. It was a tremendous moment to see the delight in the eyes of the children as they sat at their desks with their blue school bags on their backs inside UNICEF-constructed prefab classrooms. It occurred to me that if UNICEF hadn’t done this for these refugee children, probably no one else would have.

It was a phenomenal year for me, split between a surge mission to the Gaza Strip during the military escalation in May and returning to Iraq to join the COVID-19 pandemic response. One UNICEF priority upon my return was to expand the storage capacity for vaccines in the country. That involved the construction of two vaccine warehouses in Duhok and Nineva Governorates. Another highlight was helping expand access to remote learning across the country when schools were closed due to COVID-19 lockdowns. As a result of the contracts we developed, 14 million children could access broadcast services providing lessons online.

Stala Polina Mandal – UNICEF Bangladesh
Senior Procurement Associate

The pandemic emergency meant offices were closed. Movement was restricted, and it was very difficult to get work done on time. There were many ad hoc requests. Once, I received a call at midnight from a programme colleague asking if we could do an urgent print job for delivery by 7 am the next day. I immediately called one of our long-term agreement (LTA) suppliers and placed the order. Thankfully, the supplier managed to deliver the work on time. During the pandemic, we worked non-stop for the betterment of Bangladeshi mothers and children.

Delivering supplies to the Severe Acute Respiratory Infection (SARI) Isolation and Treatment Centres for Rohingya refugees suffering from COVID-19 was a special achievement. It was set up from scratch and required everything – from medical equipment to housekeeping supplies. We had to search the market to set up new LTAs for fabric masks, shoe covers, and many other products. This entailed a tremendous amount of work within a very short time.
S T R A T E G I C C O L L A B O R A T I O N

To reach every child with timely quality supplies and services, UNICEF collaborates with a wide range of partners at all stages of the supply chain and across key commodity and service groups. Collaboration improves efficiency, achieves fit-for-purpose solutions, offers value for money, and provides long-term sustainability. Together, UNICEF and partners carry out a variety of supply interventions, including product innovation, global and local procurement, market shaping, and strengthening sustainable procurement practices. This section highlights 2021 examples of these strategic collaborations.

Innovation
Oxygen Plant-in-a-Box
To address a gap in oxygen supply, UNICEF collaborated with industry to develop the Oxygen Plant-in-a-Box, which is easy to procure and deploy – and can produce medical grade oxygen within days of arriving at a health facility in a low resource setting. Contributions to UNICEF’s ACT-A Supplies Financing Facility supported $20 million in pre-orders by reducing lead times and enabling UNICEF to secure components. In addition to treating COVID-19 patients, the Oxygen Plant-in-a-Box supports UNICEF’s broader goals in system strengthening, maternal health, and neonatal and child survival.

Resilient oxygen concentrators
A partnership with Oxygen CoLab connected innovators with health professionals in understanding the design improvements needed to produce oxygen concentrators that would be robust and energy-efficient in low-resource settings. UNICEF will publish a target product profile in 2022.

Partner consultations
Vaccine industry consultation
UNICEF’s three-day annual vaccine industry consultation convened more than 100 participants to engage with manufacturers on vaccine procurement. The first day focused on the programme landscape, vaccine supply, WHO’s Immunization Agenda 2030, the Verification and Traceability Initiative (VTI), and the latest developments in the Vaccine Innovation Prioritization Strategy (VIPS) – a collaboration between Gavi, WHO, the Bill & Melinda Gates Foundation (BMGF), UNICEF, and PATH. Day Two included a panel session with the Developing Countries Vaccine Manufacturers Network (DCVMN) and the International Federation of Pharmaceutical Manufacturers & Associations (IFPMA) on upcoming challenges and updates on specific vaccines. On Day Three, UNICEF and partners presented on procurement and delivery of COVID-19 supplies and the general supply landscape. Updates were provided on the WHO COVID-19 strategy, the COVAX 2.0 strategy, and markets.

UN seminars and procurement workshops
In January, Supply Division’s Water, Sanitation and Education teams, suppliers, and other UN agencies participated in the Nordic International Procurement Seminar-WASH Workshop and the International Procurement Seminar (IPS) hosted by Austria, Estonia, France, Germany, Portugal, and Spain. In June, Supply Division’s Education team participated in the IPS hosted by Ireland, the Netherlands, Poland, Slovenia, and the UK.

Vaccine Procurement Practitioners Exchange Forum (VPPEF)
The VPPEF brings together government procurement practitioners to exchange best practices on countries’ timely access to affordable vaccines. In June, Supply Division and UNICEF’s Eastern and Southern Africa Regional Office (ESARO) convened the VPPEF for 92 participants from 19 countries, representing government, development partners and UNICEF. COVID-19 response, procurement forecasting and planning, and sustainable financing were among the topics discussed.

Quality assurance
Surveillance diagnostics to support targeted vaccination
To enable more effective, efficient, and equitable use of Gavi-supported vaccines, UNICEF worked with the Centers for Disease Control (CDC), the BMGF, Gavi,
UNICEF and WHO on developing a proposal to Gavi to expand a surveillance diagnostics model to cover typhoid, cholera, meningococcus, measles, and rubella. The proposal resulted in the approval of $55 million for novel surveillance diagnostics work between 2022 and 2025 and an expansion of procurement and distribution of diagnostics for yellow fever, cholera, meningococcus, typhoid, measles, and rubella.

Emergency preparedness

Ebola vaccines
The International Coordinating Group (ICG) on Vaccine Provision – which includes WHO, UNICEF, the International Federation of Red Cross and Red Crescent Societies (IFRC), and Médecins Sans Frontières (MSF) – with financial support from Gavi, established a global Ebola vaccine stockpile, giving countries timely access to vaccines during outbreaks. Based on approval of the ICG on Vaccine Provision, UNICEF coordinated the first shipment of WHO prequalified Ebola vaccines from the stockpile.

The Global Logistics Cluster (GLC)
UNICEF collaborated with the GLC – which includes several other UN agencies and NGOs – on developing the Strategic Plan, the Field-Based Preparedness Project (FBPP), and the design of a cluster training programme. The GLC facilitated three different cohorts of UNICEF Supply Division’s global emergency preparedness and response training.

Pandemic response
As the Procurement Coordinator for the COVAX Facility, UNICEF collaborated closely with Gavi, WHO, the Pan American Health Organization (PAHO), governments, donors, and the freight and logistics industry in managing the delivery of more than 884.2 million doses of COVID-19 vaccines to 110 countries through COVAX, AVAT, and other mechanisms. The 2020 tender for COVID-19 vaccines issued jointly with PAHO resulted in nine long term agreements (LTAs) that helped strengthen equitable access to vaccines.

Shared services and piggybacking on long term agreements (LTAs)
Reducing the digital education gap
UNICEF Supply Division is an active member of the Inter-Agency Working Group, providing administrative support for the periodic meetings and managing communications and reports. Highlights included $97.8 million in funds utilisation to reduce the digital education gap in El Salvador through the procurement of laptops for students on behalf of the Ministry of Education.

Collaboration
Collaboration through UN agencies using existing UNICEF LTAs (i.e., piggybacking), which reduces administrative time and costs, had positive results. For example, the procurement by FAO for solar radios; FAO, IOM, and UNFPA for flak jackets and helmets; IOM for collapsible water tanks; UNFPA for solar power systems, motorcycles and bicycles; UNHCR for portable water quality testing kits; WFP for solar LED lamps with phone chargers; and WHO for Multiple Indicator Cluster Survey (MICS) equipment.

UNICEF piggybacked on LTAs from UN and other agencies, including, Department of Operation Support (UNDOS) for trucks, forklifts and specialised vehicles; MSF for medical tents; UNDP for prefabricated homes; UNHCR for vehicles, plastic mats, and kitchen sets; and UNHCR and UNDP for armoured vehicles.

UNICEF collaborated with UNHCR on the technical evaluation of their improved emergency latrine slab request for proposal (RFP) and procured a medical surveillance unit from the United Nations Humanitarian Response Depot (UNHRD) and WFP.

Joint tenders
Joint menstrual hygiene initiative
In collaboration with UNFPA and UNHCR, UNICEF Supply Division created technical specifications for reusable menstrual cups and established joint LTAs. The agencies are currently working on joint technical specifications for tampons.

Staff security and safety
Supply Division’s Education team participated in strategic discussions on joint UN procurement to optimise resources while securing access and technical expertise. The main items for the joint procurement strategy have been body armour and personal ballistic protection, security protective equipment, safety equipment, uniforms, and work clothing, among other items.

High-Level Committee on Management (HLCM)
Procurement Network
UNDP and UNICEF established global information and communications technology (ICT) consolidators LTA as part of the HLCM’s Procurement Network initiative to deliver IT systems, equipment, and related services to UN offices, partners, and government projects around the world. UNDP, UNFPA, and UNICEF jointly evaluated and coordinated four ICT consolidators on behalf of the One UN LTA team.
The goal of equitable access can be achieved only in collaboration with governments, donors, other development and humanitarian partners, and with the expert contributions of academia, business, and civil society. Amid a historic year, UNICEF worked as a team – not as UNICEF alone – but together with partners. In 2021, Supply Division’s key partners included:

### UN Family
- Food and Agriculture Organization (FAO)
- High-Level Committee on Management Procurement Network (HLCM PN)
- International Civil Aviation Organization (ICAO)
- International Organization for Migration (IOM)
- Pan American Health Organization (PAHO)
- Stop TB Partnership
- Supply Chain Inter-Agency Coordination Cell (SCICC)
- UNAIDS
- UN City Copenhagen
- UN Department of Operation Support (UNDOS)
- UN Development Programme (UNDP)
- UN Economic Commission for Africa (UNECA)
- UN Global Logistics Cluster
- UN Global Nutrition Cluster
- UN Global Service Centre (UNGSC)
- UN Humanitarian Response Depot (UNHRD)
- UN Learning Network
- UN Office for Project Services (UNOPS)
- UN Office for the Coordination of Humanitarian Affairs (OCHA)
- UN Population Fund (UNFPA)
- UN Procurement Division (UNPD)
- UN High Commissioner for Refugees (UNHCR)
- UN Special Envoy for Malaria
- UN System Staff College (UNSSC)
- World Food Programme (WFP)
- World Health Organization (WHO)

### Academia, Foundations, Private Sector
- American Airlines
- Bill & Melinda Gates Foundation (BMGF)
- CMA CGM
- Copenhagen Business School
- Developing Countries Vaccine Manufacturers Network (DCVMN)
- DHL International
- Dubai Ports (DP) World
- Emirates Airlines
- Flexport
- HOPE Consortium
- Iberia Airlines
- International Air Transport Association (IATA)
- International Federation of Pharmaceutical Manufacturers & Associations (IFPMA)
- International Humanitarian City (IHC)
- John Hopkins University
- Kuehne + Nagel (K+N)
- Linksbridge
- Maersk
- Massachusetts Institute of Technology (MIT)
- Mastercard Foundation
- McKinsey & Company
- Mediterranean Shipping Company (MSC)
- Microsoft
- National Academy of Medicine (NAM)
- Novacyt
- Port Authority of Cotonou, Benin
- Port of Antwerp, Belgium
- Qatar Airways
- Turkish Cargo
- United States Pharmacopeial Convention (USP)
- UPS Foundation
- Virgin Atlantic Airways
- Wellcome Trust
Donor Governments, International Financial Institutions

Africa Centres for Disease Control and Prevention (Africa CDC)
African Development Bank (AfDB)
African Export–Import Bank (Afreximbank)
African Leaders Malaria Alliance (ALMA)
African Union (AU)
Asian Development Bank (ADB)
Association of Southeast Asian Nations (ASEAN)
Centers for Disease Control and Prevention, United States (CDC)
Department of Foreign Affairs and Trade, Australia (DFAT)
Directorate-General for European Civil Protection and Humanitarian Aid Operations (DG ECHO)
European Commission (EC)
Federal Public Service Foreign Affairs, Foreign Trade and Development Cooperation, Belgium (FPS Foreign Affairs)
Foreign, Commonwealth and Development Office, United Kingdom (FCDO)
German Federal Foreign Office (AA)
Global Affairs Canada (GAC)
Islamic Development Bank (IsDB)
Japan International Cooperation Agency (JICA)
KfW, Germany
Ministry of Foreign Affairs of Denmark
Ministry of Foreign Affairs, Republic of Korea
Ministry of Foreign Affairs and International Cooperation, United Arab Emirates
President’s Malaria Initiative (PMI)
Swedish International Development Cooperation Agency (SIDA)
Swiss Agency for Development and Cooperation (SDC)
World Bank
United States Agency for International Development (USAID)

Civil Society

Action Contre la Faim (ACF)
Humanitarian Innovation Fund (HIF) – Elrha
Humanitarian Mechanism
International Committee of the Red Cross (ICRC)
International Federation of Red Cross and Red Crescent Societies (IFRC)
Médecins Sans Frontières (MSF)
Oxfam
Save the Children International

Health and Supply Chain Partnerships

Access to COVID-19 Tools Accelerator (ACT-A)
African Vaccine Acquisition Trust (AVAT)
Alliance for Malaria Prevention (AMP)
Amref Health Africa
ATscale, the Global Partnership for Assistive Technology
Clinton Health Access Initiative (CHAI)
Coalition for Epidemic Preparedness Initiative (CEPI)
Codex Alimentarius Commission
The East African Community (EAC)
Regional Centre of Excellence for Vaccines, Immunization and Health Supply Chain Management (RCE-VIHSCM)
Eliminate Yellow Fever Epidemics (EYE Strategy)
European Scientific Working Group on Influenza (ESWI)
Every Breath Counts Coalition
Foundation for Innovative New Diagnostics (FIND)
Gavi, the Vaccine Alliance (Gavi)
Global Diagnostics Working Group (GDWG)
Global Drug Facility (GDF)
The Global Fund
Global Polio Eradication Initiative (GPEI)
Global Supply Network for Pandemic Preparedness and Response
Global Taskforce for Cholera Control (GTFCC)
Interagency Supply Chain Group (ISG)
International Coordinating Group (ICG) on Vaccine Provision
International Development Innovation Alliance (IDIA)
John Snow, Inc. (JSI)
Learning Network for Countries in Transition (LNCT)
Malaria Vaccine Implementation Programme (MVIP)
Measles & Rubella Initiative (MRI)
MedAccess
Medicines for Malaria Venture (MMV)
Medicines Patent Pool (MPP)
Newborn Essential Solutions and Technologies (NEST) at RICE 360°
Nutrition International (NII)
PATH
People that Deliver (PtD)
RBM Partnerships to end Malaria (RBM)
Sykehusinnkjøp
The Task Force for Global Health
Unitaid
World Economic Forum
Annexes of the Supply Division Annual Report 2021 are accessible by scanning the QR code or following the URL below.

**QR code**

![QR code](https://www.unicef.org/supply/documents/annexes-supply-annual-report-2021)

**URL**


**UNICEF global procurement statistics**

**Annex 1**

UNICEF procurement by country/area of invoice and US$ value, aggregating local, country-to-country, and international procurement

**Local**

Goods and services procured by country offices for local delivery and subject to the principle of competitive bidding from local suppliers

**Country-to-country**

Goods and services procured on behalf of another country, or international procurement by country or regional offices, and subject to the principle of competitive bidding

**International**

Goods and services procured by Supply Division, or by country offices through Direct Order arrangements, or by other headquarter divisions, and subject to the principle of international competitive bidding

For a list of contracts awarded at or above the value of $100,000 by UNICEF Supply Division, visit [https://www.unicef.org/supply/contract-awards](https://www.unicef.org/supply/contract-awards).

For further information on the work of UNICEF in markets to secure the rights of children, visit [https://www.unicef.org/supply/influencing-markets](https://www.unicef.org/supply/influencing-markets).
Viet Nam

A UNICEF logistics team unloads a shipment of early childhood development kits in Da Nang. In 2021, UNICEF supported the scale up of the country's Integrated Early Childhood Development (IECD) programme.
**Afghanistan**

An 11-year-old girl jumps for joy outside a UNICEF-supported child-friendly school.

**South Sudan**

(covers photo)

A UNICEF speed boat transports medicine and other life-saving supplies to villages along the Nile and Sobat Rivers in Upper Nile State.

**Photo credits**
