

Closing the Gap:

The united mission to support countries to cross the global COVID-19 vaccine equity divide

The next phase of COVID-19 vaccine delivery sees us transitioning to a new approach.

This will ensure our efforts will create long-lasting benefits that will be seen beyond the COVID-19 pandemic.

Vaccine equity - for all vaccines - is one of the great responsibilities of our lifetime. The work towards closing this gap continues.

*data as at March 2023

COVAX

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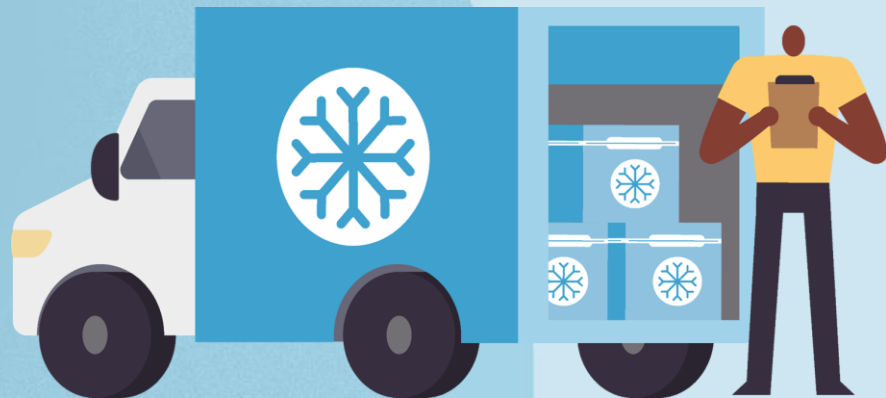


Delivery of the first vaccines

COVAX and its Country Readiness and Delivery (CRD) workstream worked with countries to help prepare the world for the biggest vaccine roll-out in history.

Together with countries, through the CRD workstream, WHO, UNICEF, Gavi and partners worked at global, regional and national levels to develop and disseminate adaptable resources, such as guidance, training, tools, and communication materials, and coordinate and provide technical assistance to support the delivery of COVID-19 vaccines.

Since the first COVID-19 vaccine was delivered to Ghana on 24 February 2021, more than 13 billion doses have been administered globally, nearly 2 billion of which were delivered by COVAX.



Inequitable supply

With a limited supply of vaccines and huge demand, the world faced challenges in the equitable distribution of vaccines.

Many high-income countries signed contracts with pharmaceutical companies, giving them priority for doses to immunize their populations several times over, constraining supplies for the rest of the world.

Global shipping and supply chains were already under pressure, and vaccines, with their intricate handling requirements, were particularly vulnerable to these disruptions.

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Delivery challenges

As supply of COVID-19 vaccines became more readily available, some countries experienced barriers to vaccines from airports to arms. This is due to four main challenges - storage; logistics around reaching remote areas; limited workforce surge capacity; and people's willingness to get the jab.

To overcome these challenges, priority actions for countries with low coverage rates included strong leadership engagement, prioritising high-risk populations and integrating COVID-19 vaccination programs alongside strengthening health systems.

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Building on strong foundations

With the CRD workstream having laid the foundation and prepared countries for the introduction and delivery of vaccines, towards the end of 2021 the time came to respond to an evolving situation.

The world no longer had a global vaccine supply problem; it had a vaccine equity and delivery problem.

Some low- and middle-income countries needed more support to overcome challenges to reach vaccine delivery targets.

The COVID-19 Vaccine Delivery Partnership (CoVDP) was established in January 2022 by UNICEF and the World Health Organization (WHO), in consultation with Gavi, the Vaccine Alliance to support vaccine delivery in the 92 COVAX AMC economies with a specific focus on 34 countries with the lowest coverage rates.



The role of CoVDP

CoVDP provides urgent and concerted operational support to all the COVAX 92 AMC countries and in particular to the 34 countries that were at or below 10% full vaccination coverage in January 2022, to progress towards national and global targets.

The role of this partnership is to bolster support for countries bringing governments, partners, donors and NGOs together around one team, one plan and one budget, and to facilitate the release of funds on a 'no regrets' basis.

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Countries of focus

The COVID-19 Vaccine Delivery Partnership provides concerted support to all 92 COVAX AMC countries and in particular to the 34 countries that were at or below 10% COVID-19 vaccine coverage at the beginning of 2022.

% of the total population with complete primary series in mid-January 2022



Afghanistan
9.8%



Burkina Faso
3.5%



Burundi
<1%



Cameroon
2.5%



CAR
9.6%



Chad
0.6%



Côte d'Ivoire
8.2%



Djibouti
7.3%



DR Congo
0.1%



Ethiopia
3.5%



Gabon
9.6%



Gambia
9.8%



Ghana
7.5%



Guinea
7.8%



Guinea-Bissau
1.2%



Haiti
0.6%



Kenya
8.1%



Madagascar
2.8%



Malawi
3.6%



Mali
2.6%



Niger
4.0%



Nigeria
2.3%



Papua New Guinea
2.4%



Senegal
5.6%



Sierra Leone
4.8%



Solomon Islands
8.8%



Somalia
5.0%



South Sudan
1.8%



Sudan
3.0%



Syria
4.8%



Tanzania
2.8%



Uganda
3.1%



Yemen
0.9%



Zambia
3.5%

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How the CoVDP partnership works

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unicef

World Health Organization

Gavi



High-level political and technical country missions: engaging with governments and countries to identify barriers and implement recommendations.



One Team, One Plan, One Budget: a coordinated, global approach across partners to ensure countries have access to support in a streamlined manner.



Provision of quick impact funding: aligned and distributed across partners to aid in country's vaccination efforts.



Bottlenecks unblocked: through country missions, specialized technical assistance and funding to countries.



Global political advocacy: engaging with high-level government officials to encourage and accelerate efforts.

Vaccination coverage progress:

The global vaccine equity gap persists but is closing, thanks to the hard work of countries and many supporting partners.

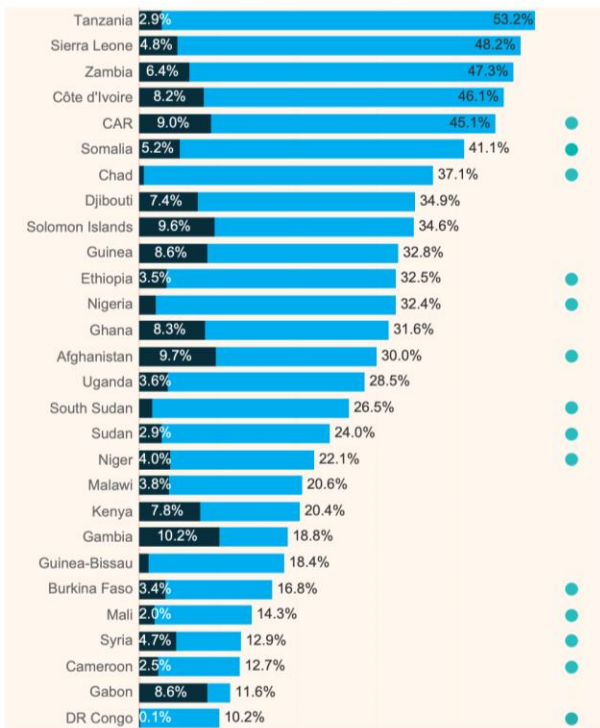
The global picture of primary series coverage has largely flattened, with 65% of the world's population having completed their primary series vs. 23% in low-income countries and 28% in Africa.



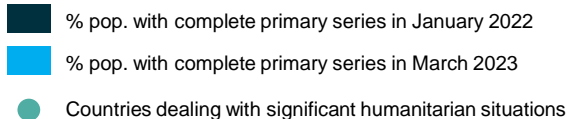
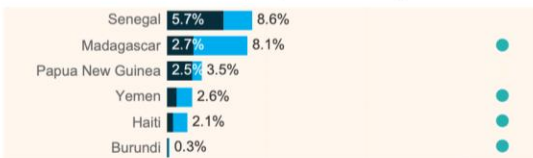
28 out of the initial 34 countries have coverage levels above 10% Twenty countries have passed the 20% threshold, fourteen of which have coverage above 30%

Increase in coverage since January 2022

34 countries for concerted support, >10% coverage



34 countries for concerted support, <10% coverage



- **Tanzania, Zambia, Sierra Leone, Côte d'Ivoire, the Central African Republic and Somalia** are the first of the countries with below 10% coverage in January 2022 to cross 40% coverage.
- **Some of the 34 countries have surpassed their national coverage target**, e.g., Sierra Leone (49% against a target of 40%), Somalia (41% against 40% target) and Zambia (47% against 46% target).
- **Countries facing humanitarian emergencies have generally made notable progress** over the past year.
- **Sudan has conducted a mega campaigns since October**, increasing coverage from 10% to 24% and is conducting another campaign round before Ramadan.
- **DR Congo is the latest country to cross 10% coverage** – up from 0.1% in January 2022, despite addressing Ebola, Cholera and measles outbreaks.

Key milestones

With thanks to countries, partners, and donors:

- 27 expert visits have been conducted with countries to help increase COVID-19 vaccination coverage.
- 322 million people have been vaccinated in the 34 countries identified for concerted support.
- 143 million USD in urgent delivery funding has been aligned by CoVDP and distributed across partners.

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unicef

World Health
Organization

Gavi

Our current situation

Challenges remain after one year of concerted support and vaccination efforts. Governments and individuals face competing health priorities, including the largest sustained backslide in routine immunization coverage in 30 years, which has led to measles and polio outbreaks.

Many countries with low coverage rates are also dealing with stretched health systems and/or humanitarian emergencies.

Community health systems represented the first line of response during the pandemic but are severely stretched. Healthcare workers – the backbone of any health system – remain insufficiently or irregularly paid in many countries.



CoVDP's focus through to June 2023

Throughout the first half of 2023, CoVDP will continue supporting countries with the lowest coverage rates.

There will be a focus on high-priority groups (older adults, healthcare workers, and the immunocompromised), particularly in humanitarian settings where COVID-19 vaccination levels are still low. CoVDP will also:

- Support integration of COVID-19 vaccination into routine primary healthcare services, linking to specialized programmes on non-communicable diseases and programmes to reach the elderly. This support will phase over to a model of operational support to countries led by WHO, UNICEF and Gavi, incorporating the ways of working built over the past three years of the response.
- Conduct high-level meetings to take stock of COVID-19 vaccine delivery and prepare for future pandemic responses.
- Continue engagement on community health systems strengthening with focus on a series of high-level political events and national consultations between governments and partners.

Key lessons

Global COVID-19 vaccine delivery has built on several lessons learnt which should be maintained for the rest of the response and used to inform future pandemic response mechanisms.

What's needed for countries to be able to deliver vaccines:

- Strengthening of health systems and primary health care being positioned at the center.
- Prioritize protecting and paying health workers a fair, living wage.
- Modernisation of cold storage infrastructure to help ease logistical and supply chain challenges.
- Spreading manufacturing capacity to both boost overall global capacity.

Support given to countries:

- High-level political attention and access to senior agency leadership.
- Large-scale, concerted preparation for vaccine introduction as well as tailored approaches at the regional country level.
- Close coordination across partners and efficient. decision-making through One Team, One Plan, One Budget
- Provision of layered and sequenced quick impact funding from across partners.

Transition of CoVDP

CoVDP was put in place as a time-bound mechanism to support COVID-19 vaccine delivery in those countries with the lowest coverage rates.

Countries are now going from an acute phase of addressing the pandemic to an ongoing phase where COVID-19 needs to be integrated into primary health care services.

CoVDP will transition through to June 2023. Future COVID-19 vaccination will be supported by an enhanced operational model led by WHO, UNICEF and Gavi working with partners. We are currently working with the regions to define the specifics of the support model post-CoVDP to ensure countries receive the support needed for continued acceleration and integration.

Investing in Primary Health Care (PHC) and community health systems – including protecting and paying health workers a living wage – will be key for future pandemic preparedness and response.

A focus on community health will complement measures already taken to strengthen the health system via the COVID-19 response.

CoVDP roadmap for acceleration and transition

Assuming WHO base case scenario



Acceleration

- Provision of quick impact funding
- High-level political and technical missions as required
- Continued advocacy at global level



Consolidation

- Provision of TA with focus on priority topics (e.g., high-priority groups, boosters, VCVs)
- Documentation of lessons learnt
- Prepare to phase over or out specific mechanisms (funders' forum, etc)



Phase over

- No more dedicated CoVDP country missions
- Remaining support on global advocacy
- Funding request to be coordinated by partners

Nov 22

Feb 22

Apr 23

Jun 23

The future

The COVID-19 vaccine delivery challenges encountered during this pandemic are a stark reminder that we need to strengthen health systems and position primary health care at the center of all we do - built from the grassroots up with staff being paid a fair living wage. To build a resilient global community, all countries need to have access to basic health services.

If, after COVID-19, we end up with more countries that have a more sustainable community health system, then we'll be in better shape next time.

This is the responsibility of a lifetime.



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Working with countries, communities and essential partners



A GLOBAL NOD NETWORK
FOR PRINCIPLED AND EFFECTIVE
HUMANITARIAN ACTION

