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for every child

**Humanitarian** 

Action for Children



Hanan Kasim, age 26, has just received her COVID-19 vaccine. She is a health worker at Logia health centre in Afar, Ethiopia.

# Access to COVID-19 Tools Accelerator (ACT-A)

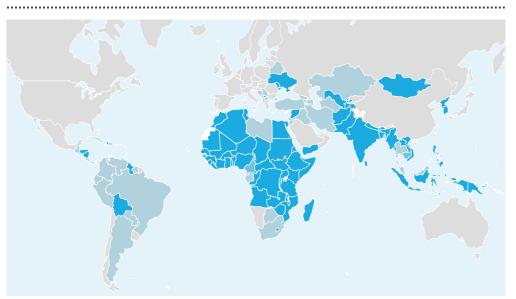
## **HIGHLIGHTS**

The Access to COVID-19 Tools Accelerator (ACT-A) is a global collaboration that seeks to accelerate equitable access to COVID-19 tests, treatments and vaccines. To do our part, UNICEF is fundraising for approximately one-fifth of the ACT-A funding gap, currently estimated at US\$16.6 billion across ACT-A partners for 2021.<sup>1</sup> Our success in mobilizing these funds will be critical to delivering the largest and fastest procurement, supply and country readiness and delivery operation ever.

UNICEF has revised its ACT-A Humanitarian Action for Children (HAC) fundraising targets upwards from US\$659 million to US\$969 million in response to the increase in global vaccine coverage targets and to support our expanded actions to curb the COVID-19 pandemic in low- and middle-income countries.<sup>2</sup>

We urgently require additional flexible funds to:

- support in-country delivery of COVID-19 vaccines
- deliver diagnostic tests and related technical assistance
- strengthen oxygen systems and deliver novel and repurposed therapeutics
- provide front-line workers with personal protective equipment (PPE) and supplies to work safely
- support risk communication and community engagement (RCCE) to promote the uptake of COVID-19 vaccines tests and treatments.



This map does not reflect a position by UNICEF on the legal status of any country or territory or the delimitation of any frontiers. The countries dark blue are Gavi COVAX AMC-eligible countries. In this revised appeal, UNICEF will increase support to include all low- and middle-income countries highlighted in light blue.

### KEY PLANNED RESULTS

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# 3 billion

vaccine doses to be delivered globally via COVAX and 2.3 billion doses to Advanced Market Commitment (AMC) countries via ACT-A partners, including UNICEF<sup>3,4,5,6</sup>



# 900 million

diagnostic tests to be delivered via ACT-A partners, including UNICEF

# 165 million

therapeutic treatment courses to be delivered via ACT-A partners, including UNICEF

FUNDING REQUIREMENTS

US\$ 969 million

## **HUMANITARIAN SITUATION AND NEEDS**

The COVID-19 pandemic is an unprecedented crisis on an unprecedented scale. As of 1 October 2021, there have been 233.5 million confirmed cases of COVID-19, including 4.8 million deaths reported globally.<sup>7</sup> Yet these figures likely underreport the devastation, especially in low- and middle-income countries, where surveillance, testing capacity and data availability can be limited. Moreover, new variants have emerged, which pose further risks to the gains made so far in the fight against the pandemic.

Many national governments are struggling to implement public health and social measures to reduce transmission of COVID-19. Further, they often lack sufficient capacity to deliver new COVID-19 tools through existing health systems at scale. Disruptions to education and essential health services, such as childhood immunizations, remain significant.<sup>8</sup> The COVID-19 crisis is exacerbating the vulnerabilities of children and families everywhere – and fuelling inequalities.

Access to new COVID-19 tools – vaccines, tests and treatments – is vital to supporting the broader response to the COVID-19 pandemic. Despite the significant achievements<sup>9</sup> of the ACT-A collaboration so far, access to COVID-19 tools remains grossly unequal. For example, as of 30 September 2021, 1.3 per cent of people in low-income countries were fully vaccinated against COVID-19, compared with 59.4 per cent of people in high-income countries.<sup>10</sup> As a lead implementation partner for ACT-A, UNICEF is well-placed to address the implementation challenges that exist in low- and middle-income countries and close this equity gap.<sup>11</sup>

Access to COVID-19 vaccines for high-risk and vulnerable populations in humanitarian settings also requires urgent attention. To address this, the Humanitarian Buffer<sup>12</sup> mechanism has been established with the COVAX Facility as a measure of 'last resort' when all efforts have failed to deliver COVID-19 vaccines through national plans. The aim in 2021 is to provide access of up to 100 million doses for humanitarian populations.<sup>13</sup>

COVID-19 is a global problem requiring a global solution. As of 3 September, 2021, ACT-A faces a US\$16.6 billion funding gap for 2021.<sup>14</sup> Donors are invited to contribute directly to individual ACT-A partner organizations. Direct funding to UNICEF will help ensure efficient and timely support for the last-mile delivery of COVID-19 vaccines, tests and treatments to those in need.

### **STORY FROM THE FIELD**



INICEF/2020/Mawa

The Ministry of Health with support from UNICEF visited health centres which are in a hard to reach area of in Kabale District to deliver COVID-19 vaccines.

The first doses of the COVID-19 vaccine from COVAX arrived in Uganda on 5 March 2021, with vaccinations starting just a few days later. By 17 June, 1,039,200 COVAX vaccines had been delivered to Uganda – and by the end of June, almost 900,000 COVID-19 vaccine doses had been administered to people.

The challenge of getting vaccines to people in some of the most remote parts of the country, such as Bwama in Kabale District, delayed the start of the vaccine roll out in these areas. Bwama Health Centre III is located on Bwama Island on Lake Bunyonyi, and boats are required to access. UNICEF supported the Ministry of Health by providing fuel for the boats, which helped to transport COVID-19 vaccines safely to Bwama Health Centre III to enable the launch of the vaccination roll out in Bwama on 28 April 2021.

### Read more about this story here

## **HUMANITARIAN STRATEGY**

UNICEF's strategy to deliver on its ACT-A commitments and meet urgent needs for the remainder of 2021 complements ongoing work to mitigate the impacts of the pandemic, deliver essential health and social services and build more resilient systems.

By raising US\$969 million in 2021, UNICEF will support:

The Vaccine Pillar: This appeal will provide technical assistance and support for:

• delivery of commodities needed for safe vaccine administration (e.g., PPE, soap and sanitizer for vaccinators)

- cold chain strengthening (e.g., procurement of equipment)
- vaccine logistics management (e.g., storage, transportation)
- activities to create demand and increase uptake of vaccines
- operational costs for vaccine delivery (e.g., planning, budgeting and coordination, trainings).

Of note, the Inter-Agency Standing Committee (IASC) has agreed that UNICEF's ACT-A HAC appeal will be used as the centralized mechanism for financing operational and delivery costs associated with COVID-19 vaccine allocations from the Humanitarian Buffer. Thus, this appeal will increase support for vaccine delivery to humanitarian populations, including through the Humanitarian Buffer.<sup>15</sup>

• The Diagnostics Pillar: This appeal will continue to support procurement and supply of novel diagnostic tests to scale up access to and/or to meet acute gaps for COVID-19 testing. Where needed, diagnostics will be accompanied with technical assistance to support rapid scale-up (e.g., strengthening supply chain storage, data management and the training of health workers).

• The Therapeutics Pillar: This appeal will prioritize technical support to build and improve oxygen systems and supplies in low- and middle-income countries. As novel products become available, UNICEF will purchase and deliver novel and repurposed treatments for COVID-19 and provide technical assistance for country preparedness activities and capacity building to roll-out treatments.

• The Health Systems Connector: UNICEF will prioritize two areas where it is well-positioned to provide support:

### Personal Protective Equipment:

UNICEF seeks to contribute to ACT-A's urgent PPE funding ask of US\$1.7 billion<sup>16</sup> by procuring and delivering quality PPE for essential health care and other front-line workers in low- and middle-income countries, enabling them to deliver care safely. UNICEF has PPE stock pre-positioned across warehouses in Copenhagen, Shanghai, Panama and Dubai that is immediately available for delivery to countries in need, subject to availability of funding. UNICEF will give priority to low-income countries and emergency settings responding to acute outbreaks.

### Risk Communication and Community Engagement:

UNICEF will support people-centred, community-led engagement campaigns adapted to local contexts to increase trust and promote the adoption of COVID-19 tools. UNICEF will build the capacity of civil society, community health actors and the social service workforce in relevant programmatic areas, such as community engagement and interpersonal communication.

## 2021 PROGRAMME TARGETS

### Vaccines

- 3,000,000,000 COVID-19 vaccine doses are administered in low- and middle-income countries<sup>17</sup>
  - **30** per cent of the population in low-income countries is fully vaccinated against COVID-19<sup>18</sup>
- 3,000,000 Humanitarian Buffer COVID-19 vaccine doses are administered<sup>19</sup>

### **Diagnostics**



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- 5,600,000 COVID-19 diagnostic tests are procured and delivered in low- and middle-income countries responding to acute outbreaks<sup>20</sup>
- 10 low- and middle-income countries have scaled up COVID-19 testing with technical assistance from UNICEF<sup>21</sup>

### Therapeutics

- 5,500,000 COVID-19 treatment courses are procured and delivered in low- and middle-income countries<sup>22</sup>
- 30 low- and middle-income countries have scaled up oxygen treatment systems with technical assistance from UNICEF<sup>23</sup>

# Health Systems Connector: Personal protective equipment

- 57,000,000 days' worth of quality PPE is delivered to protect health workers in low- and middle-income countries as they support the roll-out of new COVID-19 tools<sup>24</sup>
- 60 low- and middle-income economies receive quality PPE to enable the safe roll-out of new COVID-19 tools<sup>25</sup>



#### Health Systems Connector: Risk communication and community engagement

- 85 per cent of individuals who would get vaccinated once a vaccine is available and recommended<sup>26</sup>
- **94** low- and middle-income countries implement ACT-A related RCCE interventions based on social and behavioural evidence <sup>27</sup>

## **FUNDING REQUIREMENTS IN 2021**

UNICEF has revised its 2021 ACT-A HAC appeal upwards by US\$310 million. These funds will enable UNICEF to better support national governments, NGOs and partners to deliver COVID-19 tools to communities and reduce inequalities in access in 2021. This revision is aligned with and complements the recent Rapid ACT-Accelerator Delta Response urgent appeal.<sup>28</sup>

The need for an additional US\$209 million in funding for the Vaccine Pillar reflects (1) the increase in the global target from 20 per cent COVID-19 vaccine coverage to 30 per cent coverage by end of 2021;<sup>29</sup> (2) the increased number of countries that UNICEF seeks to support from AMC to over 130 low- and middle-income countries; and (3) the increased costs to deliver COVID-19 vaccines in humanitarian settings and through the Humanitarian Buffer. Additional flexible funding is needed urgently to fill gaps related to vaccine roll-out, while the more medium to long-term financing opportunities kick in, to avoid doses going idle. This is essential as we expect a 15-fold surge in vaccine supply to low- and middle-income countries in the second half of the year, compared with the first half.

Fundraising targets for the Diagnostics and Therapeutics Pillars remain unchanged. UNICEF continues to provide support to these pillars, prioritizing low-income countries with urgent needs. UNICEF also responds to country requests for technical assistance to optimize the rollout of diagnostics and treatments, such as oxygen therapy.

The Health Systems Connector is a new pillar, replacing the original ACT-A HAC pillar on Risk Communication and Community Engagement. Within the Health Systems Connector, we highlight two specific needs to complement UNICEF's much broader support to strengthening health systems. First, to provide front-line workers with PPE to work safely, UNICEF is fundraising for quality PPE to support the roll-out of new COVID tools. This is in addition to providing vaccinators with PPE within the Vaccine Pillar. Second, UNICEF will increase the scale of its programming for RCCE to generate demand and uptake of new COVID-19 tools in 44 additional countries.

Without adequate funding, UNICEF will be unable to reach millions of crisis-affected and vulnerable populations targeted in this appeal, slowing down the roll-out of COVID-19 vaccines and tools, and prolonging the pandemic. This would exacerbate poverty and malnutrition, result in poorer health and lower levels of education, and further entrench inequalities.

5.6% THERAPEUTICS	LS\$969 million		Appeal sector	Revised 2021 HAC requirement (US\$)
			Vaccine delivery, including Humanitarian Buffer	719,000,000
7.3% DIAGNOSTICS			Diagnostics	70,500,000
<b>10.0%</b> HEALTH SYSTEMS CONNECTOR: PPE			Therapeutics	54,500,000
		<b>74.2%</b> VACCINE DELIVERY, INCLUDING HUMANITARIAN BUFFER	Health Systems Connector: Personal Protective Equipment	97,000,000
			Health Systems Connector: Risk communication and community engagement	28,000,000
			Total	969,000,000

Appeal sector	Original 2021 HAC requirement (US\$)	Revised 2021 HAC requirement (US\$)	Funds available (US\$)	Funding gap (US\$)	2021 funding gap (%)
Vaccine delivery, including Humanitarian Buffer	510,000,000	719,000,000	389,451,811	329,548,189	45.8%
Diagnostics	70,500,000	70,500,000	12,648,303	57,851,697	82.1%
Therapeutics	54,500,000	54,500,000	4,335,997	50,164,003	92.0%
Health Systems Connector: Personal Protective Equipment	-	97,000,000	14,786,520	82,213,480	84.8%
Health Systems Connector: Risk communication and community engagement	24,000,000	28,000,000	12,826,953	15,173,047	54.2%
Total	659,000,000	969,000,000	434,049,584	534,950,416	55.2%

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## **ENDNOTES**

1. World Health Organization (WHO). Funding Snapshot at 13 August 2021. <a href="https://www.who.int/publications/m/item/access-to-covid-19-tools-tracker">https://www.who.int/publications/m/item/access-to-covid-19-tools-tracker</a>, accessed 3 September 2021.

2. Using the World Bank classification of economies, which uses gross national income per capita data in U.S. dollars, converted from local currency using the World Bank Atlas method, to group countries or economies into the following four income groups: low-income countries; lower-middle income countries; upper-middle income countries; and high-income countries. In this revision of the ACT-A HAC appeal, UNICEF seeks to increase support to all low-income countries, lower-middle income countries that have urgent needs to reach their populations with vaccines, tests and treatments.

3. This target has been revised upwards from 2 billion to 3 billion. To achieve a population coverage of 30 per cent in low- and middle-income countries and reach each person with two doses, UNICEF estimates that, as of 7 September, 3,018,759,698 doses will be required in 2021. (The official ACT-A/COVAX target is currently to reach 2 billion in low- and middle-income countries based on achieving a population coverage of 20 per cent in 2021). UNICEF supports 133 low- and middle-income countries with vaccine roll-out.

4. COVAX is the vaccine pillar of ACT-A and is co-convened by the Coalition for Epidemic Preparedness Innovations, Gavi, the Vaccine Alliance and WHO. UNICEF is the lead implementation partner for end-to-end procurement, supply and delivery of COVID-19 vaccines.

5. This target has been revised upwards from 1.2 billion to 2.3 billion. To achieve a population coverage of 30 per cent in AMC economies and reach each person with two doses, UNICEF estimates that, as of 7 September, 2,387,767,997 doses will be required in 2021. (The official ACT-A/COVAX target is currently to reach 1.2 billion in AMC economies to achieve a target population coverage of 20 per cent in 2021). UNICEF supports all AMC economies with vaccine roll-out.
6. Gavi COVAX AMC economies are 92 low- and middle-income economies that are eligible to have their participation in the COVAX Facility supported by the COVAX AMC in a cost-sharing agreement. UNICEF's support to countries goes beyond these 92 Gavi COVAX AMC countries where UNICEF is leading the procurement and shipment of COVID-19 vaccines. Outside of COVAX, there are 98 self-financing countries that UNICEF can support with supply of vaccines, syringes, refrigerators, PPE and other supplies via UNICEF Procurement Services. This is relevant, as self-financing countries are expected to cover vaccine procurement costs via domestic resources but may not have ready access to sufficient funds to support this for their populations. UNICEF has a separate fundraising mechanism, UNICEF Supply Financing Facility, to support low- and middle-income countries to access, purchase and receive the delivery of key COVID-19 supplies via UNICEF Procurement Services.

7. WHO COVID-19 Dashboard, <https://covid19.who.int/>, accessed 1 October 2021.

 UNICEF 2021, <https://www.unicef.org/press-releases/covid-19-continues-disrupt-essential-health-services-90-cent-countries> accessed 30 August 2021; and UNICEF 2021, <https://www.unicef.org/rosa/reports/direct-and-indirect-effects-covid-19-pandemic-and-response-south-asia>, accessed 24 August 2021.
 ACT Accelerator: Quarterly Update Q2: 1 April – 30 June 2021, <https://www.who.int/publications/m/item/act-accelerator-quarterly-update-q2-1-april---30-june-2021>, accessed 24 August 2021.

10. Our World in Data, <a href="https://ourworldindata.org/grapher/share-people-fully-vaccinated-covid?country=High+income~Upper+middle+income~Lower+m

11. Since the start of the pandemic, as of 30 June 2021, UNICEF has shipped 214.8 million COVID-19 vaccine doses to 138 countries through COVAX; 7.8 million COVID-19 RT-PCR tests and almost 4 million COVID-19 antigen-detecting rapid diagnostic tests; 2,252,400 dexamethasone ampoules and 499,650 dexamethasone tablets to 27 countries; 25,926 oxygen concentrators and related consumables (US\$8.5 million value); more than 258 million gloves, 292 million surgical masks, 22 million N95 respirators, 9.5 million gowns, 1.4 million goggles, and 5.6 million face shields in support of 140 countries as they respond to the pandemic. 12. For more information, see https://interagencystandingcommittee.org/inter-agency-standing-committee/covax-humanitarian-buffer.

13. Including refugees, asylum seekers, migrants, internally displaced persons and people living in areas under the control of armed groups for which governments may not have control.

14. World Health Organization, Funding Snapshot at 13 August 2021, <a href="https://www.who.int/publications/m/item/access-to-covid-19-tools-tracker">https://www.who.int/publications/m/item/access-to-covid-19-tools-tracker</a>, accessed 8 September 2021.

15. The IASC is an inter-agency forum of UN and non-UN humanitarian partners. Once proposals are approved and endorsed by the IASC decision-making body, UNICEF will leverage existing partnership agreements and systems to support the swift allocation of funds to implementing partners. Thus, by supporting this HAC appeal, donors can have confidence that their funding will be used by the humanitarian agencies selected to deliver to populations of concern by the IASC decision-making body.

16. Rapid ACT-Accelerator Delta Response urgent appeal. See, https://www.who.int/publications/m/item/rapid-act-accelerator-delta-response-(radar)-urgent-appeal. 17. New target and indicator: For 2021, to achieve a population coverage of 30 per cent in low- and middle-income countries and reach each person with two doses, UNICEF estimates 3,018,759,698 doses will be required. The official ACT-A/COVAX target is currently to reach 2 billion in low- and middle-income countries, which is to achieve a population coverage of 20 per cent. UNICEF is supporting 133 low- and middle-income countries with vaccine roll-out. UNICEF contributes to the achievement of this indicator with partners.

18. New target and indicator: As of 30 September 2021, only 1.3 per cent of people living in low-income countries were fully vaccinated. See, <a href="https://ourworldindata.org/grapher/share-people-fully-vaccinated-covid?country=High+income~Upper+middle+income~Lower+middle+income~Low+income>">https://ourworldindata.org/grapher/share-people-fully-vaccinated-covid?country=High+income~Upper+middle+income~Lower+middle+income~Low+income>">https://ourworldindata.org/grapher/share-people-fully-vaccinated-covid?country=High+income~Upper+middle+income~Lower+middle+income~Low+income>">https://ourworldindata.org/grapher/share-people-fully-vaccinated-covid?country=High+income~Upper+middle+income~Lower+middle+income~Low+income>">https://ourworldindata.org/grapher/share-people-fully-vaccinated-covid?country=High+income~Upper+middle+income~Lower+middle+income~Low+income>">https://ourworldindata.org/grapher/share-people-fully-vaccinated-covid?country=High+income~Upper+middle+income~Lower+middle+income~Low+income>">https://ourworldindata.org/grapher/share-people-fully-vaccinated-covid?country=High+income~Upper+middle+income~Lower+middle+income~Low+income>">https://ourworldindata.org/grapher/share-people-fully-vaccinated-covid?country=High+income~Upper+middle+income~Lower+middle+income~Low+income>">https://ourworldindata.org/grapher/share-people-fully-vaccinated-covid?country=High+income~Upper+middle+income~Lower+middle+income~Low+income>">https://ourworldindata.org/grapher/share-people-fully-vaccinated-covid?country="">https://ourworldindata.org/grapher/share-people-fully-vaccinated-covid?country=High+income~Lower+middle+income</a>

19. New target and indicator: UNICEF support will include procurement, technical assistance or in-country delivery cost provision.

20. Revised indicator: Priority will be given to low-income countries responding to an acute outbreak. UNICEF directly contributes to the achievement of this indicator. 21. New target and indicator: Priority will be given to low-income countries responding to an acute outbreak. UNICEF directly contributes to the achievement of this indicator.

22. Revised indicator: Priority will be given to low-income countries. Current eligible novel and repurposed treatment courses are corticosteroids and interleukin-6 receptor blockers for COVID-19. UNICEF directly contributes to the achievement of this indicator.

23. New target and indicator: Priority will be given to low-income countries expressing need. UNICEF directly contributes to the achievement of this indicator. 24. New target and indicator: UNICEF will model progress towards this indicator based on the estimated costs used by the ACT-A Hub to provide a community-based frontline worker with basic PPE for one day. We note that there are many assumptions and also that there is marked variation in the type of PPE needed (such as masks, eye protection, gloves, gowns and disposable bags to safely store and discard contaminated items) that are used and the costs vary significantly. UNICEF directly contributes to the achievement of this indicator.

25. New target and indicator: Priority will be given to low-income countries expressing need. UNICEF directly contributes to the achievement of this indicator. 26. New target and indicator: The data source for this indicator will be: COVID-19 Behavioural Indicators - Collective Service for Risk Communication and Community Engagement (RCCE) (rcce-collective.net). In January 2021, the percentage of individuals who would get vaccinated once a vaccine is available was 69.5 per cent, and by May 2021, this had increased to 79.5 per cent. UNICEF contributes to the achievement of this indicator with partners.

27. Risk communication and community engagement interventions include engaging with communities, influencers, local groups, media and frontline workers for behaviour change. It also involves the creation of engagement platforms, participation, feedback and accountability mechanisms, as well as capacity building and evidence generation (e.g., via social listening, monitoring of rumours, monitoring uptake of practices). There is a focus on sustained community trust. 28. Rapid ACT-Accelerator Delta Response urgent appeal. See, <a href="https://www.who.int/publications/m/item/rapid-act-accelerator-delta-response-(radar)-urgent-appeal">https://www.who.int/publications/m/item/rapid-act-accelerator-delta-response-(radar)-urgent-appeal</a>.

29. Director-General's opening remarks at the World Health Assembly - 24 May 2021, <a href="https://www.who.int/director-general/speeches/detail/director-general-speeches/detail-speeches/detail