COVAX

CEPI  Gavi  unicef  World Health Organization

The Humanitarian Buffer

Briefing Presentation
5 May 2021
Agenda

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Overview

• The Humanitarian Buffer (HB) is a mechanism established within the COVAX Facility to act as a measure of ‘last resort’ to ensure access to COVID-19 vaccines for high-risk and vulnerable populations in humanitarian settings.

• The HB is a virtual stockpile of up to 5% of the COVAX Facility’s real-time doses as they become available. This could reach up to 100 million doses by the end of 2021.

• The HB is expected to become operational and ready to receive application from May 2021.
Humanitarian Buffer entities

COVAX

Joint Allocation Taskforce (JAT)

Application form and package of documents:
- Verify completeness of the request according to the decision making criteria
- Confirmation of number of doses available and type of vaccine

INDEPENDENT

The IASC Decision Group

Reports to

IASC EDG

Summary reports (2 times per year)

GAVI Board
IASC Decision
Group role

- A decision group comprising experts from IASC entities has been established to take decisions on allocations to the buffer and will report to the IASC EDG.

- The decision group will decide by consensus, based on the information provided.

- This group is composed of representatives from the following agencies: WHO (chair), UNICEF, OCHA, IOM, UNHCR, ICRC, IFRC, MSF and a representative from the IASC’s NGO consortia.
  - GAVI will have observer status
# Decision Group decision criteria

<table>
<thead>
<tr>
<th>Criteria for Approval</th>
<th>Criteria for prioritization among applications</th>
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<tbody>
<tr>
<td><strong>Last resort</strong> : evidence that population is excluded from NDVP roll out and all efforts have been made to include them</td>
<td><strong>Epidemiology</strong>: number of cases, trends, deaths, disease burden. % at risk populations, risk groups/specific risk factors in this population. E.g., HIV</td>
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<td><strong>Contextual Parity</strong>: -intra / inter country across borders vaccine access for at risk population</td>
<td><strong>Other control measures</strong> in place to control the epidemic, quarantine/isolation, contact tracing/testing, IPC, health care capacity.</td>
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<td><strong>SAGE recommendation</strong> on prioritization of target groups</td>
<td><strong>Availability of funds for operational costs</strong>, sufficient financial resources for vaccination</td>
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<td><strong>Requestor’s capacity</strong> to reach to the population in need. E.g., the requestor is already working with this population</td>
<td><strong>I&amp;L agreement in place</strong></td>
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<td><strong>Requestor’s experience</strong> to conduct a vaccination in humanitarian settings. Being operational in the area</td>
<td><strong>Regulatory approval</strong>: licensing, EUL/EUA, other regulatory approval for use.</td>
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<td><strong>Vaccination plan</strong>: adequate human resources, transportation, cold chain, AEFI surveillance, waste management</td>
<td><strong>Type of vaccine</strong> available in the country</td>
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<td><strong>Evidence of operational ability</strong> : how the vaccine and supplies will get to the population in these areas</td>
<td><strong>Windows Opportunity</strong> for vaccination/Community acceptance: HCWs, vulnerable populations</td>
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<td><strong>Consultation</strong>: Technical opinion from UN Resident Coordinator - humanitarian country team – health cluster representative</td>
<td><strong>Availability of required additional supplies in-country</strong>: masks, PPEs, Oxygen supply, medicines needles, syringes, safety boxes, etc.</td>
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Humanitarian Buffer
Operational Framework

1. Application received in Joint Allocation Task Force (JAT) Humanitarian Buffer Secretariat Inbox, reviewed for completeness and sent to IASC Decision Group (website within the COVAX facility will be live in May 2021, guidelines and application form)

2. IASC Decision Group approves/ rejects/ or requests more information for application

3. JAT HB secretariat sends decision to applicant

4. Applicant provides formal agreement within one week

5. Authorization to procurement agencies: UNICEF Supply Division / PAHO Revolving Funds for shipping
   • Or self-procurement mechanism (if SFP)

6. UNICEF SD/ manufacturer (if self-procured) delivers the vaccine to the consignee/ applicant to implement the vaccination campaign
Financing

- For Humanitarian Buffer doses financed through the COVAX Advance Market Commitment (AMC), Gavi will cover the cost of doses and their shipment to the designated port of entry.

- Delivery costs for the vaccination are not covered by Gavi, thus IASC partners are working on identifying a financial mechanism.

- Financing for COVID-19 vaccines must not come at the expense of other humanitarian activities.

- Several IASC partners have launched appeals to fundraise for COVID-19 vaccine delivery. IASC partners are working on a mechanism to centralize donations.
Routine EPI services at risk

Disruptions in immunization services

Percentage of countries reporting disruptions in immunization services

- Average disruption in service group
  - 0%: 23%, 10%, 8%, 5%, 37%
  - 10%: 8%, 10%, 30%, 7%, 34%
  - 20%: 7%, 20%, 40%, 6%, 36%
  - 30%: 6%, 30%, 50%, 5%, 35%
  - 40%: 5%, 40%, 60%, 4%, 34%
  - 50%: 4%, 50%, 70%, 3%, 33%
  - 60%: 3%, 60%, 80%, 2%, 32%
  - 70%: 2%, 70%, 90%, 1%, 31%
  - 80%: 1%, 80%, 100%, 0%, 30%
  - 100%: 0%, 100%, 100%, 0%, 29%

- Routine outreach immunization services (n=89)
  - 0%: 21%, 10%, 8%, 39%

- Routine facility-based immunization services (n=103)
  - 0%: 24%, 7%, 7%, 34%

More than one third of countries reported disruptions to both routine facility-based and outreach immunization services

Denominator: excludes "Not applicable" or "Do not know" responses.
Thank you

URL: https://www.gavi.org/covax-facility
HB email address: covax_humanitarian_buffer@gavi.org