COVAX: Key Strategic Issues

BOARD MEETING **Aurélia Nguyen, Thabani Maphosa** 22-23 June 2022, Geneva, Switzerland



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Current landscape

- Delivery Updates
- Supply and demand

COVAX ambition in procurement and delivery for 2023

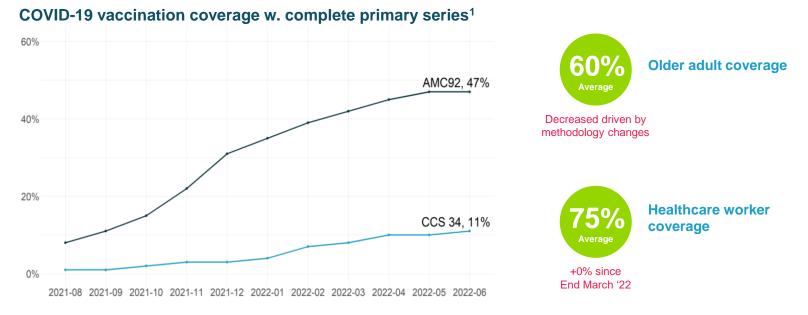
- Continued administration of the COVAX Facility in 2023
- Planning for a future COVID-19 vaccine programme

COVID-19 vaccine policies

- Adapting policies according to SAGE recommendations
- Future COVID-19 paediatric vaccine support



Despite overall progress, increased coverage has been uneven across AMC; high-risk population still not reached as priority

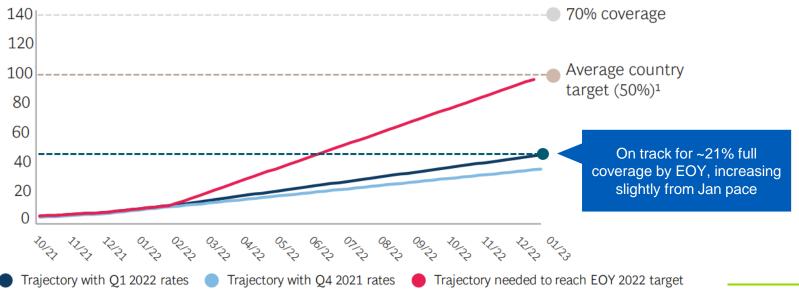


CCS = 34 Countries for Concerted Support (below 10% primary series coverage as of Jan 2022)

3 1. Two AMCs not vaccinating: DRPK and Eritrea; Countries w. concerted support (CCS) Source: WHO COVID-19 Vaccine dashboard; data as of 16 June 2022

CoVDP: 34 countries for concerted support on track to reach ~21% coverage by EOY 2022

Total doses administered as % of population, 34 countries for concerted support



1. Weighted average of country interim milestone targets. Note: Assumes all doses are part of 2-dose primary vaccination series. Source: CoVDP InfoHub (https://infohub.crd.co/) (March 29th, 2022)



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Delivery of COVID-19 vaccination could mutually benefit from further integration with broader Primary Healthcare and Routine Immunisation

COVID-19 vaccine infrastructure and learnings can be leveraged for RI



Cold chain expansion and supply chain management



Use of data management systems

Technological upgrades for microplanning



Vast increase in immunisation-trained Health Care Workers Integration with established RI & PHC channels could further benefit Covid-19 vaccination



Bundle targeted health interventions (e.g. reaching immunocompromised, older adults)



Generate demand by leveraging broader health access points and advocacy



Broaden reach to marginalised communities



Combine planning and service delivery to increase system efficiencies



More effective combined messaging



Sustainable long-term COVID-19 Vx with potential future boosting of target pops

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COVAX Delivery support for countries to focus on high-risk, integration in addition to scale-up

Support for countries will target:

- Aspirational 100% high and highestrisk population coverage to prevent morbidity and mortality
- 2. Reaching national coverage targets
- 3. Integration of C19 and RI to achieve mutual, sustainable benefits

COVAX Delivery Support and Funding (CDS) to evolve with these priorities to deploy recently raised US\$ 600 million

For Guidance: Building on previous approach, is Board comfortable for Secretariat to continue to support countries with high risk appetite where relevant?



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Globally, there are more than enough vaccines available to protect every adult and adolescent (12yrs+) with a 3-dose regimen; however, distribution remains unequal

Doses secured through COVAX Number of doses required to achieve 70% primary series coverage (two-dose)² Key: Doses secured through non-COVAX sources¹ Number of doses required to achieve three-dose coverage for all 12yrs and older² 8.1 4.1 4.3 8.0 3.6 3.2 2.9 3.3 2.0 2.3 2.8 2.1 1.5 1.8 1.1 2.6 1.8 2.1 2.1 02 0.2 HICs UMICs (excl. China) India LMICs (excl. India) LICs Number of doses administered 2.4 1.8 2.0 2.1 0.2 (billion doses)3 Number of doses 6.2 1.7 1.9 2.1 1.3 secured per capita²

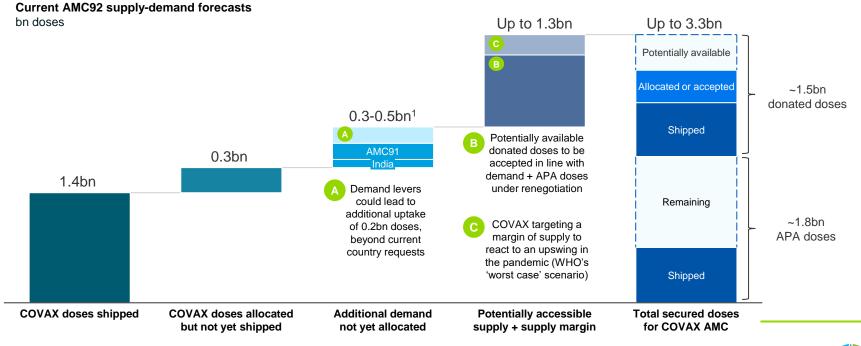
Total available global supply (COVAX and non-COVAX), billion doses

1 Source: Linksbridge Global Market Assessment analysis as of 13th June 2022.

2 Both dose requirement calculations assume 10% wastage. In calculating number of doses secured per capita, assumes 10% wastage of doses.

3 Source: WHO COVID-19 vaccine dashboard, as of 7th June 2022.

End-to-end view on supply/demand matching As of 15 June 2022 Demand- and supply-side actions in place to meet AMC92 national targets, balancing agility to respond to a pandemic upswing whilst minimising vaccine expiry





¹ In addition to AMC91 demand, demand levers include volumes that might rollover into 2023, paediatric doses and 100Mds demand from India (as part of overall agreement between COVAX and Government of India for 240Mds).

COVID-19 pandemic scenarios drawn from WHO are informing COVAX planning

Base case	The virus continues to evolve; however, severity is significantly reduced over time due to sustained and sufficient immunity against severe disease and death, with a further decoupling between incidence of cases and severe disease leading to progressively less severe outbreaks.
Best case	Future variants that emerge are significantly less severe , protection against severe disease is maintained without the need for periodic boosting or significant alterations to current vaccines.
Worst case	A more virulent and highly transmissible variant emerges against which vaccines are less effective, and/or immunity against severe disease and death wanes rapidly, especially in the most vulnerable groups.

World Health Organization: Strategic Preparedness, Readiness, and Response Plan to End the Global COVID-19 Emergency in 2022

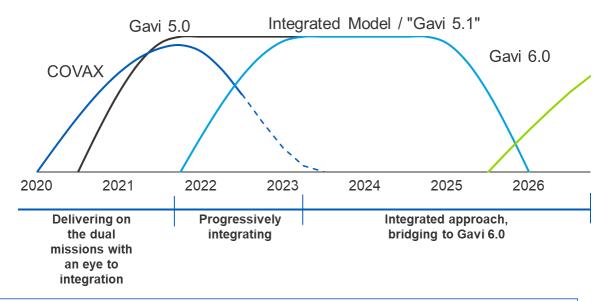


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Planning for a future COVID-19 vaccine programme

Considerations for a future COVID-19 programme:

- Vaccine programme design
- Alignment with Gavi's programmatic policies
- Implications for programmatic approaches



The Board is requested to **approve** that Gavi continues to administer the COVAX Facility for 2023



COVAX Vaccine Policies

COVAX is likely to continue to operate in a dynamic environment

WHO/SAGE COVID-19 guidance and vaccines recommendations will continue to evolve and be updated throughout 2022

 As an indication, these may include areas such as: fourth dose (2nd booster); hybrid immunity; paediatrics; variant-adapted vaccines

Decision: Provide flexibility to adapt COVAX policy positions

Flexibility to adapt COVAX policy positions, contingent on available supply and funding, will ensure that COVAX can provide timely support for countries' targets and goals



COVAX'S Paediatric Vaccine Position



Option 2 is recommended to capitalise on using existing supply, meeting participants' requests, whilst maintaining focus on and resources for higher priority populations and programs

 Implementation would be contingent on several factors (e.g. supply availability, updated SAGE guidance)



Recommendation

The Gavi Alliance Programme and Policy Committee recommends to the Board that it:

- a) **Approve** the continued administration of the COVAX Facility by Gavi in 2023;
- b) <u>Delegate</u> to the CEO, with reporting to the Board, the authority to approve flexibility to adapt programmes based upon updated SAGE recommendations for COVID-19 (such as on vaccine use, additional boosters, the need for variant-adapted vaccines), contingent on available supply and funding; and
- c) Informed by the interim approach outlined in Annex A to Doc 05, <u>approve</u> future paediatric support (July 2022 onwards) that supports continued limited provision of paediatric doses, with guardrails related to participant's coverage of COVID-19 vaccines in higher priority use groups, maintaining routine immunisation and monitoring any adverse impact on immunisation programmes.



The Gavi Alliance Board is further requested to:

- a) **Provide guidance** on the future evolution of the objectives and scope of Gavi's COVID-19 vaccine delivery and funding, building upon PPC alignment and feedback.
- b) **Note** the potential disease scenarios outlined in Section 1.4 to Doc 05, **provide guidance** on the proposed framing to develop a longer-term approach to supporting COVID-19 vaccination, including learning from other Gavi work and to note the interim steps taken to ensure Gavi continues to deliver on its joint Gavi 5.0 and COVAX objectives, and **provide guidance** on the high-level planning assumptions guiding operational decision-making toward Gavi 5.1, as outlined in Section 2.









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