### **COVID-19 vaccination supply and distribution:** UNICEF Update and implications for Ministries of Finance

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Taking Stock: COVID-19 vaccine financing, procurement and distribution in Africa
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13:00-17:00 (CAT)

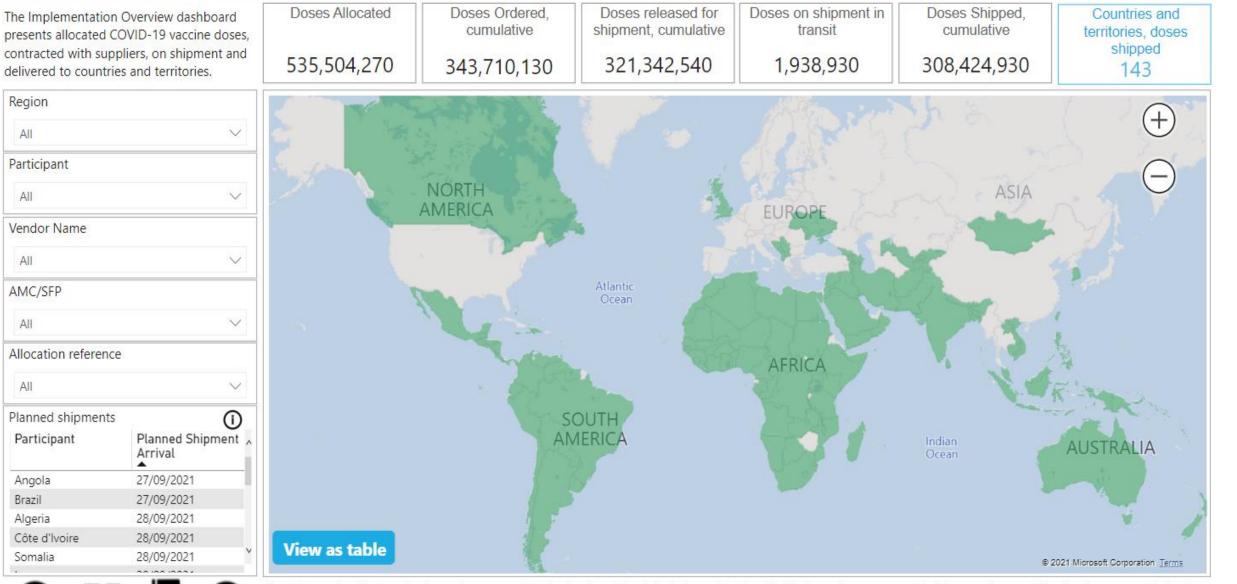
### Part I: UNICEF Update

**COVID-19 vaccine supply and distribution** 

#### unicef COVAX Implementation Overview

Map

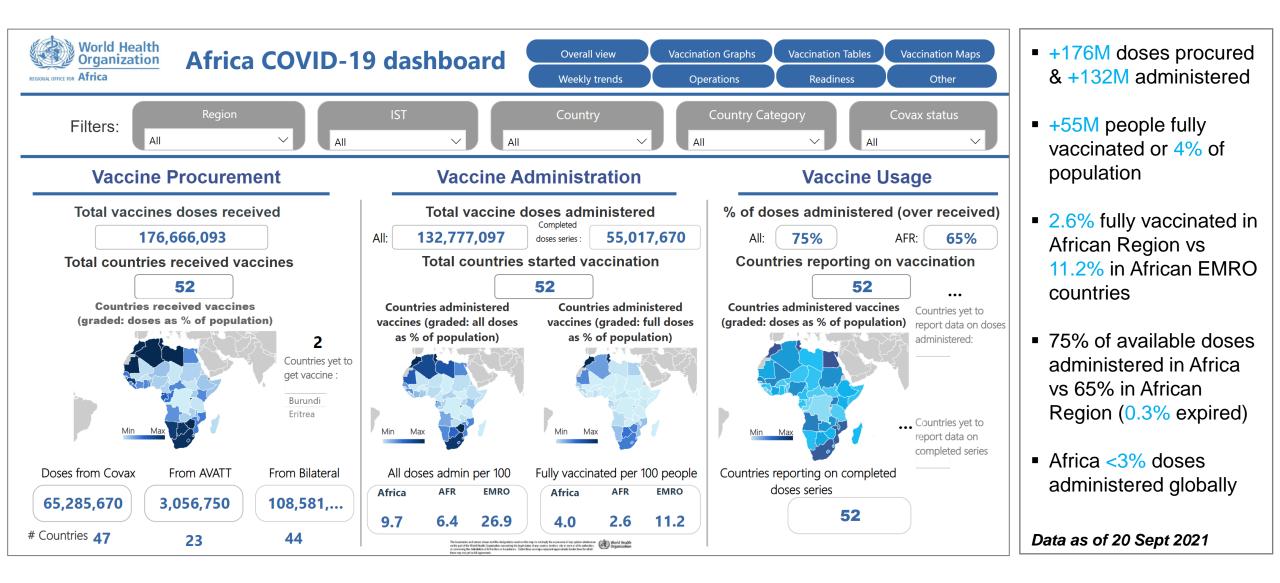
Details



The information displayed reflects the status of deliveries based logistics information in a highly dynamic context and subject to change. This visual may not display the most recent data at all points. The information included in the dashboard is for internal use by the COVAX partners only. The mirroring, reproduction, republishing or translation of any of the information for wider dissemination outside COVAX is prohibited unless prior written permission is obtained.

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### Summary of vaccine procurement and uptake



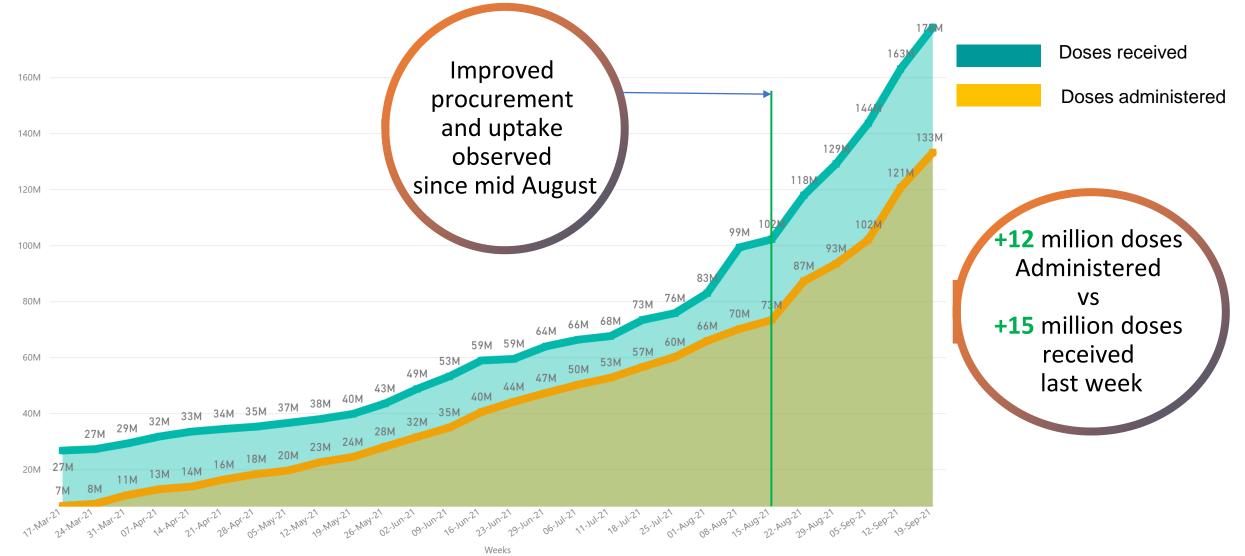
#### **Quantity of vaccine doses allocation & Quantity delivered**

			Allocated doses	
Countries	Doses Allocated	Doses received	received in %	
Mauritius	176,850	176,850	100.0%	
Sao Tome	48,000	48,000	100.0%	
Seychelles	35,100	35,100	100.0%	
South Africa	11,208,600	9,269,910	82.7%	
Mauritania	1,061,250	856,800	80.7%	
Eswatini	429,420	340,800	79.4%	
Guinea-Bissau	490,560	360,000	73.4%	
South Sudan	500,470	344,470	68.8%	
Lesotho	555,660	374,400	67.4%	
Cameroon	1,045,250	694,250	66.4%	
Senegal	2,937,650	1,934,160	65.8%	
Côte d'Ivoire	5,441,400	3,482,080	64.0%	
Gambia	612,300	376,800	61.5%	
Algeria	10,116,960	5,833,200	57.7%	
RoC	939,900	530,400	56.4%	
CAR	823,180	462,560	56.2%	
Тодо	2,231,210	1,210,550	54.3%	
Uganda	8,944,730	4,576,010	51.2%	

Countries	Doses Allocated	Deces received	Allocated doses	
			received in %	
Comoros	24,000	,		
Malawi	3,212,250			
Rwanda	2,454,760			
Ghana	6,140,950			
Liberia	1,096,650			
Kenya	10,577,090	4,697,120	44.4%	
Nigeria	22,697,540	10,018,320	44.1%	
Benin	1,139,880	487,200	42.7%	
Angola	6,378,240	2,631,930	41.3%	
Botswana	751,470	304,350	40.5%	
Congo (DRC)	5,519,860	2,218,230	40.2%	
Guinea	3,080,750	1,143,360	37.1%	
Ethiopia	19,417,020	7,132,790	36.7%	
Zambia	2,975,380	1,002,100	33.7%	
Sierra Leone	1,359,930	456,690	33.6%	
Chad	333,450	100,620	30.2%	
Namibia	366,240	108,000	29.5%	
Mozambique	5,990,320	1,318,560	22.0%	
Gabon	471,210	100,620	21.4%	
Niger	4,061,070	864,000	21.3%	
Burkina Faso	2,307,590	475,200	20.6%	
Madagascar	4,709,550	794,990	16.9%	
Tanzania	6,860,910	1,058,450	15.4%	
Mali	4,569,390	626,400	13.7%	
Cabo Verde	461,180	61,050	13.2%	
Zimbabwe	2,153,340	0	0.0%	

	Quantity on Cost Estimate	
Countries	(quantity requested)	Quantity shipped
Nigeria	1,173,600	
Egypt	787,200	787,200
Ghana	499,200	
Kenya	393,600	141,600
Mozambique	276,000	100,800
Cote d'Ivoire	230,400	100,800
Jamaica	216,000	216,000
Uganda	196,800	0
Angola	165,600	165,600
Cameroon	158,400	158,400
Senegal	158,400	158,400
Sudan (the)	158,400	158,400
Belize	148,800	148,800
Zambia	129,600	129,600
Ethiopia	120,000	120,000
Тодо	118,100	117,600
Benin	108,000	52,800
Botswana	108,000	108,000
Congo (the)	108,000	52,800
Gambia	108,000	52,800
Guinea	108,000	108,000
Lesotho	108,000	108,000
Liberia	108,000	108,000
Mauritania	108,000	108,000
Mauritius	108,000	108,000
Namibia	108,000	108,000
Rwanda	108,000	108,000
Sierra Leone	108,000	52,800
Trinidad&Tobago	108,000	108,000
Tunisia	108,000	108,000
Antigua&Barbuda	38,400	38,400
Bahamas	38,400	38,400
Guyana	31,200	31,200

#### Improvement noted in doses procured and administered last week compared to the previous week



### **Key Messages**

- 1. Countries struggling to achieve high coverage in priority groups (elderly, people with health conditions) despite being first priority in NDVPs
  - Some countries expanded access to other groups to avoid expiration of doses, but have not identified strategies to reach at risk (Kenya started offering vaccines at church on Sunday morning in rural areas)
- 2. Adjust needs to meet primary objective of C-19 vaccination: Reduce mortality in vulnerable groups
- 3. Support countries to adopt tailored delivery strategy
  - Multiple vaccines in countries with different requirements e.g. specific syringes for Pfizer, storage/thawing/distribution implications on vaccine management
  - Acknowledge all WHO approved vaccines are effective in preventing hospitalization/death
  - Opportunity to differentiate strategies (e.g. mRNA in hospitals, AZ in rural areas with weaker cold chain, J&J for outreach in hard-to-reach populations given is one dose)
- 4. Develop an effective strategy to increase vaccination

### **Part II: Financing Sources**

**Update and implications for Ministries of Finance in Africa** 

## Financing sources available to support COVID-19 vaccine delivery ~ 3.2 billion pledged as of 16<sup>th</sup> September 2021

THE WORLD BANK \$20 billion window	Asian Development Bank	ISDB الإسلامة للتنمية Islamic Development Bank	,	Bilateral and Four USAID: \$1	44 million	<b>Gave Control</b> <b>\$150 million</b> for TA and	unicef \$66 million disbursed to
Projects <b>approved in 54</b> countries for \$4.5 B	Projects <b>approved in</b> 13 countries for \$2.5 B	<b>46 countries for \$1.2 B</b> Only for vaccine		through country missions & UNICEF HAC		cold chain \$775 million Country	81 countries from non- earmarked donations to
Delivery of vaccines comprise <b>approx. \$1.2</b> billion	Delivery of vaccines comprise <b>approx.</b> \$67m	procurement and manufacturing		DFAT	\$52M via UNICEF	<ul> <li>Delivery Support (from USA, Germany* and Canada).</li> <li>Includes \$16 million to 15 countries through bridge funding</li> </ul>	UNICEF's Humanitarian Action for Children (HAC) Appeal
				New Zealand	\$3.5M via UNICEF		
<i>New:</i> Master Card Foundation to Africa CDC: US\$500 million for vaccine purchase US\$600 million for vaccine rollout				Japan	\$121M via UNICEF		
					er donors (includin and ELMA Found	-	a finne al de linear fine di s

Values marked in blue are confirmed delivery funding

Values marked in green are confirmed in-country disbursed funds

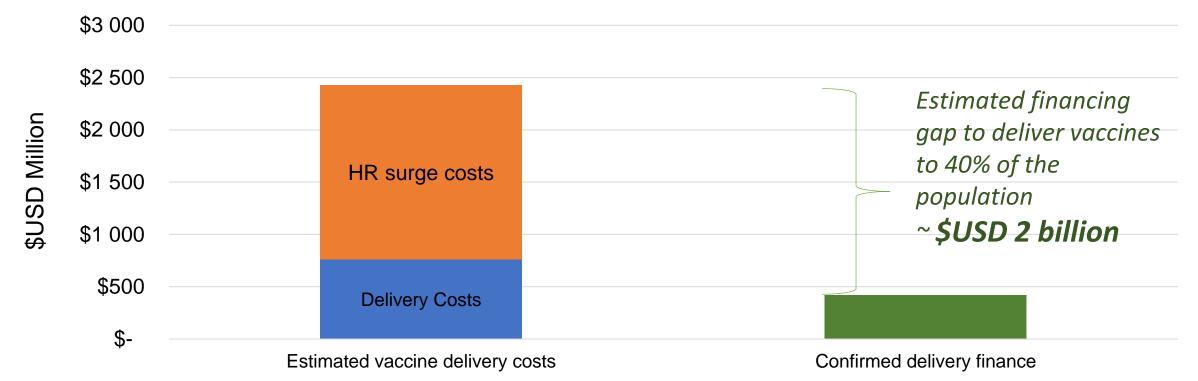
\*Funds from Germany are funneled through UNICEF

# Domestic financing – national government budget allocations lower than financing needs

Source: UNICEF regular engagements with donors

### Financing gap, COVID-19 vaccine delivery costs

Fig 1. Estimated vaccine delivery costs to delivery vaccines to 40% of the population in 44 African countries compared to 2021 confirmed external financing



**Source:** UNICEF internal vaccine delivery cost modelling (4 August 2021), UNICEF tracking of confirmed 2021 external financing for country vaccine delivery (*New modelling of COVID19 vaccine delivery costs in 2022 to be released first week of October*)

### **Key messages to Ministries of Finance**

- Comprehensively cost COVID-19 vaccination programmes, including vaccines and delivery (e.g. vaccine transport, cold chain, waste management, human resource surge costs, per diem, monitoring etc).
- Integrate cost estimates in annual budgets and medium-term budgeting frameworks while preserving financing of essential health and social services.
- Explore other non-debt creating external financing including grants, concessional finance from IFIs (e.g. World Bank \$20bn financing window), and consider using using a portion of SDRs to finance vaccination programmes.
- ✓ Negotiate for **COVID-19 vaccination debt swaps** with creditors, where possible.
- ✓ Enhance efficiency and transparency in vaccine procurement and delivery.
- Strengthen oversight and accountability mechanisms, including through public disclosure of external funds received, vaccine donations and expenditures.

### **UNICEF offer to Governments**

- ✓ Financial and technical assistance in costing
- TA in integrating cost estimates in government budgets and mediumterm budgeting frameworks
- ✓ Financial and technical assistance in conducting public finance diagnostics, including monitoring and measuring resource flows
- ✓ Financial and technical assistance in planning and procurement of vaccines and other supplies
- Technical assistance in immunization, primary health care and vaccine delivery, including planning, delivery and management of vaccination campaigns, social mobilization, pharmacovigilance, etc.



for every child

Thank you