



A GLOBAL FRAMEWORK TO ENSURE EQUITABLE AND FAIR ALLOCATION OF COVID-19 PRODUCTS

WHO Member States Briefing

2nd July 2020

RECAP from last MS briefing

Major elements of the Global Allocation Framework



Initial view for Vaccine Allocation Mechanism

1 Goals

What are the overarching goals of the response?

Reducing COVID-19 mortality & protecting health systems will significantly improve the well being of populations and reduce the impact on societies and economies

2 Priorities

Which populations should be prioritized to help achieve this goal?
How should specific products be allocated given their characteristics?

The goal above in the context of **scarce supply** leads to **prioritization of specific population groups** for vaccination

These could include **healthcare system workers, older adults, and others with high risk conditions**. Specific policy recommendations from SAGE once performance of specific products is known

3 Timing

At what pace will countries receive products given:

- their vulnerabilities (health systems and population factors)
- the dynamic nature of the threat?

Given the ubiquitous nature of COVID-19, all countries should receive an initial allocation as products become available

Eventually, timing for countries would be **based on a risk assessment of countries'** vulnerability and COVID-19 threat

Summary of feedback received as of 30 June 2020

Topic	Summary of feedback
Allocation Framework overall	<ul style="list-style-type: none">• MS welcomed consultation on the Global Allocation Framework, and expressed commitment to global equitable access to COVID-19 products, alongside other agreements countries may reach with manufacturers.• Clarifications were requested on:<ul style="list-style-type: none">• whether this framework will apply outside of the COVAX Facility (e.g., for bilateral-agreements)• what time frame this Allocation Framework would apply to (e.g., once supply meets demand)• There was broad agreement that this framework should be extended / adapted to other COVID-19 products• Clarifications were requested on whether countries funding COVAX would receive preferential allocation of doses
1 Goals	<ul style="list-style-type: none">• Agreement on the objectives to reduce mortality and protect health systems, and prioritizing populations over time.• MS would like to retain decision making authority on how to use doses within their own countries
2 Priority populations for vaccination	<ul style="list-style-type: none">• Support for the prioritisation of healthcare system workers; adults >65 years and other adults with co-morbidities• Concerns that prioritising these populations initially could lead to lower allocation to LICs and LMICs• Further suggestions on priority groups (e.g., based on exposure and transmission risk, essential workforces, or ethnicity and gender as risk factors)
3 Timing (prioritisation based on risk assessment)	<ul style="list-style-type: none">• Broad support for using Vulnerability and population factors to determine country risk, and some noted that consideration should be given to vulnerable populations within countries, small island states etc.• Prioritization based on threat could be sensitive given interdependencies with countries' public health strategies testing etc.• Concerns were raised on how reporting limitations across countries might affect the threat and vulnerability assessment
Operational considerations	<ul style="list-style-type: none">• Clarifications on what will be done to ensure that limitations in country capacities do not influence allocation

Note: This reflects comments received from 10 Member States as of 30/06/2020

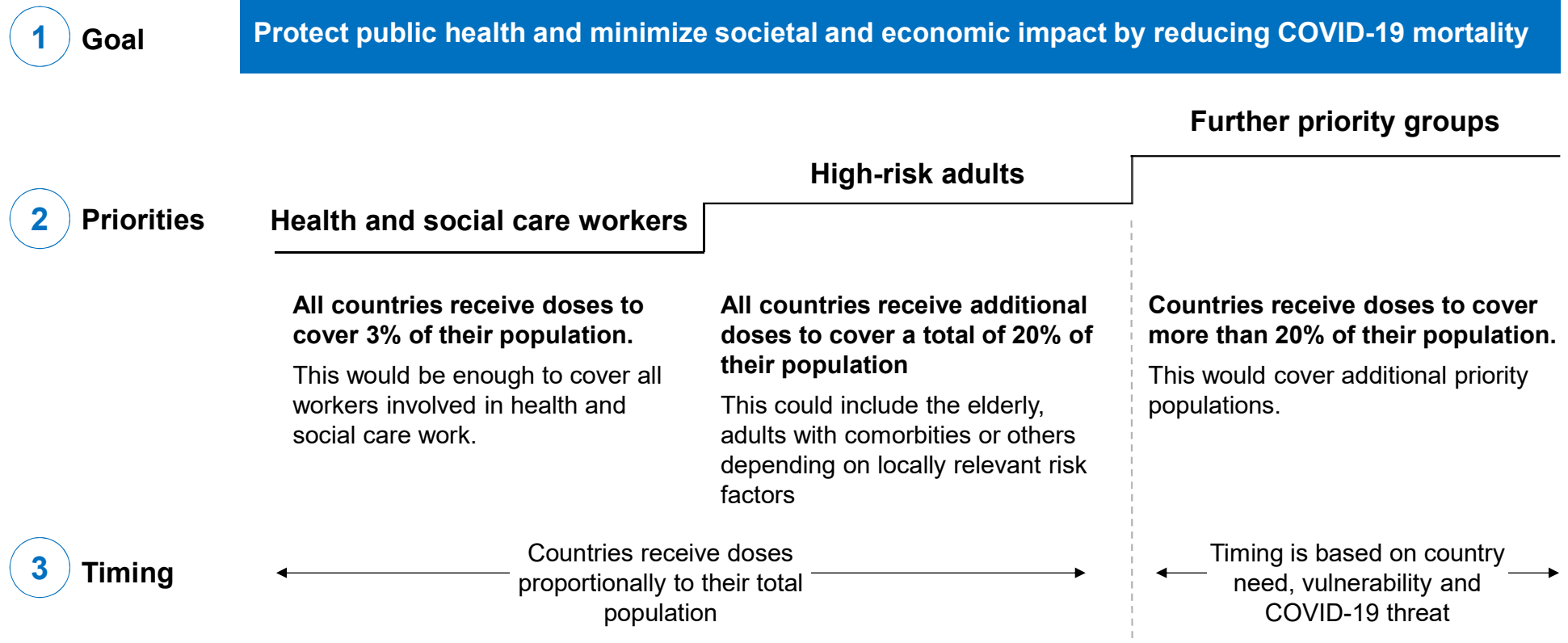
Recurring questions received as of 30 June 2020

Following the Member States on a Global Allocation Framework last week

Topic	Key questions
Allocation Framework overall	<ul style="list-style-type: none">• Will the framework apply to doses obtained outside of the COVAX Facility (e.g., for bilateral-agreements)• How and when will the framework be adapted / extended to apply to other COVID-19 products?• Will the funding that countries provide to COVAX be linked to how many doses they are allocated?
1 Goals	<ul style="list-style-type: none">• Will countries be able to define their own public health goals and priorities?
2 Priority populations for vaccination	<ul style="list-style-type: none">• Will consideration be given to other priority groups? (e.g., risk of exposure and transmission, essential workforces, potential risk factors of gender and ethnicity)• What will be done for countries with younger populations (e.g., with fewer adults over 65)?
3 Timing (prioritisation based on risk assessment)	<ul style="list-style-type: none">• How will data reporting limitations affecting the threat and vulnerability assessment be dealt with?• How will the assessment account for interdependencies between the perceived COVID-19 threat and countries' public health strategies testing capabilities etc?• Will consideration be given to specific vulnerable populations within countries?
Operational considerations	<ul style="list-style-type: none">• What will be done to ensure that limitations in country capacities does not influence allocation?

Note: This reflects comments received from 10 Member States as of 30/06/2020

We have continued to develop the draft Allocation Framework and Allocation Mechanism for Vaccines based on your feedback



A buffer will also be set aside for emergency deployment based on immediate needs

Next steps

Friday 3rd July



Please share any feedback on this presentation so it can be reflected in the draft Global Allocation Framework

Monday 6th July



We will share a working draft of the Global Allocation Framework and Vaccine Allocation Mechanism

Thursday 16th July



Next Member States Briefing

Please share any further feedback the WHO lead on Access and Allocation, ADG Mariângela SIMÃO via ACTaccelerator@who.int