

COVAX

CEPI



The Humanitarian Buffer

Briefing Presentation

27 July 2021

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 doses as they become available.
- The HB is operational and has received 3 applications to date.
- The HB stockpile currently has 14.7M COVID-19 doses available

Decision Group decision criteria

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

Humanitarian Buffer Application status – to date

- Buffer opened for applications since 23 May
- Three applications received to date
 - Applications currently under review
 - New, learning process – continue to refine
 - Limited number of applications may be related to indemnity & liability issues.

Shipping v. Delivery/Ops Costs

The cost of delivery refers to the cost of administering the vaccines once they have arrived in a country.

- The cost of delivery will vary from country to country based on several factors.
- A COVAX working group estimated it would cost around \$3 per dose in in fragile and conflict-affected settings.

Shipping Costs v. Delivery Costs

- Shipping Costs – already covered by Gavi for AMC countries. Freight costs are covered until the point of entry.
- Delivery/operational Costs for the vaccination – are not covered by Gavi. These costs include transportation from the point of entry to the vaccination site + the costs to administer the vaccines.

Financing

- For Humanitarian Buffer doses financed through the COVAX Advance Market Commitment (AMC), this will cover the cost of doses and their shipment to the designated port of entry.
- In-country delivery/operational costs for the vaccination are not covered by the COVAX AMC, thus IASC partners have identified the UNICEF HAC as the financial mechanism, through which funds are being raised for Humanitarian Buffer ops costs. They have raised nearly \$25M to date.
- Financing for COVID-19 vaccines and delivery/operational costs must not come at the expense of other humanitarian activities.

Indemnity & Liability

- When COVID-19 vaccines are allocated through the COVAX Facility to countries, the national authority receiving the doses is required to take on the liability related to the product.
- When humanitarian agencies apply for doses allocated through the COVAX Humanitarian Buffer, manufacturers are likely to request that liability be addressed directly by the agencies. No agency has the capacity, to provide unlimited indemnity.
- Unless these issues regarding indemnity requirements are resolved, manufacturers are unlikely to accept a purchase order and deliver doses to humanitarian agencies.
- Humanitarian organizations cannot take on liability for COVID-19 vaccines in the same way as manufacturers or national governments. The situation regarding COVID-19 vaccines is exceptional: normal practice for other vaccines is for companies to assume liability for adverse effects arising from use of their products.
- The IASC is therefore working closely with Gavi to try to resolve the issues related to indemnities and liabilities so that the buffer can be fully operationalized.
- **To date - 3 manufacturers have waived I&L**

Vaccine Equity

COVID-19 Vaccination in Humanitarian Settings

- 3.9 B doses administered globally
- Only 94.2 M in countries with humanitarian settings
- Further inequity seen in LIC with humanitarian settings

	total PIN M / (no. countries)	Tot doses administered	Tot. doses administered per 100	Total vaccine doses supplied	Total vaccine doses per 100
LIC	153.6 /(17)	7.0 M	1.3%	17.9 M	3.3%
LMIC	40.8 /(9)	55.4 M	7.3%	80.1 M	10.6%
UMIC	19.1 /(4)	31.8 M	24.8%	43.3 M	33.8%
ALL	213.5/ (30)	94.2 M	6.6%	141.2 M	9.9%

Emerging Challenges

- Short expiration dates, quick roll out needed, vaccine hesitancy/acceptancy
- Supply shortage of COVID-19 vaccines (recent US and other donations helping)
- Insufficient funding for vaccine delivery/operational costs for vaccination
- Unable to reach populations in hard to reach / insecure areas
- ID requirements for populations of concern e.g. those in NGCA, irregular migrants
- Concerns for lack of contextual parity for POC especially as vaccination strategies open up (e.g. age range lowered to use up vaccine quickly but high-risk populations for POC still not reached)
- Insufficient monitoring / coverage data on reaching populations of concern especially migrants, returnees, those living in NGCA,

**In-country
coordination
mechanism for
vaccination roll
out including for
humanitarian
buffer**

- **National EPI Task Forces** or their equivalents at national and sub-national levels to continue to coordinate vaccination roll out plans including in humanitarian settings. NEPI Task Forces to also consider other vaccination needs of target populations of HB.
- **National Health Clusters** to continue to coordinate broader health response including in area where delivery of HB should/ can be done as part of a package of services.
- NEPI Task Forces and NHCs to coordinate based on contextual needs on COVID vaccination roll out including in areas using HB.

COVAX

CEPI



Thank you

URL: <https://www.gavi.org/covax-facility>

HB email address: covax_humanitarian_buffer@gavi.org