COVAX Buffer for high-risk groups in humanitarian situations

Doc 02 Annex A - Sections referenced in decision points PPC Meeting on 1 March 2021





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Doc 03 - Annex E

Doc 03 - Annex B

Target populations

The Humanitarian Buffer is intended to be a measure of last resort

- The first resort for covering all high-risk groups (irrespective of their legal status) as per SAGE guidelines, is their inclusion in National Deployment and Vaccination Plans (NDVPs)
- Protecting the Humanitarian Buffer from creating perverse incentives for countries, requires a
 combination of clear guidelines for countries and partners, revision of incomplete NDVPs, and global
 and national advocacy based on public-health rationale
 - Regional Review Committees and regional COVAX working groups are advised to include humanitarian agencies, including CSOs, in their expert consultations to mitigate the risk of high-risk groups being missed in relevant contexts
 - Gavi, WHO and IASC briefed UN Resident Coordinators in 11 priority countries with significant humanitarian needs on the need for advocating with respective host governments to ensure inclusion of high risk populations in national plans and to help identify where populations may be missed
- The Humanitarian Buffer is neither designed nor intended to cover the entirety of target populations, nor to
 prioritise them over any other population the Humanitarian Buffer will adhere to SAGE guidelines and
 only cover high-risk groups within a given target population e.g. the frontline healthcare workers and
 the vulnerable elderly¹
- The Humanitarian Buffer is **only a measure of last resort**, and is particularly relevant in instances of statefailure and conflict, proactive exclusion of high-risk populations, and for covering people living in areas controlled by non-state armed groups, inaccessible to governments

1. Gavi would work actively with local implementing partners to ensure best efforts are made to identify vulnerability status of individuals in data poor environments

Target populations for Humanitarian Buffer doses

- At-risk populations in humanitarian settings may include refugees, asylum seekers, stateless persons, internally displaced persons, populations in conflict settings or those affected by humanitarian emergencies and, vulnerable migrants in irregular situations
- Target populations served by doses released through the Humanitarian Buffer will be those included in the Global Humanitarian Overview, whilst noting that the obligation to provide access to COVID-19 vaccines for all people within their respective territory rests with national governments
- Access to vaccines for target populations will be sensitive to intra- and inter-country contexts, to avoid any perception of improper prioritisation of any one group above another

Implications

- Where there are unavoidable/deliberate gaps in coverage, COVAX will work with applicants to the Humanitarian Buffer to confirm that target populations are those missed by government-led vaccination, as part of the application process
- Doses will be in addition to any existing country allocations (i.e. a 'top up')

Identification of target populations will be guided[®]by the Global Humanitarian Overview (GHO)

- The Global Humanitarian Overview (GHO) builds on Humanitarian Needs Overviews (HNOs) and Humanitarian Response Plans (HRPs) prepared by each country, as well as regional refugee plans and other appeals to provide an evidence-based assessment of global humanitarian needs, response and trends; it is a dynamic, regularly updated resource
- GHO¹ covers individuals that require humanitarian assistance either as a result of conflict, natural disaster or other factors. People in need are defined as those whose living conditions and basic rights have been disrupted and their current level of access to basic services, goods and social protection is inadequate to re-establish normal living conditions without additional assistance.
- The GHO 2021 includes dedicated sub-sections on gender-based violence, gender, persons with disabilities as well as older persons and mental health and psychosocial support providing greater focus on these vulnerabilities, which have also been aggravated by COVID-19

1. The GHO 2021 covers 56 countries, includes 34 response plans and combines the analysis of humanitarian needs due to COVID-19 and other causes of humanitarian problems

Inter-Agency Standing Committee (IASC) estimates ~167m at risk of exclusion from COVID vaccination

Target group	Number
Refugees	19.9 million
Asylum-seekers	1.9 million
Venezuelans displaced abroad	3.6 million
Stateless persons	2.9 million
Other persons of concern	5.5 million
Internally displaced persons (IDPs) displaced by conflict/violence	49.2 million
Stranded migrants and migrants in irregular situations and at highest risk	13.2 million
Detainees	1 million
People living under the state-like	
governance of non-State Armed	70 million
Groups	
Total	167.2 million

- These numbers are highly variable and subject to unexpected shocks (due to conflicts etc.) and the demand-based Humanitarian Buffer is designed to expand or contract within the capped limit to respond appropriately
- Even in the ideal scenario of all countries including all high-risk populations in national plans, 60-80 million people in nongovernment controlled areas could still remain beyond national deployment reach

Estimated number of SAGE high-risk groups to maintain parity with overall roll-out

3% = ~ 5 million1 20% = ~ 33.4 million

Eligibility of Countries and Humanitarian Agencies to apply to the Humanitarian Buffer

All COVAX Facility participants (AMC and SFP) with be eligible to apply to the Buffer

Country applications

- All participant applicants will be asked to clearly demonstrate why the target populations for which they are applying for doses were not included in their national deployment and vaccination plans and what other attempts have been made to cover them.
- For **AMC-eligible economies**, doses granted through the Humanitarian Buffer will be both additional and AMC-funded, on top of their standard AMC-allocated doses. They will therefore be additionally asked to demonstrate that the target population is 'new' (e.g. recent cross-border displacement) or 'uncounted' in population statistics (e.g. irregular, undocumented, stateless etc.), so as not to give preferential treatment to any AMC-eligible economies over others.
- Note: Currently, COVAX provides no other means for SFPs to procure additional doses

Proposed criteria for humanitarian actor eligibility for Humanitarian Buffer doses

Humanitarian Agency applications (e.g. UN agencies, red cross, civil society organisations) may also apply for doses to serve populations not otherwise being reached in any country or territory

- **Conditional on demonstrated gap in population coverage** e.g. it can be reliably ascertained that a certain population within a given country is not being covered or accessible by the govt.
- Conditional on capacity to deliver and other relevant standards
 - Agencies having experience with conducting vaccination campaigns in humanitarian contexts¹
 - Access to target populations
- At national level, where present the Health Cluster Coordinator and the Humanitarian Coordinator should provide a positive opinion of the humanitarian entity and their proposed plan, or if not in place, the UN Resident Coordinator and WHO Representative.
- At global level a group convened by the Inter-Agency Standing Committee (IASC) would validate Humanitarian Agencies and their plan.

1. Humanitarian Agencies have experience reaching vulnerable populations, with multi-dose vaccination campaigns and in tracking AEFIs

Non-COVAX Facility countries access to Humanitarian Buffer doses

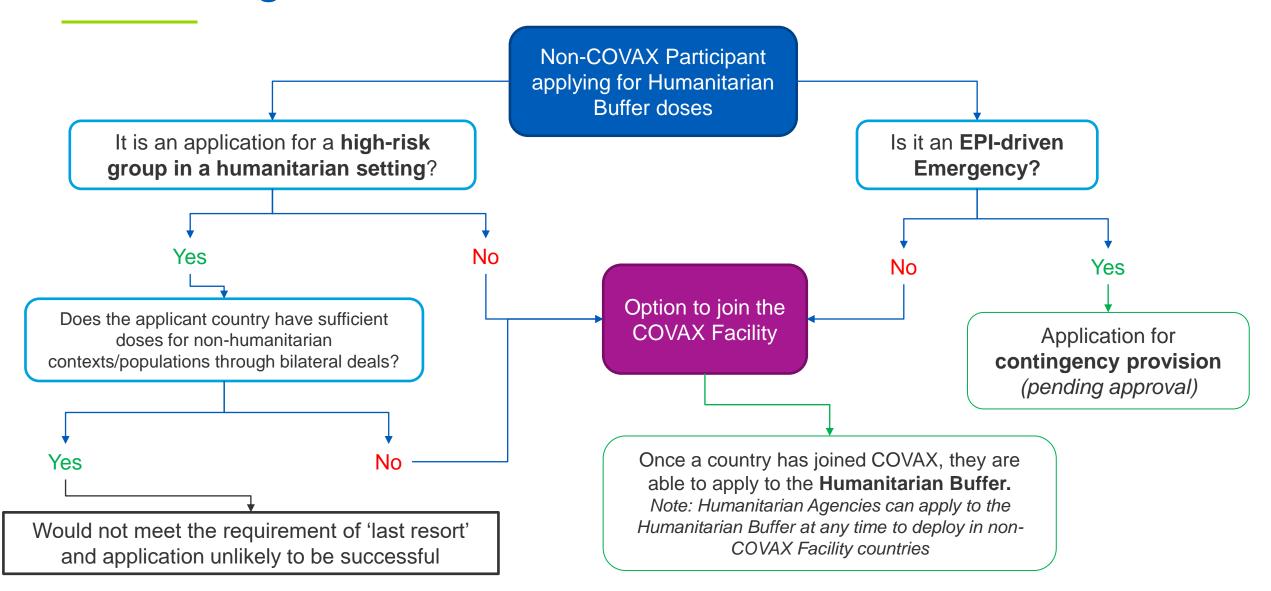
- The Humanitarian Buffer was originally proposed to be open to:
 - All COVAX Facility participants (SFP and AMC)
 - Humanitarian Agencies, for deployment in any geographical location, regardless of whether a COVAX Facility participant or not
- During the informal PPC discussion on the 2nd February, PPC members proposed that the Humanitarian Buffer could also be open to direct applications from non-COVAX Facility participants
- The Gavi Secretariat had originally envisaged that non-COVAX Facility participants would first need to join the Facility in order to access the Humanitarian Buffer. Following a careful review of the PPC's proposal to allow non-COVAX facility participants to directly apply to the Humanitarian Buffer, the Secretariat feels that it would be prudent to retain the original restriction, i.e. that non-COVAX Facility participants are required to first join COVAX before applying to the Humanitarian Buffer

Rationale for requiring non-COVAX Facility participants to join the COVAX Facility before applying to the Humanitarian Buffer

- If a non-COVAX Facility participant were to directly access the Humanitarian Buffer without first joining COVAX, it
 may be perceived that the country is benefitting from the advantages of COVAX (e.g. access to a portfolio of
 vaccines, access to COVAX Facility prices) without having contributed
- There are **no real advantages for a country to directly apply to the Humanitarian Buffer without first joining COVAX**, e.g. for AMC-eligible economies, dose and delivery funding for Humanitarian Buffer doses is aligned with the rest of COVAX, administrative requirements (e.g. regulatory, indemnification and liability) are the same
- It is considered very unlikely that a country would apply directly to the Humanitarian Buffer for target populations without having already found a way, outside of COVAX, to secure vaccines for the rest of their population*. This means that, under the principle of 'last resort', any direct application by a non-COVAX Facility participant is very unlikely to be successful**.
- In cases of urgent need for Humanitarian Buffer doses in a non-COVAX Facility participant, there remains the **possibility for Humanitarian Agencies to apply** directly.
- The 'Contingency Provision' part of the wider COVAX Buffer is expected to be open to all countries, regardless of whether they are Facility participants. Whilst pending approval, this could enable non-COVAX Facility participants to access emergency doses in cases of extreme public health need, including for Humanitarian Buffer target populations.

^{*}If a country has not accessed vaccines for the rest of their population, it would be very unusual for the country to only apply to the Humanitarian Buffer for doses for relevant target groups. It is more likely that the country does not plan to introduce COVID-19 vaccines at all. **All applicants to the Humanitarian Buffer will be asked to clearly demonstrate why the target populations for which they are applying for doses were not included in their national plans and what other attempts have been made to cover them. This is to ensure that the Humanitarian Buffer remains a mechanism of last resort. For countries with alternative sources of vaccines, it's unlikely that they will be able to demonstrate 'last resort'.

Non-COVAX Facility participant pathways to accessing doses



Financing of doses & delivery

Classified as Internal

Funding dose and delivery costs – summary of Doc 03 - Annex B proposal

Principle to align Humanitarian Buffer-related dose and delivery costs to usual AMC funding

Applicant	Deploying in	Dose costs covered by AMC?	Delivery costs covered by COVAX?
Self-Financing Participant (SFP)	SFP	No – self-financed	No – self-financed
	SFP but for AMC-originating populations	Exceptional cases only	No Barring exceptional cases for which 5% of the \$150M exceptional support approved by the Board in December would be available
AMC-eligible	AMC-eligible	Yes	
Humanitarian Agency	Non-AMC (SFP or non- COVAX Facility participants)	Exceptional cases only	
	AMC-eligible	Yes	

Exceptional cases only:

- Helps to protect AMC resources, but creates some flexibility to reduce the barriers for the vaccination of missed communities, as per the objectives of the COVAX Buffer
- In line with Gavi's Fragility, Emergencies & Refugees Policy