ACTaccelerator
ACCESS TO COVID-19 TOOLS

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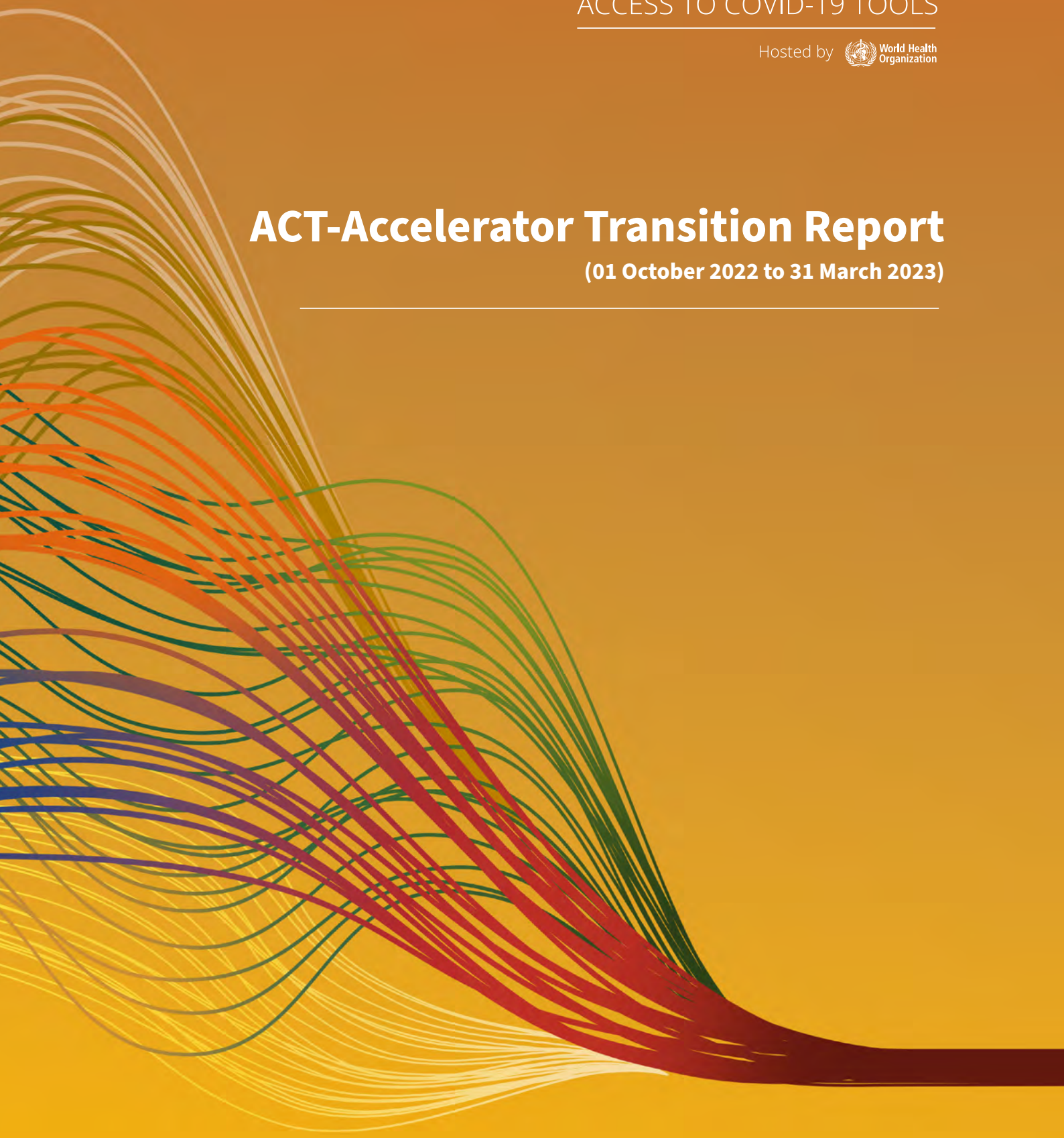
ACT-Accelerator Transition Report

(01 October 2022 to 31 March 2023)



16 May 2023

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Design and layout: Studio FFFOG

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INTRODUCTION

ABOUT THIS REPORT

The ACT-A Transition Report provides an overview of progress made in delivering the objectives set out in the ACT-A Transition Plan (1 October 2022 to 31 March 2023).

It also charts ACT-A partner achievements in the 4th quarter of 2022 and 1st quarter of 2023.

As outlined in this report, ACT-A partners have largely mainstreamed their COVID-19 work and will carry forward ongoing activities as part of their regular programmes and support.

Going forward, as applicable, ACT-A partner agencies will report on ongoing activities via their regular, agency-level reporting channels and modalities.

For the duration of the COVID-19 emergency, ACT-A partners maintained vigilance and readiness to reactivate surge support in the event needed (see section 3 for details).

This report reflects inputs from across the ACT-A partners as well as from recent reports and meetings, including the 3rd meeting convened by the ACT-A Council Tracking and Monitoring Task Force on 31 March 2023. Data are drawn from the ACT-Accelerator Global COVID-19 Access Tracker (GCAT), which tracks country access to COVID-19 tools. Data are also drawn from WHO Coronavirus (COVID-19) Dashboard, UNICEF COVID-19 Vaccine Market Dashboard, and consolidated reports from each of the ACT-Accelerator Pillars and the Health Systems and Response Connector.

Following a brief introduction and update on the status of the global COVID-19 pandemic as of 31 March 2023 and delivery of COVID-19 tools, this report provides an overview of progress made in implementing the objectives of the ACT-A Transition Plan. This includes a summary of achievements against each transition objective, related monitoring and coordination activities (e.g., supported by the ACT-A Tracking and Monitoring Task Force), and a Pillar-by-Pillar update on implementation progress. Reflections on the way forward are provided in the final section of the report, with quarterly information (for Q4 2022 and Q1 2023) included as annexes.

STATE OF THE GLOBAL COVID-19 PANDEMIC

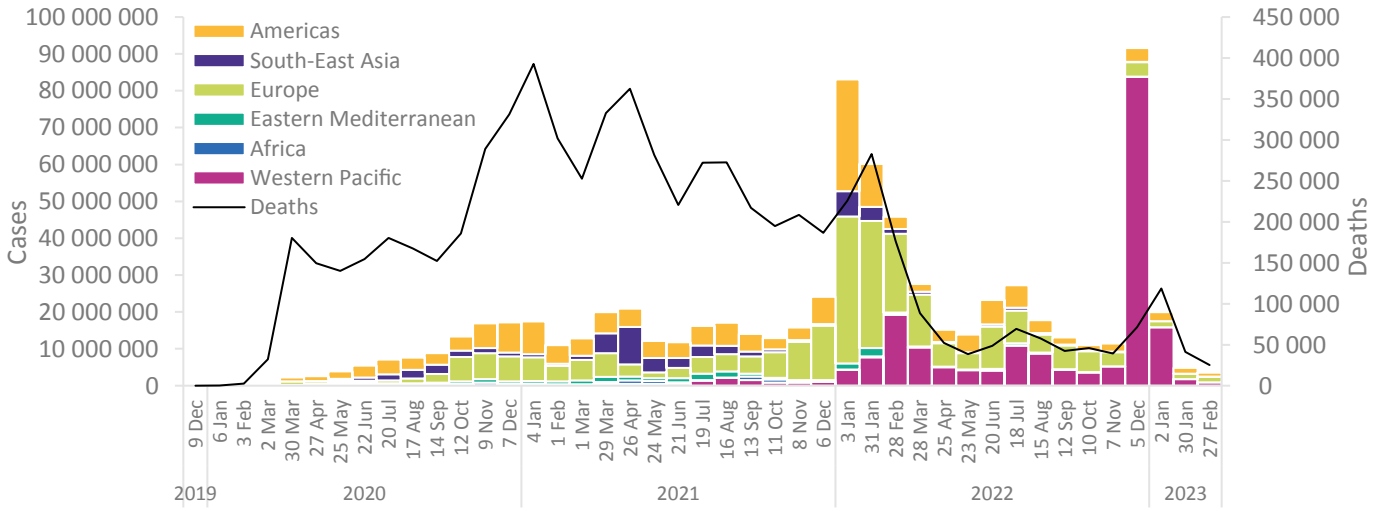
As of 31 March 2023, the COVID-19 pandemic was still a Public Health Emergency of International Concern (PHEIC). Given the continued evolution of SARS-CoV-2, the virus that causes COVID-19, the WHO Technical Advisory Group on SARS-CoV-2 Virus Evolution continues to monitor and evaluate its evolution to assess whether any mutations or combinations of mutations alter its behaviour, such as its transmissibility or disease severity. This process is becoming increasingly challenging as reports on case numbers are no longer being received from the majority of WHO Member States; however, the WHO COVID-19 Weekly Epidemiological Updates now include:

- the COVID-19 epidemiological update at the global and the regional levels,
- an update on the circulating SARS-CoV-2 variants including pre-Omicron and Omicron subvariants being monitored, and
- an update on hospitalizations and intensive care unit admissions related to COVID-19.

Following a predominantly downward trend in cases and deaths and low reported cases from April through September 2022 (See Figure 1), COVID-19 cases and deaths began to climb in the Western Pacific Region at the start of Q4 2022, largely driven by an increase in cases reported in China. Reported COVID-19 cases and deaths peaked in December, again largely due to the surge reported in China, and then fell rapidly in January 2023, with cases and deaths decreasing overall for the rest of Q1 2023. An exception to the downward trend in deaths was the Eastern Mediterranean Region where deaths increased in the last month of Q1 2023.

Throughout the ACT-A transition period, demand for COVID-19 tools remained low globally despite the surge in cases described above.

Figure 1: COVID-19 cases and deaths as of 26 March 2023[1]



New sub-variants were tracked during the six-month period of the Transition Plan; all were of the Omicron variant and none were designated as new variants of concern.

Importantly, while a surge in COVID-19 cases and deaths did occur during the transition period as indicated above, existing vaccines, tests and treatments remained largely effective in reducing severe morbidity and death. Populations most heavily affected included older persons and individuals with pre-existing health conditions/underlying co-morbidities. This underscores the critical importance of ensuring that all high-risk and high-priority populations are fully vaccinated and boosted, and that diagnostics and COVID-19 antivirals are available for those most at risk.

CUMULATIVE PROCUREMENT AND DELIVERY OF COVID-19 TOOLS BY ACT-A

From April 2020 to end March 2023

VACCINES
A total of **1.94bn vaccine doses** allocated under Advance Purchase Agreements or confirmed as donations through COVAX (1.9bn shipped), and more than US$ 1.5 bn in delivery support funding dedicated to countries.

1.94 billion

THERAPEUTICS
US$ 29.5m worth of COVID-19 medicines procured (US$ 28.5m delivered) and US$ 261m awarded by the Global Fund to countries for therapeutics and other supportive hospital equipment.

US$ 29.5 million

OXYGEN
US$ 410.7m worth of oxygen supplies procured (US$ 296.6m delivered) and US$ 605m awarded by the Global Fund to countries for medical oxygen.

US$ 410.7 million

[1] Source: Weekly epidemiological update on COVID-19 - 30 March 2023 (who.int)

DIAGNOSTICS
193m tests procured (182.1m delivered to 182 countries) across all member agencies within the diagnostics consortium and US$ 1,017m awarded by the Global Fund to countries for diagnostics.

193 million

HEALTH SYSTEMS AND RESPONSE CONNECTOR
US$ 940.6m worth of PPE procured (US$ 896.1m delivered) and US$ 767m awarded by the Global Fund to countries for PPE.

US$ 940.6 million

Financing

From April 2020, in the beginning of the pandemic, to the end of the ACT-A transition period, unprecedented support of US$ 24bn was committed to the ACT-A agencies by generous donors. The Transition Plan called for US$ 386m in funding for the Therapeutics and Diagnostics Pillars and the Health Systems and Response Connector. By 17 March 2023, US$ 116.9m had been generously committed by donors, leaving a funding gap of US$ 269.1m. This unmet need will be carried forward with funds still required to support the integration of COVID-19 work into core and routine health programmes. This will need to be complemented by additional funding to support the recovery from COVID-19 related setbacks to other critical health services. Figure 2 below shows the breakdown of the US$ 24bn by donor.

Figure 2: Total contributions to ACT-A from April 2020 to 17 March 2023.

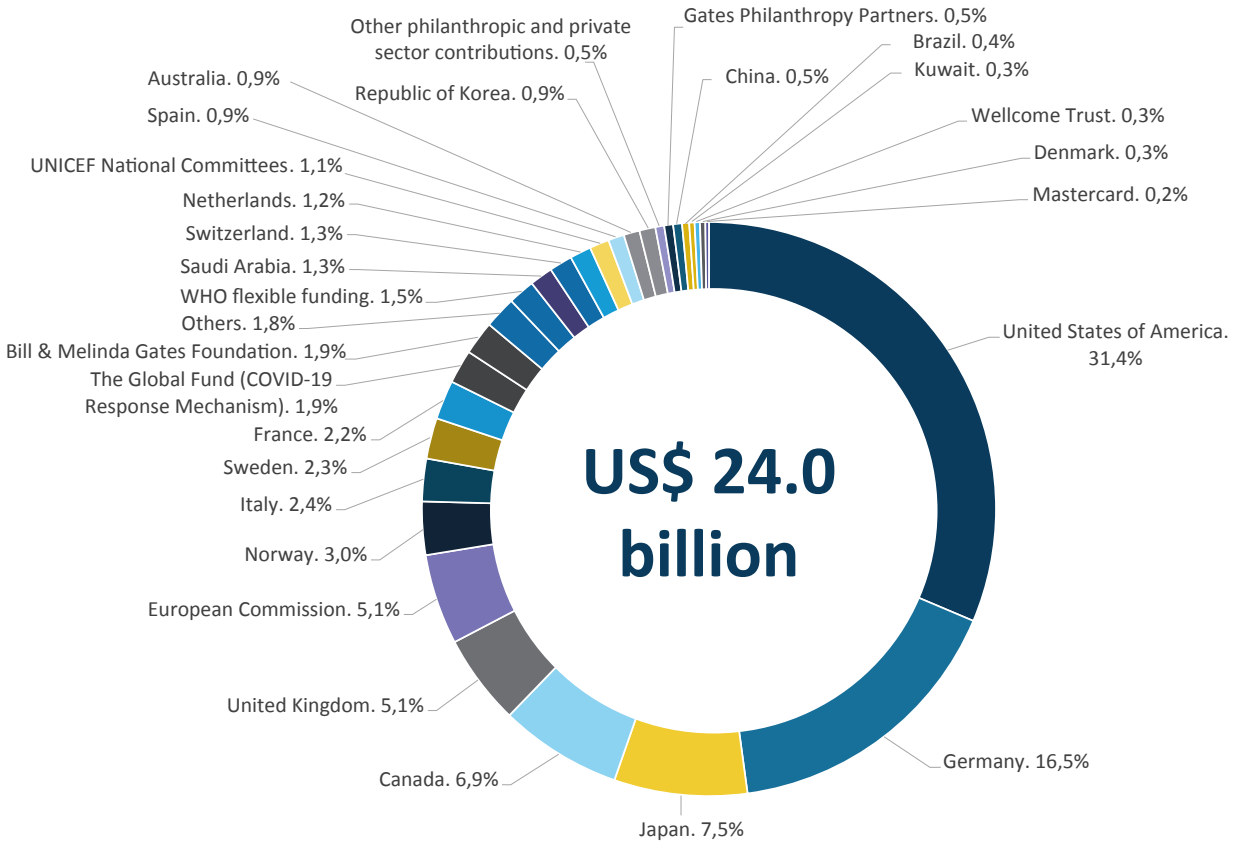
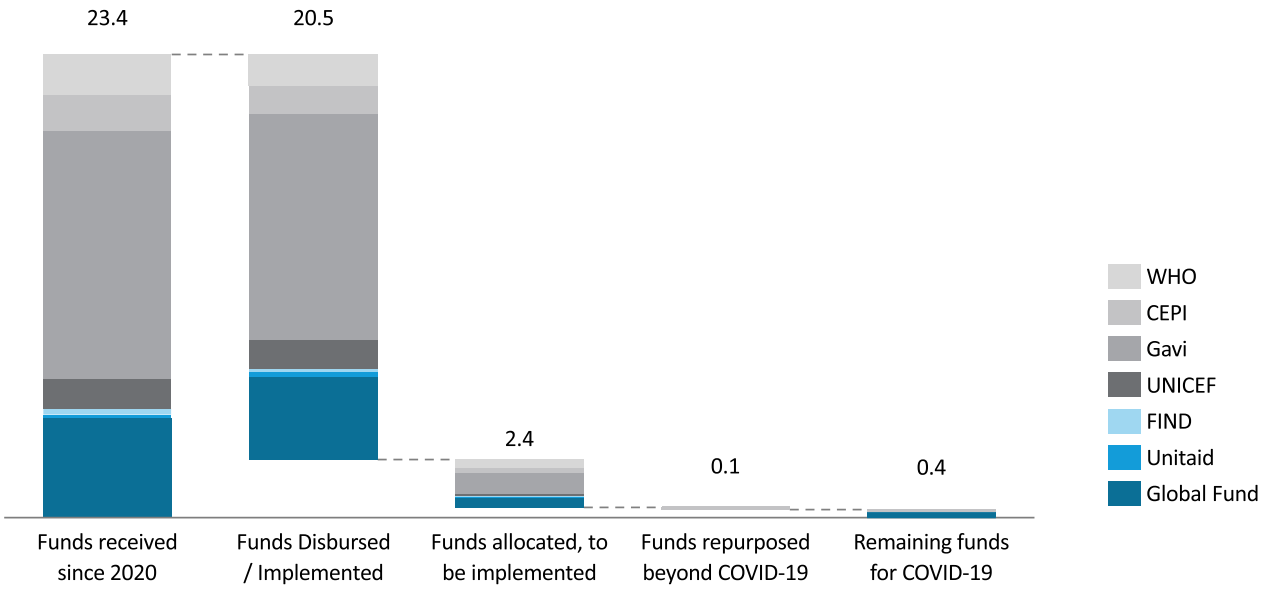


Figure 3 below shows the consolidated financial status of ACT-A funds as of 14 February 2023 from seven ACT-A agencies: CEPI, FIND, Gavi, Global Fund, UNICEF, Unitaid, and WHO. Together, these agencies have raised US$ 23.4bn, through the generosity of ACT-A donors. Of the total, US$ 20.5bn (88%) has been disbursed or implemented (this includes the US$ 2.7bn in the Pandemic Vaccine Pool). US$ 2.4bn (10%) is allocated and to be implemented shortly, while US$ 100m has been repurposed, and US$ 400m, (1.7 %) is pending allocation.

Figure 3: Status of ACT-A contributions as of 14 February 2023 (US$ billion)



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TRANSITION PLAN IMPLEMENTATION

AIMS AND OBJECTIVES OF THE ACT-A TRANSITION PLAN

(1 October 2022 to 31 March 2023)

The ACT-A Transition Plan recognized that the world had entered a new phase of the pandemic requiring adjustments to the partnership's set up and ways of working.

Although the SARS-CoV-2 virus continued to circulate widely, by mid-2022, many countries had already started actively transitioning to long-term COVID-19 disease control. Dedicated emergency mechanisms and coordination structures set up to manage the COVID-19 response were being folded down and related activities were being consolidated and integrated into routine public health and health care services. In addition, as countries shifted away from dealing with COVID-19 as an acute emergency, attention was increasingly directed towards other pressing health priorities that suffered major reversals during the pandemic and emerging needs like cholera.

Given this context, the overarching goal of the Transition Plan was to support countries in the shift to long-term COVID-19 control. For ACT-A agencies, this meant ensuring partner countries had continued and sustained access to the COVID-19 vaccines, tests and treatments needed during this period and beyond.

The plan set out three objectives in support of this transition to long-term COVID-19 control:

i. Focusing ACT-A partner research and development (R&D) and market shaping activities on ensuring a pipeline for new and enhanced tools. This included spurring further R&D and innovation and strengthening capacities to accelerate regulatory approval and prequalification of new or enhanced products.

ii. Securing longer-term institutional arrangements to ensure sustained access to COVID-19 tools, for example through expanded manufacturing and generics production, procurement (as needed and based on country priorities and demand), and by sustaining investments in key infrastructure (e.g., oxygen production capacity).

iii. Concentrating ACT-A partner delivery work on supporting the roll out of new tools (especially novel antivirals) and the protection of priority populations, including through support for vaccine delivery.

The plan also laid out how, in parallel to the above, ACT-A partners would maintain critical capacities and functions needed to support countries in the event of a major global surge in COVID-19 cases and deaths. For example, each of the pillars provided details on activities and scopes of work that would be maintained and/or 'kept warm' during the transition period in the event a reactivation of support was needed. The Transition Plan also described how ACT-A coordination and Facilitation Council functions would be consolidated and streamlined while ensuring readiness.

SUMMARY OF PROGRESS MADE TOWARDS THE TRANSITION PLAN OBJECTIVES

This section provides a high-level overview and summary of progress made in delivering the Transition Plan objectives as set out above. Details on pillar specific contributions to these objectives are provided in Section 3.

(i) Focused R&D and market shaping activities to ensure a pipeline for new and enhanced tools

This objective focused on ensuring access to new and enhanced COVID-19 tools, especially vaccines and novel oral antivirals. This work was supported by ACT-A partners engaged in upstream **R&D** and market shaping activities and included activities aimed at spurring further R&D and innovation and facilitating regulatory approval of new products across the ACT-A's pillars. Additional activities included policy guidance (related to product use) and support for distributed manufacturing, more affordable pricing, and generics production.

Regarding R&D, during the report period, the WHO's Strategic Advisory Group of Experts on Immunization (SAGE) approved use of several bivalent vaccine products for primary and booster vaccination.

In March, WHO SAGE reviewed evidence and policy recommendations to update the Roadmap for Prioritizing uses of COVID-19 Vaccines. Further, with respect to improving diversity of vaccine markets, CEPI is investing in innovations for SARS-CoV-2 and broadly protective coronavirus vaccines. CEPI is focused on optimization of SARS-CoV-2 vaccines for long-term use, driving innovations to increase breadth of protection and accessibility in low-resource settings, such as improved thermostability and speed in manufacturing processes.

FIND, in close collaboration with Unitaid, is supporting the development and acceleration of access to affordable COVID-19 rapid antigen diagnostic tests. In addition, FIND and Unitaid, are supporting the development and roll out of digital tools, self-tests, point of care diagnostics at primary healthcare levels, multiplex multi-pathogen platforms, next-generation platforms and surveillance systems.

With regard to **market shaping**, Gavi continues to engage with COVID-19 vaccine manufacturers and donors of COVID-19 vaccine supply to promote healthy market dynamics, where possible, while ensuring equitable access to vaccines. Gavi is well-positioned to serve the forecasted demand in 2023, and will apply a deliberate approach to COVID-19 market health as part of the proposed COVID-19 vaccine programme for 2024-2025. As of Q1 2023, UNICEF is tendering to meet demand for COVID-19 vaccines for 2024 onward. Gavi has published a wide-ranging plan, developed in collaboration with the African Union (AU) and G7, on how immunisation stakeholders – including Gavi, the Vaccine Alliance – can support the AU's vision for regional manufacturing in Africa, and leverage the high level of political commitment and investment generated by the COVID-19 pandemic to build sustainable capacity for both COVID-19 and other antigens.

As noted in the Second Report of the ACT-A Tracking and Monitoring Task Force, clinical trials and timely updates of guidance are ongoing as part of WHO's normative work. In addition, WHO is carrying out prequalification of vaccines, therapeutics and diagnostics, and development of other norms and standards, in areas such as medical oxygen and ensuring international standards are available. WHO's access to medicines and health products division is supporting pricing, procurement, quality assurance and other areas. The WHO Pre-qualification (PQ) team is reviewing evidence of COVID-19 vaccines already recommended by WHO and others that have been accepted for review under emergency use listing (EUL) as well as oversee the transition from EUL to PQ status.

Unitaid will continue engaging with manufacturers to ensure equitable access to essential COVID-19 products, including antivirals. This includes collaborating with originators as novel products are identified as high priority by WHO and regional health agencies. In addition, Unitaid is working closely with the Medicines Patent Pool (MPP) and generic manufacturers to support the prompt development and submission of products for prequalification, enabling early procurement and introduction in low- and middle-income countries (LMICs). Additionally, Unitaid is committed to addressing persistent access barriers in LMICs excluded from access plans, while building market resilience for oral antivirals. Unitaid will also continue to leverage its market shaping expertise and track record of driving product adoption and access at the country level to promote sustainable and equitable oxygen access.

(ii) Securing institutional arrangements to ensure sustained access to COVID-19 tools

This objective is focused on clarifying the institutional arrangements needed within ACT-A partner agencies to ensure continued and long-term support for accessing COVID-19 tools. For many, this entailed consolidating and mainstreaming COVID-19 work into regular (core) programmes, and where needed, adjusting those programmes to accommodate long-term COVID-19 support.

The Coalition for Epidemic Preparedness Innovations (CEPI) will continue to invest in SARS-CoV-2 and broadly protective coronavirus vaccine innovations, while also optimizing them for long-term use. This will be accomplished by promoting innovations that broaden the scope of protection and accessibility in low-resource settings, such as improved thermostability and manufacturing process speed. CEPI will continue to work on identifying research gaps and coordinating with other funders to invest. It is worth noting that CEPI is the only vaccine R&D funder globally that systematically includes equitable access terms in its agreements.

FIND will continue to spur innovation and invest in the development and deployment of accurate, affordable, accessible diagnostic technologies and tools for countries. FIND has a focus on digital tools, next generation sequencing platforms, surveillance systems, and molecular diagnostics at primary healthcare levels that make a transformational impact on livelihoods and fill critical gaps across different health care settings. This includes point of care technology and multiplex multi-pathogen platform for COVID-19, and other infectious diseases including out-break prone pathogens.

FIND and Unitaid are ensuring the availability and supply of accurate and affordable diagnostics through targeted investments and expanded regional manufacturing. WHO and partners are enabling procurement of tests and to support technology transfers – including through the COVID-19 Technology Access Pool (C-TAP) initiative – facilitating market entry and regulatory approval.

Gavi's COVID-19 Vaccine Delivery Support (CDS) has committed nearly US$ 1bn to support vaccine delivery efforts in 83 countries to date. It continues to focus on supporting vaccination of high priority groups and integration of COVID-19 vaccinations with routine immunisation and primary health care in a way that provides sustainable benefits. In addition, Gavi is using learnings from the CDS experience to identify ways in which vaccine delivery can be improved – both in preparation for future health emergencies as well as to support global outbreak response for other diseases such as measles, cholera, yellow fever, Ebola and meningitis.

Responding to the shift in priorities in implementing countries, the **Global Fund**'s COVID-19 Response Mechanism (C19RM) has been extended until the end of 2025. The extension enables the Global Fund to support both the immediate COVID-19 response and broader pandemic preparedness, while strengthening underlying health systems.

The **Gavi Alliance** will continue its support of COVID-19 vaccination needs in AMC92 countries through 2023, and is developing a programme to extend that support through 2024-2025 for continued coverage of high-risk populations. The proposed programme has received Board approval in principle in December 2022, and will be brought to Gavi's Board for final decision in June 2023 when more data will be available on both the pandemic trajectory and countries' vaccine needs for 2024 and beyond.

In the report period, **UNICEF** increased country focus on delivery of all essential immunization services, including COVID-19 vaccine delivery, reaching zero-dose children, immunization catch-up and recovery interventions and related community engagement. UNICEF is tendering to meet demand for COVID-19 vaccines for 2024 onwards.

UNICEF's COVID-19 related long-term purchase agreements remain valid through 2023 (for personal protective equipment), early 2024 (for antivirals), and until 2025 (for oxygen and diagnostics), respectively. UNICEF will look to re-tender and establish contractual agreements, subject to disease evolution and demand from countries.

Unitaid remains dedicated to making strategic investments throughout the treatment access value chain to ensure equitable access to all in need of life-saving tools. This involves strengthening manufacturer capabilities and streamlining systems to accelerate time-to-market, while promoting decentralized care models for high-risk populations. Moreover, Unitaid continues to prioritize improving access to oxygen innovations tailored to LMICs by supporting regional manufacturers and taking a leading role in the Global Oxygen Alliance. In Diagnostics, Unitaid will continue efforts to improve access to critical diagnostic tools by providing targeted support for the market entrance of accurate, affordable, multi-pathogen point-of-care molecular tests for COVID-19 and other infectious diseases, such as respiratory pathogens, as well as support to countries for introduction and deployment of these technologies.

The World Health Organization (WHO) will continue to conduct clinical trials and provide timely updates to guidelines as part of their normative work. Prequalification of vaccines, therapeutics, and diagnostics, as well as the development of policy and programmatic guidance and other norms and standards in areas such as vaccines and medical oxygen, will be maintained, as will the availability of international standards.

The COVID-19 Vaccine Delivery Partnership (CoVDP), set up by UNICEF, WHO, and Gavi and other partners in January 2022, maintained its increased level of support for 34 countries for concerted support while providing a wider set of services to the AMC92 (e.g., technical guidance). Delivery support by the CoVDP continued in a range of areas including high-level political advocacy, coordination of quick impact funding and specialized technical assistance. As a targeted effort to increase coverage rates when it was an acute challenge, CoVDP will transition in mid-2023, with the main functions re-integrated into the core work of Gavi, UNICEF and WHO – in line with the move to integrate COVID-19 into routine programmes.

Going forward, COVID-19 tools will continue to be available to countries through the sources identified in Table 1 below.

Table 1: Sources of COVID-19 tools and enablers for implementing countries

TOOL	SOURCING MECHANISM FOR IMPLEMENTING COUNTRIES
VACCINES	Access to COVID-19 vaccines, syringes, and ancillaries (2023 and 2024 onward): • In 2023, COVID-19 vaccine doses, syringes, and ancillaries will be supplied on request according to the standard COVAX processes. Delivery funding will also continue through standard processes. • UNICEF is preparing to tender for COVID-19 vaccines in Q2 2023 and to award quantities and enter into good-faith long-term framework agreements (LTAs) in Q3 for deliveries from Q1 2024, subject to confirmation of forecasted demand and availability of funds to cover the demand. • UNICEF has supply agreements in place covering forecast needs for safe injection equipment (including for COVID-19 vaccines) well into 2024 and plans to issue a tender in Q1 2024 to cover future forecast demand requirement. • In addition to funding vaccines and UNICEF procurement, Gavi is committed to providing delivery support to countries, including through funding channelled through Alliance partners, WHO and UNICEF. • For 2024-2025, the Gavi Alliance is developing a programme, pending final Board approval, for countries to receive COVID-19 vaccines to protect high-risk populations. Policy, Regulatory and Technical Assistance (TA): • WHO will continue to lead on COVID-19 vaccine regulatory and policy topics, as well as providing TA support to countries via regional and country offices.

TOOL	SOURCING MECHANISM FOR IMPLEMENTING COUNTRIES
DIAGNOSTICS AND SEQUENCING EQUIPMENT/ SUPPLIES AND OTHER TOOLS FOR SURVEILLANCE	• There are now numerous quality-assured Ag-RDTs and PCR tests commercially available globally, which are procurable through routine mechanisms, including implementing partners, UN agencies, global donors and directly through distributors/manufacturers. • Price negotiations and market shaping efforts have led to affordable pricing for public sector procurement of both types of diagnostics. • The landscape for sequencing reagents and equipment is less diverse with systems available for procurement through routine channels, but advancements remaining to ensure affordability as well as timely installation, service and maintenance for sustained delivery. • Global Fund C19RM provides funding and its pooled procurement platform Wambo has PCR and Ag-RDTs, as well as Next Generation Sequencing equipment and consumables available for procurement. • All UNICEF contracts (LTAs) for diagnostics, including rapid and PCR tests (professional and self-use) as well as kits for viral sample collection and transportation, are valid until 2025. This will enable sustainable and reliable access for countries and eligible partners.
ANTIVIRALS	• Unitaid will continue to facilitate access to antiviral drugs through the implementation of country-specific programmes (Test to Treat) and country procurement mechanisms via Ministries of Health and other institutions. • Global Fund C19RM provides funding and its pooled procurement platform Wambo has molnupiravir and nirmatrelvir/ritonavir available for procurement. • UNICEF has established LTAs with suppliers for generic oral antivirals that are valid until early 2024 at prices for a full treatment course below US$ 10. LTAs with originator suppliers will be maintained to ensure COVID-19 oral antivirals are accessible to countries that are not covered by the Medicines Patent Pool license and cannot access generic supplies.
INFRASTRUC-TURE: OXYGEN	• Unitaid plays a critical role in enabling access to life-saving oxygen supplies through the implementation of country-specific programmes and procurement mechanisms in collaboration with Ministries of Health and other institutions. • UNICEF will maintain its diverse product portfolio of oxygen products ranging from oxygen concentrators to large-scale oxygen plants, accessories, and consumables to support patient delivery as well as services related to maintaining equipment. UNICEF tenders and consequent awards will ensure supply of these products and services through 2025. • Global Fund C19RM provides funding and pooled procurement platform Wambo has oxygen cylinders and PSA oxygen plants available for procurement.

ENABLER	SOURCING MECHANISM FOR IMPLEMENTING COUNTRIES
RCCE	• WHO, UNICEF, IFRC and GOARN continue to coordinate and build Risk Communication and Community Engagement (RCCE) capacity for future public health emergencies through the Collective Service. The Collective Service is working to increase the scale, quality and consistency of RCCE approaches before, during and after health emergencies. Key services of the partnership include enhanced coordination support, building social science expertise that fosters the capacities of countries to collect, analyse and use social-behavioural data for better decision-making, and providing fast and quality feedback on RCCE queries from countries through its multi-agency help desk. • Based on new evidence, changing science, social listening and feedback, WHO and UNICEF have continued to update COVID-19 RCCE guidance and public facing messaging, tools and products which continue to encourage equal access to and uptake of COVID-19 tools and adherence to protective behaviours. New COVID-19 concepts and messaging themes were tested globally in over 20 countries in multiple markets and in different audiences for impact. Additionally capacity building support is provided to the regions and countries. • Through C19RM, Global Fund provides funding for RCCE activities in implementing countries.
HUMAN RESOURCE (HR) TRAINING	• Through C19RM, Global Fund provides funding for HR training activities in implementing countries. • Unitaid plays a key role in facilitating training activities through its Test to Treat and oxygen grants, ensuring that essential skills and knowledge are imparted across key areas. • UNICEF continues to support national governments with technical assistance and guidance for the training of health and community workers to deliver essential health and social services as well as to increase trust in and uptake of services through social and behavioural change interventions.
INFRASTRUC-TURE: COLD CHAIN	• Global Fund C19RM provides funding and pooled procurement platform Wambo has laboratory freezers and refrigerators available for procurement. • UNICEF will continue to support countries in expanding and upgrading their cold chain and dry storage, and to implement the Cold Chain Equipment Optimization Platform on behalf of the Gavi Alliance.

(iii) Concentrating delivery work on supporting the roll out of new tools and the protection of priority populations

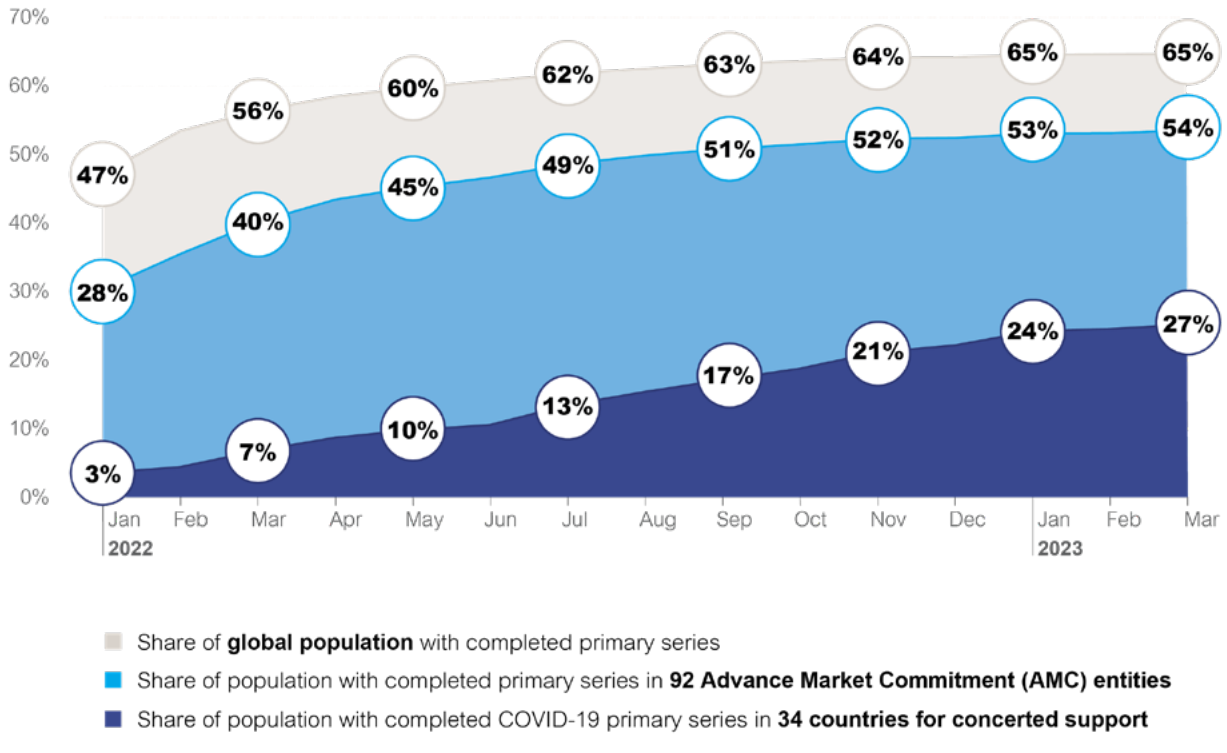
This objective focused on support to countries for the introduction and roll out of new products (especially novel COVID-19 antivirals) and for vaccine delivery to priority populations, with a focus on supporting countries with the lowest vaccination coverage rates.

Protecting priority populations by raising vaccination rates in countries with low coverage

During this period, COVAX and partners took a multi-pronged approach to increasing primary vaccine coverage. Thanks to successful efforts by partners, including targeted efforts via CoVDP, primary series vaccination coverage levels almost doubled in the AMC92 entities since January 2022 (see Figure 4 below). In the 34 countries selected for concerted support, coverage increased 8-fold, and the number of countries at or below 10% coverage dropped to 6 in February 2023 from 34 in January 2022.

These increases were supported by Gavi's COVID-19 Vaccine Delivery Support (CDS) funding, with nearly US$ 1bn committed to date, and which continued its focus on vaccination of high priority groups and on the integration of COVID-19 vaccinations with routine immunisation and primary health care. This CDS funding was provided in addition to Gavi's core work and investments in routine immunisation, reaching zero-dose children, and outbreak response, including financial support for vaccine delivery and health systems strengthening provided to countries and Alliance partners. Building on US$ 1.135m of support for COVID-19 vaccine roll out and RCCE supported by the UNICEF ACT-A Humanitarian Action for Children (HAC) Appeal in 2022 (including funds carried forward from 2021), UNICEF is supporting national governments to turn COVID-19 vaccines into vaccinations. Similar to Gavi, investments made during COVID-19 are supporting systems strengthening and complement UNICEF's ongoing work on delivery of all essential immunization services, reaching zero-dose children, immunization catch-up and recovery interventions and related community engagement.

Figure 4: Progress in COVID-19 primary vaccination coverage since January 2022. Data as of 28 March 2023[2]



[2] Source: COVID-19 Vaccine Delivery Partnership

Support Test to Treat approaches for the roll out of new oral antivirals

To prevent severe disease and death, the ACT-A Diagnostics and Therapeutics Pillars co-convened by FIND, Unitaid, and the Global Fund, with strong support from WHO and over 50 global health partners and civil society representatives, have worked closely together to promote a Test to Treat approach for the early detection, care and treatment of SARS-CoV-2 cases in high-risk populations. Moreover, ACT-A Agencies are working alongside communities and in-country stakeholders across multiple LMICs in Asia, Africa and South America to drive demand for testing and treatment. Supported by FIND and Unitaid, community-based organizations (CBOs), civil society organizations (CSOs), religious groups and organizations specialized in information, education and communication (IEC) developed and deployed advocacy strategies to promote COVID-19 diagnostics, treatment, and linkage to care. To date, community demand-creation activities have been introduced and monitored to generate learnings to inform national efforts and the global response.

Furthermore, to maximize the impact of Test to Treat programmes, Global Fund, Unitaid, and ACT-Accelerator partners came together in mid-2022 to provide supplementary support to countries. A Test to Treat coordination working group was launched to i) support efficient allocation of country support resources across and within selected countries, ii) provide partners with ongoing visibility on demand for Test to Treat implementation support and iii) ensure countries are connected swiftly and proactively to procurers and procurement funding as necessary.

In 2023, partners will continue to leverage the Test to Treat working group to ensure optimal use of resources and support countries to respond to future COVID-19 surges if needed. The shift in focus in 2023 for the working group will take into consideration the upcoming WHO Operational Guidance to countries covering a broad range of topics related to integrating medicines into health systems.

- The Global Fund and Unitaid will continue to work with ACT-A partners and provide funding for technical assistance and procurement of diagnostics and antivirals through established Test to Treat projects.
- Unitaid's commitment to improving clinical care packages for COVID-19 will continue throughout 2023, with a focus on increasing access to oral antivirals, such as nirmatrelvir/ritonavir, for high risk populations through the Test to Treat projects.
- With partner support, the Global Fund will support national governments to put in place Test to Treat deployment plans that help countries respond quickly in event of future surges and health threats.
- FIND and Unitaid will continue to support the decentralization of testing and treatment for COVID-19 through the use of Ag-RDTs for the detection of SARS-CoV-2. Furthermore, FIND and Unitaid will continue to invest in advocacy efforts to drive continued demand for testing, treatment and linkage to care.

COORDINATING ACT-A'S WORK AND PARTNERSHIPS DURING THE TRANSITION PERIOD

This section provides an overview of the work of the ACT-A Tracking and Monitoring Task Force and the support it provided for ACT-A partner activities during the transition period. It also provides an overview of ACT-A wide coordination activities maintained during this period including support for coordination between ACT-A Principals and Pillar Co-Conveners and with the ACT-A CSO platform.

Support provided by the ACT-A Tracking and Monitoring Task Force (TMTF)

When the ACT-Accelerator entered the six-month transition period in October 2022, the ACT-Accelerator Tracking and Monitoring Task Force was created to monitor the roll out and access to tools, facilitate political engagement, track ACT-A resource use and needs, and maintain the Council's readiness to reactivate if needed. Co-chaired by the United States of America and India with members from former ACT-A Facilitation Council Working Groups, the Task Force operated until the end of March 2023 in line with the time frame of the ACT-Accelerator's six-month Transition Plan, as ACT-A shifted its ways of working for the next phase of the pandemic.

The Task Force met three times during the transition period (9 December 2022, 15 February 2023, and 31 March 2023) to review progress made in delivering each of the ACT-A transition plan objectives. Following each meeting, a Task Force Co-Chairs Statement and a status update (on the roll out of COVID-19 tools, longer-term institutional arrangements to support COVID-19, and ACT-A financing) was published.[3,4,5] The Co-Chair Statements were also used to highlight issues of concern (e.g., delays in accessing novel oral antivirals) observed during the transition period.

Coordination among ACT-A Principals

During the transition period, the ACT-A Principals Group met six times and discussed topics ranging from roll out of tools, demand and supply of vaccines to access to COVID-19 therapeutics. As in prior periods, this forum provided a key opportunity for ACT-A partners to share information, take stock of the evolving epidemiological situation, discuss key developments and challenges, and align on strategy and cross-Pillar priorities. The ACT-A Agency Leaders met four times during the transition period, mainly to discuss inter-agency coordination issues.

Coordination of ACT-A Resource Mobilization and Communications

Six meetings between ACT-A Resource Mobilization and Communications Focal Points including the 10 ACT-A agencies, MPP and Global Financing Facility (GFF), were held during the period 1 October 2022 and 31 March 2023. These meetings provided an important opportunity to keep partners abreast of key meetings and events and align cross-partner messaging regarding the ACT-A Evaluation, the WHO work on pandemic prevention, preparedness and response (PPR), pandemic financing mechanisms and joint communications and reporting.

Coordination with ACT-A CSO Platform

The ACT-A Executive Hub also supported CSO engagement by facilitating information sharing and exchange between the ACT-A CSO platform and ACT-A pillars. The ACT-A CSO platform continued to coordinate CSO engagement in ACT-A Task Force meetings and Pillar-level working groups. In this context, the Hub convened six coordination meetings between ACT-A Agency CSO representatives and the ACT-A CSO Platform to facilitate discussions on cross-Pillar topics during the transition period.

[3] Update on the roll out of COVID-19 tools: a report from the ACT-A Tracking and Monitoring Task Force, 14 December 2022, Geneva: ACT-Accelerator (https://www.who.int/publications/m/item/update-on-the-rollout-of-covid-19-tools--a-report-from-the-act-a-tracking---monitoring-task-force, accessed 16 February 2023).

[4] Update on the roll out of COVID-19 tools: Second meeting of the ACT-A Tracking and Monitoring Task Force, Meeting report, 15 February 2023, Geneva: ACT-Accelerator (https://www.who.int/publications/m/item/update-on-the-roll out-of-covid-19-tools--a-report-from-the-act-a-tracking---monitoring-task-force---15-february-2023 accessed 7 March 203).

[5] Third Access to COVID-19 Tools (ACT) Accelerator Tracking & Monitoring Taskforce Outcome Statement Report - 31 March 2023: ACT-Accelerator (Third Access to COVID-19 Tools (ACT) Accelerator Tracking & Monitoring Taskforce Outcome Statement Report - 31 March 2023 (who.int)).

3

PROGRESS TOWARDS TRANSITION PLAN OBJECTIVES: DETAILS BY PILLAR

VACCINES PILLAR

COVAX, the ACT-Accelerator's Vaccines Pillar: COVAX is co-led by the Coalition for Epidemic Preparedness Innovations (CEPI), Gavi, the Vaccine Alliance (Gavi), the World Health Organization (WHO), and UNICEF, and aims for fair and equitable access to COVID-19 vaccines. The PAHO Revolving Fund works as a procurement partner for COVAX in the Americas. In January 2022, WHO, UNICEF and Gavi established CoVDP to provide enhanced vaccine delivery support to 92 AMC-eligible countries and territories, with a focus on the 34 countries with the lowest coverage as of the start of 2022. COVAX has shipped more than 1.9bn doses of COVID-19 vaccines to 146 countries and territories, and more than 90% fully-funded doses to AMC-supported countries. Investments of more than US$ 1.5bn have helped lower-income countries strengthen health systems and turn vaccines into vaccinations, pushing primary series coverage to 54% on average (including 81% of healthcare workers) across the AMC92, and supporting the countries furthest behind to make incredible progress. COVAX has been the major supplier of COVID-19 vaccines to low-income countries, humanitarian settings where government response plans are in place, and the African continent.

OVERVIEW	MAPPING OF THE TRANSITION OBJECTIVES	CONTEXT AND OUTCOMES
R&D and manufacturing, marketplace and policy	Investment in R&D for COVID-19 vaccines and support for manufacturing, including for regional diversification	The research and development, manufacturing, and marketplace teams have transitioned into partner processes, with pillar partners coordinating through pre-existing and new bilateral channels. In this way, COVAX partners have continued to support R&D into COVID-19 vaccine innovations, expanding and scaling tech transfer and supporting partners and regional bodies on manufacturing. This included ongoing work by **CEPI** to support the development and long-term equitable access to broadly protective COVID-19 and other coronavirus vaccines, with a portfolio of 13 candidates to take forward this vital research; and the establishment of CEPI's first partnerships with manufacturers in the Global South who will form part of a global vaccine manufacturing network. This network is designed to support agile and resilient manufacturing in and for the Global South, thereby accelerating access to vaccines during future outbreaks and pandemics. With respect to improving diversity of vaccine markets, **Gavi** has received Board approval for plans to work closely with regional entities on the development of sustainable regional vaccine manufacturing – through support provided for strategic antigen selection by manufacturers and countries, market shaping and demand creation. Gavi is currently designing various tools to advance these critical objectives, in collaboration with key stakeholders such as the African Union, while also scoping the feasibility and design of a potential innovative financing mechanism.

OVERVIEW	MAPPING OF THE TRANSITION OBJECTIVES	CONTEXT AND OUTCOMES
Institutional arrangements	Management of advance purchase agreements with manufacturers, unblocking of issues, and resolution of supply issues, including through the One Deal team. Support for end-to-end operations, including allocation, demand planning, downstream product operationalization, procurement logistics and shipping, and data and analytics. Development of policy, regulatory and programmatic guidance, including SAGE, the global COVID-19 vaccines strategy, and future COVID-19 vaccine programme design. Delivery of coordination meetings including the CCM, the PLT, WSC and cross-partner coordination mechanisms, including the SCO. Cross-partner coordination of RM activities, including on dose donations.	A transition plan for COVAX has been agreed upon and is being executed across the partnership ensuring continuity of COVID-19 vaccine supply to participants in 2023 and beyond. The COVAX transition in 2023 runs in parallel to core 2023 operational activities seeing through procurement and delivery objectives for the year. While maintaining the focus to deliver vaccines to high-risk groups among AMC participants, the COVAX transition focuses on: • **Gavi**'s COVID-19 programme for 2024-2025 has received approval in principle and will be brought to the Gavi Board for final decision in June 2023, following extensive consultation with countries and other stakeholders. Emerging from COVAX, the programme would seek to meet country needs for COVID-19 vaccines to protect high-risk populations beyond 2023. • Deal and portfolio strategy: Continued optimization of the COVAX portfolio in line with **WHO** SAGE guidance and aligned with the principles of dose donations and product preference to inform the evolving supply strategy. • Operations: Collaborative approach to deliver on 2023 priorities in line with country demand (including worst-case scenario planning) and executing the transition of processes, including demand planning, vaccine procurement, country engagement, and delivery. • Coordination and governance (including CCM, PLT, WSC and SWAT): Maintained at reduced frequency, to provide oversight of 2023 operational plans, COVAX transition to the future **Gavi** Alliance COVID-19 programme and partner business-as-usual processes, and worst-case preparedness.

OVERVIEW	MAPPING OF THE TRANSITION OBJECTIVES	CONTEXT AND OUTCOMES
Delivery of new products and protecting priority populations	Country engagement, readiness, and support provided through CoVDP.	Partners across **CoVDP** undertook detailed activities to plan for the phase change over to an enhanced operational support model led by UNICEF and WHO supported by Gavi and partners, building on lessons learned from COVID-19 vaccine delivery to date.

DIAGNOSTICS PILLAR

The Diagnostics Pillar: This Pillar is co-convened by FIND and the Global Fund, with strong support from WHO. It works closely with over 50 global health partners and civil society representatives to scale up equitable access to COVID-19 diagnostic technologies and tools. Through the support of the Pillar and its partners in-country and globally, investments in diagnostics resulted in rapid development, manufacturing, and implementation of SARS-CoV-2 tests, improving equitable and timely access to low-cost, quality-assured diagnostics and enabling countries to understand transmission dynamics, create surveillance programmes and implement timely medical and non-medical countermeasures to safeguard their people and communities.

OVERVIEW	PROGRESS TOWARDS TRANSITION PLAN OBJECTIVES
R&D and market shaping	ACT-A Diagnostics Pillar partners will continue to ensure the availability and supply of accurate and affordable diagnostics, including next generation sequencing, through continued regulatory assessment and development of international standards through **WHO**, targeted investments (such as those through **FIND** and **Unitaid**), and expanded regional manufacturing and technology transfers - including through the C-TAP initiative.
Institutional arrangements to ensure continued access to COVID-19 tools	ACT-A Diagnostics Pillar partners will aim to continue to work together to generate an integrated, holistic approach around diagnostic priorities to expand progress for COVID-19 and other disease areas and build preparedness for future pandemic threats. **FIND** will continue to spur innovation and invest in the development and deployment of accurate, affordable, accessible diagnostic technologies and tools for countries. FIND has a focus on digital tools, next generation sequencing platforms, surveillance systems, and molecular diagnostics at primary healthcare levels that make a transformational impact on livelihoods and fill critical gaps across different health care settings. These include point of care technology and multiplex multi-pathogen platform for COVID-19, and other infectious diseases including outbreak-prone pathogens. Responding to the shift in funding priorities in implementing countries, the **Global Fund** has extended the use of C19RM funds until the end of 2025 to enable investments that take longer to prepare and implement effectively. These include resilient and sustainable systems for health and pandemic preparedness, which include community health workers that work across several disease programmes, lab networks, end-to-end surveillance and supply chains systems. **Unitaid** is committed to improving access to vital diagnostic tools and will provide targeted support to facilitate the market entrance of accurate and affordable multi-pathogen point-of-care molecular tests for COVID-19 and other infectious diseases, including respiratory pathogens. **UNICEF** will continue to support countries' access to a wide range of quality-assured COVID-19 diagnostics, including rapid tests for self-use and point-of-care molecular tests.

OVERVIEW	PROGRESS TOWARDS TRANSITION PLAN OBJECTIVES
	WHO will continue to support countries to calibrate their COVID-19 response which includes timely updates to global guidance, advancing and advocating for collaboration, research and data sharing to enable evidence-based policies, and assessing the risk posed by novel SARS-CoV-2 variants. Furthermore, to ensure that learnings and resources for diagnostics generated throughout the COVID-19 pandemic are stored in an accessible, user-friendly format relevant for stakeholders at the global, regional, and country levels, FIND, Global Fund, and WHO, along with the broader ACT-A Diagnostics Pillar partnership launched and will maintain a knowledge hub on diagnostics: https://www.dxkhub.org
Delivery of new products and protecting priority populations	Diagnostics Pillar partners will continue to support decentralized access to testing services, further enabled by training for healthcare workers and health volunteers, to integrate COVID-19 testing including self-testing alongside existing and routine health services. For Test to Treat, **FIND and Unitaid**, as convenors of the Diagnostics and Therapeutics Pillars, will continue collaborating to sustain progress around Test to Treat approaches, including through implementation projects and engagement via in-country advocacy partners. In addition, the Global Fund will continue to work to provide funding for technical assistance and procurement, enabling the development and scaling of Test to Treat programmes.
Preparations to respond to possible surge	The diagnostics infrastructure put in place by countries and strengthened during the pandemic through the support of partners has immense value in fighting COVID-19. It will help mitigate the magnitude and impact of potential surges, and enable country preparedness against future threats. Investments in molecular and rapid antigen tests for professional and self-test use as well as investments in decentralized models of care, regional manufacturing and technology transfer have secured a global supply for COVID-19 tests, regardless of demand volatility. In particular, **FIND** will provide support to partners to optimize the use of diagnostics and strengthen disease surveillance in LMICs and in conflict settings. Through the C19RM, the **Global Fund** is supporting select national governments to put in place Test to Treat deployment plans to quickly respond in the event of a future surge or health threat. **Unitaid** is prioritizing investments in critical diagnostic tools such as molecular tests, as part of its efforts to build sustainable healthcare systems that can support pandemic preparedness and response. **WHO** will continue to support member states to define readiness and response in the instance of surges.

THERAPEUTICS PILLAR

The Therapeutics Pillar: This Pillar, co-led by Unitaid, the Global Fund and Wellcome, and supported by WHO, enhances the development, manufacturing, procurement, and distribution of COVID-19 treatments for populations in LMICs. The Global Fund, UNICEF, and WHO have led procurement and deployment of COVID-19 therapeutics, including oxygen and related products, with Unitaid providing critical support on market interventions to lower prices and address supply bottlenecks.

OVERVIEW	PROGRESS TOWARDS TRANSITION PLAN OBJECTIVES
R&D and market shaping	**Unitaid** is committed to advancing access to COVID-19 therapeutics, with a particular focus on creating healthy supply conditions and demand through market shaping. Together with partners, Unitaid will prioritize efforts to build market resilience for oral antivirals and address persistent access barriers in LMICs that have been excluded from existing access plans. Furthermore, Unitaid will utilize its established skills in shaping markets and successful history of promoting product adoption and accessibility at the country level to facilitate the attainment of sustainable and equitable oxygen access.
Institutional arrangements to ensure continued access to COVID-19 tools	**Unitaid** is committed to sustaining targeted investments across the treatment value chain to ensure equitable access. This includes enhancing manufacturer capabilities and systems to speed up time-to-market and supporting decentralized models of care for those at highest risk through established Unitaid/FIND projects. Unitaid will continue to prioritize boosting access to oxygen innovations adapted to LMICs through support of regional manufacturers and leadership in the Global Oxygen Alliance. To inform the Global Oxygen Alliance, **UNICEF** has supported Unitaid with stakeholders' discussions, and facilitated, on behalf of the ACT-A Oxygen Emergency Task Force, a multi-stakeholder discussion on lessons learned and priorities moving ahead during the International Conference on Public Health in Africa in Kigali. In 2023, UNICEF will continue to focus on deployment of COVID-19 therapeutics to recipient countries, managing shifts in global demand while transitioning from innovator to generic products. Responding to the shift in funding priorities in implementing countries, the **Global Fund** extended the use of C19RM funds until the end of 2025 to enable investments that take longer to prepare and implement effectively, such as resilient and sustainable systems for health (RSSH) and pandemic preparedness, including systems-building for oxygen and respiratory care, as well as lab networks to support Test to Treat programmes. **WHO** remains committed to clinical trials and clinical care guidance as part of its ongoing normative work. It will continue to maintain its Allocation mechanism through 2023 and to prequalify vaccines, treatments, and diagnostics. Developing other norms and standards such as technical specifications will also remain a core part of WHO's work, along with safety and surveillance initiatives. WHO will ensure that access to medicines and health products is maintained, covering topics such as pricing, procurement, and shortages.

OVERVIEW	PROGRESS TOWARDS TRANSITION PLAN OBJECTIVES
Delivery of new products and protecting priority populations	**Unitaid** will continue to support countries' access to generic products via current Test to Treat projects. In addition, Unitaid will invest nearly US$ 56m to increase access to oxygen, which is a key component of COVID-19 management and preparedness. The **Global Fund** has made both originator and generic versions of molnupiravir and nirmatrelvir/ritonavir antivirals available to LMICs, giving countries more options to tailor their response to local needs. Along with ACT-A partners, the Global Fund and Unitaid will continue to provide funding for the development and scaling of Test to Treat programmes, which can help reduce the impact of COVID-19 on high-risk populations. Together with partners, the Global fund, is also supporting select national governments to put in place Test to Treat deployment plans that help them to respond quickly in case of future surges and health threats. **UNICEF** is exploring new technologies such as energy-efficient oxygen plants and solar solutions that can ensure uninterrupted power. Additionally, UNICEF is working on the production of oxygen concentrators that are specifically designed for use in LMICs. Through these efforts, UNICEF aims to strengthen health systems and prepare countries for future public health emergencies.
Preparations to respond to possible surge	**Unitaid** will prioritize investments that build sustainable markets and health systems that can be leveraged for pandemic preparedness and response and remain viable during inter-crisis periods. The extension of C19RM until the end of 2025 provides the **Global Fund** with the flexibility to meet the ongoing challenges of the pandemic while remaining agile in the face of future unknowns. This allows countries to respond to changes in funding needs and enables C19RM to remain effective in addressing the pandemic's evolving demands. **UNICEF** has increased its focus on helping countries develop clear roadmaps and strategies for oxygen to guide investments and strengthen systems for routine care, public health emergency preparedness, and response. UNICEF will continue to work towards ensuring access to quality oxygen products and related services through ongoing tenders for PSA plants, oxygen concentrators, consumables, and accessories.

HEALTH SYSTEMS AND RESPONSE CONNECTOR

The Health Systems and Response Connector (HSRC): HSRC was co-led by WHO, UNICEF, the Global Fund, and the World Bank with support from the GFF. The HSRC worked closely with partners across ACT-A Pillars to support countries to accelerate the uptake of COVID-19 tools in the short term, particularly in most vulnerable population groups, and begin the process of integrating COVID-19 delivery into other health priorities in the medium to longer term. To achieve this objective, a more country-facing approach has been adopted. During the transition period, the HSRC scope of work transitioned to its constituent agencies.

OVERVIEW	PROGRESS TOWARDS TRANSITION PLAN OBJECTIVES
Institutional arrangements to ensure continued access to COVID-19 tools	In 2023, **UNICEF, WHO and coordinated partners** will focus on the following areas of demand generation and RCCE: • Updating technical guidance and localized packages in line with the evolving situation and informed by qualitative social and behavioural change research and evidence-generation. • Building onto the already existing data collection and analysis methods and available dashboards established for COVID-19 vaccine uptake, **UNICEF, WHO and coordinated partners** will continue to support country capacity building to collect, analyse and use data in a systematic way. Social listening mechanisms and systems have been established in countries, and capacity building done to track rumours and misinformation, analyse the trend and to respond quickly. These will be leveraged for other primary healthcare needs. • Advocating for greater integration of RCCE principles into national emergency action plans to ensure that these plans are community-centred, focused on the most vulnerable, build trust, and empowerment and promote greater resource sharing with local actors. • Behavioral insights and human centered design approaches will be implemented in at least 20 countries to diagnose and implement behavioral science-informed interventions to increase the uptake of vaccination services. Implementation research will be harnessed to document innovations emanating from the project with a view to scale and replicate them. Responding to the shift in funding priorities in implementing countries, the **Global Fund** extended the use of C19RM funds until the end of 2025 to enable investments that take longer to prepare and implement effectively, such as resilient and sustainable systems for health (RSSH) and pandemic preparedness, which include community health workers (CHWs) that work across several disease programmes, lab networks, end-to-end surveillance and supply chains systems. The **WHO Partners Platform** was born of the pandemic and provides the first digital space used by governments, partners and donors for two-way information sharing on planning, financing and monitoring their COVID-19 response. The Partners Platform became the only site for all countries to apply for and receive COVID-19 vaccine delivery support from both **Gavi** and **UNICEF**, and will continue to provide the space for COVID-19 tools needs. The Platform tracked over US$ 20bn in contributions for the COVID-19 response and it enabled over 150 countries to share their plans and needs. **UNICEF** issued a global tender for its full range of PPE items in 2022 with the aim to establish new long-term agreements by mid-2023 to ensure sustainable access to PPE. UNICEF's procurement strategy for PPE focuses on supply diversity, supporting local production and sustainability.

OVERVIEW	PROGRESS TOWARDS TRANSITION PLAN OBJECTIVES
Preparations to respond to possible surge	**UNICEF** has established a strategic stockpile of PPE supplies to ensure availability to support the emergency response to the pandemic and meet global demand in a timely manner. These supplies are prepositioned in UNICEF supply hubs in Copenhagen, Guangzhou, Panama, and Dubai. **UNICEF, WHO and coordinated partners** will continue to provide technical support and training on RCCE emergency preparedness, complementing national efforts to utilize all systems during an emergency. By the end of 2022, every LMIC supported by **UNICEF**'s ACT-A Humanitarian Action for Children (HAC) appeal had established a fully functioning inter-agency RCCE Working Group, a critical mechanism that can not only be used to coordinate RCCE activities but also to prepare communities and public authorities for potential new outbreaks and support them to effectively manage health emergencies in the future. The extension of C19RM until the end of 2025 enables the **Global Fund** to meet the pandemic's ongoing challenges, while allowing C19RM to remain agile in the face of future unknowns—for example, another new variant that once again shifts country demand. C19RM remains flexible, enabling countries to respond to changes in funding needs. The **WHO** Partners Platform collaborated with ACT-A partners to develop and now host the Global COVID-19 Access Tracker (GCAT), a dynamic tool to transparently track progress on access to COVID-19 vaccines, treatments, tests, and PPE, which is critical for surge planning.

4

WAY FORWARD

This section provides an overview of how ACT-A partner agencies will carry forward and continue to support further mainstreaming of COVID-19 work, highlighting some examples of scopes of work and initiatives that will continue through the end of the Public Health Emergency of International Concern and in some cases beyond. A brief overview is also provided on some of the ways in which ACT-A partner agencies are contributing to preparedness for future pandemics as part of wider efforts to strengthen the global health security architecture.

CONTINUED SUPPORT FOR MAINSTREAMING OF COVID-19 WORK

While, as evidenced in this report, important progress has been made in supporting the transition to long-term COVID-19 control, many ACT-A partner-led initiatives and scopes of work will continue. For example, COVAX partners will continue to engage regularly as the COVID-19 work is fully transitioned to Gavi's proposed COVID-19 programme in early 2024. The COVID-19 Vaccine Delivery Partnership will continue to support vaccination efforts in countries with low coverage through April 2023, as well as the integration of COVID-19 vaccination into routine primary health care services, transitioning to an enhanced operational support model led by UNICEF and WHO with partners.

To promote the continuity of COVID-19 vaccination, especially among priority populations, many countries are working to integrate COVID-19 vaccination within their routine vaccination systems, as well as their primary healthcare systems. As routine immunization programmes in many countries are often primarily focused on childhood immunization, adjustments will be needed to ensure coverage of priority adult and elderly populations. This will be an essential area of focus for support going forward. Key learnings and innovations from the COVAX experience are being documented and put to use not only to improve future preparedness and response planning but also routine immunisation and outbreak response efforts, which are critical to prevention as well.

Several achievements, advancements, and learnings borne out of the ACT-A Diagnostics and Therapeutics Pillars will also be leveraged in the future. Before ACT-A, there had been limited convening of global, regional, and country organizations within the diagnostics space for pandemic preparedness, readiness and response to deliver public health priorities in an end-to-end manner. The global health community now has an unprecedented opportunity to develop long-term solutions for diagnostics to address health emergency preparedness and response and there is consensus among global, regional, regional, and local partners on the need to continue a coordinated approach to addressing diagnostic needs.

In 2021, the Lancet Commission on Diagnostics highlighted the need for an international alliance on diagnostics to address gaps and challenges. Furthermore, in 2023, the WHO Executive Board approved a resolution for the 76th World Health Assembly to strengthen diagnostic capacity focused on orienting health systems to primary health care as a foundation for universal health coverage. Additionally, the work of the ACT-A Oxygen Emergency Taskforce will be carried forward under a new broader and more inclusive Global Oxygen Alliance which aims to maintain momentum towards all countries reaching self-sufficiency in ensuring affordable, equitable access to medical oxygen for everyone who needs it.

PREPARING FOR THE NEXT PANDEMIC

In parallel to the above work to ensure longer-term support for the management of COVID-19 as part of routine public health programmes, ACT-A partner agencies are also preparing for the next pandemic. The following is a non-exhaustive overview of some of the initiatives underway in this regard.

CEPI and others are working with the G7, G20 and others towards a "100 Days Mission", exploring how we can respond to the next "Disease X" by compressing the development of safe, effective and accessible vaccines to within 100 days of the disclosure of the genetic sequence of a pandemic

pathogen. CEPI is also establishing a global vaccine manufacturing network designed to support agile and resilient manufacturing in and for the Global South, thereby accelerating access to vaccines during future outbreaks and pandemics. Agreements are in place with the first two members of the network, based in South Africa and Senegal.

FIND has recently established a Global Health Security programme, with dedicated Units for Surveillance and Humanitarian Emergencies to provide support to global, regional, and local partners optimize the use of diagnostics and strengthen disease surveillance in LMICs and conflict settings. Particular areas of focus are community-based surveillance; use of novel molecular multiplex assays for integrated surveillance and patient care at the primary healthcare level; modeling to effectively orient surveillance programmes; genomic sequencing (including wastewater surveillance); and activities aimed at enhancing surveillance data quality and diagnostic network optimization. Strong support for digital reporting systems underlies all aspects of the programme.

FIND is working with CEPI to support country partners in an application to the Pandemic Fund with a goal of advancing diagnostics for epidemic-prone pathogens, including both viruses and antimicrobial resistant bacteria, and to integrate these novel diagnostics into reinforced surveillance systems in line with the goals of the 100 Days Mission.

Gavi is actively participating in global processes focused on the future of pandemic prevention, preparedness and response, including the negotiations on the Pandemic Accord and discussions in the G20 and G7 on a future global coordinating platform for pandemic countermeasures. Equipped with important learnings from the COVAX experience and a Board approved Pandemic Preparedness and Response approach, Gavi is driving several cutting-edge initiatives to ensure we are ready for the next pandemic. First, it is developing innovative financing mechanisms to enable rapid access to funding in the earliest stages of a crisis, to avoid the crippling funding gap faced in the early days of COVAX. Along these lines, Gavi's Pandemic Vaccine Pool and two front-loading mechanisms supported by the European Investment Bank (EIB) and the Development Finance Corporation (DFC) have already been established and capitalized. It is also exploring the design of contingent pledges through IFFIm, whereby donor contributions would be triggered in the event of a major health emergency. Second, Gavi is committed to supporting the regional manufacturing agenda for vaccines and is in the process of developing financing and other tools to advance this critical objective in collaboration with the African Union and others. Finally, Gavi is continuing to invest in health systems as the foundation of pandemic response, including through investment in digital tools that proved so critical to effective, coordinated COVID-19 programmes.

UNICEF has developed recommendations and commitments for strengthening the global architecture, including financing and systems for public health emergencies preparedness and response in a way that puts the best interest of children, women and marginalized communities at the centre of our collective actions. This simultaneously focuses on preventing public health emergencies, responding to public health threats, and mitigating and addressing their socio-economic consequences with a whole-of-society approach.

WHO, UNICEF, IFRC and GOARN continue to coordinate and build RCCE capacity for future public health emergencies through the Collective Service which is working to increase the scale, quality and consistency of RCCE approaches before, during and after health emergencies. Key services of the partnership include enhanced coordination support, building social science expertise that fosters the capacities of countries to collect, analyse and use social-behavioural data for better decision-making, and providing fast and quality feedback on RCCE queries from countries through its multi-agency help desk.

WHO is supporting consultations with Member States and other key stakeholders on a framework for strengthening the global health architecture for health emergency preparedness, response and resilience (HEPR). This framework brings together 10 key Member-State-led proposals to strengthen the global health architecture, under the aegis of a new WHO convention, agreement or other international agreement on pandemic PPR, with the principles of equity, inclusivity and coherence at its centre. This framework includes proposals for

governance, financing (e.g., the Pandemic Fund), and key systems and HEPR capabilities needed at national, regional and global levels. The Secretariat will continue to work with Member States to refine and advance these proposals and will provide a status update on this work at the 76th World Health Assembly in May 2023. With ACT-A scaled down, and while the Intergovernmental Negotiation Body (INB) and Working Group on Amendments to the IHR (2005) deliberations are ongoing, WHO and partners are leading a consultation to design an interim global coordination platform for pandemic countermeasures which could be activated by September 2023, if required, and later adapted and adjusted as work to enhance the global health security architecture progresses.

Unitaid is actively supporting global pandemic PPR efforts to address access inequities in both the preparedness and response phases of a pandemic. Unitaid's immediate priority is to contribute to the WHO consultative process to define a future global coordination platform for pandemic countermeasures, participate in the G7 and G20 discussions, particularly on strengthening regional manufacturing, and lead the set-up and formalization of the Global Oxygen Alliance. In the short term, Unitaid will focus on building upon successful COVID-19 investments. These no-regret investments will support regional manufacturing for therapeutics and diagnostics and boost access to oxygen through local manufacturing and LMIC-specific product innovations.

Global Fund continues to invest in formal and community health systems which are the foundation for pandemic PPR. When countries and communities are working together effectively against the heaviest infectious disease burdens, they are also building infrastructure and capabilities that underpin the prevention, detection and response to future outbreaks. Global Fund will also remain poised to support the delivery of new products and tools to countries in existing and future pandemics, leveraging its work and experience fighting ongoing HIV, TB, and malaria pandemics. Global Fund's pooled procurement platform, Wambo.org, already supports an annual procurement value of over US$ 2bn. It can be flexibly used to pool demand and enter into agreements with suppliers to accelerate access to pandemic-related products once they have the necessary regulatory approvals. Furthermore, through its NextGen Market Shaping Framework, Global Fund works to accelerate and improve health product introductions to ensure availability and affordability of quality-assured health products. Successfully deploying these interventions is critical to building preparedness for future pandemics, where ability to introduce new innovations quickly and at scale will be paramount. The Global Fund is engaged and active in related global discussions on pandemic preparedness and response including on a future medical counter measures platform, modalities for surge funding, approaches for supporting regional manufacturing, and future coordination mechanisms for the global response. The focus remains ensuring equitable and speedy access to new tools and treatments in the face of new threats.

The above serves to illustrate the plurality, breadth and depth of some of the efforts being led by ACT-A partner agencies to build a stronger, more resilient and safer world.

ANNEXES

ANNEX I: Q4 2022 ACHIEVEMENT HIGHLIGHTS TABLE

Q4 2022 VACCINES PILLAR ACHIEVEMENT HIGHLIGHTS

R&D, product assessment, and manufacturing	Since COVID-19 emerged, **CEPI** has invested in vaccine development across an R&D portfolio of 14 vaccine candidates. Three of these vaccines have been granted WHO EUL, and four additional vaccines have been approved by their respective national regulators. In Q4 2022, **CEPI** continued to support clinical research studies to expand access to vaccines, in addition to vaccine effectiveness studies. In addition, **WHO**'s SAGE issued a good practice statement on the use of variant-containing COVID-19 vaccines.
Procurement, including demand planning and supply	By the end of 2022, more than 1.9bn vaccine doses had been provided through COVAX to 146 countries, more than 90% of which have gone to COVAX AMC-supported participants. COVAX was the majority supplier of COVID-19 vaccines to low-income countries, humanitarian settings with active government response plans, and the African continent. In Q4 2022, the COVAX Facility received requests for 29m doses across 33 countries and fulfilled 100% of country requests via **Gavi**'s Advance Purchase Agreements with manufacturers and dose donation programme. A total of 102.5m doses were shipped in the same period, of which 22.5m were procured and 80m were donated. Within months of the first global roll out of variant-containing vaccines (VCVs), COVAX shipped VCVs to Kosovo on December 14th 2022, followed by Pakistan and Tunisia shortly thereafter. By the end of 2022, **UNICEF** shipped 3.85bn syringes to 121 countries and delivered 40.9m safety boxes to 110 countries as well as delivering 2,828 cold chain ultra-low freezers. COVAX partners kicked off and completed a streamlined demand planning process in Q4 2022 that included systemic outreach to AMC 91 participants to ascertain a forecast for COVID-19 vaccine needs in 2023.
Demand generation and in-country delivery	By end 2022, COVAX deliveries and investments had helped raise primary series coverage in the AMC92 to 53% on average, including 81% of healthcare workers, compared to 31% primary series coverage at the start of the year. Of the 34 countries below 10% coverage identified for targeted support in January 2022, only 8 remained below this milestone, with many amongst the AMC-supported countries that made the most progress through the year. **CoVDP** helped disburse US$ 26m in quick impact funding across partners, including US$ 10m through **Gavi**'s flexible funding window, with funding disbursed as quickly as within one day. By November, funding coordinated by the CoVDP in 2022 had supported 23 campaigns targeting approximately 139m people. **CoVDP** conducted ten country missions, unblocked political bottlenecks in six countries and organized three peer-to-peer learning sessions. CoVDP also successfully advocated for COVID-19 vaccine delivery with a focus on high-priority groups, and investments in community health systems, among others at the Global Health Summit.

	By the end of 2022, US$ 523m was disbursed to countries through **Gavi** to support COVID-19 vaccine delivery, with US$ 40m in Q4 of 2022 alone. In addition, 49 countries submitted requests for the third window of COVID-19 Vaccine Delivery Support (CDS) amounting to US$ 524m, primarily intended for use on COVID-19-routine immunization integration activities. By end 2022, the overall amount committed by Gavi totaled nearly US$ 1bn. In Q4 2022, **UNICEF** organized a side session of the Health System Research conference in Bogota on COVID-19 vaccine costs and financing, bringing together policy makers, programme planners and health systems researchers to review existing evidence and discuss financing COVID-19 vaccine delivery and other essential immunization services.

Q4 2022 DIAGNOSTICS PILLAR ACHIEVEMENT HIGHLIGHTS

R&D and product assessment	**C-TAP** continues to work on tech transfer of COVID-19 in vitro diagnostics technologies, though no new licenses were issued in Q4 2022. The first **WHO** International Standard for SARS-CoV-2 antigen (21/368) has been established and is available from the National Institute for Biological Standards and Control. Launch of usability studies of a chatbot developed with **FIND** support to facilitate the use of COVID-19 self-tests.
Market shaping and manufactu-ring	In Q4 2022, 2 additional Ag-RDTs have been **WHO** EUL listed and 2 Ag-RDTs failed the EUL assessment. **FIND** engaged with private partners in 7 LMICs to launch pilots to decentralize testing though professional and self-test Ag-RDTs in pharmacies, schools, occupational settings. In Uganda, an Ag-RDT-PCR concordance study was completed to support Ministry of Health policy change to allow use of Ag-RDTs for border testing.
Procurement	Since the start of the pandemic, 191.4m tests have been procured across all member agencies within the diagnostics consortium, with 178.4m delivered to 182 countries (Q1 2020 to Q4 2022). In Q4 2022 specifically, 5.5m tests (2.4m PCR tests and 3.1m Ag-RDTs) were procured and 12.9m were delivered (1.7m PCR tests and 12.2m Ag-RDTs). In Q4, the **Global Fund** awarded US$ 33m for diagnostic tools in 7 countries. Since the beginning of 2021, the Global Fund awarded US$ 827m for procurement of tests across 101 countries via C19RM to enable the procurement of 165-200m tests.

Demand generation and in-country delivery	Through **Global Fund**'s C19RM, US$ 146m in funding was awarded to support in-country roll out of diagnostic tools (cumulative 2021-2022). Through C19RM, project STELLAR provides technical assistance in 23 African countries, including training for genomic surveillance sample collection in Ethiopia and implementation of multi-disease testing (COVID-19, TB, HIV, VL and EID) in Zambia. **UNICEF** provided technical assistance and funding allocations for diagnostics to 4 countries: Niger, Mali, Nigeria, and Lebanon. TB/COVID-19 screening was initiated Kenya, with additional integrated testing projects underway in Bangladesh, DR Congo, Uganda, and Ethiopia to routinize COVID-19 testing in health systems. In-country advocacy efforts (i.e. ECHO sessions, IEC development, support on guidelines development) to maintain and sustain COVID-19 testing is underway in 6 countries. **FIND** and partners finalized pilots for COVID-19 self-testing delivery models in Georgia and Brazil. A contract was signed in Nigeria to gather evidence and understand barriers to self-testing uptake. FIND is partnering with a Guinean organization, Clinic+O, and the Ministry of Health on operational community health worker-led research studying multi-disease screening using digital tools. **FIND** supported genomic surveillance capacity building in Bangladesh and initiated genomic capacity building efforts in Vietnam and Sudan. **FIND, Global Fund, and WHO**, along with the broader ACT-A Diagnostic Pillar partnership created a knowledge hub on diagnostics to ensure ensure learnings and resources for diagnostics generated throughout the pandemic are stored in an accessible, user-friendly format relevant for stakeholders at the global, regional, and country levels.

Q4 2022 THERAPEUTICS PILLAR ACHIEVEMENT HIGHLIGHTS

Market shaping and manufacturing	In Q4 the **Global Fund** signed agreements with generic manufacturers of molnupiravir and nirmatrelvir/ritonavir to further improve access, affordability and sustainable supply of antivirals for vulnerable populations in low- and middle-income countries.
Procurement	In Q4 alone, the **Global Fund** awarded US$ 82m for therapeutic tools in 11 countries. Since the beginning of 2021, the **Global Fund** Awarded US$ 823m for procurement of therapeutics across 96 countries (US$ 575m for oxygen, US$ 248m for others including C-19 pharmaceuticals and other supportive hospital equipment) via Global Fund's C19RM. In Q4, 25,524 treatment courses of molnupiravir total value (US$ 2.3m) were delivered by **UNICEF** to 8 countries. No nirmatrelvir/ritonavir was procured in Q4 2022. Since 2021, **UNICEF** delivered 20m dexamethasone tablets to 22 countries, 44,661 oxygen concentrators to 82 countries, 62 Oxygen-Plant-in-a-Box to 25 countries and 46,188 treatment courses of molnupiravir to 9 countries.

Demand generation and in-country delivery	The **Unitaid** and **FIND** grants have been instrumental in assisting 22 countries with their readiness assessments to introduce new antivirals, regulatory pathway mapping, policy updates, and access to the WHO allocation mechanism. For example, in Q4, Ghana updated its guidelines to include nirmatrelvir/ritonavir as it became registered, while Bolivia and Paraguay received Tocilizumab **Unitaid** continues to provide oxygen delivery support across the 51 countries where its grant has a footprint. In Q4 only, the grants progressed in installing oxygen delivery systems in several African countries, gathering data on oxygen consumption, signing purchase orders for equipment in Senegal and Nigeria, and procuring oxygen equipment in 8 countries. Through the ACT-A Oxygen Emergency Taskforce and support to the **WHO** Emergencies Programme, a set of global oxygen delivery key performance indicators (KPIs) was developed. Since the beginning of 2021, the **Global Fund** awarded US$ 99m in funding to support in-country roll out of therapeutic tools via Global Fund's C19RM (cumulative 2021-2022). By the end of 2022, **UNICEF**'s global team of experts provided technical assistance to at least 40 countries, including those with ongoing humanitarian situations, for strategic planning for oxygen systems. UNICEF's long-term agreements for engineering services allowed countries to access these services and build a workforce of engineers and technicians to maintain oxygen systems. These services also included technical assessments and repair of oxygen systems and equipment and helped identify personnel training needs.

Q4 2022 HEALTH SYSTEMS RESPONSE CONNECTOR ACHIEVEMENT HIGHLIGHTS

Procurement	In Q4 alone, the **Global Fund** awarded US$ 45m for health products in HSRC in 12 countries. Since the beginning of 2021, the Global Fund awarded US$ 824m for procurement of health system tools across 103 countries (US$ 491m for PPE, US$ 333m for other health products in HSRC e.g., disinfectants and waste management) via Global Fund's C19RM.
Demand generation and in-country delivery	Throughout 2022, but especially in Q4, **UNICEF** continued to strengthen the technical capacity of partners in-country for RCCE, including coordination mechanisms into routine structures that provide communities with health promotion activities related to COVID-19 and other health priorities. Specifically, UNICEF created a repository of RCCE planning tools that were available to all partners, provided in-depth training and information-sharing forums on how to effectively implement RCCE activities, and established a global helpdesk responding to country needs and providing relevant expertise. **UNICEF** and **WHO** developed a range of RCCE materials and guidance, including communications' packages, that were accessible to all partners. **WHO** continued to develop and provide RCCE materials and tools adaptable and available in all UN languages on the WHO website and other several platforms such as regional RCCE network and the RCCE Collective Service. In addition, WHO continued to provide RCCE capacity building support to regions and countries through mentoring, technical support and resource-sharing. **WHO** led the development of four COVID-19 creative concepts which were tested in 30 countries. The results have been made available to all regions to help ensure future COVID-19 public messaging has been tested and resonates with different communities.

The Collective Service (CS) partners (**WHO**, **UNICEF**, IFRC, GOARN) have updated and launched a new social and behavioural COVID-19 dashboard which continues to track social-behavioural data associated with the COVID-19 pandemic. To date more than 730 quantitative studies from 196 countries have been organized within a behavioural framework and made publicly available to member states. In addition, the CS led the development of COVID-19 youth initiatives 7 case studies.

The CS partners continue to strengthen local RCCE capacities around the world through the CS help desk function which has logged hundreds of requests for RCCE support since its launch in 2022, with increasing numbers in 2023.

UNICEF developed Christian and Muslim COVID-19 vaccination modules for faith leaders to support their engagement with communities with plans to conduct training sessions and dialogues with faith leaders in 2023.

In October 2022, using the global Teach to Reach platform, an online peer learning session was conducted by **UNICEF** and the Geneva Learning Foundation where 654 health workers learned interpersonal communication skills to improve their interactions with communities.

Since the beginning of 2021, the **Global Fund** awarded US$ 447m in funding to support in-country roll out of health system tools via Global Fund's C19RM (cumulative in 2021-2022).

Through **Global Fund**'s C19RM countries were encouraged to invest in crucial community interventions, such as responding to human rights and gender related barriers to services, community-led monitoring, community-led advocacy and research, social mobilization, building community linkages and coordination, institutional capacity building, planning and leadership development, and gender-based violence (GBV) prevention.

The HSRC has partnered with **CoVDP** and conducted a joint mission to Cameroon during Q4 to identify specific challenges where HSRC can provide support. The HSRC is working with the country and partners to coordinate a response.

WHO / Blink Media - Martyn Aim

ANNEX II: Q1 2023 ACHIEVEMENT HIGHLIGHTS TABLE

Q1 2023 VACCINES ACHIEVEMENT HIGHLIGHTS

R&D, product assessment, and manufacturing	Since COVID-19 emerged, **CEPI** has invested in vaccine development across an R&D portfolio of 14 vaccine candidates. Three of these vaccines have been granted WHO Emergency Use Listing, and four additional vaccines have been approved by their respective national regulators. In Q1 2023, **CEPI** continued to support clinical research studies to expand access to vaccines, in addition to vaccine effectiveness studies. In February, **WHO** SAGE updated the Good Practice Statement on the use of variant-containing COVID-19 vaccines, approving the use of several bivalent vaccine products for primary and booster vaccination. In March, **WHO** SAGE reviewed the prioritization roadmap resulting in a simplified risk classification which includes three risk groups (high, medium, and low). It proposes a differentiated approach for the provision of the primary series and additional booster doses for each risk group.
Procurement, including demand planning and supply	By the end of Q1 2023, COVAX had shipped a total of 1.94bn COVID-19 doses to 146 countries. During Q1 2023 specifically, COVAX shipped a total of 62m doses to 51 countries, of which 10m doses were procured and 52m donated. In this period, the COVAX Facility received requests for 51m adult and adolescent doses across 45 countries. Taking into account countries' product and shelf life preferences and acceptance of supply offers made, 86% of this demand was met through COVAX supply. COVAX partners have continued work with AMC 91 participants to fine-tune demand forecasts for the remainder of 2023, and to build a first high-level forecast for 2024. The latest risk-adjusted COVAX demand for 2023 ranges between 200-300m doses. By the end of Q1 2023, **UNICEF** shipped 15.5m syringes to 19 countries and delivered 305,175 safety boxes to 22 countries as well as delivered cold chain ultra-low freezers with a storage capacity of 8,490 litres. In Q1 2023, **UNICEF** shipped 47.42m doses of Covid19 vaccines to 43 countries based on country requested allocations. 5.52m doses were for paediatric use.
Demand generation and in-country delivery	By the end of Q1 2023, AMC92 countries have achieved a primary series coverage of 55% (compared to 28% in January 2022) and the 34 countries for concerted support (34 CCS) have increased their coverage 9-fold to 27%. Twenty-eight among the 34 CSS that were at or below 10% primary series coverage have achieved coverage above 10%, with Tanzania and Sierra Leone being the first to reach more than 50% coverage. In Q1 2023, **CoVDP** facilitated the disbursement of US$ 17m in quick impact funding to address delivery bottlenecks, with disbursement times as low as 24 hours. CoVDP continued its political engagement with governments and conducted 5 country missions in Q1 2023 (total of 33 to date). A Joint Convening on COVID-19 vaccinations in humanitarian settings took place in February 2023 to inform future strategies, approaches, tools and mechanisms to reach populations of concern. A total of US$ 967m has been disbursed to support COVID-19 vaccine delivery in AMC countries, inclusive of COVID-19 Vaccine Delivery Support (CDS), direct country support, and cross cutting initiatives. Of this amount, a total of US$ 631m has been disbursed in CDS funds to 57 AMC countries, with US$ 79m alone in Q1 of 2023. 96% of the approved applications for the third window of CDS have programmed activities to support integration of COVID-19 vaccinations into routine immunizations.

	Long-term impact of **Gavi** CDS funding beyond COVID-19: Of the countries that reported impact of CDS funding, 54% of lower-income countries supported by COVAX have reported strengthening of their cold chain infrastructure to include cold rooms, vaccine fridges, CCE and refrigerated trucks. 49% of the reporting countries have also been able to digitize their health data, i.e, developing electric immunization registries that are integrated with the government's civil registry, and optimizing DHIS2 modules to improve data collection to monitor stock and inform program decisions. 46% of responding countries have integrated COVID-19 vaccination into routine immunization programs using mass vaccination outreach to increase COVID-19 coverage. 33% of the countries reported having expanded their vaccine supply chain capacity, helping increase storage capacity, improve availability of COVID-19 and RI vaccines, and better manage vaccine supply chain and logistics.

Q1 2023 DIAGNOSTICS ACHIEVEMENT HIGHLIGHTS

R&D and product assessment	Beginning in 2023, all SARS-CoV-2 Ag-RDTs underwent an independent evaluation of analytical performance, led by PATH with funding from **FIND**, in partnership with **WHO** PQT-IVD. **FIND** finalized development of two novel multiplex assays for acute respiratory illness (SARS-CoV-2/Flu/RSV) on near-Point of Care platforms. Commercial launch is planned for Q4 2023.
Market shaping and manufac-turing	In Q1 2023, 2 additional Ag-RDTs/PCR tests have been **WHO EUL** listed and 3 Ag-RDTs/PCR tests have failed the Emergency Use Listing assessment. **FIND** launched the DxConnect Marketplace, a secure digital platform and support service designed to connect buyers and sellers and facilitate the procurement of affordable, quality-assured diagnostics including for COVID-19.
Procurement	Since the start of the pandemic, 193m tests have been procured across all member agencies within the diagnostics consortium, with 182.1m delivered to 182 countries (Q1 2020 to Q1 2023). In Q1 2023 specifically, 1.7m tests (0.35m PCR tests and 1.35m Ag-RDTs) were procured and 3.7m were delivered (0.95m PCR tests and 2.8m Ag-RDTs). In Q1 alone, the **Global Fund** awarded US$ 7m for diagnostic tools in 6 countries. Since the beginning of 2021, the **Global Fund** awarded US$ 835m for procurement of tests across 103 countries (US$ 507m for PCR tests, US$ 327m for Ag-RDTs) via Global Fund's C19RM, to enable the procurement of 165-200m tests.
Demand generation and in-country delivery	Since the beginning of 2021, **Global Fund** awarded US$159m in funding to support in country roll-out of diagnostic tools via Global Fund's C19RM (cumulative 2021-2023) **WHO** completed a global external quality assessment of SARS-CoV-2 molecular testing, which engaged almost 3,000 laboratories in 117 countries & territories. **UNICEF** provided technical assistance and funding allocations to five countries (Eswatini, Lebanon, Namibia, South Africa, Zimbabwe) aimed at increasing access to testing at the community and Primary Healthcare levels. **UNICEF** continued to develop its global advocacy strategy on diagnostics across 22 countries ahead of the anticipated launch of the strategy and associated toolkit during the World Health Assembly in May 2023.

	UNICEF, in partnership with **FIND** and government/non-government partners, developed two videos (Video 1, Video 2) on how to integrate COVID-19 testing into existing programmes in Suriname. **FIND** supported countries to generate evidence to support policy change on the role of community healthcare workers in community-based integrated TB/Malaria/COVID-19 screening with supportive digital tools. **FIND** collaborated with Africa-CDC to facilitate the donation of 357,000 home use COVID-19 Ag-RDTs to Kenya, Mauritius and Seychelles. **FIND**, **Global Fund**, and **WHO**, along with the broader ACT-A Diagnostic Pillar partnership launched the COVID-19 Dx knowledge hub to ensure ensure learnings and resources for diagnostics generated throughout the pandemic are stored in an accessible, user-friendly format relevant for stakeholders at the global, regional, and country levels.

Q1 2023 THERAPEUTICS ACHIEVEMENT HIGHLIGHTS

Market shaping and manufacturing	**Unitaid** successfully initiated a first-of-its-kind blended finance award process with MedAccess, stimulating the expansion of regional production of liquid oxygen and associated delivery innovations in Sub-Saharan Africa.
Procurement	In Q1 alone, the **Global Fund** awarded US$ 31m for therapeutic tools in 21 countries. Since the beginning of 2021, the **Global Fund** Awarded US$ 854m for procurement of therapeutics across 100 countries (US$ 593m for oxygen, US$ 261m for others including COVID-19 pharmaceuticals and other supportive hospital equipment) via Global Fund's C19RM. In Q1 2023, **UNICEF** delivered 14,290 treatment courses of molnupiravir to Mozambique, and 59,904 nirmatrevir/ritonavir treatment courses to 9 countries. In Q1 2023, **UNICEF** delivered 2,123 oxygen concentrators to 13 countries as well as 13 oxygen plants to 5 countries. In Q1, 2023, **UNICEF** delivered 113,650 dexamethasone tablets to 7 countries.
Demand generation and in-country delivery	In Q1 2023, **UNICEF**'s global team of experts continued to provide extensive technical assistance to countries, including those with ongoing humanitarian situations, for oxygen systems scale up. The Test to Treat coordination group, co-chaired by **Unitaid** and the **Global Fund**, supported the successful delivery of oral antivirals in four countries and launched discussions on developing a standard set of metrics to measure country preparedness for surges and future outbreaks. Since the beginning of 2021, the **Global Fund** awarded US$ 105m in funding to support in-country roll-out of therapeutic tools via **Global Fund**'s C19RM (cumulative 2021-2023).

	Unitaid continues to support **WHO** in developing and updating the COVID-19-related guideline environment including: • The Foundations of Medical Oxygen Systems was published in February 2023, providing access to relevant definitions, technical requirements, tools, and resources related to the medical oxygen ecosystem. • The COVID-19 Cost and Decision Analysis Tool for Therapeutics (ESFT) was also launched in Q1 2023, providing a more comprehensive approach to costing COVID-19 therapeutics.
Cross cutting	In January 2023, the **WHO** Executive Board agreed to table a resolution on oxygen for adoption by Member States at the 76th World Health Assembly. **Unitaid** supported finalizing the Global Oxygen Alliance governance and terms of reference, positioning the Alliance for formal launch on the sidelines of the 76th World Health Assembly.

Q1 2023 HEALTH SYSTEMS AND RESPONSE CONNECTOR ACHIEVEMENT HIGHLIGHTS

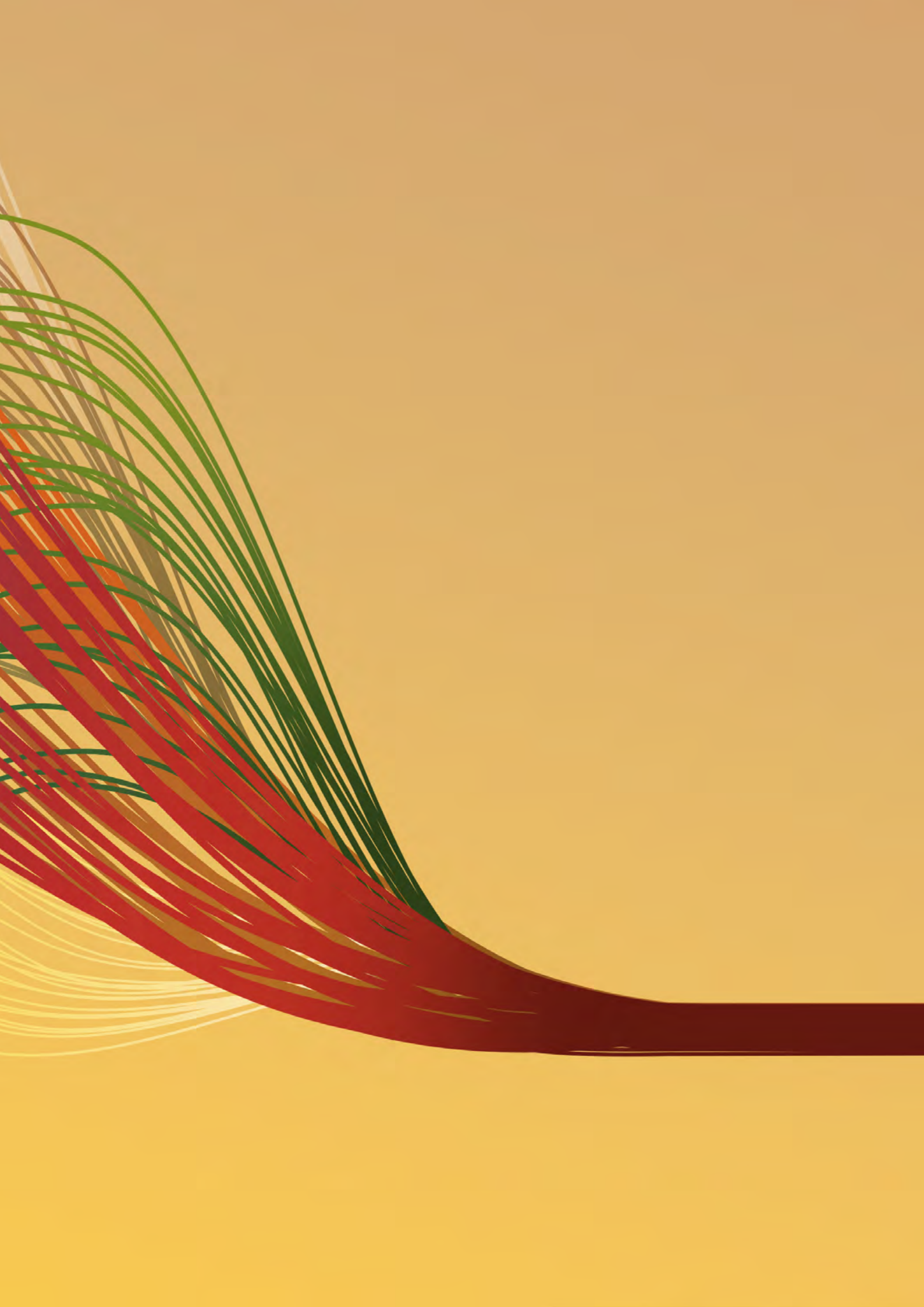
Procurement	In Q1 alone, the **Global Fund** awarded US$ 16m for health products of the Health Systems and Response Connector in 14 countries. Since the beginning of 2021, the **Global Fund** Awarded US$ 839m for procurement of health system tools across 104 countries (US$ 491m for PPE, US$ 348m for other health products of the Health systems and Response Connector, e.g., disinfectants and waste management) via Global Fund's C19RM. In Q1 2023, **UNICEF** shipped 12.35m PPE items to 45 countries.
Demand generation and in-country delivery	Since the beginning of 2021, **Global Fund** awarded US$ 468m in funding to support in-country roll-out of health system tools via Global Fund's C19RM (cumulative 2021-2023). **UNICEF** and other members of the global Vaccination Demand Hub (**WHO**, USAID, US CDC, BMGF and IFRC) convened a meeting in Nairobi with 80 participants from 11 countries from the Eastern and Southern Africa (ESAR) and Western and Central Africa (WCAR) regions, hosted by Kenya. Countries prioritized key actions for demand promotion, including integration of COVID-19 into primary health care, and shined a spotlight on approaches for recovery from Routine Immunization backsliding, and its implications on demand. In Q1, **UNICEF** supported key stakeholders, including the governments of India and Tanzania, to host human centered design (HCD) workshops to identify barriers to vaccination and co-create solutions to improve vaccine uptake. **UNICEF** HQ conducted an integrated analysis and social listening training for health promoters in Papua New Guinea providing them with the necessary tools and skills to counter online misinformation.

In partnership with its global Office for Innovation, **UNICEF** is piloting FunDoo, a low-tech chatbot based on existing U-Report and Rapidpro SMS-based infrastructure to engage adolescents and youth on vaccine-related topics through channels such as WhatsApp, Facebook, Viber and SMS. Available in multiple languages, Fundoo conveys verified information, builds skills, and encourages young people to take actions through 'tasks' in a gamified format. Fundoo is set to be deployed in Jamaica, Mozambique, DRC, Cote D'Ivoire, and Ghana.

UNICEF, in partnership with its Office of Research (Innocenti), is employing rigorous behavioural science-informed approaches by using experimental design to assess interventions. UNICEF is working with 10 countries, convening stakeholders (including relevant ministries) to apply implementation research and experimental methods to adapt vaccination activities and scale up promising interventions.

Together with the ACT-A partnership and key informants across countries and regions, **WHO** co-developed the Core Clinical Care Readiness (C3R) Tool in 2022. The C3R tool supports countries to identify specific gaps in their health service delivery, assess their context-specific barriers and propose actions to address them through an action plan. There is ongoing development of additional hazard profiles to enable country responsiveness and resilience.

Current implementation work is ongoing with the national **WHO** Emergency Care Toolkit training in Sudan, Jordan, Nepal, Zambia, and Timor-Leste to enhance facility level response to COVID-19 and support future resilience.



ACT-A co-convening partners:

Gavi The Vaccine Alliance

CEPI

World Health Organization

wellcome

Bill & Melinda Gates foundation

FIND Diagnosis for all

The Global Fund

Unitaid

unicef

World Bank Group

Working with goverments, civil society and industry