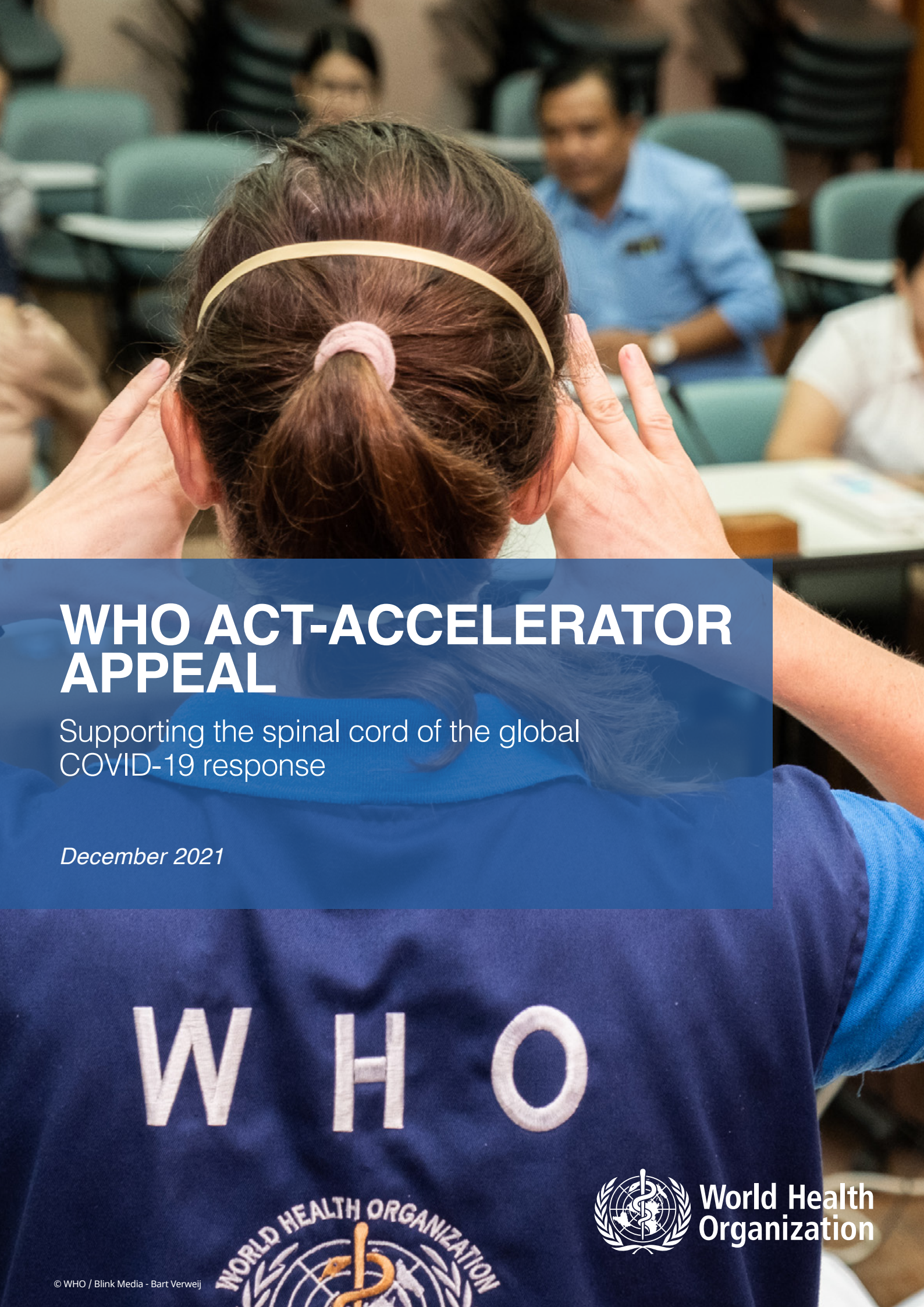

WHO ACT-ACCELERATOR APPEAL

Supporting the spinal cord of the global COVID-19 response

December 2021

World Health Organization

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ACCESS TO COVID-19 TOOLS

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INTRODUCTION

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When WHO co-founded the ACT-Accelerator as an end-to-end partnership to halt the acute phase of the pandemic there were no effective, regulator-approved tools to fight COVID-19. Now, less than two years later, an unprecedented international public - private effort has led to the creation, testing, approval, procurement and initial deployment of vaccines and effective therapies in combination with medical oxygen, and multiple tests. **WHO has driven this process, tracking the development of the disease, and playing the role of global regulator by setting the guidelines and assessing the safety and efficacy of new products. WHO is the spinal cord of the response, convening and coordinating the partners able to deliver for global health in conjunction with its Member States.** It has carried out its essential role, but within a modest budget. As the world enters the next phase of the pandemic, WHO is being called upon to add to its work within the partnership to ensure that tools are not only theoretically available but are delivered and deployed equitably, effectively and efficiently.

This document sets out WHO's funding requirements to deliver on its role and work under **the Access to COVID-19 Tools (ACT)-Accelerator,** October 2021 to September 2022. The ACT-Accelerator – and WHO's funding requirement within it – is a subset to WHO's global **Strategic Preparedness and Response Plan (SPRP)** which outlines WHO's overall objectives and funding needs for the COVID-19 response.

1: THE ACT-ACCELERATOR STRATEGY FOR THE NEXT PHASE OF THE PANDEMIC

The pandemic is not over. But while we all face the same virus, in some countries if you are infected with COVID-19 you are more likely to recover, in others you are still more likely to require hospitalization due to a lack of tests, treatments and vaccines and the trained personnel and effective health systems needed to get them to people. Millions of health workers and vulnerable people remain unprotected. This divergence of experiences of the pandemic is inequitable and dangerous. The detection of the new Omicron variant demonstrates the threat posed to world by the inequitable distribution of vaccines. Until regulatorily approved tests, treatments, and vaccines are accessible to everyone, supported by the skilled personnel and national development plans needed to get them to those who need them, the virus will continue to spread and come back to the vaccinated world. New variants threaten us all. The economic cost of inequitable vaccine access alone is estimated to cost the world $5.3 trillion in losses over five years according to the IMF.

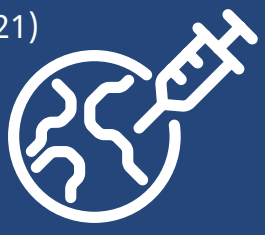
It is in this context that the ACT-Accelerator has expanded its focus to address growing inequities in access to COVID-19 tools for underserved countries and areas. WHO will have an especially important role to play as the ACT-Accelerator moves more resources downstream to sharpen and build up its support for country and community needs. The ACT-Accelerator will build on its unique structure as the only global, integrated, end-to-end platform for developing, scaling access to and delivering COVID-19 tools to support country readiness and enable the uptake of tools.

To support this expansion, the Health Systems & Response Connector (HSRC) has been revamped to work with countries and their health systems to take products all the way from the scientist in the lab and to those that need them most. This requires sight of the whole process from the development and optimization of tools through to the use of those tools in local communities, a view that only WHO has.

0.6%

of the nearly 7.5 billion doses of COVID-19 vaccine have been administered in low-income countries

(as of mid-November 2021)



2: WHO'S ROLE IN THE ACT-ACCELERATOR

With 194 Member States and 152 country offices, WHO has unique global reach and legitimacy. It played a crucial role in bringing together Member States to create the Facilitation Council that provides high level political leadership to the ACT-Accelerator partnership. With moderate investment, it hosted and ran the Hub secretariat and provided technical guidance in all the pillars of the partnership including across regulatory and allocation functions. It is only thanks to the Hub role that donors have been able to interact with a single coordinated global plan with a view across the whole partnership.

Now, in the next phase of the pandemic, WHO's role in the ACT-Accelerator is increasing as the focus shifts to ensuring equitable impact at the final mile.

End-to-end: global footprint, local knowledge

The scale of the COVID-19 pandemic continues to call for a global response that goes beyond any one government or institution. As the spinal cord in the ACT-Accelerator partnership, WHO sits across all pillars of the response, with its role underpinned by its full suite of capabilities from R&D, policy and strategy, navigating the regulatory and decision-making processes, and gathering and tracking data, through to downstream implementation within communities and capacity building. Years of accumulated knowledge of the needs and challenges on the ground in countries means WHO can deliver for impact, bringing the latest science to bear in support of the safe and effective delivery of countermeasures. And WHO can coordinate UN agency national and regional offices throughout the world, across partner, government, and multi-stakeholder platforms and within local communities.

The flow of information up and down the WHO network means data informs decision-making and ensures that communities do not have to remain subject to implementation barriers to access vaccines, tests, treatments and PPE. WHO has teams on the ground with country knowledge, trust and understanding backed by the full WHO system of regional and global expertise and partnerships. Over half the world relies on WHO as their regulator for diagnostics, treatments and vaccines.

When countries begin to roll out tools, they come to WHO for guidance. This is all crucial to the delivery of the ACT-Accelerator's new plan.

WHO's deep in-country presence has enabled it to support people in fragile, conflict-affected and vulnerable settings where access gaps are at their most acute. For example, in June 2021, internally displaced persons in the Adhagom refugee community in Cross River State, Nigeria, received their first doses of COVID-19 vaccine from COVAX. WHO supported Nigeria's State Primary Health Care Development Agency, together with the United Nations High Commissioner for Refugees, to run an information campaign to help overcome initially high rates of hesitancy among refugees and community groups. WHO's in-country support in Nigeria was crucial to the vaccine uptake and is indicative of the range of roles WHO is able to play in the value-chain to address country needs.

"Hundreds of WHO experts are on the ground, supporting countries to expand vaccination sites and to manage the complexities of rolling out a large number of vaccines which often have different storage and handling requirements. This is a massive endeavor, and takes technical expertise and precision planning"
Dr Matshidiso Moeti, WHO Regional Director for Africa

Outcome-focused, targeted response

Navigating an evolving virus and a bigger, more complex ecosystem, requires a clear focus on outcomes. The ACT-Accelerator has set minimum coverage targets, anchored in the global coverage targets set by WHO, to improve access to tools including treatments, tests and PPE. These targets require leadership, oversight and coordination to enable convening partners to procure tools and ensure their effective delivery. WHO, as the normative agency on health, can leverage relationships with governments, legal teams and Health Ministries to push through the deployment of tools and guide national implementation policies and plans. It can ensure tools are in the right place, in the hands of health workers who know how they are used and can administer them to the people in need.

A more target-driven approach is further enabled by WHO's country specific surveillance and capacity capabilities that map and track the path of the virus. Two of WHO's core functions in the ACT-Accelerator: developing a framework to enable the allocation of scarce resources and hosting the Hub across agencies, provide the legitimacy and impetus for decision-making.

How WHO can bring together its strategic, integrated roles is well illustrated in Somalia, where WHO recently implemented a training series on the Early Warning and Response Network, focused on three pillars: detecting, verifying, and responding to COVID-19 and other diseases. As a result, the reporting rate and case detection for COVID-19 increased from 57% to 79% from April 2020 to May 2021 – and this surveillance will have utility for diseases beyond COVID-19. In addition, WHO's role in the Emergency Use Listing (EUL) process of tools has broken down regulatory barriers and accelerated their market entry at country level, whilst ensuring rigorous standards are upheld. 194 vaccines are currently in pre-clinical development and 132 vaccines in clinical development phases. And through WHO's country-level trackers, for example the **ACT-Accelerator Access Tracker**, it can highlight gaps in delivery and access and accelerate the roll-out of tools where they are needed most.

194

vaccines are currently in pre-clinical development with a further 132 in clinical development phases.

(As of 23 November 2021)

"We can transform each new challenge into opportunity and Georgia is a good example of this. Due to urgent needs in the pandemic management process, Georgia has taken important measures to improve sustainability of the healthcare system. The pandemic revealed necessity to speed up the process of strengthening the State Sector, which is ongoing with financial and technical support of the WHO, EU, the World Bank, and other donor organizations"

Ekaterine Tikaradze, Minister of Internally Displaced Persons from the Occupied Territories, Health, Labour and Social Affairs of Georgia

Fully integrated across response networks

The ACT-Accelerator's revised focus on maximizing the impact of vaccines, diagnostics and therapeutics via the newly convened HSRC will see the WHO play an even more important role translating tools into effective interventions. WHO's central position means that it will continue to help lower middle-income countries (LMICs) ensure a robust level of capacity building, working with local entities and actors to ensure greater impact from the roll-out of tools, by strengthening health systems and empowering health workers. Through WHO's role in the HSRC, it can see across the landscape. Its Health Emergencies Programme and Incident Management Support Teams work at all levels to better connect dynamic country needs with pillar-level strategic planning, enabling the ACT-Accelerator to take a more proactive, country-centered and demand-driven approach.

Recently, WHO developed a comprehensive implementation plan for a government grant to Sri Lanka. The focus was on gaps in the COVID-19 response and technical areas to put Sri Lanka back on track to further advance its achievements on universal health coverage. Urgent medical supplies, including 2 million syringes for the accelerated COVID-19 vaccination effort, arrived in Sri Lanka in August 2021 and medical equipment for 55 hospitals at the primary health care level has been procured. With WHO's expertise of the global network, the donor was able to better coordinate its efforts through the multilateral system and provide timely support for Sri Lanka in its fight against COVID-19.

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3: WHO'S ROLE IN THE PILLARS OF THE ACT-ACCELERATOR

Diagnostics

WHO's work within the Diagnostics pillar spans developing guidelines, supporting the Emergency Use Listing (EUL) process, expanding genomic sequencing capacity by building new infrastructure, including lab and testing capabilities, and investing in the development of community-based training and testing strategies. In the face of a mutating virus, all of this work is paramount to ensure affordability and accessibility of tests.

Of the more than 3 billion tests reported across the world, only 0.4% of these have been performed in low-income countries (LICs). Without access to tests, countries are blind to the extent of the pandemic, with poor surveillance impeding their capability to identify and respond to variants as they arise. Over the next twelve months, WHO alongside other agency leads, will advance the ACT-Accelerator's target of procuring 988 million tests. This target will help to advance testing rates to a minimum of 100 tests per 100,000 individuals per day in LICs, LMICs and upper middle-income countries (UMICs) - a critical threshold to ensure effective public health interventions. Alongside antigen rapid diagnostic tests, with donor funding, WHO will also support the deployment of serological tests to enable understanding of the immune status of individuals, to identify high-risk populations and prioritize the roll-out of vaccine programmes.

Countries deeply value WHO's role in the prequalification stage - applying international standards to ensure products are safe and effective and facilitating the EUL process to expediate the availability of products. Working closely with FIND, WHO has assessed more than 90 diagnostic tests against quality benchmarks to inform regulation and country procurement and provided EUL approval of 28 diagnostic tools. WHO plays a vital role in ensuring a successful and effective test and treat approach at the national level in LICs/LMICs.

Therapeutics

WHO's support to this pillar spans policy and guidance, R&D, and product assessment, strengthening efforts to improve the clinical pipeline through to oxygen and therapeutics procurement, and providing technical assistance and delivery support within countries and communities. WHO plays a leading role in prequalification procedures, regulatory support and safety monitoring and vigilance, drawing on its deep expertise in essential medicines and treatments.

By September 2022, the Therapeutics Pillar of the ACT-Accelerator aims to provide treatment for 120 million cases, focusing on LICs, LMICs and UMICs. The next twelve months will also provide a turning point in the deployment of outpatient medicines, such as oral antiviral medicines. Through the Medicines Patent Pool (MPP), established by Unitaid, and WHO's work with other partners, much needed and quality assured medicines will be more accessible to LMICs – and more quickly. WHO's integration across the whole global health infrastructure means therapeutics can be developed, regulated, and deployed to maximum effect in health systems that are able to support patients.

Over the next 12 months, WHO will help the ACT-Accelerator to:

- **Procure 988 million tests**
- **Treat 120 million cases**
- **Administer 5 billion vaccine doses**

to meet its global targets for access to COVID-19 tools

Vaccines

WHO will provide operational support to ensure in-country readiness for vaccines. It will mobilize hundreds of staff across its country network to support capacity to receive and administer vaccines in communities and health systems, working with partners on field operations. At the same time, WHO will continue providing upstream support in recognition of the evolving virus and new information emerging that can inform the development of vaccines and manufacturing and provide the critical regulatory function.

Concerted and well-coordinated support for countries to administer the doses arriving on their doorsteps is vital to achieve the 70% global vaccination target by mid-2022. WHO's work to date on product assessment and policy and guidance, alongside technical assistance, early planning on country capacity and delivery support through the Country Readiness and Delivery (CRD) workstream with UNICEF, has helped ensure that vaccines can reach those most in need and prevent countries from slipping too far behind their coverage targets.

This includes R&D for new vaccines, and the establishment of the world's first MRNA vaccine technology transfer hub that will scale up production and access to COVID-19 vaccines, in partnership with a South African consortium comprising Biovac, Afrigen Biologics and Vaccines, a network of universities and the Africa Centres for Disease Control and Prevention (CDC). In October 2021, WHO also announced the launch of co-sponsored Solidarity Trial Vaccines with the Ministries of Health of Colombia, Mali and the Philippines, part of an international, randomized clinical trial platform to rapidly evaluate promising new vaccine candidates. The trial is possible thanks to the convening of global expertise by WHO, with a trial team comprised of at least 50 scientists and researchers across organizations.

"WHO's continued support to the Ministry of Health has been vital to strengthen the government response capabilities to tackle COVID-19 in Iraq; engaging communities and addressing immediate health systems bottlenecks. Together with WHO, we were able to scale up our testing capacity, increase intensive care performance, and fill gaps in medications and health technologies. We also launched a Mass Vaccination campaign, aiming to reach the globally agreed targets, and above all, we continued to secure access to essential health care throughout the pandemic"

Dr Hani Mousa Badr Al Eqabi, Minister of Health a.I in Iraq

HSRC

WHO is coordinating country planning, financing and tracking against targets; coordinating technical, operational and financial support to countries to ensure translation of tools into effective health interventions; and health systems and workforce protection and capacity strengthening.

Under the new HSRC, WHO will be working towards measurable milestones that include countries having at least 80% of their financing gaps for delivery met, primarily through domestic funding and, where required, additional concessional and/or grant financing. WHO will support countries to have "real-time" monitoring of availability and absorption of new COVID-19 tools and tracking against delivery targets. In addition, WHO will be supporting each ACT-Accelerator Pillar to meet their targets by aligning with and leveraging national response capabilities, engaging communities and addressing immediate health systems bottlenecks. WHO will be working closely with countries to guarantee that they have integrated plans, resource requirements and financing allocations for vaccination, testing and clinical management via the COVID-19 partners platform. Behind all of this will be a drive to keep essential health and community care workers safe by the continued provision of PPE, alongside strengthened infection, prevention and control measures.

"The new HSRC will elevate our ability to connect vital COVID-19 tools with those who are most desperately in need. Only WHO, as the multilateral organisation for global health, has the footprint to make this work – working across, between, and within the systems that can truly move the dial on the response, drawing on decades of experience"

Dr Michael Ryan, Executive Director, WHO Health Emergencies Programme

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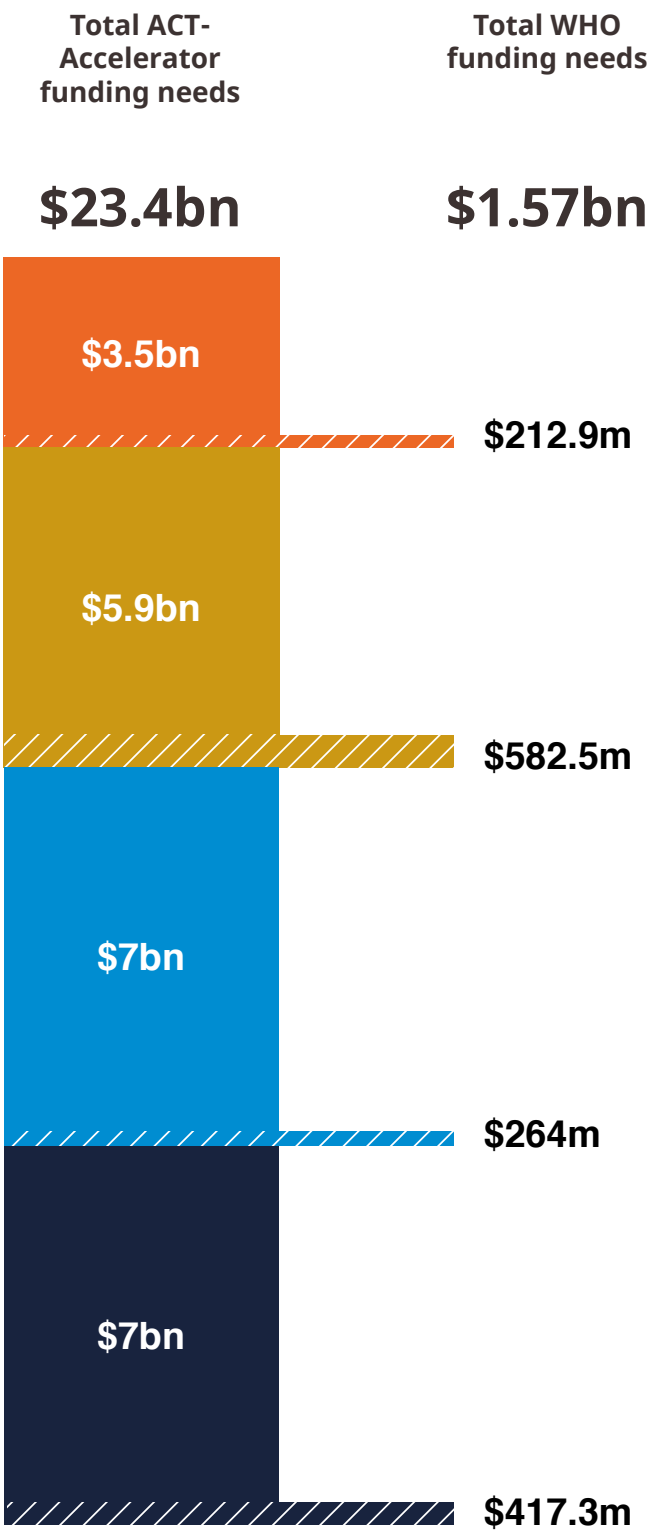
4: NO TIME TO WASTE

Thanks to the generosity of donors, investments in the ACT-Accelerator to date have helped slow the pandemic's destructive path and enabled the introduction of life-saving tools. But we have not yet addressed the inequities in access to these tools among many of the communities and countries that need them most. WHO has the authority, the regulatory, legal and scientific firepower, the in-country integration and the relationships at the most senior levels of government at the scale needed to address the equity problem. But to turbocharge these capabilities requires additional financing. Without the capabilities WHO provides, donors won't be able to ensure the full and effective deployment of their investments in other parts of the ACT-Accelerator. Vaccines, treatments and tests will be delivered to people who haven't been trained to use them, new products will emerge but countries who lack their own regulator won't know whether or not they are safe to use and the coordination that is the hallmark of the ACT-Accelerator won't be possible.

The ACT-Accelerator needs **US$23.4 billion** until September 2022. Of this, WHO's funding needs are just **$1.57 billion**, less than 7% of the total ask. This is an urgent call for the international community to fund the low cost, high impact work of the WHO to deliver on its new role within the new ACT-Accelerator.

Funding needs from Oct 2021 to Sept 2022 by Pillar



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