

## Enhancing readiness for large-scale vaccine distribution amid COVID-19

19 August 2020, 10:30-12:00 (Manila Time), via Microsoft Teams

### I. Background and Context

1. The coronavirus disease (COVID-19)<sup>1</sup> pandemic continues to severely affect health and economic systems globally. In Southeast Asia and the People's Republic of China (PRC), hundreds and thousands have been infected and thousands have lost their lives. Without a vaccine, countries are taking measures to “flatten the epidemiologic curve” by closing borders, imposing restrictions on passenger transportation and labor mobility, shutting down schools, reducing business operations affecting global supply chains, and imposing lock downs putting a sudden stop to economic activities and making poor households vulnerable. The social and economic implications of these measures are significant.<sup>2</sup> As a global crisis, mitigating the effects of the COVID-19 outbreak requires country, (sub)regional, and global interventions and collaborative responses.

2. Epidemiologists have justified that health measures to contain the virus need to be sustained until such a time that vaccines and effective treatments can be made widely available.<sup>3</sup> Eradicating COVID-19 is challenging given the highly infectious nature of the virus and likely animal reservoir,<sup>4</sup> but vaccination could help to control infection just as it does for many infectious diseases. One paper suggests that 70% or more of a population would need to attain immunity either through exposure and recovery, or vaccination, in order to achieve herd immunity that is sufficient to stop transmission.<sup>5</sup> Given SARS-CoV2 is airborne, and highly transmissible, it is unlikely at this point in time that a vaccine could eradicate COVID-19;<sup>6</sup> however, it will be a major tool to reduce prevalence and allow countries to re-open borders, businesses, schools, and economies. Global equitable access to a vaccine, particularly protecting health care workers and those most-at-risk is a significant way to mitigate the public health and economic impact of the pandemic.

3. The global vaccine research and development effort in response to the COVID-19 pandemic is unparalleled in terms of scale and speed with one or more vaccines forecasted to be approved in 2021. This is a vital shift from the traditional lengthy vaccine development route, which takes on average over 10 years, even when compared with the accelerated 5-year timescale for development of the first Ebola vaccines.<sup>7</sup> The Asia-Pacific region is playing

<sup>1</sup> COVID-19 is the short term for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). As of 13 August 2020, 20,810,774 people have been infected with 747,305 deaths.

<sup>2</sup> ADB. 2020. *What Drives Innovation in Asia? Special Topic: The Impact of the Coronavirus Outbreak—An Update. Asian Development Outlook*. Manila


<sup>3</sup> Walker, P, et al. (2020), “The Global Impact of COVID-19 and Strategies for Mitigation and Suppression,” Imperial College COVID-19 Response Team, 26 March.

<sup>4</sup> Geoffard, P-Y, and T Philipson (1996), "Disease Eradication: Private versus Public Vaccination", *American Economic Review* 87(1): 222-30.

<sup>5</sup> D. Dowdy and G. D. Souza. Early Herd Immunity against COVID-19: A Dangerous Misconception, John Hopkins University and Medicine accessed on 11 August 2020 from <https://coronavirus.jhu.edu/from-our-experts/early-herd-immunity-against-covid-19-a-dangerous-misconception>

<sup>6</sup> Allergy. 2020 Jul;75(7):1564-1581.

<sup>7</sup> Matthias Helble and Susan Roth. Asia should lead the way in producing a novel coronavirus vaccine. ADB blog published on 23 April 2020 and accessed on 9 August 2020 from <https://blogs.adb.org/blog/asia-should-lead-way-producing-novel-coronavirus-vaccine>.



a critical role in this historic endeavor. Of the confirmed active vaccine candidates, 36 (46%) are in North America, 14 (18%) in the People's Republic of China, 14 (18%) in other parts of Asia and Australia, with 14 (18%) in Europe.<sup>8</sup> The need for accelerated and innovative approaches to vaccine development and distribution requires close coordination between manufacturers, research institutes, governments and regulatory agencies to ensure quality and safety. In addition, countries in Asia and the Pacific also need to find a regional coordination mechanism that ensures the production and distribution of safe vaccines for the entire region within a short period of time.

4. With countries having different capacities in vaccine research, development, and distribution, global alliances and mechanisms are put in place to ensure no country is left behind and to complement domestic efforts. One example is the Global Alliance for Vaccines and Immunizations (GAVI), a global health partnership of public and private sector organizations leading the COVID-19 Global Vaccine Access Facility (COVAX). COVAX operates as the vaccines pillar (pillar 3) of the Access to COVID-19 Tools (ACT) Accelerator which aims to fast-track development, production, and equitable access to COVID-19 tests, treatments, and vaccines. ACT-Accelerator coordinates with COVAX Facility since it serves as a global risk-sharing mechanism for pooled procurement and equitable distribution of eventual COVID-19 vaccines. COVAX is co-led by GAVI, the Coalition for Epidemic Preparedness Innovations, and the World Health Organization and offers a partial solution given its goal of vaccinating the most vulnerable 20% of the population of participating countries focusing on health care workers and vulnerable groups. Further doses will be made available based on country need, vulnerability, and COVID-19 threats.

5. As of 31 July 2020, a total of 92 low- and middle-income countries and economies will be able to access COVID-19 vaccines through GAVI's COVAX Advance Market Commitment (AMC) which will also cover at least part of the cost. GAVI COVAX AMC is a new financing instrument aimed at incentivizing vaccine manufacturers to produce sufficient quantities of eventual COVID-19 vaccines, and to ensure access for developing countries. It serves as a building block to the broader COVAX Facility. Fund-raising for COVAX is ongoing with US\$600 million<sup>9</sup> raised against the target of US\$2 billion by the end of 2020 to fund the cost of the vaccine and possibly immunization supplies for the pre-determined allocation amount. An additional US\$3.4 billion will be required to procure 1 billion doses by end 2021.<sup>10</sup> Eligible COVAX countries and economies are classified as low-income country (LIC), lower-middle-income country (LMIC), upper-middle-income country (UMIC), and high-income country (HIC). LICs and LMICs will be subsidized by COVAX while UMICs and HICs are self-financing. Seven countries in Southeast Asia are eligible for the COVAX AMC namely: Cambodia, Indonesia, Philippines, Lao People's Democratic Republic, Myanmar, Timor-Leste and Viet Nam.

6. Once a vaccine is proven to be both safe and effective, governments, industry and healthcare providers will face the enormous task of figuring out how to distribute the vaccine efficiently, safely, and fairly. Vaccine distribution involves health care and supply chains, as well as issues of efficiency (speed), effectiveness (avert deaths), and equality. Policy makers need to contend with issues on sustainable access to vaccines, efficient and safe distribution, and prioritization in accessing and distributing the vaccines, among others.

## II. Tenth PACER Dialogue

7. The development of safe and effective COVID-19 vaccines, their manufacture, financing, and procurement requires strong country capacity to make informed decisions related to prioritization, introduction, and delivery. Advance country preparation is crucial to the success of efficient, effective and equitable vaccines delivery. International experience from similar outbreaks yield useful lessons on safe and effective delivery of COVID-19 vaccines such as: (i) non-traditional immunization and logistics to reach the most vulnerable populations; (ii) robust

<sup>8</sup> Ibid

<sup>9</sup> WHO news release published on 15 July 2020 and accessed on 11 August 2020 from <https://www.who.int/news-room/detail/15-07-2020-more-than-150-countries-engaged-in-covid-19-vaccine-global-access-facility>

<sup>10</sup> GAVI news release published on 1 August 2020 and accessed on 11 August 2020 from <https://www.gavi.org/news/media-room/92-low-middle-income-economies-eligible-access-covid-19-vaccines-gavi-covax-amc>



advocacy and communications campaigns; (iii) transparent criteria and allocation process of vaccine doses that is well understood by the population; and (iv) effective information management and distribution systems, among others.

8. As countries act to address the COVID-19 crisis, they need to contend with the multi-faceted issues and are pressured to quickly develop strategies and plans for safe and effective large-scale vaccines distribution in a systematic manner. Development of COVID-19 vaccine introduction plans and strategies need to consider different scenarios, phased approaches in prioritizing beneficiaries, assessment of current vaccine delivery and administration capacity, and innovative ways to deliver vaccines to target populations.

9. Recognizing new products will have supply constraints, a strategy for phased vaccine rollout and continued pandemic control using public health measures and other tools will be required. Each country presents unique epidemiologic, demographic, infrastructure, and financing challenges; thus, each country plan should reflect specific activities required to introduce COVID-19 vaccines in a manner that will reduce mortality, strengthen health system response, and build economic resilience. Several lessons learned and best practice examples are available for governments to consider and adapt to their own approaches for COVID-19 large scale vaccines distribution and delivery.

10. In this context the Asian Development Bank (ADB) will convene the tenth **Policy Actions for COVID-19 Economic Recovery (PACER) Dialogue** in virtual format on 19 August 2020 (Wednesday) from 10:30–12:00 (Manila time) using Microsoft Teams. The title of the tenth PACER Dialogue is **“Enhancing readiness for large scale vaccine distribution amid COVID-19.”** The PACER Dialogues are organized under the ADB-supported BIMP-EAGA, IMT-GT, and GMS (B-I-G) Capacity Building Program, and will explore measures that can help “B-I-G” member countries, Singapore, and Timor-Leste “bounce back better” from the COVID-19 pandemic.

### III. Objectives

11. The tenth PACER Dialogue will feature policy options for safe, efficient, effective, and equitable vaccine delivery amid COVID-19. The objectives are to:

- promote a better understanding of global vaccine development and COVID-19 access strategies available for developing countries;
- share knowledge and lessons on what developing countries should consider in preparing for large scale COVID-19 vaccine distribution; and
- provide a platform for policy makers, development planners, and health practitioners to share knowledge and experience and collaboratively learn from each other.

12. At the end of the dialogue, a Policy Brief will be produced to summarize the policy options and recommendations discussed.

### IV. PACER Dialogue Background Paper, Structure and Timing

13. The PACER Dialogues are envisaged to help decision makers broaden their perspectives, appreciate the wider implications of critical policy choices, and identify concrete policy actions. During the open discussions, participants are requested to provide inputs, share analysis, country experiences and lessons on vaccine distribution policies and strategies used in similar pandemics.

14. A background paper will be circulated to all participants as advance reading. The indicative structure of the 1.5-hour (90 minute) PACER Dialogue is summarized in the attached program.

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TIME	DETAILS
10:30-10:35	<p><b>Tenth PACER Dialogue – Overview and Objectives</b>  <i>Moderator: Mr. Ramesh Subramaniam</i>  <i>Director General, Southeast Asia Department (SERD), Asian Development Bank (ADB)</i></p> <p>Moderator to deliver introductory remarks on the tenth PACER Dialogue context, objectives, and structure.</p>
10:35-11:15	<p><b>Supporting Access to and Efficient Delivery of COVID-19 Vaccines</b>  <i>Dr. Hannah Kettler, Director for Vaccine Financing and Partnership, PATH</i>  <i>Ms. Farzana Muhib, Asia Team Lead Vaccine Implementation, PATH</i>  <i>Dr. Huong Minh Vu, Regional Technical Advisor, Vaccine Implementation, PATH</i></p> <p>Presentation by a team of PATH experts on: (i) COVID-19 vaccine preparedness; (ii) global supply strategy and financing; (iii) COVID-19 epidemiology, and prioritization questions; and (iv) vaccine delivery. Recommendations and next steps in terms of assessing financing options, creating country demand scenarios and evaluating health system readiness.</p>
11:15-11:20	<p><b>Expert Reaction and Inputs</b>  <i>Dr. Eduardo P. Banzon, Principal Health Specialist, Health Sector Group, Sustainable Development and Climate Change Department, ADB</i></p> <p>Discussant to provide lessons, insights and perspectives on enhancing large scale vaccine distribution amid COVID-19 based on the experience of ADB working with countries in Asia and the Pacific.</p>
11:20-11:55	<p><b>Open Discussion and Questions</b>  <i>Moderator: Mr. Ramesh Subramaniam</i></p> <p>PACER Dialogue participants exchange information on vaccine distribution policies and strategies in an open discussion format.</p> <p>To enrich the PACER dialogue discussions, the moderator will request country delegations to provide inputs and share analysis, country experiences, and lessons on vaccine distribution policies and strategies used in similar outbreaks.</p>
11:55-12:00	<p><b>Synthesis and Summary</b>  <b>Closing Remarks</b>  <i>Mr. Ramesh Subramaniam, Director General, SERD, ADB</i></p> <p>Moderator summarizes the policy discussions, key recommendations, and closes the Dialogue.</p>