

COVAX

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COVAX Allocation Round 10 Vaccine Allocation Decision

IAVG Decision Meeting on 09 November 2021

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Background: Round 10 Supply and Demand

Background

Context for COVAX Allocation Round 10

Context for Round 10

1/5

For allocation of Pfizer USG doses, there are three key actions to enable successful delivery

The goals of this approach are to:

1. Improve country predictability of Pfizer supply, allowing for longer-term planning;
2. Improve ability to plan for syringe arrivals and overall supply management;
3. Provide mechanisms for supply smoothing as on-ground situation evolves over Q4.

1

Running ~120M of Q1 supply at least 8 weeks in advance

- In absence of other reliable supply for Q1, **these Pfizer doses were run alone.**
- 120M represents approximately 80% of available supply;
- Only prior (or pipeline) recipients of Pfizer will be eligible.

2

Retaining ~30M reserve to address change over time + smooth supply

- Reserve represents 3-weeks of supply, and will be run in early January;
- As possible, this supply will be run with other doses.
- Reserve will be used to:
 - ☐ Account for increases in absorption;
 - ☐ Provide pathway for new countries to receive doses;
 - ☐ (Potentially) As source of “pull forward” supply to offset Q4 doses that spill over.

3

Using updated inputs with validation checks

- CRD/Comms reached out to participants to update CCP inputs;
- CRD/TT engaged to support country CCP inputs and validation.

Background

Context for COVAX Allocation Round 10

Context for Round 10

2/5

Process to gather and review country intelligence (1/2)

- On 01 November 2021, the Pfizer TT + CRD members conducted a review of the CCP inputs ahead of the allocation of Q1 Pfizer volumes;
- This followed on **an additional week of outreach** to countries for inputs into the CCP, including direct communications to countries, briefings to country-facing staff, and dedicated sessions in the COVAX-wide participant briefings.
- The goal of the review was to ensure this long-horizon allocation could account for:
 - **Vaccine safety and idle doses** by ensuring allocations accounted for available UCC storage capacity and absorption rate month-on-month;
 - **Syringe availability**, by reducing the risk of supply-constrained devices (sent 4-6 weeks in advance of vaccine) would not sit idle in countries unable to take their full allocations.
 - **Country preferences / inputs**, by only overriding CCP values where a relevant programmatic interest prevailed.

Process to gather and review country intelligence (2/2)

- Due to this **additional week of outreach** to countries for inputs into their CCP, and to respect the 8-week advance notice to manufacturer and participants to prepare shipment of vaccines and syringes, a **pre-allocation** of January supply was conducted. This proposal includes this pre-allocation of 36.3M doses to 4 participants, that was recorded in the allocation portal with an ADMIN round.

Post algorithm run considerations

- After running the allocation algorithm and analyzing the output, the situation presented several countries, expected to be key consumers of Pfizer doses, with few or no allocated doses. This is because, once the algorithm has accounted for the caps and equity balance, the supply proved insufficient to serve all participants
- The non-allocation to some 'big consumer' countries would create a programmatic challenge: it would risk interrupting countries' Pfizer deployment programs, which will complicate delivery of larger volumes in future quarters. As Pfizer is the hardest vaccine to deliver, losing recipient countries would risk these doses not being able to find homes.
- In light of that, a decision was taken to pull forward a portion of the initially set-aside reserve (equivalent to around 15M doses) to allocate against to these countries. The 'pull forward' should be enough to keep these countries actively invested in delivering Pfizer, while retaining a meaningful amount in reserve. This was implemented as an admin round.¹

1. Admin rounds are occasionally needed to be executed in the WHO Allocation Portal. Administrative rounds are intended to address swift operational issues for a limited number of doses which must be quickly allocated to Participants due to a variety of reasons.

Post algorithm run consideration

- With the same logic, and following careful assessment by CRD and task team, **the allocation volumes for some participants were considered to be over-ambitious based on programmatic signals.**
- The recommendation for these was to reduce to the amounts indicated and shift those doses into the reserve. This would allow these countries to access more doses if they can signal progress against the gaps identified by early January, when the reserve will be allocated.

Background

Participant Scope – COVAX Allocation Round 10

Participant Scope

COVAX Facility Participants

- There are 89 Advance Market Commitment (AMC) and 73 Self Financing (SFP) participants to the COVAX Facility, for a total of 162 participants.
- There are 94 participants eligible for Pfizer USG vaccines, 87 AMC and 7 SFP participants.

Participant Allocation Preferences

- The JAT decided to ensure participants would not be assigned a vaccine marked as (highly) undesirable by removing this vaccine from the possible ones to be allocated to that participant.
- Participants have provided a voluntary monthly allocation maximum, as well as an ultra-cold chain vaccine allocation maximum through the CCP, and some have activated the delay toggle.
- All caps were thoroughly reviewed by a multi-disciplinary, multi-partner team.
- Since several participants have reached or are very close to reaching 20% COVAX coverage, the algorithm has automatically excluded them from this allocation round. To avoid programmatic interruptions, some of these participants have been allocated quantities equivalent to their monthly UCC cap. This choice was made because there is an expectation of additional supply from Pfizer to come from February 2022, allowing for new doses to be allocated against the following 2 months of Q1. As such, these doses only need to 'bridge' until then.

Participant Summary

Criteria	Participants (n)
Inclusion	
AMC	54
OP	3
CP	3
Team Europe	0
Total Participants Included	60
Exclusion	
20% population coverage (or requested) reached through COVAX (n=20)	• AMC: 13 • SFP: 7 (CP)
Voluntary Delay Toggle (n= 8)	• AMC: 3 • SFP: 2 (CP), 3 (TE)
No combination allowed (n=74)	• AMC: 19 • SFP: 18 (CP), 37 (OP)
I. Outside of USG-subsidized Pfizer earmark (No combination allowed)	• AMC: 1 • SFP: 18 (CP), 37 (OP)
II. Marked Pfizer as 'undesirable' or 'highly undesirable' in CCP	• AMC: 5 • SFP: 0
III. Refused Earlier Allocation of USG-subsidized Pfizer doses	• AMC: 6 • SFP: 0
IV. Did not clear Pfizer readiness checks	• AMC: 7 • SFP: 0
Total Participants Excluded	102

Background

COVAX Allocation Round 10 Supply

Round Supply Considerations

- COVAX Allocation Round 10 is dedicated to allocating Q1-2022 Pfizer vaccine made available to the COVAX Facility through a procurement facilitated by the USG.
- As mentioned, a pre-allocation was done to ensure January's early supply could be prepared and shipped to 4 participants.
- Furthermore, after the allocation algorithm was run, additional participants were added to the list of allocated countries in this round and some participants were allocated additional doses to reach their UCC caps. On the contrary, doses allocated to others were reduced due to limitations in absorptive capacity and need for reassessment closer to shipment.
- The JAT and IAVG may be called to allocate additional supply becoming available in Q4/2021.

Minimum Shipment Size

Product Name	Minimum Shipment Size (doses)
Pfizer BioNTech – Comirnaty (USG-facilitated)	• 1,170

Overview of November-December Available Supply¹

Product Name	Pre-Allocated	Allocated	Post-allocation additions	Post-allocation reductions	Total
Pfizer BioNTech – Comirnaty (USG-facilitated)	36,299,250	83,700,630	14,374,620	- 6,198,660	128,175,840

1. A total of 21,824,010 doses remain to be allocated. Therefore, the total Q1-2022 supply of Pfizer USG doses sums to 149,999,850 doses.

Background

Humanitarian Buffer

Proposed Allocation to the Humanitarian Buffer	
Product Name	Total Supply (doses)
-	-

Background to Proposed Allocation to the Humanitarian Buffer	
The R10 supply, being USG facilitated, is not eligible to be allocated to the Humanitarian Buffer.	

Background

Details of pre and post allocation

List of participants pre-allocated doses

Participant Name	Doses Pre-Allocated
Bangladesh	7,999,290
Pakistan	9,999,990
Philippines	9,999,990
Viet Nam	8,299,980
Total	36,299,250

Background

Details of pre and post allocation

List of participants post-allocated doses

Status	Participant Name	Doses Allocated in R10	One Month Cap	Proposed increase	Allocated + Increase (Total)
Increased R10 Amount	Ethiopia	310,050	499,590	189,540	499,590
	Kenya	310,050	1,898,910	1,588,860	1,898,910
	Rwanda	310,050	999,180	689,130	999,180
	Ghana	139,230	565,110	425,880	565,110
	Cabo Verde	100,620	-	200,070	300,690
Ex Novo	Angola	-	1,599,390	1,599,390	1,599,390
	Côte d'Ivoire	-	1,737,450	1,737,450	1,737,450
	Egypt	-	9,999,990	2,999,880	2,999,880
	Nigeria	-	8,999,640	2,999,880	2,999,880
	Togo	-	728,910	728,910	728,910
	Uganda	-	699,660	699,660	699,660
	Kosovo	-	515,970	515,970	515,970
Total				15,544,620	

Background

Details of pre and post allocation

List of participants for which a reduction in allocated doses is recommended

Participant Name	Participation Model	Total Allocated R10 (Admin + Full)	Comments from CRD/Pfizer TT	Suggested Alternative Value	Change
Sudan	AMC92	3,598,920	Recommended a reduction, given ongoing challenges. CRD and Pfizer TT suggested that the doses should go into the reserve and could come to Sudan if they open up again.	999,180	-2,599,740
Ukraine	AMC92	3,384,810	Flagged as big step jump, reporting strong vaccine hesitancy flags. Additional doses Pfizer doses expected through other sources of supply coming in Q1, which would fill UCC capacity – though the actual timing of this delivery is uncertain and could be delayed. Recommendation is to reduce with option to restore doses from reserve in January with better information.	999,180	-2,385,630
Niger	AMC92	1,413,360	Preference would be to reduce now and move to 700K (~50%), with balance to reserve. Country can be topped up when we have greater visibility on ability to receive.	699,660	-713,700
Mali	AMC92	1,199,250	Preference would be to reduce now, and move to 800K, with balance to reserve. Country can be topped up when we have greater visibility on ability to receive.	699,660	-499,590

Total - 6,198,660

R10 Proposal

R10 Allocation Outcome (1 of 3)

Participant name	WHO region	COVAX Participation model	Pre-allocated (doses)	Allocation (doses)	Post-allocation changes (doses)	TOTAL allocation (doses)
Angola	AFR	AMC92	-	-	1,599,390	1,599,390
Bangladesh	SEAR	AMC92	7,999,290	14,214,330	-	22,213,620
Benin	AFR	AMC92	-	278,460	-	278,460
Bolivia (Plurinational State of)	AMR	AMC92	-	310,050	-	310,050
Botswana	AFR	OPTIONAL	-	100,620	-	100,620
Burkina Faso	AFR	AMC92	-	333,450	-	333,450
Cabo Verde	AFR	AMC92	-	100,620	200,070	300,690
Cameroon	AFR	AMC92	-	449,280	-	449,280
Chad	AFR	AMC92	-	149,760	-	149,760
Congo	AFR	AMC92	-	259,740	-	259,740
Côte d'Ivoire	AFR	AMC92	-	-	1,737,450	1,737,450
Democratic Republic of the Congo	AFR	AMC92	-	1,499,940	-	1,499,940
Djibouti	EMR	AMC92	-	100,620	-	100,620
Egypt	EMR	AMC92	-	-	2,999,880	2,999,880
El Salvador	AMR	AMC92	-	310,050	-	310,050
Eswatini	AFR	AMC92	-	100,620	-	100,620
Ethiopia	AFR	AMC92	-	310,050	189,540	499,590
Gabon	AFR	COMMITTED	-	115,830	-	115,830
Ghana	AFR	AMC92	-	139,230	425,880	565,110
Guinea	AFR	AMC92	-	310,050	-	310,050
Guyana	AMR	AMC92	-	70,200	-	70,200

R10 Allocation Outcome (2 of 3)

Participant name	WHO region	COVAX Participation model	Pre-allocated (doses)	Allocation (doses)	Post-allocation changes (doses)	TOTAL allocation (doses)
Haiti	AMR	AMC92	-	179,010	-	179,010
Indonesia	SEAR	AMC92	-	18,599,490	-	18,599,490
Kenya	AFR	AMC92	-	310,050	1,588,860	1,898,910
Kosovo (in accordance with UN Security Council resolution 1244 (1999))	EUR	AMC92	-	-	515,970	515,970
Kyrgyzstan	EUR	AMC92	-	149,760	-	149,760
Lesotho	AFR	AMC92	-	100,620	-	100,620
Liberia	AFR	AMC92	-	310,050	-	310,050
Libya	EMR	OPTIONAL	-	705,510	-	705,510
Madagascar	AFR	AMC92	-	494,910	-	494,910
Malawi	AFR	AMC92	-	714,870	-	714,870
Maldives	SEAR	AMC92	-	100,620	-	100,620
Mali	AFR	AMC92	-	1,199,250	- 499,590	699,660
Mauritania	AFR	AMC92	-	100,620	-	100,620
Mauritius	AFR	COMMITTED	-	203,580	-	203,580
Morocco	EMR	AMC92	-	4,499,820	-	4,499,820
Namibia	AFR	COMMITTED	-	352,170	-	352,170
Nepal	SEAR	AMC92	-	664,560	-	664,560
Niger	AFR	AMC92	-	1,413,360	-713,700	699,660
Nigeria	AFR	AMC92	-	-	2,999,880	2,999,880
occupied Palestinian territory, including east Jerusalem	EMR	AMC92	-	299,520	-	299,520
Pakistan	EMR	AMC92	9,999,990	18,783,180	-	28,783,170

R10 Allocation Outcome (3 of 3)

Participant name	WHO region	COVAX Participation model	Pre-allocated (doses)	Allocation (doses)	Post-allocation changes (doses)	TOTAL allocation (doses)
Philippines	WPR	AMC92	9,999,990	310,050	-	10,310,040
Republic of Moldova	EUR	AMC92	-	100,620	-	100,620
Rwanda	AFR	AMC92	-	310,050	689,130	999,180
Senegal	AFR	AMC92	-	899,730	-	899,730
Seychelles	AFR	OPTIONAL	-	39,780	-	39,780
Sierra Leone	AFR	AMC92	-	299,520	-	299,520
Somalia	EMR	AMC92	-	310,050	-	310,050
Sri Lanka	SEAR	AMC92	-	4,127,760	-	4,127,760
Sudan	EMR	AMC92	-	3,598,920	-2,599,740	999,180
Tajikistan	EUR	AMC92	-	299,520	-	299,520
Timor-Leste	SEAR	AMC92	-	100,620	-	100,620
Togo	AFR	AMC92	-	-	728,910	728,910
Tunisia	EMR	AMC92	-	310,050	-	310,050
Uganda	AFR	AMC92	-	-	699,660	699,660
Ukraine	EUR	AMC92	-	3,384,810	-2,385,630	999,180
Uzbekistan	EUR	AMC92	-	310,050	-	310,050
Viet Nam	WPR	AMC92	8,299,980	310,050	-	8,610,030
Zambia	AFR	AMC92	-	655,200	-	655,200
		TOTALS	36,299,250	83,700,630	8,175,960	128,175,840

R10 Allocation Outcome – Descriptive statistics

Total
Participants

60

AMC92
participants

90%

Optional
purchase

5%

Committed
purchase

5%

Population-
weighted avg.
coverage in
round

2.99

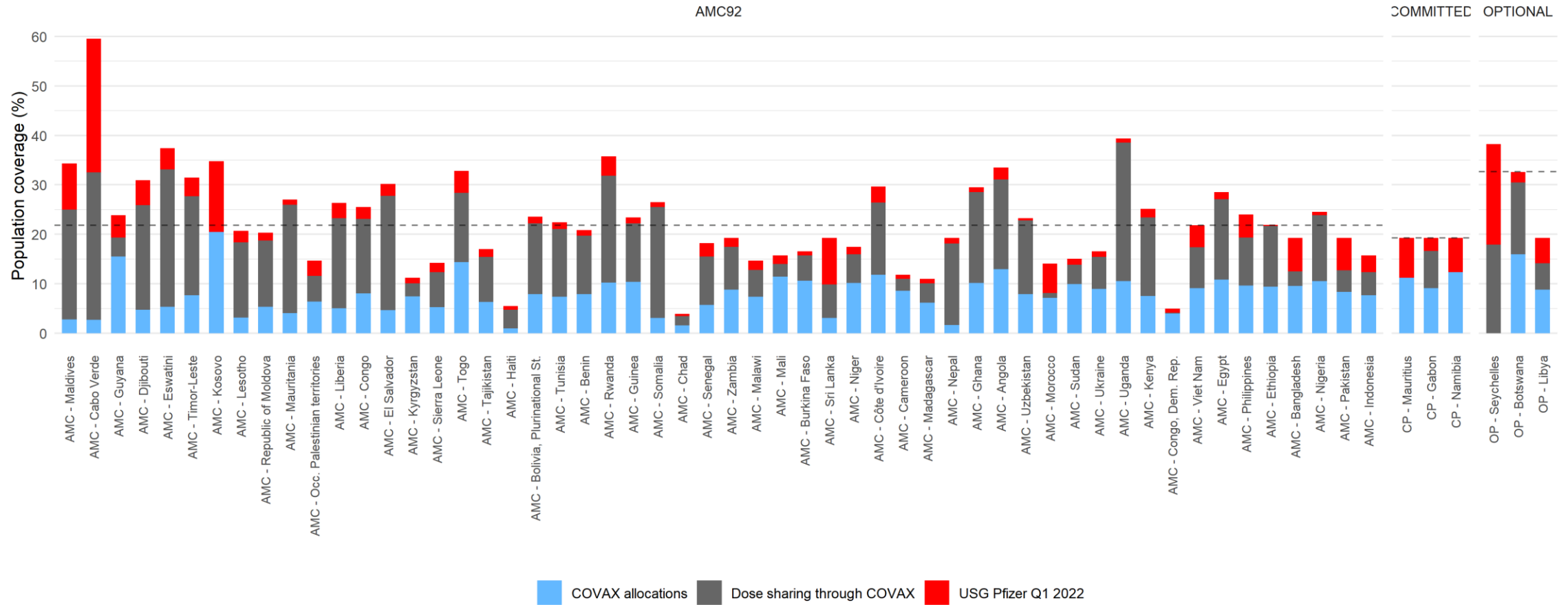
Population-
weighted avg.
coverage overall

20.0

	Round Coverage				Total Coverage			
Participation Model ▾	Avg. Coverage in Round ▾	Round Median ▾	Round Min ▾	Round Max ▾	Average ▾	Median ▾	Min ▾	Max ▾
AMC92 participants	3.22	1.77	0.22	27.04	22.66	21.84	3.94	59.52
Optional purchase	9.19	5.13	2.14	20.3	30.03	32.63	19.25	38.2
Committed purchase	5.85	6.93	2.6	8.03	19.25	19.25	19.25	19.25
OVERALL	3.65	2.01	0.22	27.04	22.86	21.3	3.94	59.52

Overall population coverage after Round 10 – Participants allocated doses in round 10

COVAX overall population coverage
Round 10 participants only, N = 60. Grouped by COVAX participation model. Last update: 8 November 2021

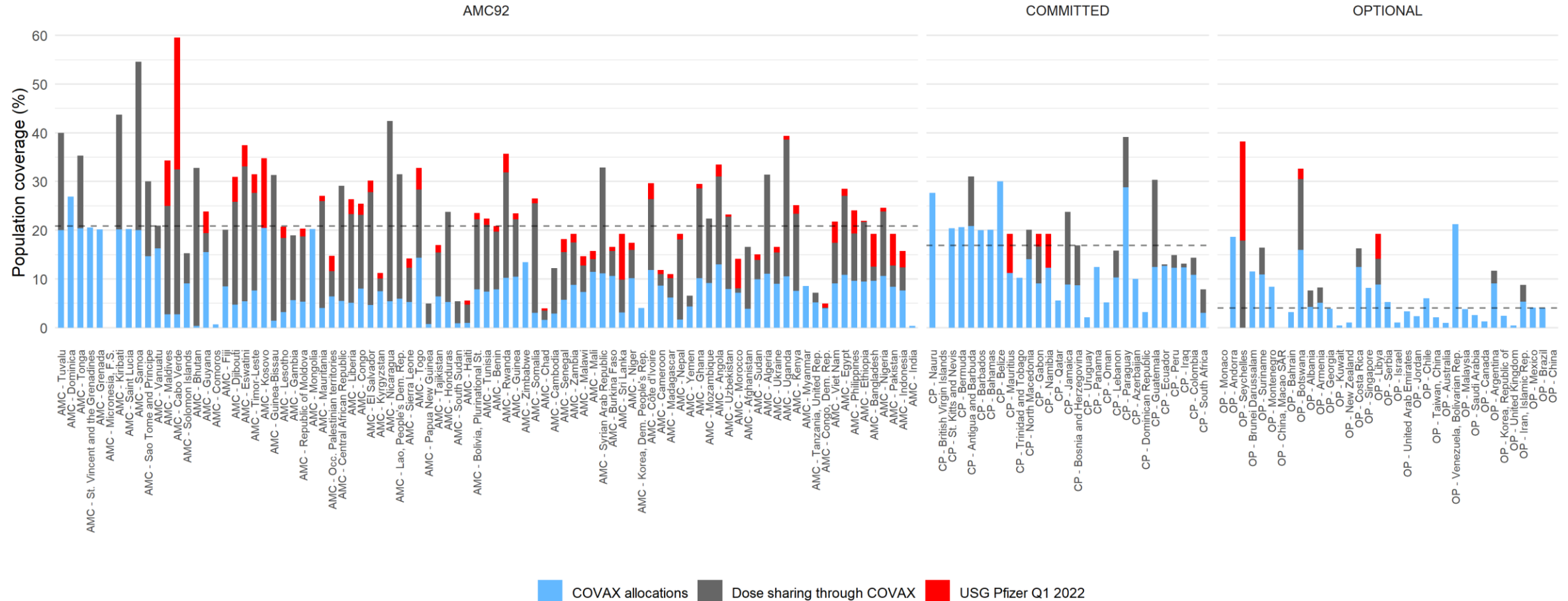


*Note: Participants listed from left to right in ascending order of population size. The dashed lines represents the median COVAX overall coverage across all participants who have ever received allocations through COVAX, where the median overall coverage across AMC participants is 21.84%, the median overall coverage across COMMITTED participants is 19.25%, and the median overall coverage across OPTIONAL participants is 32.63%. COVAX overall population coverage accounts only for doses allocated through COVAX allocations and donations distributed through COVAX.

Overall population coverage after Round 10 – All Participants Allocated

COVAX overall population coverage

N = 153. Grouped by COVAX participation model. Last update: 8 November 2021



*Note: Participants listed from left to right in ascending order of population size. The dashed lines represents the median COVAX overall coverage across all participants who have ever received allocations through COVAX, where the median overall coverage across AMC participants is 20.83%, the median overall coverage across COMMITTED participants is 16.86%, and the median overall coverage across OPTIONAL participants is 4.03%. COVAX overall population coverage accounts only for doses allocated through COVAX allocations and donations distributed through COVAX.

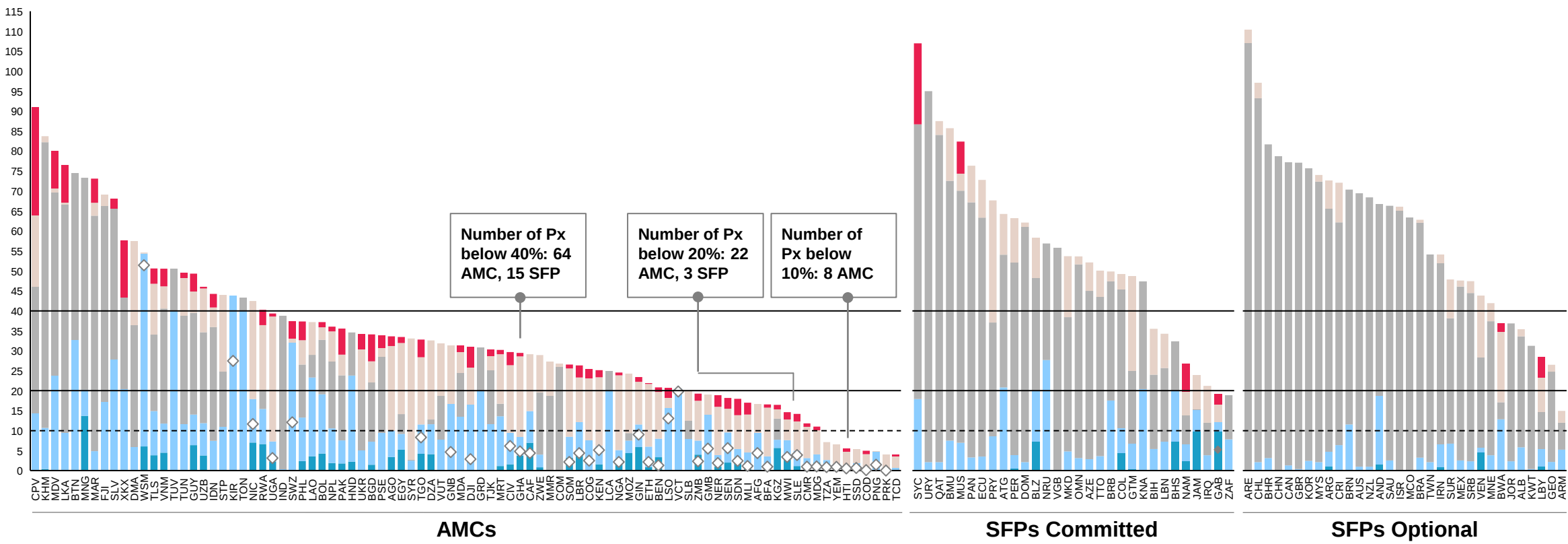
Total Allocations from COVAX and total population coverage¹

COVAX allocated, not shipped Fully vaccinated equivalent² COVAX Shipped courses (assumes 2 doses) COVAX shipped, last month Round 10

NOVEMBER 4TH DATA

Doses Allocated through COVAX (R1-10, donations, reallocations) vs. Total administered courses (n=150)

Proportion of population vaccinated, assumes all shipped doses administered, Sorted by coverage %



This data has been updated on November 4th, participants with a grey dot over the blue bar (shipped courses) may be facing absorption capacity issues, others appear to be using the doses shipped and beyond

1. Assumes 2 dose regimens, total coverage could be higher if 1 dose regimens are available 2. Total population coverage is represented by a grey bar when higher than allocations, and a grey dot if lower, for visualization

Distribution Proposal & Shipment Considerations

COVAX Allocation Round 10

Distribution Proposal

- The **median** cumulative coverage accounting for all COVAX allocation and donations through COVAX **for the 60 participants who received an allocation in Round 10 is 21.3%.**
- The **median** cumulative coverage **across all 153 participants who have ever received a COVAX allocation or donation through COVAX is 18.66%.**
- In alignment with the standard reallocation process, Participants will be notified that they are allotted a four-week period to clear all post-allocation preparedness checks following notification of the Round's outcome.
- Subsequent changes to Participants' total coverage from this Round resulting from the standard reallocation process will be communicated to the Participants upon execution. These modifications will also be visible to the IAVG in the Allocation Portal once completed.

Shipment Considerations

- Normally, to facilitate logistics planning, a prioritized shipping order is recommended for distribution of doses allocated in a Round. In previous rounds, a decision was taken to inform the sequencing of shipments based on participants' overall achieved coverage (from all source of supply) and their epidemiological situation. The JAT will provide this data to the Procurement Coordinator, as we have in the last rounds.
- The Joint Allocation Taskforce continues to work with the Procurement Coordinator and Procurement Agencies to account for the changing context in Facility Participants, particularly relating to absorptive capacity, upcoming shipments for donations, and additional doses coming from cost-sharing deals.
- The Facility recommends that, closer to the date of the planned shipment, participants' absorption capacity be assessed to ensure all the planned quantities can be used by participants within the vaccines' expiry dates.

Conclusion & Signatures

COVAX Allocation Round 10

Conclusion

On 09 November 2021, the IAVG validated the allocation amounts detailed in **Allocation Round Results** (slides 16-18) and outlined in the **Round 10 Output** from the Allocation Portal. The JAT has provided further information and details as requested by the IAVG during the discussion.

All Members of the IAVG were present at the decision-making meeting apart from three who excused themselves: Mr Christopher Maher; Dr Bruce G. Gellin; Doctor Dafrossa Cyrily Lyimo. No IAVG members expressed the need to make a declaration of interest statement at this time.

Next Steps

Process Step	Date
JAT sends R10 allocation proposal to IAVG	5 November 2021
IAVG Decision Meeting for R10	9 November 2021
WHO DDG sign-off on R10 allocation decision	9 November 2021
JAT notifies the Office of the COVAX Facility and the Procurement Coordinator	10 November 2021
Country communications dispatched for R10	10 November 2021
IAVG Pre-Reports for R10 finalized and published	19 November 2021

Signatures

Signature Assistant Director General, Access to Medicines and Health Products, WHO	Signature Managing Director, Office of the COVAX Facility, Gavi
provided via email	provided via email
Mariângela SIMÃO	Aurélia NGUYEN
On date: 5 November 2021	On date: 5 November 2021

IAVG Opinion

On the JAT Proposed Allocation

The IAVG considered the JAT's allocation proposal and is of the following opinion:

- The IAVG agreed with the allocation methodology for the COVAX Allocation Round 10, which was:
 - ❑ To run the allocation round at least eight-weeks in advance to improve country predictability of the Pfizer USG supply and to improve planning around syringe management and availability for the Pfizer product, which continues to be a challenge globally;
 - ❑ To retain a 'reserve' of Pfizer USG doses to allocate to Facility participants in early January, accounting for improvements in absorptive capacity and to provide a pathway for more participants to access the Pfizer product.
- The IAVG noted that, despite the limitations of the Pfizer USG supply's earmarking, the allocation still largely benefitted participants behind in coverage, while safeguarding the momentum achieved in others.
- The IAVG underlines the following concerns relating to this supply of Pfizer product and its allocation:
 - ❑ The IAVG inquired about the major limitation faced by Facility participants related to UCC and calls for continued efforts to increase UCC storage capacity across countries, thereby increasing the array of Facility participants who could receive the Pfizer product, of which the USG-facilitated doses continue to be a major source of supply for standard COVAX allocation rounds;
 - ❑ The IAVG raised the concern relating to indicating Participants as ineligible to receive Pfizer product if they had refused an allocation in the distant past, suggesting that this be reviewed on a case-by-case basis, as countries' opinions may change and capacity to handle the vaccine may improve;
 - ❑ The IAVG raised the concern relating to this deal's earmarking and encourages the JAT to continue offsetting this by allocating other products without earmarking to participants ineligible to receive from this deal, while noting the persisting dangers to overall equity posed by the earmarking of donated doses to the Facility;
 - ❑ Finally, the IAVG raised the general concern about the future supply of Pfizer product to the Facility, given that the funding for R10's Pfizer supply is provided to the Facility through an earmarked deal.

Annex 1

Overview of Dose Donations Accounted for Before Running R10

Donor	Product	Doses Donated	Recipient Participants (N)
Belgium	AstraZeneca – Vaxzevria	2,309,120	7
Canada	AstraZeneca – Vaxzevria	4,084,900	10
Canada	Moderna – mRNA-1273	4,290,580	3
Switzerland	AstraZeneca – Vaxzevria	660,000	6
Czechia	AstraZeneca – Vaxzevria	117,600	2
Germany	AstraZeneca – Vaxzevria	15,019,720	22
Germany	Pfizer BioNTech – Comirnaty	10,300,000	7
Denmark	AstraZeneca – Vaxzevria	1,144,320	11
Spain	AstraZeneca – Vaxzevria	10,233,880	14
Spain	Pfizer BioNTech – Comirnaty	1,000,350	1
Estonia	AstraZeneca – Vaxzevria	36,000	1
Finland	AstraZeneca – Vaxzevria	247,200	4
France	AstraZeneca – Vaxzevria	16,330,320	37
France	Pfizer BioNTech – Comirnaty	5,358,600	9
United Kingdom	AstraZeneca – Vaxzevria	6,223,680	15
Greece	AstraZeneca – Vaxzevria	520,800	2
China, Hong Kong SAR	AstraZeneca – Vaxzevria	619,900	1
Croatia	AstraZeneca – Vaxzevria	109,400	2
Iceland	AstraZeneca – Vaxzevria	68,120	8
Italy	AstraZeneca – Vaxzevria	10,015,180	13
Italy	Pfizer BioNTech – Comirnaty	8,815,954	5
Japan	AstraZeneca – Vaxzevria	11,263,170	14
Luxembourg	AstraZeneca – Vaxzevria	12,000	1
Luxembourg	Pfizer BioNTech – Comirnaty	100,000	1
Norway	AstraZeneca – Vaxzevria	1,536,740	13
Norway	Pfizer BioNTech – Comirnaty	88,000	1
New Zealand	AstraZeneca – Vaxzevria	919,200	8
European Commission	AstraZeneca – Vaxzevria	45,873,600	22
European Commission	Janssen - Ad26.COV 2-S	82,540,800	32
European Commission	Moderna – mRNA-1273	15,782,400	5
Portugal	AstraZeneca – Vaxzevria	298,700	1
Portugal	Pfizer BioNTech – Comirnaty	160,000	1
Sweden	AstraZeneca – Vaxzevria	3,252,800	18
United States of America	Janssen - Ad26.COV 2-S	37,444,950	49
United States of America	Moderna – mRNA-1273	56,937,000	23
United States of America	Pfizer BioNTech – Comirnaty	7,656,480	9
	TOTAL	361,371,464	

Overview of Allocations to Date (1/3)

Allocation round	Product name	WHO EUL date	Allocation approval date	Doses allocated	Doses Allocated Adjusted for Supply Shortages and Redeployments	Description
COVAX-1	Pfizer BioNTech – Comirnaty	30 Dec 2020	29 Jan 2021	1,200,420	1,200,420	Pfizer Feb-Mar 2021
COVAX-2	AstraZeneca – Vaxzevria	15 Feb 2021	23 Feb 2021, IAVG	75,996,000	73,696,800	AZ and SII-AZ Jan-May 2021
COVAX-2	SII – Covishield	15 Feb 2021		161,472,000	29,790,600	AZ and SII-AZ Jan-May 2021
COVAX-3	Pfizer BioNTech – Comirnaty	30 Dec 2021	15 Mar 2021, IAVG	14,109,030	14,109,030	Pfizer Apr-Jun 2021
COVAX-4	AstraZeneca – Vaxzevria	15 Feb 2021	8 June 2021	17,366,400	16,672,500	AZ to cover COVAX-2 SII shortage
COVAX-5	Pfizer BioNTech – Comirnaty	30 Dec 2021	15 July 2021, IAVG	72,190,170	68,536,120	Pfizer Jul-Sep 2021
COVAX-6	Sinopharm BIBP	07 May 2021	29 July 2021, IAVG	42,649,200	42,877,200	Sinovac and Sinopharm 2021
COVAX-6	Sinovac	01 Jun 2021		42,650,400	47,668,800	Sinovac and Sinopharm 2021
COVAX-7	AstraZeneca – Vaxzevria	30 Dec 2020	17 Sept 2021, IAVG	15,000,000	14,952,000	Oct 2021 Exceptional Round
COVAX-7	Janssen - Ad26.COV 2-S	15 Feb 2021		3,996,000	3,996,000	Oct 2021 Exceptional Round
COVAX-7	Moderna – mRNA-1273	12 March 2021		10,993,920	10,160,640	Oct 2021 Exceptional Round
COVAX-7	Pfizer BioNTech – Comirnaty	30 April 2021		45,615,960	43,342,650	Oct 2021 Exceptional Round
COVAX-7	Sinopharm BIBP	07 May 2021		326,400	326,400	Oct 2021 Exceptional Round

Overview of Allocations to Date (2/3)

Allocation round	Product name	WHO EUL date	Allocation approval date	Doses allocated	Doses Allocated Adjusted for Supply Shortages and Redeployments	Description
COVAX-8	AstraZeneca – Vaxzevria	15 Feb 2021	13 Oct 2021, IAVG	10,048,800	10,048,800	Nov-Dec 2021 and reallocations part A
COVAX-8	Janssen - Ad26.COV 2-S	15 Feb 2021		1,461,600	1,447,200	Nov-Dec 2021 and reallocations part A
COVAX-8	Moderna – mRNA-1273	12 March 2021		11,860,800	11,739,840	Nov-Dec 2021 and reallocations part A
COVAX-8	Pfizer BioNTech – Comirnaty	30 Dec 2020		46,461,870	45,841,770	Nov-Dec 2021 and reallocations part A
COVAX-8	Sinopharm BIBP	07 May 2021		4,173,600	2,786,400	Nov-Dec 2021 and reallocations part A
COVAX-9	AstraZeneca – Vaxzevria	15 Feb 2021	13 Oct 2021, IAVG	10,051,200	10,051,200	Nov-Dec 2021 and reallocations part B
COVAX-9	Janssen - Ad26.COV 2-S	15 Feb 2021		1,461,600	1,396,800	Nov-Dec 2021 and reallocations part B
COVAX-9	Moderna – mRNA-1273	12 March 2021		11,854,080	11,854,080	Nov-Dec 2021 and reallocations part B
COVAX-9	Pfizer BioNTech – Comirnaty	30 Dec 2020		36,398,700	35,566,970	Nov-Dec 2021 and reallocations part B
COVAX-9	Sinopharm BIBP	07 May 2021		4,161,600	3,488,400	Nov-Dec 2021 and reallocations part B
ADMIN-1	Pfizer BioNTech – Comirnaty	30 Dec 2020	23 Sept 2021	8,903,700	8,903,700	Previous USG Pfizer donations from DS-5
ADMIN-2	Pfizer BioNTech – Comirnaty	30 Dec 2020	28 Sept 2021	19,338,930	19,338,930	R5 Redistributed Doses
ADMIN-3	AstraZeneca – Vaxzevria	15 Feb 2021	8 Oct 2021	7,996,800	7,996,800	AZ Short Shelf Life

Overview of Allocations to Date (3/3)

Allocation round	Product name	WHO EUL date	Allocation approval date	Doses allocated	Doses Allocated Adjusted for Supply Shortages and Redeployments	Description
ADMIN-4	Sinopharm BIBP	07 May 2021	8 Oct 2021	10,730,400	10,730,400	Sinovac Option 1 - SFPs
ADMIN-4	Sinovac	01 Jun 2021	8 Oct 2021	4,039,400	4,039,400	Sinovac Option 1 - SFPs
ADMIN-5	Pfizer BioNTech – Comirnaty	30 Dec 2020	8 Oct 2021	1,167,660	1,167,660	OP Pfizer APA close out
ADMIN-6	Sinovac	01 Jun 2021	8 Oct 2021	714,000	714,000	SGP & BWA increase of Sinovac pro rata share
DOSE_SHARING	AstraZeneca – Vaxzevria	15 Feb 2021	Dose donations distributed as of 4 Nov 2021	130,896,350	130,896,350	Donations received and allocated to date
DOSE_SHARING	Janssen - Ad26.COV 2-S	15 Feb 2021		119,985,750	119,985,750	Donations received and allocated to date
DOSE_SHARING	Moderna – mRNA-1273	12 March 2021		77,009,980	77,009,980	Donations received and allocated to date
DOSE_SHARING	Pfizer BioNTech – Comirnaty	30 Dec 2020		33,479,384	33,479,384	Donations received and allocated to date
			TOTALS	1,055,762,104	915,812,974	

Annex 2

DS-33: First 6-week EU prospective donation allocation outcome (1 of 2)

Participant name	WHO region	COVAX Participation model	Janssen - Ad26.COV 2-S	AstraZeneca – Vaxzevria	Moderna – mRNA-1273	TOTAL allocation (doses)
Afghanistan	EMR	AMC92	1,497,600	-	-	1,497,600
Algeria	AFR	AMC92	5,320,800	5,491,200	-	10,812,000
Angola	AFR	AMC92	3,268,800	2,484,000	-	5,752,800
Benin	AFR	AMC92	396,000	420,000	-	816,000
Burkina Faso	AFR	AMC92	496,800	-	-	496,800
Central African Republic	AFR	AMC92	295,200	-	-	295,200
Chad	AFR	AMC92	144,000	-	-	144,000
Congo	AFR	AMC92	230,400	264,000	-	494,400
Côte d'Ivoire	AFR	AMC92	2,268,000	-	-	2,268,000
Djibouti	EMR	AMC92	50,400	-	-	50,400
Egypt	EMR	AMC92	10,159,200	-	-	10,159,200
Eswatini	AFR	AMC92	-	24,000	-	24,000
Ethiopia	AFR	AMC92	9,799,200	-	-	9,799,200
Ghana	AFR	AMC92	1,900,800	2,184,000	-	4,084,800
Guinea	AFR	AMC92	496,800	799,200	-	1,296,000
Guinea-Bissau	AFR	AMC92	-	103,200	-	103,200
Haiti	AMR	AMC92	57,600	60,000	-	117,600
Indonesia	SEAR	AMC92	-	7,430,400	-	7,430,400
Kenya	AFR	AMC92	4,305,600	3,753,600	-	8,059,200
Kyrgyzstan	EUR	AMC92	-	-	115,200	115,200
Lao People's Democratic Republic	WPR	AMC92	295,200	199,200	-	494,400

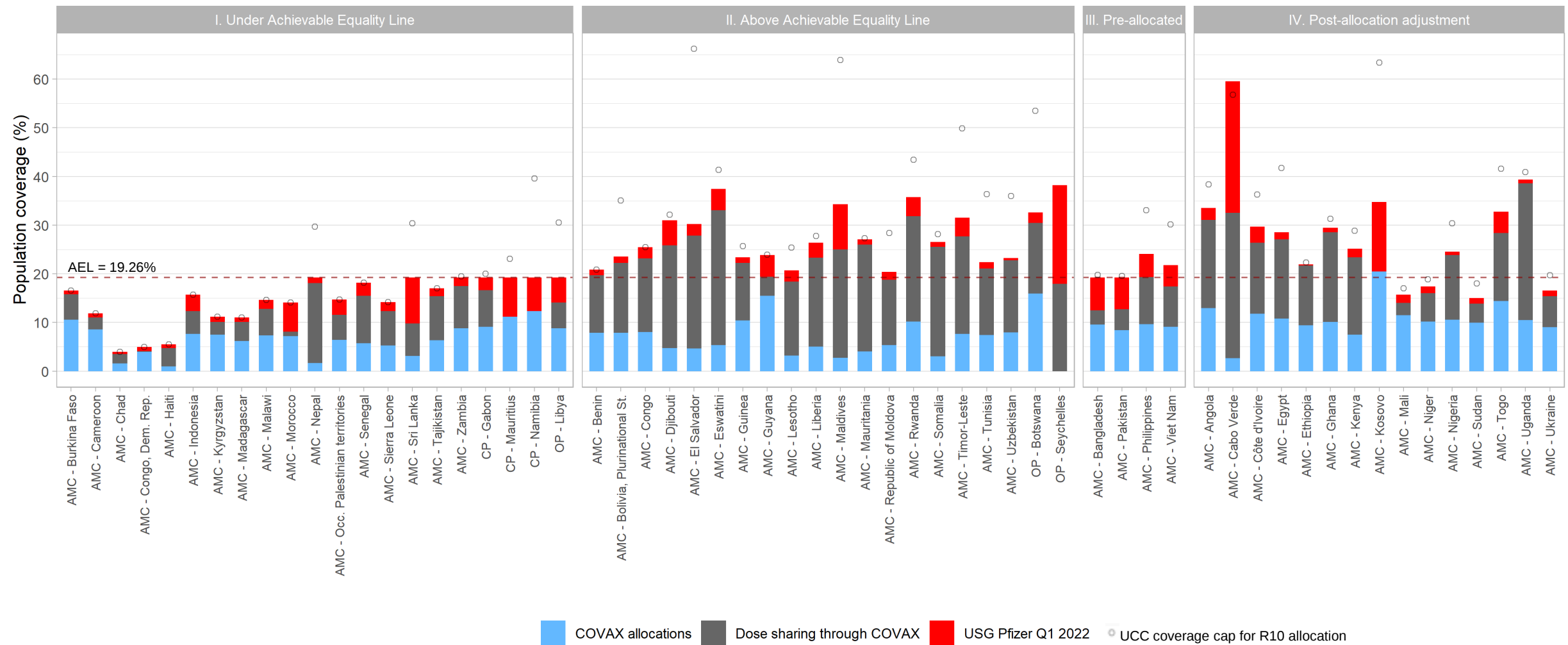
DS-33: First 6-week EU prospective donation allocation outcome (2 of 2)

Participant name	WHO region	COVAX Participation model	Janssen - Ad26.COV 2-S	AstraZeneca – Vaxzevria	Moderna – mRNA-1273	TOTAL allocation (doses)
Libya	EMR	OPTIONAL	-	76,800	-	76,800
Mali	AFR	AMC92	57,600	199,200	-	256,800
Mauritania	AFR	AMC92	144,000	-	-	144,000
Mozambique	AFR	AMC92	1,188,000	3,158,400	-	4,346,400
Nepal	SEAR	AMC92	2,188,800	-	-	2,188,800
Nicaragua	AMR	AMC92	-	1,447,200	-	1,447,200
Niger	AFR	AMC92	496,800	-	-	496,800
Nigeria	AFR	AMC92	19,994,400	-	4,953,600	24,948,000
Pakistan	EMR	AMC92	-	-	8,064,000	8,064,000
Philippines	WPR	AMC92	-	8,505,600	-	8,505,600
Republic of Moldova	EUR	AMC92	-	-	230,400	230,400
Rwanda	AFR	AMC92	-	1,272,000	-	1,272,000
Sao Tome and Principe	AFR	AMC92	21,600	-	-	21,600
Sierra Leone	AFR	AMC92	-	199,200	-	199,200
Somalia	EMR	AMC92	2,498,400	-	-	2,498,400
South Sudan	AFR	AMC92	93,600	-	-	93,600
Suriname	AMR	OPTIONAL	-	64,800	-	64,800
Syrian Arab Republic	EMR	AMC92	3,996,000	-	-	3,996,000
Togo	AFR	AMC92	640,800	-	-	640,800
Uganda	AFR	AMC92	9,964,800	-	-	9,964,800
Ukraine	EUR	AMC92	-	1,248,000	2,419,200	3,667,200
United Republic of Tanzania	AFR	AMC92	115,200	-	-	115,200
Uzbekistan	EUR	AMC92	-	6,489,600	-	6,489,600
Vanuatu	WPR	AMC92	14,400	-	-	14,400
Yemen	EMR	AMC92	144,000	-	-	144,000
		TOTALS	82,540,800	45,873,600	15,782,400	144,196,800

Backup

Overall population coverage after Round 10 grouped by major constraints

COVAX overall population coverage
Round 10 participants, N = 60. Last update: 8 November 2021



*Note: Participants listed from left to right in alphabetical order. The dashed line represents the main Achievable Equality Line (AEL) of 19.26% determined by the allocation algorithm. COVAX overall population coverage accounts only for doses allocated through COVAX allocations and donations distributed through COVAX.