





REPORT OF THE HIGH-LEVEL MINISTERIAL MEETING

Partnerships to Accelerate COVID-19 Vaccination in Africa

Theme: 'One Country, One Plan'



CONVENED BY:

AFRICAN UNION/AFRICA CENTRES FOR DISEASE CONTROL AND PREVENTION &

WORLD HEALTH ORGANIZATION



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'One Country, One Plan'

Background

At the February 2022 Assembly of AU Heads of State and Government (HoSG) Summit, the HoSG committed to exercise leadership to advance the vaccination agenda and urge the Africa Centres for Disease Control and Prevention (Africa CDC) to ensure greater coordination and collaboration to support Member States in achieving the goal of vaccinating at least 70% of the continent's population by year 2022. They further called for an innovative approach and increased political leadership to accelerate COVID-19 vaccination in Africa. Therefore, this high-level ministerial meeting on 10 March 2022; co-convened by the Africa CDC and WHO AFRO, was held virtually to discuss partnerships to accelerate COVID-19 vaccination in Africa in line with the call to action issued by the HoSG at the February Summit, under the theme "One Country, One Plan". This meeting was also a follow up to the meeting held on 20 December 2021 which discussed strategies to accelerate uptake of COVID-19 vaccines and moving vaccines from the ports to the arms of the African population.

Fast-tracking COVID-19 vaccine acquisition, delivery and uptake are critical to protecting lives and stimulating economic recovery. With only 15% of the African population reported to be fully vaccinated as of 16 March 2022, African Union (AU) Member States need to identify innovative and effective strategies to ensure more people are vaccinated; and the continent is safe from further disruptions by the pandemic. Although COVID-19 vaccine availability is no longer an obstacle these days, African countries should not relax on this transitional availability of vaccines. Despite the recent steady supply of COVID-19 vaccines in Africa, the continent has only 38% of its total vaccine requirement to vaccinate 70% of its population. In addition, the steady supply has not successfully translated to vaccine uptake; only 18 AU Member States have had 20% and above of their people fully vaccinated, 16 countries had less than 10% and 11 countries had covered less than 5% of their population.

Meeting Highlights

In his welcome remark, H.E. Prof. Moustafa Mijiyawa, Minister of Health of Republic of Togo, Chair of the Africa CDC Governing Board, and Chair of WHO Regional Committee for Africa, emphasized the importance of partnerships coordination to advance the COVID-19 vaccination agenda on the continent. The Africa CDC highlighted the need to coordinate efforts among partners and focus on what can be done collectively to address and solve the challenges presented by the COVID-19 crisis in line with the recent AU Assembly Decisions. The WHO reiterated the power of partnerships to accelerate delivery

of critical services to people. The opening session further highlighted the need to identify and address bottlenecks that are impeding vaccine delivery and uptake in terms of planning, governance, deployment, and community engagement. Identified challenges include low risk perception for COVID-19, false beliefs, and misinformation. Therefore, it is critical to address these misperceptions with strong communication strategies and community engagement.

The meeting further reaffirmed the effectiveness of Janssen (J&J) COVID-19 vaccine through a multinational vaccine effectiveness study from the continent as presented by J&J representative. Vaccine acceptance in AU Member States is high (~80%) and therefore need to be matched with delivery options within suboptimal healthcare systems. While hesitancy remains low at about 1 in 4 individuals, the largest contributor to low COVID-19 vaccine uptake is inconvenient access. Convenient and accessible human-centred vaccination approaches are needed. There is urgent need to close health service access gaps - human resources, service delivery, and financial resources. The meeting reiterated the need to ensure that once vaccines arrived at ports across the continent, they should reach beneficiaries starting with the most vulnerable, health care workers, frontline workers, the elderly, and people with underlying chronic medical conditions, COVID-19 vaccine delivery partnership is working to ensure that transaction costs for countries are lowered, and flexible funding are made available for operational delivery. For a more effective vaccine rollout, collaboration under the leadership of Ministries of Health and ensuring Ministries of Finance and the Presidencies are included is key. The vision of a new public health order for Africa and the granting of autonomy and authority to Africa CDC will help to plan, prepare, and respond more effectively and decisively to ongoing and future public health emergencies.

"While hesitancy remains low at about 1 in 4 individuals, the largest contributor to low COVID-19 vaccine uptake is inconvenient access" – Dr. Githinii Gitahi – AMREF.

The Ministers of Health session had presentations from Ghana, Mozambique, and Egypt and all emphasized the importance of strong partnerships to accelerate COVID-19 vaccination in Africa. Vaccine deployment in Member States has faced several challenges and these include storage of vaccines; technology challenges such as network connection; funds for deployment of vaccines; vaccine hesitancy; continuity of essential health services; and simultaneous outbreaks such as yellow fever and lassa fever. To scale up vaccination, there is critical need for strong leadership from Member States, dedicated governance structure; coordinated involvement of all partners in all phases of the vaccine delivery; resource mobilization; and strategic communication and information exchanges.

"I want to emphasize our interconnectedness and the fact that no one is safe until we are all safe. Making sure that vaccines are accessible both within and between countries is not only the right thing to do but also the smart thing to do" - Dr. Mohamed Hassany, Egypt.

The high-level meeting highlighted the importance of strategic engagement of youths on the continent to get to the 70% vaccination target by 2022 as set by WHO. The youths constitute more than 70% of African population, hence the need to engage them to receive the COVID-19 vaccines, mobilize people to go for their shots, and to provide surge capacity for vaccination. In this regard, the AU/Africa CDC has launched the AU COVID-19 Vaccination Bingwas Initiative. The initiative will align with the Member States coordinating structures.

The partners emphasized the critical role of leveraging their platform in Member States to drive the COVID-19 vaccination. Such platforms include The U.S. **President's Emergency Plan for AIDS Relief** (PEPFAR), **U.S.** President's **Malaria** Initiative (PMI), etc. One country, one plan approach is very important. Partnerships that is locally contextualised and tailored to the needs of each individual government is critical. There is need to do better in sharing information transparently on what each partner is doing with each other and particularly

with Governments. Making sure we know which partner is signed up to do what and that we are holding each other accountable is crucial. There is need for political leadership at national, sub-national, and community levels to increase coordination and foster greater synergies among partners around the one country vaccination plan with budget plans that have time bound targets.

Coordinated partnerships should support Member States to deploy extraordinary efforts to ensure that the marginalized and vulnerable communities benefit from the global vaccination effort. Risk communication and community engagement (RCCE) needs to be strengthened to build trust in vaccine programs and create demand for the vaccine. This requires mobilizing community leadership at all levels including civil society, religious leaders, and young influencers. Partners also have critical role to play in RCCE.

More resources are needed to strengthen vaccine cold chain logistics and meet other operational costs for vaccination. Partners are required to invest in cold chain and other operational needs to scale up vaccination programs. Countries should explore innovative financial strategies to support vaccinations operations. There is urgent need to build capacity of the health workforce. Prioritization of support for recruitment and deployment of additional health workers, particularly during mass vaccination campaign is very important. Coordinated partnership support is required to focus greater attention on the impact of the pandemic on routine vaccination programs and primary health care and take steps to address disruptions..

Consensus Emerging

- 1. Embed partnerships into in-country needs and country plans and tailored to the needs of each individual Governments.
- 2. There is need to do better in sharing information more transparently with each other and particularly with Governments.
- 3. Mutual accountability making sure we know who is signed up to do what and that we are holding each other accountable for doing it.
- 4. Convenient and accessible human-centred vaccination approaches are needed, including weekend and evening hours access to vaccination centres.
- 5. New approaches are needed to encourage high-risk groups to seek vaccination and ensure they have access to it.
- 6. Leveraging partners platform in Member States to accelerate COVID-19 vaccination. Such platforms include The U.S. **President's Emergency Plan for AIDS Relief** (PEPFAR) and **U.S.** President's **Malaria** Initiative (PMI).
- 7. There is need to integrate COVID-19 vaccination services into existing routine essential health services and think increasingly about how integration becomes the norm and not an exception.
- 8. Strategic engagement of youths (constitute ~70% of African population) on the continent to get to the 70% vaccination target by 2022 as set by WHO.

Action Points

It was agreed to have the high-level ministerial meeting every three months until decided otherwise.

ANNEX

Attendance

The meeting had approximately over 190 participants and was attended by Ministers of Health and/or their representatives as well as partners who are engaged in supporting AU Member States with vaccine delivery. These included Africa CDC, WHO AFRO, WHO EMRO, AMREF, UNICEF, World Bank, PEPFAR, The Gavi Alliance, GIZ, US CDC, USAID, and a whole lot of other partners.

AGENDA

African Union, Africa CDC and WHO AFRO co-convene high level Ministerial Meeting on COVID-19

'Partnerships to Accelerate COVID-19 Vaccination in Africa'

Theme: 'One Country, One Plan'

Time	Activity	Speaker	Chair		
Session 1: Opening					
15:00-15:05	Welcome Remarks	H.E Prof. Moustafa Mijiyawa, Chair of Africa CDC Governing Board and Chair of WHO Regional Committee for Africa	Dr John Nkengasong		
15:05 -15:10	WHO Remarks	Dr. Matshidiso Moeti, Regional Director WHO AFRO	_		
		Dr. Rana Hajjeh, Director of Program Management, WHO EMRO			
15:10-15:15	Objectives of the meeting	Dr. John Nkengasong, Director Africa Centres for Disease Control and Prevention	_		
15:15- 15:25	Update on Johnson & Johnson Vaccine Effectiveness from Africa	Dr Carlos Castillejos	_		

Session 2: Keynote Presentations					
15:25-15:40	Strategies to increase uptake of COVID-19 Vaccines in AU Member States	Dr Githinji Gitahi - AMREF	Dr Matshidiso Moeti		
15:40-15:55	Update on COVID-19 vaccine delivery partnerships and coordination	Dr Ted Chaiban – COVID-19 Vaccine Delivery Partnership	_		
15:55-16:15	Discussion	All			

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Time	Activity	Speaker	Chair		
Session 3: Moderated Session on Country Experiences in Partner Engagement and Challenges in Vaccine Delivery					
16:15 – 17:00	H.E. Kwaku Agyeman- Manu, Ghana	_ _ Ministers of Health	Dulaha		
	Dr. Mohamed Hassany, Egypt		Dr John Nkengasong and Dr Ayoade		
	Dr. Ivan Manhica, Mozambique		Olatunbosun- Alakija		
	Discussion	All			
	ccination in AU Member St UNICEF	oordinating Partners Efforts ates Ms Catherine Russell	Dr Tajudeen Raji		
	World Bank	Dr Dena Ringold	& Dr Benido		
	PEPFAR	Dr. Mamadi Yilla	——— Impouma		
	GAVI	Mr Alex de Jonquieres			
	USAID	Mr Jeremy Konyndyk			
	Discussion	All			
Closing					
17:46 – 18:00	Summary, next steps and closing		Dr Moeti and Dr Nkengasong		

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