

## Update on COVID-19 vaccinations – broadcast to all IRMCT staff

8 March 2021

As the COVID-19 pandemic continues to affect countries and communities around the world, vaccination offers hope that the pandemic will abate and restrictions can begin to be relaxed. The UN is keenly interested in ensuring that its staff and their eligible dependents have access to vaccines, and the Secretary-General has requested its Member States to include UN personnel serving within their borders in their respective national vaccination campaigns. Where this is not possible, the UN is taking a coordinated approach to facilitating access to vaccines. With vaccine becoming available, even if still in short supply, work has progressed well to ensure readiness for eventual UN vaccination.

### **UN Vaccination efforts**

To aid the UN System-wide COVID-19 vaccination effort, a **Vaccine Deployment Working Group** has been established. Please find attached the **Vaccination Framework Document**, which captures the purpose, scope and a high-level overview of the vaccination effort. In addition, please note the **Vaccination FAQ**, attached here as well. You are strongly encouraged to read these documents, as they contain answers to questions you might have. Both documents are available on a **dedicated vaccination page on iSeek**, <https://www.un.org/en/coronavirus/vaccination>.

Answers to specific questions about time between vaccine dosages and types of vaccines can be found in this instructional WHO “science in 5” video:

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/media-resources/science-in-5/episode-26---vaccine-dosage>

The Vaccine Development Working Group is developing a comprehensive vaccine deployment roadmap, taking into account Member State responses to the Secretary-General’s request that UN personnel serving within their borders be included in their respective national vaccination campaigns, where possible. The Working Group has finalized its initial list of priority countries, with the intention to deliver a limited number of UN-sourced vaccine doses to select high-priority countries as early as the end of the first quarter and beginning of the second quarter this year. Priority is assigned on the basis of a number of parameters, being access to local healthcare, the DSS security level, UN medevac rate, ISCS mobility and hardship level, UN case rate, and the country’s human development index score. Please see the attached **UN COVID-19 Country Prioritization Model** for more information. The Working Group has confirmed that eventually staff and dependents in all countries will be addressed, and that actual allotment is dependent not just on priority but also on ability to receive and distribute locally.

In addition, vaccines will be prioritized on the basis of risks posed by occupational group, as per the attached **UN COVID-19 Vaccine Occupational Risk Groups Prioritization**.

Critical to the success of the vaccination effort will be the setup of cross-functional vaccine deployment teams at the country level, led by **Local Vaccine Deployment Coordinators**. In the case of Tanzania, this role has been assigned to UNICEF. The Local Vaccine Deployment Coordinators will be responsible for the rollout of the vaccination campaign and administration of vaccines to eligible

recipients across all UN entities within their respective Country Teams. Necessary guidance and support will be provided by the Vaccine Deployment Working Group at all stages of the effort.

### **Update on vaccination efforts in Mechanism duty stations**

#### **Tanzania**

No government vaccination campaign is envisaged in the foreseeable future. Furthermore, Tanzania is also not part of the initial list of prioritized countries established by the UN's Vaccine Deployment Working Group. In view of the specific situation in Tanzania however, the Resident Coordinator continues to lobby the UNHQ Working Group for inclusion of Tanzania on the list of priority countries. No specific timeline has yet been provided with regard to availability of vaccines through this UN effort in Tanzania. The UNCT is organizing a webinar on this topic on 16 March.

#### **Rwanda**

Rwanda has acquired vaccines through international partnerships and the African Union's medical supplies platform, and has received its first delivery through COVAX<sup>1</sup>. Rwanda commenced vaccinating on 14 February 2021 and has a vaccination plan ready, with infrastructure, protocols and personnel in place, and reports that 210,000 people have received vaccines. Rwanda is including diplomats in its national vaccination programme but hasn't yet confirmed whether UN staff and dependents will be included. No specific timeline has yet been provided with regard to availability of vaccines for UN staff and dependents in Rwanda. The UN Country Team is collecting UN staff members', and dependents' data. This will enable more focused interaction with Rwandan authorities regarding the timing and prioritization of vaccination of UN personnel.

#### **Bosnia and Herzegovina**

The Federation of Bosnia and Herzegovina has acquired more than 1.2 million doses through COVAX and a further 892,000 doses in cooperation with the European Union's (EU) vaccine program. Delivery of these vaccines is expected to take place by the end of March. The UN Country Team in FBiH is closely monitoring developments. While FBiH has indicated a willingness to include UN Personnel and their dependents in its vaccination's programs and requested the lists of UN personnel for prioritized vaccinations based on WHO instructions, the country hasn't yet formally responded positively to the SG's request to include UN staff and dependents. Timelines for vaccination of UN staff and dependents are not available at this stage.

#### **The Netherlands**

The Netherlands commenced its vaccination campaign in early January 2021 and has so far given approximately 1,600,000 doses according to a national schedule which prioritizes vulnerable groups and medical professionals. Dutch authorities have repeatedly confirmed that staff of International Organizations and their dependents will be included in the national vaccination efforts. Staff are therefore very strongly encouraged to ensure their contact details are up to date with the Visa and Entitlement Unit, and to be registered with a General Practitioner ("huisarts").

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<sup>1</sup> COVAX is the vaccines pillar of the Access to COVID-19 Tools (ACT) Accelerator. The ACT Accelerator is a global collaboration to accelerate the development, production, and equitable access to COVID-19 tests, treatments, and vaccines. COVAX is co-led by Gavi, the Coalition for Epidemic Preparedness Innovations (CEPI) and WHO. Its aim is to accelerate the development and manufacture of COVID-19 vaccines, and to guarantee fair and equitable access for every country in the world.

The current timeline indicates that vaccination of people under the age of 60 who do not fall in a specific risk category will commence around May of this year, from old to young. Pending delivery of vaccines, the Government anticipates that all adults who wish to be vaccinated can receive at least their first shot by July this year. Please see this link for further details about the order of vaccination in the Netherlands: <https://www.government.nl/topics/coronavirus-covid-19/dutch-vaccination-programme/order-of-vaccination-against-coronavirus>.

Once a person has received a personalized invitation letter from the RIVM to be vaccinated they can make an appointment online (with DigiD only), or by telephone. Invitation letters are written in Dutch only. The Ministry has therefore provided the attached courtesy English translation of the standard letter. To the RIVM letter, a number of annexes - including a health screening form - will be attached. These annexes are currently only available in Dutch. The Ministry will strive to make translated documents available.

#### Cost of COVID-19 vaccinations

Vaccinations offered through national vaccination campaigns may, depending on the policies of the country concerned, be free of charge. This will be the case, for example, in the Netherlands. Where vaccines will be provided by the UN, these will be free of charge as well. Cigna has confirmed that if vaccines that are recommended by the local health authorities and/or the WHO cannot be obtained free of charge as part of local government health systems, the UN Worldwide Plan and the UN Medical Insurance Plan will fully cover COVID-19 vaccination.

We will keep you informed of any developments.

#### Attachments:

- Vaccination Framework Document
- Vaccination FAQ
- UN COVID-19 Country Prioritization Model
- UN COVID-19 Vaccine Occupational Risk Groups Prioritization
- Courtesy translation of the RIVM vaccination invitation letter