COVID-19 has, undeniably, devastated the global economy, resulted in the loss of millions of lives, and immensely interrupted people’s ways of living across the world. IMF estimates a collapse in economic growth in many African countries due to a decline in key sectors such as tourism as a result of travel restrictions and public health measures especially lockdowns. Reopening Africa’s economy relies on substantial control of the COVID-19 pandemic.

Control of the pandemic depends on a combination of personal and collective public health measures, strengthening of health systems and attaining COVID-19 vaccination targets. The Africa Centres for Disease Control and Prevention sets this target at 60%. However, Africa is currently projected to reach its target in 2023; the rest of the world will reach 60-80% in 2022 (U.S., Canada, and some European countries projected to reach their targets by December 2021).

Amref Health Africa is cognizant of the inequalities exacerbated by the distribution of vaccines globally and the disadvantage that low- and middle-income countries (LMICs) are likely to face. Equitable access to the COVID-19 vaccine is far-fetched unless issues of availability, accessibility, and affordability are addressed. Pandemics are global in nature; requiring a global approach, guaranteeing that the COVID-19 pandemic is no longer a global threat. It is our global responsibility to ensure COVID-19 vaccines reach the arms of everyone, irrespective of their geography, gender, socioeconomic status and so on.

**The Current Situation**

Per WHO, almost a billion vaccines had been administered globally as of 27th April 2021. However, African countries have only received approximately 36 million, representing only 2% of the vaccines. Of the 36 million, only 41% have been administered. Majority of African countries will rely on the COVAX facility which is grappling with limited stocks and supply bottlenecks fuelled by vaccine nationalism. Besides, while COVAX is a major boost to Africa’s vaccination efforts, it only sets out to vaccinate 20% of countries’ populations. Doses acquired through COVAX as well as those procured through the African Union’s African Vaccine Acquisition Task Team (AVATT), are still insufficient to reach the estimated 60% vaccination target.

Current strides for COVID Vaccine manufacturing by African countries, through coordination of the African Union and Africa Centres for Disease Control and Prevention (Africa CDC) is laudable. While only five countries in Africa have demonstrated capacity to manufacture vaccines (Egypt, Morocco, Senegal, South Africa and Tunisia) the memorandum of understanding signed with the Coalition for Epidemic Preparedness Innovations (CEPI), as well as with development funding institutions are great steps towards boosting vaccine manufacturing in Africa. The outcomes of these agreements will provide vaccine security for this and future pandemics. In the immediate period, we must guarantee equitable access to vaccines and quality vaccination services for the current pandemic.

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1 [https://covid19.who.int](https://covid19.who.int)
2 [https://africacdc.org/covid-19-vaccination/](https://africacdc.org/covid-19-vaccination/)
Our Asks

Amref Health Africa, therefore, urges as follows:

**African governments and policy-makers**

i. Increase investments in health research and development (R&D) particularly in the area of capacity strengthening of health researchers, innovators and institutions by ring fencing R&D in budget allocations, and support creation of manufacturing hubs under the leadership of Africa CDC.

ii. Provide an enabling policy and legal environment to harmonize and improve efficiency of regulatory reviews and approval of health technologies and medical products across Africa.

iii. Engage Civil Society to develop people-centred country prioritization plans to guarantee in-country equity in vaccine access and availability to all citizens including hard to reach populations. Plans must include demand generation to drive vaccine uptake.

iv. Support calls, led by India and South Africa, for temporary waiver of intellectual property rights of pharmaceutical companies for COVID-19 technologies/commodities.

**Vaccine manufacturers / pharmaceutical corporations**

i. Increase availability of vaccines to low- and middle-income countries at affordable subsidized costs.

ii. Consider waivers or subsidies of Intellectual Property protections for COVID-19 technologies.

**Financing institutions (funding facilities, foundations, philanthropists)**

i. Ring fence financing for Africa’s vaccine manufacturing.

ii. Consider implementing holistic financing models which include R&D, manufacturing as well as build the capacity for health systems to deliver quality vaccination services.

**Development partners, non-governmental organisations/civil society**

i. Advocate for global vaccine solidarity by supporting policy reforms and engagements to promote vaccine equity for the achievement of herd immunity, leaving no one behind.

ii. Demystify myths and misconceptions fuelling vaccine hesitancy.

iii. Support calls, led by India and South Africa, for waiver of intellectual property protections for COVID-19 technologies/commodities.

**Our commitment**

Amref Health Africa commits to use its resources including its programmatic footprint in over 30 countries and its community trust capital to work tirelessly at the intersection of communities, local, national governments as well as with Global and Regional partners. Advocating for equity, strengthening primary healthcare for continued delivery of COVID-19 Tools and continuity of essential health services; thereby generating demand through effective and safe community engagement.

For more information on this statement and Amref Health Africa’s work, visit [www.amref.org](http://www.amref.org) or contact our Global Communications Director via email; [Elizabeth.Ntonjira@Amref.org](mailto:Elizabeth.Ntonjira@Amref.org)