

11<sup>th</sup> APAC Annual Conference

# UHC and the COVID-19 pandemic:

## Support for Covid-19 vaccines and medicines in Asia

Dr Patrick Osewe

Chief, Health Sector Group

Sustainable Development and Climate Change Department

ADB



# Presentation Outline



1. Progress on universal health coverage in Asia
2. ADB's 10-year health sector strategic directions
3. ADB's pandemic responses:
  - Vaccine procurement
  - Delivering vaccines
  - COVID-19 therapeutics
4. ADB's future directions for COVID-19 support



ADB 2<sup>nd</sup> Urban Primary Health Care Project Bangladesh

# Progress on Universal Health Coverage in Asia



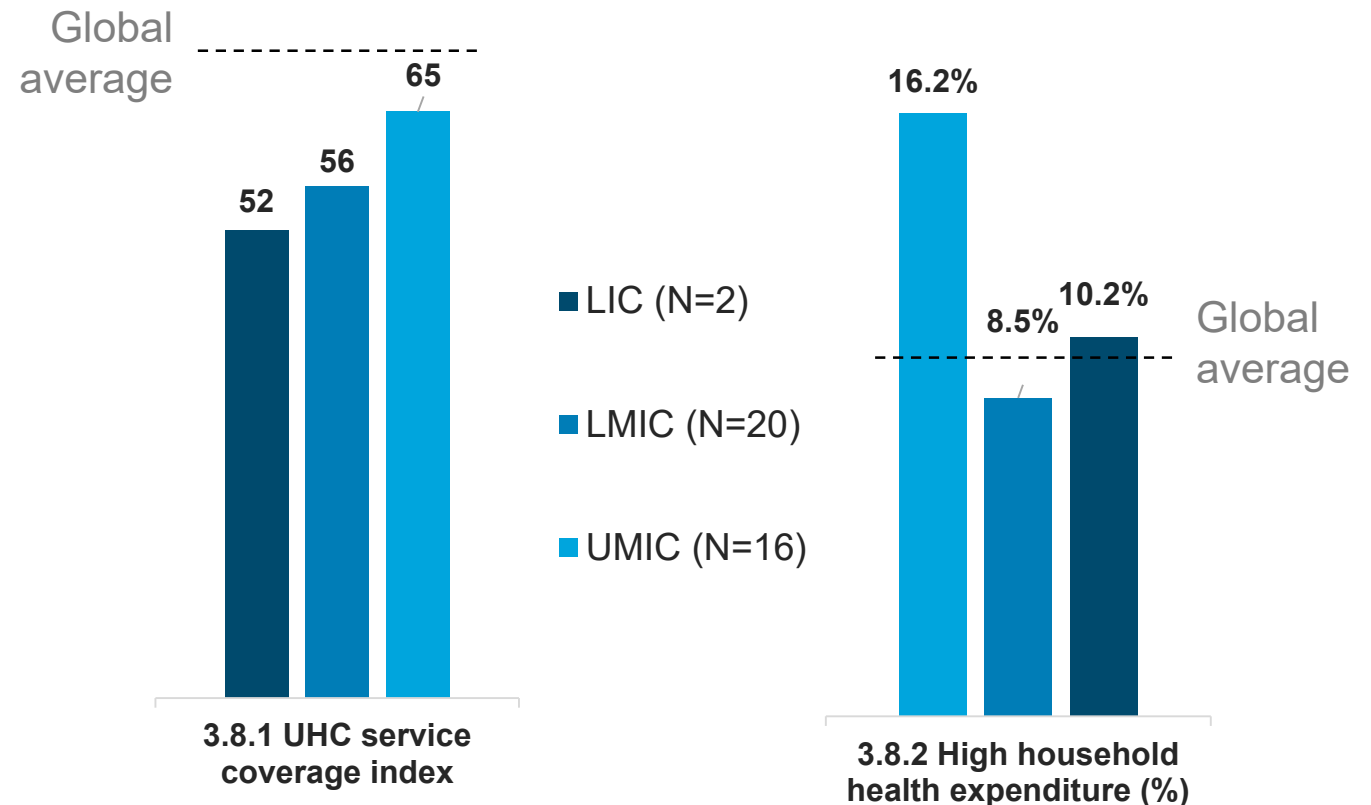
# 1.1 Asia-Pacific: progress towards Universal Health Coverage up to 2019

In 2019, developing Asia-Pacific had **variable progress** on the Sustainable Development Goal (SDG) 3 UHC indicators

- **Service coverage index:** countries performed below the global average across income groups
- **Out-of-pocket spending:** upper middle-income economies (UMIC) had a high proportion of households facing significant out-of-pocket expenses

## SDG 3: UHC indicators, 2019

ADB Asia Pacific Countries with Operations<sup>1</sup>



<sup>1</sup> Chart excludes two high income small island countries (Nauru and Palau). Data: WHO (2021), IHME (2019). High household exp. measured at 10% threshold.

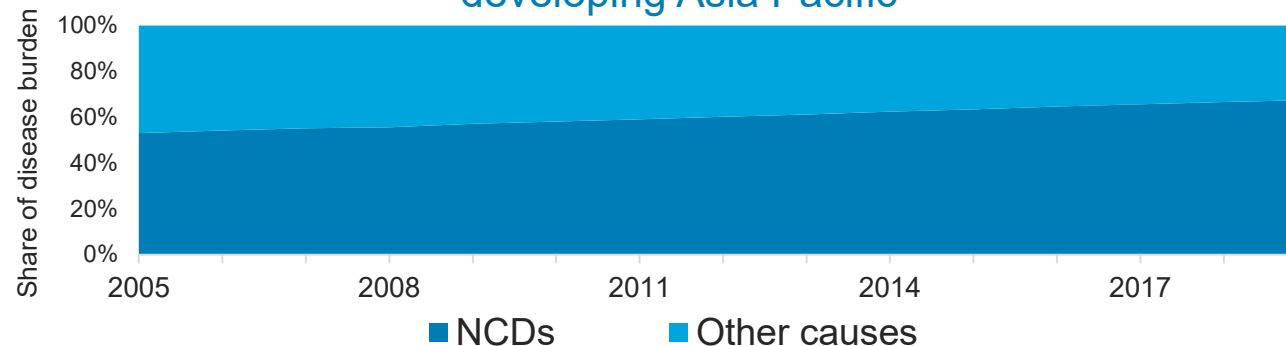
# 1.2 Challenges for UHC in Asia



## Health systems in Asia face multiple challenges

- **Epidemics/pandemics** lead to disruption in health supply and demand, workforce burnout, and high economic cost
- **Triple burden of disease** – unfinished agenda of maternal and child health, rise of non-communicable diseases, and trauma and road injuries
- **Stress on human health from climate change**
- **Fiscal pressure on the social sector** and increased demand for higher quality healthcare
- Rapid **urbanization** and **demographic shifts**

Rising burden of noncommunicable diseases in developing Asia Pacific



<sup>1</sup> Chart excludes two high income small island countries (Nauru and Palau). Data: WHO (2021), IHME (2019). High household exp. measured at 10% threshold.

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# ADB's 10-year health sector Strategic Directions



## 2. ADB's Approach to Accelerate Progress towards UHC

**Key trends:** Provide long-term strategic direction, guide knowledge activities, input in DMC engagement via CPS, influence multi-sectoral



I. **Rapid urbanization alongside climate change**



II. **Demographic trends**, especially aging



III. **Decentralization and regionalization** (e.g., around health security)



IV. **Digitalization of society and processes**

**Focal areas:** Guide skills-building and staffing, influence pipeline creation: SOV/NSO, generate flagship projects in DMCs



I. **Governance, policy and public goods:** regulation, legislation, and stewardship



II. **Architecture:** infrastructure, data systems and supply chains



III. **Financing and incentives:** public - and private - led



IV. **Workforce:** clinical, technical and managerial - link with OP1

**Vision:** Provide financing and knowledge products to advance universal health coverage in the Asia Pacific

### Universal Health Coverage Results

- Universal access to high - quality services
- Impoverishment due to medical payments eliminated

**Cross-cutting priorities:** Address programming priorities and enhance projects' development effectiveness

Gender equality across all domains

Climate change mitigation and adaptation

Pandemic preparedness

# ADB's pandemic response:

## Vaccine procurement





# 3.1 Vaccine procurement: Asia Pacific Vaccine Access Facility (APVAX)

28 Feb 2022



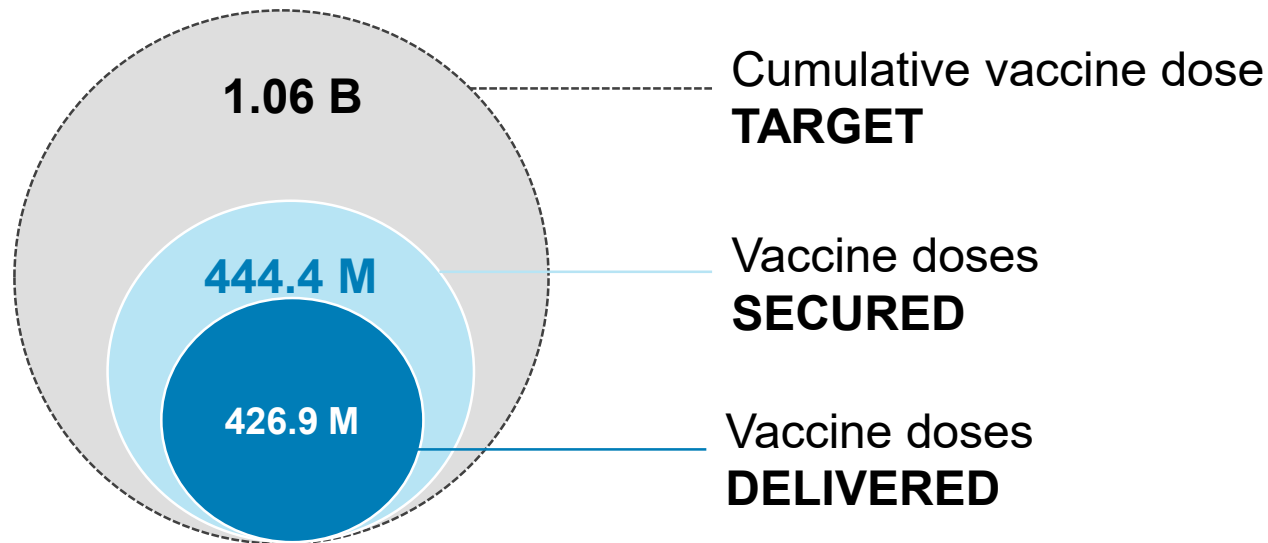
14 approved projects in 17 Developing Member Countries

Total approved financing  
(incl co-financing, counterpart financing)

\$ 6.38 B

**ADB financing approved**

**\$ 4.63 B**



\* 17 DMCs includes 4 DMCs in Pacific under a regional APVAX project (Samoa, Tonga, Tuvalu, Vanuatu)

## 3.2 Forward looking: Next Generation vaccines



### Current generation of vaccines

- LESS protection against infection due to Omicron – ongoing spread even in highly vaccinated populations
- GOOD protection against hospitalization and death with BOOSTERS
- BUT...protection is LIVED
- 3<sup>rd</sup> dose (booster) immunity seems to wane rapidly

### Next-generation vaccines

- Better and longer lasting protection against variants
- Easier to administer
- Easier to store

Innovation	Benefit	Stage of development
Pan-coronavirus vaccines	Protection against all variants (and new coronaviruses) ? Longer protection	Vaccines that target parts of the virus that don't change Pre-clinical to Phase I
New ingredients (adjuvant)	Stronger immune response ? Longer protection	Valneva, Medigen (Phase III)
Oral vaccines	Easy to administer	Vaxart (Phase II)
Intranasal vaccines	Easy to administer Stop transmission	16 candidates from Phase I - III
Room temperature vaccines	Easier to store and deliver especially to remote places	Akston Biosciences (Phase II/III) Dry powder vaccines (Ziccum – pre-clinical)

# ADB's pandemic response:

## Delivering vaccines

**\$156.8M**

to support COVID-19 vaccination



## 3.3 Formation of Regional Vaccine Advisory Group (RVAG)

RVAG is an innovative platform, spanning geographies and regulatory capacities

Asian Development Bank (convenor)

Australia (Chair)

Canada

China, People's Republic of

India (co-Chair)

Indonesia (co-Chair)

Japan - PMDA

Korea, Republic of

Philippines

Singapore

Thailand

United Kingdom

Viet Nam

WHO

### Timely advice to ADB on critical regulatory issues

Approval of AstraZeneca vaccine produced by Siam Bioscience by Therapeutic Goods Administration of Australia

Advice on how to support fill-and-finish vaccine manufacturing where WHO/SRA approval of facilities is pending

Regulatory advice re: changes in vaccine manufacturing from single to multi-dose vials

### Proactive engagement with manufacturers on latest developments

Meetings with manufacturers to get the latest updates on new generation vaccines and therapeutics for COVID-19

Collaboration to expanding manufacturing capacity across DMCs

## 3.4 Technical assistance and \$ for vaccine manufacturing



### Defining how to support vaccine manufacturing

#### Synthesizing what we know

- Analysis of scale-up of manufacturing in India and People's Republic of China
- Regional supply-demand analysis

#### Partnering with the best

- Partnerships for scale-up of manufacturing (e.g., CEPI, KENUP Foundation, TechInvention, vaccine manufacturers)

### Financing for vaccine manufacturing

#### Sovereign

DMCs are interested in new facilities e.g., Bangladesh

#### Nonsovereign

PSOD is developing projects for vaccine manufacturing and tech transfer to the region

Manufacturers in the Republic of Korea (ROK) are committed to tech transfer in Asia

### Building people's knowledge and skills

#### Developing vaccine manufacturing skills in DMCs

Intensive 8-week course - Yonsei Uni, ROK

#### Improving understanding of what it takes to be a vaccine manufacturer

Short courses for senior policy makers/financiers - International Vaccine Institute, ROK

# ADB's future directions for COVID-19 support



# 4.1 Future directions



RESPONSE



RESILIENCE



PREPAREDNESS



## Sustain a flexible pandemic response

Purchase **next generation vaccines** to protect against multiple variants

Procure **diagnostics and therapeutics** to protect the most vulnerable and prepare for endemic Covid-19

## Build resilient health systems

Establish **national Centers for Disease Control** to prevent, detect and respond to disease outbreaks and emerging health threats

Invest in **primary care, laboratory and surveillance systems** that strengthen the region's ability to anticipate and manage infectious disease outbreaks

## Strengthen pandemic preparedness

Support **sustainable pharmaceutical manufacturing** focusing on financing, workforce, technology transfer, and regulation

Build **regulatory and clinical trial capacities** required to support the development, monitoring and approval of new health products

## 4.2 Pandemic responses can support UHC and vice versa



- Opportunity now to prioritize longer-term health strengthening
- Ensure pandemic responses address identified needs and contribute to UHC
- Ensure UHC considers core public health capacities for public health emergencies

### Global health security – International Health Regulations

Surveillance  
Outbreak response  
Risk communication  
Coordination

### Pandemic response, resilience and preparedness

↑ Primary health care role in  
surveillance and response  
↑ Critical hospital services (e.g. oxygen)  
↑ Coordination and surge capacity  
↑ Digital health innovations  
↑ Vaccine manufacturing  
↑ Regulatory and clinical trial capacities

### Universal Health Coverage

Access and high coverage  
Comprehensive services  
High quality – skilled workers  
Financial protection



## 4.3 Value of UHC in responding to COVID-19

ADB's Joint Ministers of Finance and Health Symposium on Universal Health Coverage in Asia and the Pacific, 2020

**Core Lesson: strong UHC assisted in responding to the COVID-19 pandemic**

### Viet Nam

- **Effective public health communications, rigorous contact tracing, and health teams ready for rapid responses**
- Investing in health: health spending increasing beyond GDP growth and health prevention budget is at least 30%
- Social health insurance coverage – 13% (2000) to 87% (2017)

### Thailand

- **Comprehensive village health volunteer network supported COVID-19 prevention, detection and reporting**
- Longstanding UHC policy (2002):
  - Comprehensive primary health care coverage
  - High health insurance coverage (75%) with declining out-of-pocket expenditures

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**Thank you**

